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Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

	r cal	endar year 2011 or tax year beginning	, 2	011, and ending		, 20
١	Name	of foundation			A Employer identi	
	THE	JANE AND MARC NATHANSON FOUND	DATION		95-425395	58
1	Numb	er and street (or P O box number if mail is not delivere	d to street address)	Room/suite	B Telephone numb	er (see instructions)
					(3	10) 209-7253
	1090	00 WILSHIRE BLVD., 15TH FLOOR				
	City o	r town, state, and ZIP code				_
					C If exemption application pending, check her	ation is
	LOS	ANGELES, CA 90024				_
G	Che	ck all that apply Initial return	Initial return of a form	er public charity	D 1 Foreign organiza	ations, check here . ►
		Final return	Amended return		2 Foreign organiza	
		Address change	Name change	*****	85% test, check computation	nere and attach
H	Che	ck type of organization X Section 501(c)(3) exempt private foundation		E If private foundation	n status was terminated
	S	ection 4947(a)(1) nonexempt charitable trust	Other taxable private four	ndation	- '	b)(1)(A), check here . ►
I	Fair	market value of all assets at end J Accou	inting method X Cash	Accrual	F If the foundation is	ın a 60-month termination
	of ye		her (specify)		under section 507(i	b)(1)(B), check here . 🕨
_	16)	▶ \$ 35. (Part I,	column (d) must be on cash be	asis)		
P	art I	Analysis of Revenue and Expenses (The	(a) Revenue and (b) Ne	t investment	(c) Adjusted net	(d) Disbursements for chantable
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in	expenses per	ncome	income	purposes
_		column (a) (see instructions))	books			(cash basis only)
	1	Contributions, gifts, grants, etc. received (attach schedule)				
	2	Check X grants, etc. received (attach schedule) Check X f the foundation is not required to attach Sch B				+
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities				
	5 a	Gross rents				-
	b	Net rental income or (loss)				
Revenue		Net gam or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a				
ě	7	Capital gain net income (from Part IV, line 2)				
~	8	Net short-term capital gain				
	9 10 a	Income modifications · · · · · · · · · · · · · · · · · · ·				
	ь	Less Cost of goods sold				
		Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)				
	12	Total. Add lines 1 through 11	q			
	13	Compensation of officers, directors, trustees, etc	0		- <u>-</u>	
	14	Other employee salaries and wages				
es	15	Pension plans, employee benefits				
ens	16 a	Legal fees (attach schedule)				
ďχ	b	Accounting fees (attach schedule)				
ē	С	Other plotessional lees/(attach schedule)				
aţį	17	nterest				
str	18	Traxes (attach) schedules (see instructions)	30.			
Administrative Expens	19	Decreciation (attach schedule) and depletion				
뒫	20	Occupancy				
7 pi	21	Trave, coolerer ses and meetings				
g and	22	Printing and publications				
Operating	23	Other expenses (attach schedule)			<u> </u>	
∍ra(24	Total operating and administrative expenses.	30.			
å]	Add lines 13 through 23	30.			-
_	25	Contributions, gifts, grants paid	30.	0		4
_	26	Total expenses and disbursements Add lines 24 and 25	30.	- 		
	27	Subtract line 26 from line 12	_20			
	ı	Excess of revenue over expenses and disbursements	-30.	_	•	-
		Net investment income (if negative, enter -0-)				

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Part II		Ralance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	nd of year	
	art II	Dalance Sheets	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash - non-interest-beam	ng	65.	35.	35.	
	2		ash investments				
	3						
		Less allowance for doub	tful accounts				
	4	Pledges receivable					
	-	Lees allowance for doub	tful accounts				
	5						
	-						
	6		officers, directors, trustees, and other				
			ich schedule) (see instructions)				
	7		ceivable (attach schedule)				
			otful accounts				
S	8		e				
Assets	9	Prepaid expenses and de	eferred charges				
As	10 a	Investments - U S and state	government obligations (attach schedule)				
	b	Investments - corporate s	stock (attach schedule)				
			bonds (attach schedule)	"			
	11	Investments - land, buildings	tion				
	12	(attach scredule)	loans				
	13	Investments other (atta-	ch schodula)				
	14	Land, buildings, and	•				
		equipment basis Less accumulated deprecia	tion				
		(attach schedule)	tion				
	15	Other assets (describe	 ⁾				
	16		completed by all filers - see the		a-		
_			age 1, item I)		35.	35.	
	17	Accounts payable and ac	ccrued expenses				
	18	Grants payable					
es	19						
Liabilities	20		s, trustees, and other disqualified persons				
abi	21	Mortgages and other not	es payable (attach schedule)				
=	22		▶)				
		,					
	23	Total liabilities (add line	s 17 through 22)	ol	C		
		Foundations that foll	ow SFAS 117, check here 4 through 26 and lines 30 and 31.				
Ñ	24	•					
ဦ	24						
<u>a</u>	25						
ä	26				<u></u>		
or Fund Balances		check here and comp	not follow SFAS 117, plete lines 27 through 31.				
		Capital stock, trust princi					
ets	28	• • •	land, bldg , and equipment fund				
Assets	29	Retained earnings, accumul	ated income, endowment, or other funds	65.	35.		
Ä	30	Total net assets or fund	d balances (see instructions)	65.	35.		
Net	31	Total liabilities and	net assets/fund balances (see				
				65.	35.		
P	art II	Analysis of Ch	anges in Net Assets or Fund	Balances			
1	Tota	net assets or fund b	palances at beginning of year - Part	II, column (a), line 30 ((must agree with		
			• • •	• • • • • • • • • • • •	· •	65.	
2		r amount from Part I, In			1	-30	
					· · · · · · · · · 		
						35	
		eases not included in I	ine 2 (itemize)		· · · · · · · · · · 		
			ances at end of year (line 4 minus line	5) - Part II - column (b)		35	
0	ı Uld	net assets of Infin oal	ances at end of year time 4 minus line	- σ) - Farcii, Columni (D),	10 JU 10	1 33	

~ -		•	
ノコ	ne	5	

(a) List and	and Losses for Tax on Inv describe the kind(s) of property sold (e ck warehouse, or common stock, 200 s	g , real estate,	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr
a					
b					
C					
d			<u> </u>		
e			ļ		
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
ab					
<u> </u>			<u> </u>		
Complete only for assets sh	lowing gain in column (h) and owned b	y the foundation on 12/31/69	<u></u>	Gains (Col (h) g	ain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		(k), but not less t Losses (from co	than -0-) or
1					
o					
			 		· · · · ·
d e					
Capital gain net income or (r		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		
If gain, also enter in Part		tructions) If (loss), enter -0- in	3		
	nder Section 4940(e) for Red	uced Tax on Net Investment In			
	e section 4942 tax on the distribut of qualify under section 4940(e)	able amount of any year in the base o not complete this part	period?		Yes X N
Enter the appropriate amou	int in each column for each year, s	see the instructions before making a	ny entries		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		(d) Distribution ra (col (b) divided by	
2010	4,010.	70.		Ę	57.285714
2009	4,030.	663.			6.078431
2008	3,520.	2,411.			1.459975
2007	, 22,112.	1,292.			17.114551
2006	42,700.	1,632.	1	2	26.164216
Total of line 1, column (d)			2	1(08.102887
	or the 5-year base period - divide t	he total on line 2 by 5, or by the	- -		
	ation has been in existence if less		3	2	21.620577
·					_
Enter the net value of nonc	hantable-use assets for 2011 from	Part X, line 5	4		63.
Multiply line 4 by line 3			5		1,362.
Enter 1% of net investment	t income (1% of Part I, line 27b)		6		
Add lines 5 and 6			7		1,362.
Enter qualifying distribution	s from Part XII, line 4		8		30.
If line 8 is equal to or gre Part VI instructions	eater than line 7, check the box	in Part VI, line 1b, and complete	that part	using a 1% ta	x rate See

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and addresses

CA,

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. . . . ▶ | Form **990-PF** (2011)

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Total number of other employees paid over \$50,000

THE JANE AND MARC NATHANSON FOUNDATION 95-4253958 Form 990-PF (2011) Page 7 Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, Part VIII and Contractors (continued) Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE 0 Total number of others receiving over \$50,000 for professional services Part IX-A **Summary of Direct Charitable Activities** List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information, such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. Expenses Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 NONE_____

Form **990-PF** (2011)

All other program-related investments See instructions

3 NONE

Page	8
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Pa		imum Investment Return (All domestic foundations must complete this part. Foreig instructions)	n founda	tions,
1	Fair marke	value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes			
а	Average mo	onthly fair market value of securities	1a	
b	Average of	monthly cash balances	1b	64.
С	Fair market	value of all other assets (see instructions)	1c	
d	Total (add l	ines 1a, b, and c)	1d	64.
е		laimed for blockage or other factors reported on lines 1a and		
	1c (attach d	etailed explanation)		
2		indebtedness applicable to line 1 assets	2	
3	Culatan at lan	O frame line 4 d	3	64.
4	Cash deem	ed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see		
			4	1.
5	Net value o	f noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	63.
6	Minimum ir	vestment return. Enter 5% of line 5	6	3.
Pa	rt XI Dis	tributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating dations and certain foreign organizations check here and do not complete this page.	art)	
1		vestment return from Part X, line 6	1	3.
		stment income for 2011 from Part VI, line 5		
		for 2011 (This does not include the tax from Part VI)	1	
	Add lines 2	1 0	2c	
3		a and 2be amount before adjustments Subtract line 2c from line 1	3	3.
4		of amounts treated as qualifying distributions	4	
5	Add lines 3	and 4	5	3.
6			6	
7	Distributab	rom distributable amount (see instructions) le amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,	<u> </u>	
•		· · · · · · · · · · · · · · · · · · ·	7	3.
			<u> </u>	
78	II All Qu	alifying Distributions(see instructions)	· · · · · · · · · · · · · · · · · · ·	
1		aid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses,	contributions, gifts, etc - total from Part I, column (d), line 26	1a	30.
b	Program-r	elated investments - total from Part IX-B	1b	
2	Amounts	elated investments - total from Part IX-B		
	purposes		2	
3	Amounts s	et aside for specific charitable projects that satisfy the		
а		test (prior IRS approval required)	3a	
b	Cash distr	bution test (attach the required schedule)	3b	
4		distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	30.
5	Foundatio	ns that qualify under section 4940(e) for the reduced rate of tax on net investment income		
		of Part I, line 27b (see instructions)	5	0
6		qualifying distributions. Subtract line 5 from line 4	6	30.
	Note. The	amount on line 6 will be used in Part V, column (b), in subsequent years when callifies for the section 4940(e) reduction of tax in those years	culating v	whether the foundation

Form	1990-PF (2011)				Page 9
Pa	rt XIII Undistributed Income (see instru	ictions)			
1	Distributable amount for 2011 from Part XI,	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
•	· F				3.
2	Undistributed income, if any, as of the end of 2011				
	Enter amount for 2010 only				
	Total for prior years 20 09 ,20 08 ,20 07				
3	Excess distributions carryover, if any, to 2011				
	From 2006				
h	From 2007 22,047.				
c	From 2008 3,399.				
d	From 2009 3,997.				
e	From 2010 4,006.				
	Total of lines 3a through e	76,067.			
4	Qualifying distributions for 2011 from Part XII,				
	line 4 ▶ \$ 30.				
а	Applied to 2010, but not more than line 2a				
	Applied to undistributed income of prior years (Election required - see instructions)				
_	Treated as distributions out of corpus (Election	 .			
·	required - see instructions)				
d	Applied to 2011 distributable amount				3.
	Remaining amount distributed out of corpus	27.			
5	Excess distributions carryover applied to 2011 .				
	(If an amount appears in column (d), the same				
6	amount must be shown in column (a)) Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	76,094.			
ь	Pnor years' undistributed income Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been				
	issued, or on which the section 4942(a) tax has				
	been previously assessed	· · · · · ·			ļ
d	Subtract line 6c from line 6b Taxable				
_	amount - see instructions				
-	Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount - see			l	
	instructions	-	<u> </u>		
f	Undistributed income for 2011 Subtract lines				
	4d and 5 from line 1 This amount must be				
_	distributed in 2012				 _ .
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see instructions)				İ
8	Excess distributions carryover from 2006 not				
•	applied on line 5 or line 7 (see instructions)	42,618.			
9	Excess distributions carryover to 2012.			 	
,	Subtract lines 7 and 8 from line 6a	33,476.			
10	Analysis of line 9				
а	Excess from 2007				
b	Excess from 2008 3, 399.			1	
С	Excess from 2009				
d	Excess from 2010 4,006.			\	
e	Excess from 2011				

		during i duridudions	occ monactions an	<u>α Part VII-A, questid</u>	311 07	NOT APPLICABLE				
1 a	If the foundation has a	received a ruling or de	etermination letter tha	it it is a private ope	rating					
	foundation, and the ruling	is effective for 2011, enter	the date of the ruling		▶[
b	Check box to indicate whe	rer the foundation is a private operating foundation described in section Tax year Prior 3 years 4942(j)(3) or 4942(j)(5)								
2 a	Enter the lesser of the ad-	Tax year		Pnor 3 years		(e) Total				
	justed net income from Part I or the minimum investment return from Part X for each year listed	(a) 2011	(b) 2010	(c) 2009	(d) 2008					
b	85% of line 2a									
С	Qualifying distributions from Part XII, line 4 for each year listed									
d	Amounts included in line 2c not used directly for active conduct of exempt activities									
e	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c									
3 a	Complete 3a, b, or c for the alternative test relied upon "Assets" alternative test - enter									
	(1) Value of all assets(2) Value of assets qualifying under section 4942(j)(3)(B)(i)									
b	'Endowment' alternative test- enter 2/3 of minimum invest- ment return shown in Part X,									
	line 6 for each year listed			 		<u> </u>				
С	"Support" alternative test - enter (1) Total support other than gross investment income									
	(interest dividends, rents, payments on secunties loans (section 512(a)(5)),									
	or royalities) (2) Support from general public and 5 or more exempt organizations as provided in section 4942									
	(3) Largest amount of support from an exempt									
	organization (4) Gross investment income									
Dа		any Information (C	omnlete this nart	only if the found	lation had \$5,000	or more in assets				
ı a		during the year - see		omy it the round	dation had \$5,000	or more in assets				
1	Information Regarding	Foundation Manager	s:							
а	List any managers of before the close of any									
	MARC B. NAT		4004							
b	List any managers of ownership of a partner					y large portion of the				
	N/A									
2	Information Regarding	Contribution, Grant,	Gift, Loan, Scholarsh	ip, etc., Programs:						
	Check here ► X if t unsolicited requests for other conditions, comp	or funds if the founda	ation makes gifts, gra	to preselected char ants, etc (see instruc	ritable organizations of to individuals of	and does not accept or organizations under				
а	The name, address, an	d telephone number of	the person to whom a	applications should be	addressed					
b	The form in which appli	cations should be subr	nitted and information	and materials they sh	ould include					
С	Any submission deadling	nes								
d	Any restrictions or li factors	mitations on awards,	such as by geogr	aphical areas, charit	able fields, kınds of	institutions, or other				

	990-PF (2					Page 11
Par	t XV	Supplementary Information (continued)			
_3	Grant	s and Contributions Paid Durin Recipient and address (home or business)	g the Year or App	roved for I	uture Payment	
		Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
	Name	and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount
а	Paid di	unng the year				
				1		
					1	
					1	
					,	
	Total				▶ 3a	
b	Appro	ved for future payment				
	• •	, ,				
				1		
					}	
				İ	ļ l	
			<u></u>			
	Total				▶ 3b	

Page **12**

Part XVI-A Analysis of Income-Produ		•			
inter gross amounts unless otherwise indicated	(a)	ated business income (b)	(c)	y section 512, 513, or 514 (d)	(e) Related or exempt function income
1 Program service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
a			. =.		
b					
С					
d					
e					
f					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash investments					
Dividends and interest from securities					
Net rental income or (loss) from real estate					*** '
a Debt-financed property					
b Not debt-financed property				· -	
Net rental income or (loss) from personal property					
Other investment income					<u> </u>
Gain or (loss) from sales of assets other than inventory					1
	<u> </u>		1		
Net income or (loss) from special events					†
Gross profit or (loss) from sales of inventory					
Other revenue a			 		
ь				·	
c					
d					
e Subtotal Add columns (b), (d), and (e)			_		
Relationship of Activities ine No. Explain below how each activit					uted importantly to
▼ accomplishment of the foundation	on's exemp	t purposes (other than	n by providing	funds for such purpose	es) (See instructions)
	· · · · · · · · · · · · · · · · · · ·				
				····	· · · · · · · · · · · · · · · · · · ·
		_			
		-		······································	
					······································
				· · · · · · · · · · · · · · · · · · ·	

		Exempt Orgai	nizations								
1	Did the	organization directl	y or indirectly	engage in any o	f the following	with any	other organiz	zation described		Yes	No
	in secti	ion 501(c) of the Co	de (other than	section 501(c)(3) organization	s) or in se	ction 527, rel	ating to political			-
	•	ations?									
		ers from the reporting							1		
(1) Cash											
(2) Other assets											X
b Other transactions											
(1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization 1b(1) 1b(2)											
	(2) Pur	chases of assets from	n a noncharitab	le exempt organi	zation				1b(2)		X
	(3) Rer	ntal of facilities, equip	ment, or other a	assets			. 		1b(3)		Х
	(4) Rei	mbursement arrange	ments		• • • • • • •				1b(4)		X
		ans or loan guarantee					· · · · · · · ·		1b(5)		X
		formance of services						• • • • • • • • •	1b(6)		X
		g of facilities, equipme							1c		X
a	ii the i	answer to any of th of the goods, other	e above is "Ye	es," complete the	e following so	nedule C	olumn (b) sho	ould always show	the	taır m	ıarket
		n any transaction or									
(a) Ln		(b) Amount involved	T	noncharitable exempt of				transactions, and share			
147	10 110	N/A	(c) Name of t	iona iamable exempt	nganization	N/A	iption of transfers,	transactions, and snan	ng arrar	igemen	is
						11/13					
		···									-
				· · · · · · · · · · · · · · · · · · ·				-			
											
					<u></u>						
					-						
				· · · · · · · · · · · · · · · · · · ·					·		
							 .				
			<u> </u>								
		foundation directly									_
		ed in section 501(c)		ther than section	501(c)(3)) or	ın section	527?		Y	es X	_ No
<u> </u>	lf "Yes,	" complete the follow		r				 			
		(a) Name of organization	1	(b) Type	of organization	-	(c)	Description of relations	hip		
		 						.			
										•	
	Under	penalties of dentity I decis	are that I have exam	uned this return, including	no accompanying s	hedules and s	tatements and to	the heet of my knowledge	o and h	solof it	.s. to .o.
Sigr	correc	penalties of dering, I declar t, and complete becaration o	f preparer (other than	taxpayer) is based on all i	nformation of which	preparer has an	y knowledge	and best of the knowledg	je alių (zenei, II	is uue,
Here		//////////////////////////////////////		12 Kg 4	n 3 2017	Ta	ustes		S discus		return
11616		nature of officer or trustee		Date	/·····································	Trtle	02(88		eparer	ר ר	below
		4			_			(see instruction	15)? X	Yes L	No
D-:-		Print/Type preparer's	name	Preparer's sign	nayture /		Date	Check If	PTIN		
Paid		GREGGORY J HU'	TCHINS	119	lkel		7/26/201		P003	6515	0
Prep				RLIN & VAN	TRIGT LLP	<u> </u>		irm's EIN ▶ 95-4			<u>-</u>
Use	Only	Firm's address ▶ 45			LVD STE 10	00					
		1	ESTLAKE VIL			913	62 P	Phone no 805-3	74-8	555	
							<u></u>			<u> </u>	

ATTACHMENT 1

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ADJUST	NET	1000

CHARITAE	PURPOSE
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3	떼	
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4	α	
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FEES	
FILING	
CALIFORNIA	
2010	

DESCRIPTION

c	_	>	
C	•)	

TOTALS	

ATTACHMENT 2

FORM 990PE, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

CONTRIBUTIONS EXPENSE ACCT TO EMPLOYEE AND OTHER BENEFIT PLANS ALLOWANCES	0	0	0	0	0	0
CONTRIBUTIO TO EMPLOYEE COMPENSATION BENEFIT PLA	0	0	0	0	0	0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	DIRECTOR / VICE PRESIDENT 1.00	CHAIRMAN / PRESIDENT 1.00	DIRECTOR 1.00	DIRECTOR 1.00	DIRECTOR 1.00	GRAND TOTALS
NAME AND ADDRESS	MARC B. NATHANSON 10900 WILSHIRE BLVD., 15TH FLOOR LOS ANGELES, CA 90024	JANE F. NATHANSON 10900 WILSHIRE BLVD., 15TH FLOOR LOS ANGELES, CA 90024	NICOLE NATHANSON 10900 WILSHIRE BLVD., 15TH FLOOR LOS ANGELES, CA 90024	ADAM NATHANSON 10900 WILSHIRE BLVD., 15TH FLOOR LOS ANGELES, CA 90024	DAVID NATHANSON 10900 WILSHIRE BLVD., 15TH FLOOR LOS ANGELES, CA 90024	

Form **8868**

(Rev January 2012)

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury

OMB No 1545-1709

Internal Revenue				plication for each return.				
 If you are 	filing for an	Automatic 3-Month Extension, co	omplete on	ly Part I and check the	s box			▶ X
• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)								
Do not comp	olete Part li	' <i>unles</i> ≱ou have already been grant	ted an auto	matic 3-month extension	n on a previously filed F	orm	8868	
Electronic fi	lina <i>(e-file</i>)	You can electronically file Form 8	8868 if vo	u need a 3-month auto	matic extension of tim	e to	file (6	6 months for
		to file Form 990-T), or an addition						
8868 to req	uest an ext	tension of time to file any of the	forms liste	d in Part I or Part II wi	th the exception of Fo	orm	8870,	Information
		ssociated With Certain Persona						
		details on the electronic filing of th				nties	& No	<u>nprofits</u>
		Month Extension of Time. On						
	-	file Form 990-T and requesting an			•			
Part I only								▶∟
		cluding 1120-C filers), partnerships	, REMICs,	and trusts must use For	•			
to file income			taustions		Enter filer's Identifyi			
Type or		empt organization or other filer, see insi		011	Employer identifica	tion t	number	(EIN) or
print		NE AND MARC NATHANSON FO	OUNDATIO	JN	05 40500	- ^		
File by the		AM NATHANSON eet, and room or suite no lif a P O box	coo instruc	tions	X 95-425395			
due date for	1	·	•	lions	Social security nun	iber ((SSN)	
filing your return See		VILSHIRE BLVD., 15TH FLOOR roost office, state, and ZIP code For a		ress see instructions				
instructions	ł **	•	loreign add	ress, see instructions				
Enter the Rei		GELES, CA 90024 r the return that this application is for	or /file a se	narate application for ea	och return)			. 0 4
Enter the Ker	ium wae io	i the return that this application is it	or (life a se	parate application for ea	ich return)	• •	• • •	[0] 4
Application			Return	Application				Return
Is For			Code	Is For				Code
Form 990			01	Form 990-T (corporation	n)			07
Form 990-BL			02	Form 1041-A				08
Form 990-EZ		·	01	Form 4720				09
Form 990-PF			04	Form 5227				10
		or 408(a) trust)	05	Form 6069				11
Form 990-T (06	Form 8870	· · · · · · · · · · · · · · · · · · ·			12
The books	are in the	care of MOLTHOUSE CARLI	IN & VAN	N TRIGT				
						_		
Telephone	• No ▶	805 374-8555	_ 1	FAX No ▶				
• If the orga	nization doe	es not have an office or place of bu	usiness in t	he United States, check	this box			▶ 🔲
• If this is fo	r a Group R	leturn, enter the organization's four	digit Grou	p Exemption Number (G	SEN)		_ If t	this is
for the whole	group, che	eck this box ▶ 🔲 🛚 If	it is for pai	rt of the group, check the	s box ▶	\Box	and a	ttach
a list with the	names and	EINs of all members the extension	ıs for	<u> </u>				
1 I reque:	st an autom	atic 3-month (6 months for a corpor	ration requi	red to file Form 990-T) e	extension of time			
until		08/15 , 20 12 , to file the e	exempt orga	anization return for the o	rganization named abo	√e T	he ext	tension is
	•	n's return for						
⊢	•	ear 20 <u>11</u> or						
▶	tax year be	ginning	, 20	, and ending		20		
		red in line 1 is for less than 12 mon ecounting period	ths, check	reason Initial re	eturn Fınal retur	n		
		(E 000 B) 000 E	O. T. 4700	0000	A		1	
	• •	is for Form 990-BL, 990-PF, 99	Ю-Т, 4720	, or 6069, enter the	tentative tax, less any			0
		dits See instructions i is for Form 990-PF, 990-T,	4720 or	6060 enter any re	ofundable credite and	3a	3	- 0
		nents made Include any prior yea				3b	s	0
		tract line 3b from line 3a Include					Ť	
		I Tax Payment System) See instruc			4	3с	s	0
		ng to make an electronic fund v		with this Form 8868.	see Form 8453-EO a			
payment inst	_	J :				-		· - ·
<u></u>		work Reduction Act Notice, see Instru	ctions.			For	m 8868	B (Rev 1-2012)