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Form 990-PF

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545 0052

2011

Department of the Treasury Internal Revenue Service

Note The foundation may be able to use a copy of this return to satisfy state reporting requirements

| | | | year 2011, or ta | | · · · · · · · · · · · · · · · · · · · | , and ending | I A | | | | |
|--|---|--|--|--|--|--|---|---|-------------------------|----------|--|
| THE SANDRA AND LAWRENCE POST FAMILY FOUNDATION | | | | | | ^ | A Employer identification number 95-4442473 | | | | |
| 1160 TOWER ROAD BEVERLY HILLS, CA 90210 | | | | | В | B Telephone number (see the instructions) 310-278-0642 | | | | | |
| 22 | | | | 30210 | | | С | If exemption application is | pending, check here | ▶ □ | |
| G | Che | ck al | I that apply. | Initial return | Initial Return of a form | mer public charity | D | 1 Foreign organizations, chec | k here | ▶□ | |
| | | | - | Final return | Amended return | | | 2 Foreign organizations meet | | , U | |
| H | CI | neck | type of organizat | Address change Lion. X Section 501 | Name change (c)(3) exempt private for | oundation | | here and attach computation | n | <u> </u> | |
| | _[| | | nonexempt charitable tr | ust Other taxable p | rivate foundation | E | If private foundation status | | | |
| ı | Fa (fi | ır mar om Pa | ket value of all assets art II, column (c), line | | ounting method. XC | ash Accrual | | under section 507(b)(1)(A) | | | |
| | ► \$ | | 12,743, | | Other (specify) column (d) must be on | cash basis) | F | If the foundation is in a 60- under section 507(b)(1)(B) | | ▶ □ | |
| Pa | rt I | | nalysis of Re | venue and | (a) Revenue and | (b) Net investme | nt | (c) Adjusted net | (d) Disbursemen | nts | |
| | | E: | xpenses (The olumns (b), (c), a | total of amounts in nd (d) may not neces- | expenses per books | income | | income | for charitable purposes | | |
| | | sa | irily equal thé am ee instructions).) | nounts in column (a) | | | | | (cash basis on | ly) | |
| | | 1 | | grants, etc, received (att sch) | 1,200,000. | | | | | | |
| | | 2 | | oundn is not req to att Sch B | | | | | | | |
| | | 3 | cash investmen | | 367,187. | 367,18 | 37. | | | | |
| | | 4 5 = | Dividends and interi Gross rents | est from securities | 99,474. | 99,47 | 74. | | | | |
| | | | Net rental income or (loss) | | | | | | | | |
| F E | 3 | 6a | Net gain/(loss) from | sale of assets not on line 10 | 13,721. | | | | | | |
| į | 7 | 7 | 000010 011 11110 00 | 51,180,417. ome (from Part IV, line 2) | | 13,72 | 21 | | | | |
| E N U | 1 | 8 | Net short-term | · | | 10, 12 | | | | | |
| L E | | 9 | Income modifica | ations I | | | | | | | |
| | | | Gross sales less returns and allowances | | | | | RECEN | /ED | | |
| | | b | Less Cost of goods sold | | | | | UN TIL OLI | LU | | |
| | | | Gross profit/(loss) | • • | | | | | 7117 | | |
| | | | Other income (a | EE STATEMENT 1 | 413,158. | | | m JOF 1 6 | (y) | | |
| | | | Total. Add lines | | 2,093,540. | 480,38 | 32. | OCUER | - 3 | | |
| | | 13 14 | | icers, directors, trustees, etc | 0. | | | L OGUEN | | | |
| | | 14 Other employee salaries and wages15 Pension plans, employee benefits | | | | | | | | | |
| | A | | Legal fees (attach so | | 16 226 | | | | | | |
| | M | | Accounting fees (attage) Other prof fees (attage) | | 16,336. 49,922. | 49,92 | 22 | | | | |
| COP | N | 17 | Interest | 1011 3011, DEE 01 3 | 11. | | 11. | | | | |
| E | Ť | 18 | Taxes (attach schedule)(se | , | 35,010. | | | | | 7 | |
| 2 1 | Ŷ. | 19 | Depreciation (at sch) and deplet | ion | | | | | | | |
| 高 M | Ϋ́ | 20 | Occupancy | | | | | | | | |
| | E | 21 22 | Printing and pul | nces, and meetings blications | | | | | | | |
| SCANNED JUL | E X P | 23 | Other expenses | (attach schedule) | F1.C | 3.0 | | | | | |
| - | N S | 24 | | EE STATEMENT 5 and administrative | 516. | 36 | <u> 56.</u> | | | | |
| ၜၣ | E S | | expenses. Add | lines 13 through 23. | 101,795. | 50,29 | 99. | | 074.6 | | |
| 7117 | | 25 26 | | grants paid PART XV and disbursements. | 971,631. | | | | 971,6 | .31 . | |
| 17 | | | Add lines 24 an | d 25 | 1,073,426. | 50,29 | 99. | 0. | 971,6 | 31. | |
| | | 27 a | Subtract line 26 Excess of rever | from line 12: | | | | | | | |
| | | | and disburseme | ents . | 1,020,114. | | | | | | |
| | | | | me (if negative, enter 0) | | 430,08 | 33. | 0. | | | |
| BA | C Adjusted net income (if negative, enter 0) BAA For Paperwork Reduction Act Notice, see instructions. | | | | | TEF | A0504L 12/05/11 | Form 990-PF (i | 2011) | | |

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| Dan | 111 | Balance Sheets Attached schedules and amounts in the description column should be for end of year amounts only | Beginning of year | End | of year |
|-------------------|-------|---|----------------------------|---------------------------------------|-----------------------|
| гаг | | (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash — non-interest-bearing | | | |
| | 2 | Savings and temporary cash investments | 1,987,172. | 3,035,710 | 3,035,710. |
| | 3 | Accounts receivable | | | |
| | | Less allowance for doubtful accounts | | | |
| | 4 | Pledges receivable | | | |
| | ١ ـ | Less. allowance for doubtful accounts | | | |
| | | | | _ | |
| | 6 | Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) | | - | |
| Δ | 7 | Other notes and loans receivable (attach sch) | | | |
| ŝ | _ | Less. allowance for doubtful accounts | | | |
| S | 8 | Inventories for sale or use | | | |
| ASSETS | 9 | Prepaid expenses and deferred charges | | · · · · · · · · · · · · · · · · · · · | |
| 5 | | a Investments — U.S. and state government obligations (attach schedule) | 106 504 | 0.66 41.6 | 200 645 |
| | ı | b Investments — corporate stock (attach schedule) STATEMENT 6 | 126,524. | 266,416 | |
| | ł | c Investments — corporate bonds (attach schedule) STATEMENT 7 | 3,307,588. | 3,475,022 | 3,769,831. |
| | 11 | Investments — land, buildings, and equipment, basis | | | |
| | | Less accumulated depreciation (attach schedule) | | | |
| | | Investments - mortgage loans | | | |
| | | Investments — other (attach schedule) STATEMENT 8 | 6,179,732. | 5,854,777 | 5,708,934. |
| | 14 | Land, buildings, and equipment. basis | | | |
| | | Less accumulated depreciation (attach schedule) | | | |
| | | Other assets (describe \(\bigcup \) Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I) | 11,601,016. | 12,631,925 | . 12,743,120. |
| Ļ | 17 | | | | _ |
| À | 18 | Grants payable | | | _ |
| B | 19 | F | | | |
| L | 20 | Loans from officers, directors, trustees, & other disqualified persons | | | 4 |
| I T | 21 | Mortgages and other notes payable (attach schedule) | | 10 000 | _ |
| I E S | 22 | | | 10,000 | 7 1 |
| <u>_s</u> | 23 | Total liabilities (add lines 17 through 22) | 0. | 10,000 | 닉 |
| | | Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. | 1 | | |
| N F E U T N | 24 | Unrestricted | | | _ |
| ŤŇ | 25 | Temporarily restricted | | | 4 |
| A D | 26 | Permanently restricted | | | 4 |
| A B A L A N | l l | Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. | | | |
| E L | 27 | Capital stock, trust principal, or current funds | | | |
| ŚŅ | 28 | Paid-in or capital surplus, or land, building, and equipment fund | | | |
| OE | 29 | Retained earnings, accumulated income, endowment, or other funds | 11,601,016. | 12,621,925 | |
| RS | 30 | Total net assets or fund balances (see instructions) | 11,601,016. | 12,621,925 | |
| | 31 | Total liabilities and net assets/fund balances (see instructions) | 11,601,016. | 12,631,925 | |
| Parl | | Analysis of Changes in Net Assets or Fund Balance | es | | |
| 1 | Total | l net assets or fund balances at beginning of year — Part II, colum of-year figure reported on prior year's return) | in (a), line 30 (must agre | e with | 11,601,016. |
| | | r amount from Part I, line 27a | | 2 | 1,020,114. |
| 3 | Other | increases not included in line 2 (itemize) SEE STATEMENT | 10 | 3 | 795. |
| 4 | Add | lines 1, 2, and 3 | _ _ | 4 | 12,621,925. |
| | | ases not included in line 2 (itemize) | _ | 5 | |
| _ 6 | Total | net assets or fund balances at end of year (line 4 minus line 5) - | Part II, column (b), line | 30 6 | 12,621,925. |

| (a) List and descri | Losses for Tax on Investment be the kind(s) of property sold (e.g., rea use; or common stock, 200 shares MLC | estate, (| b) How acquired P — Purchase D — Donation | (c) Date acquired (month, day, year) | (d) Date sold (month, day, year) |
|---|--|--|--|--|-------------------------------------|
| 1a SEE STATEMENT 11 | | | | | |
| b | | | | | |
| С | | | | | |
| d | | | | | |
| е | | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | | (h) Gain or (e) plus (f) m | |
| <u>a</u> | | | | | |
| <u>b</u> | | | | | |
| c . | | | - | | |
| d | | | | | |
| Complete only for coasts above | was soon in column (b) and award by the | foundation on 12/21/50 | | | 4) |
| (i) Fair Market Value | ring gain in column (h) and owned by the | (k) Excess of column (| <u>, </u> | (I) Gains (Col gain minus column (I | umn (h) k), but not less |
| as of 12/31/69 | as of 12/31/69 | over column (j), if any | | han -0-) or Losses (f | |
| a | | | | | |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| е | | | | · · · · · · · · · · · · · · · · · · · | |
| 2 Capital gain net income or (ne | | nter in Part I, line 7 r-0- in Part I, line 7 | 2 | | 13,721. |
| 3 Net short-term capital gain or | (loss) as defined in sections 1222(5) and | i (6) [.] | | | |
| If gain, also enter in Part I, lin | e 8, column (c) (see instructions). If (los | s), enter -0- | | | |
| ın Part I, line 8 | | | 3 | | 0. |
| Part V Qualification Unde | er Section 4940(e) for Reduced | Tax on Net Investmen | nt income | | |
| f 'Yes,' the foundation does not qua | ction 4942 tax on the distributable amountify under section 4940(e). Do not comp | ete this part. | | Yes | X No |
| | in each column for each year; see the in | | y entities | (d) | |
| (a) Base period years Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitable-use asse | ts (co | Distribution lumn (b) divided | |
| 2010 | 577,203. | 12,372 | ,973. | | 0.046650 |
| 2009 | 306,059. | 9,498 | | | 0.032221 |
| 2008 | 602,534. | 8,730 | ,783. | | 0.069013 |
| 2007 | 443,385. | 7,929 | | | 0.055918 |
| 2006 | 212,503. | 5,759 | , 332. | | 0.036897 |
| 2 Total of line 1, column (d) | | | 2 | | 0.240699 |
| Average distribution ratio for the number of years the foundation. | ne 5-year base period — divide the total n has been in existence if less than 5 ye | on line 2 by 5, or by the ears | 3 | | 0.048140 |
| 4 Enter the net value of noncha | ritable-use assets for 2011 from Part X, | line 5 | 4 | 1 | 1,921,668. |
| 5 Multiply line 4 by line 3 | | | 5 | | 573,909. |
| | come (1% of Part L line 27h) | | 6 | | 4,301. |
| | come (170 or 1 art 1, mile 270) | | 7 | | 578,210. |
| 7 Add lines 5 and 6 | | | | | |
| 8 Enter qualifying distributions f | rom Part XII, line 4 | | 8 | 1 | 971,631. |
| If lifte o is equal to or greater | than line 7, check the box in Part VI, line | e 1b, and complete that part | using a 1% t | ax rate. See the | |

b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by *General Instruction G*² *If 'No,' attach explanation*

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If 'Yes,' complete Part XIV

10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses.

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|--|---|-------------------------------|--|---------------------------|
| Part VIII-B Statements Regarding Activit | ies for Which Forn | n 4720 May Be Req | uired (continued |) |
| 5a During the year did the foundation pay or incur | any amount to. | | | |
| . (1) Carry on propaganda, or otherwise attemp | t to influence legislation | (section 4945(e))? | ☐ Yes ∑ | 【 No |
| (2) Influence the outcome of any specific publ on, directly or indirectly, any voter registra | ic election (see section tion drive? | 4955), or to carry | | No O |
| (3) Provide a grant to an individual for travel, | study, or other similar p | ourposes? | Yes 2 | 【 No |
| (4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section | | | Yes [| No I |
| (5) Provide for any purpose other than religiou educational purposes, or for the prevention | us, charitable, scientific, n of cruelty to children o | , literary, or or animals? | Yes [| 【 No |
| b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53.4945 or in (see instructions)? | 5ь N/A | | | |
| Organizations relying on a current notice regar | ding disaster assistance | e check here | ▶ [| |
| c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure response | sibility for the grant? | • | N/A Yes | ☐ No |
| If 'Yes,' attach the statement required by Regu | ılatıons section 53 4945 | -5(d) | | |
| 6a Did the foundation, during the year, receive an on a personal benefit contract? | | | | K No |
| b Did the foundation, during the year, pay premi | ums, directly or indirect | ly, on a personal benefit | t contract? | 6b X |
| If 'Yes' to 6b, file Form 8870. | | | | 71 N |
| 7a At any time during the tax year, was the found | | | | No 7b |
| b If 'Yes,' did the foundation receive any proceed Part VIII Information About Officers, D | | | | |
| and Contractors | mectors, musices, | , Foundation mana | igers, migning Fan | u Lilipioyees, |
| List all officers, directors, trustees, foundation | managers and their co | mnensation (see instru | ctions). | |
| | (b) Title, and average | | (d) Contributions to | (e) Expense account, |
| (a) Name and address | hours per week devoted to position | (If not paid, enter -0-) | employee benefit plans and deferred compensation | other allowances |
| LAWRENCE POST | PRESIDENT | 0. | 0. | 0. |
| 1160 TOWER ROAD | 0 | | | |
| BEVERLY HILLS, CA 90210 | | _ | | |
| SANDRA POST | SECRETARY | 0. | 0. | 0. |
| 1160 TOWER ROAD | 0 | | | |
| BEVERLY HILLS, CA 90210 | | | | |
| BRYAN L. SANDERS | TRUSTEE | 0. | 0. | 0. |
| 12 WEST 18TH ST 8W | 0 | | | |
| NEW YORK, NY 10011 | | | | |
| SUSAN P. RIZZO | TRUSTEE | 0. | 0. | 0. |
| 1 LA DUE CIRCLE | 0 | | | |
| PITTSFORD, NY 14534 | | | | |
| 2 Compensation of five highest-paid employees | T . | | | |
| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | other allowances |
| NONE | | | 55.11portaution | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | _ | |
| | | | | |
| | | | | |
| Total number of allow and and and 650 000 |] | | | <u> </u> |
| Total number of other employees paid over \$50,000 | TEEA0306L 1 | 12/05/11 | | Form 990-PF (2011) |

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| | 1 330-FF (2011) THE SAMPICA AND LAWICENCE 1031 TAMILIT | 7772 | .475 Fage 6 |
|----|--|--------|----------------|
| Pá | Minimum Investment Return (All domestic foundations must complete this part. F see instructions.) | oreigr | n foundations, |
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes. a Average monthly fair market value of securities | 1 a | 3,882,841. |
| | b Average of monthly cash balances | 1 b | 2,511,441. |
| | c Fair market value of all other assets (see instructions) | 1c | 5,708,934. |
| | d Total (add lines 1a, b, and c) | 1 d | 12,103,216. |
| | e Reduction claimed for blockage or other factors reported on lines 1a and 1c | | |
| | (attach detailed explanation) 1e 0. | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 12,103,216. |
| 4 | Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions) | 4 | 181,548. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 11,921,668. |
| | Minimum investment return. Enter 5% of line 5. | 6 | 596,083. |
| | Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private oper | ating | |
| | and certain foreign organizations check here ► ☐ and do not complete this part.) | _ | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 596,083. |
| 2 | a Tax on investment income for 2011 from Part VI, line 5 2a 4, 301. | | |
| | b Income tax for 2011. (This does not include the tax from Part VI) | | |
| | c Add lines 2a and 2b | 2c | 4,301. |
| 3 | Distributable amount before adjustments Subtract line 2c from line 1 | 3 | 591,782. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | |
| 5 | Add lines 3 and 4 | 5 | 591,782. |
| 6 | Deduction from distributable amount (see instructions) | 6 | |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 591,782. |
| Pe | Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26 | 1a | 971,631. |
| | b Program-related investments — total from Part IX-B | 1 b | |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes | 2 | , |
| 3 | Amounts set aside for specific charitable projects that satisfy the | | |
| | a Suitability test (prior IRS approval required) | 3a | |
| | b Cash distribution test (attach the required schedule) | 3b | 071 621 |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 971,631. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions) | 5 | 4,301. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 967,330. |

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

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Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2010 | (c) 2010 | (d) 2011 |
|---|---------------|----------------------------|--------------------|---------------------------|
| Distributable amount for 2011 from Part XI, line 7 | | | | 591,782. |
| 2 Undistributed income, if any, as of the end of 2011: | | | | |
| a Enter amount for 2010 only | | | 0. | |
| b Total for prior years: 20 , 20 , 20 | | 0. | | |
| 3 Excess distributions carryover, if any, to 2011 | | | | |
| a From 2006 | | | | |
| b From 2007 | | | | |
| c From 2008 102, 663. | | | , | |
| d From 2009 | | | į | |
| e From 2010 | | | | |
| f Total of lines 3a through e | 102,663. | | | |
| 4 Qualifying distributions for 2011 from Part | | | | |
| XII, line 4. ► \$ 971,631. | | | | |
| a Applied to 2010, but not more than line 2a | | | 0. | |
| b Applied to undistributed income of prior years (Election required — see instructions) | | 0. | | |
| c Treated as distributions out of corpus (Election required — see instructions) | 0. | | | |
| d Applied to 2011 distributable amount | | | | 591,782. |
| e Remaining amount distributed out of corpus | 379,849. | | | |
| 5 Excess distributions carryover applied to 2011 | 0. | | | 0. |
| (If an amount appears in column (d), the same amount must be shown in column (a).) | | | | |
| 6 Enter the net total of each column as | | | | |
| indicated below: | 400 510 | | | |
| a Corpus Add lines 3f, 4c, and 4e. Subtract line 5 | 482,512. | . ,_,_ | | |
| b Prior years' undistributed income Subtract line 4b from line 2b | | 0. | | |
| c Enter the amount of prior years' undistribut- ed income for which a notice of deficiency has been issued, or on which the section | | | | |
| 4942(a) tax has been previously assessed | | 0. | | |
| d Subtract line 6c from line 6b Taxable amount — see instructions | | 0. | | |
| e Undistributed income for 2010 Subtract line 4a from | | | | |
| line 2a Taxable amount — see instructions | | | 0. | <u>.</u> |
| f Undistributed income for 2011. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2012. | | | | 0. |
| 7 Amounts treated as distributions out of | | | | |
| corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) | 0. | | | |
| • | 0. | | | |
| 8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions) | 0. | | | |
| 9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a | 482,512. | | | |
| 10 Analysis of line 9. | | | : | |
| a Excess from 2007 | | | | |
| b Excess from 2008 102, 663. | | | | |
| c Excess from 2009 | | | | |
| d Excess from 2010 | | | | |
| e Excess from 2011 379, 849. | | | | Form 990 PF (2011) |

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|---|---|---|----------------------------|--|----------------------------|
| PartXIV Private Operating Founda | | | | | N/A |
| 1a If the foundation has received a ruling or c is effective for 2011, enter the date of the | ruling | · | | _ • | *** |
| b Check box to indicate whether the foundat | | rating foundation de | | 4942(j)(3) or | 4942(j)(5) |
| 2a Enter the lesser of the adjusted net income from Part I or the minimum | Tax year | | Prior 3 years | | |
| investment return from Part X for each year listed | (a) 2011 | (b) 2010 | (c) 2009 | (d) 2008 | (e) Total |
| b 85% of line 2a | | | | | |
| c 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 | | | | | |
| Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c | | | | | |
| 3 Complete 3a, b, or c for the alternative test relied upon. | | | | | |
| a '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 investment return shown in Part X, line 6 for each year listed | | | | | |
| c 'Support' alternative test — enter. | | | | | |
| Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) | | | | | |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) | | | | | |
| (3) Largest amount of support from an exempt organization | | | | | |
| (4) Gross investment income | | <u> </u> | | | |
| Part VV Supplementary Information assets at any time during to Information Regarding Foundation Managers of the foundation who is close of any tax year (but only if they have | ne year — see in ers: nave contributed mo | ore than 2% of the t | otal contributions re | | |
| SEE STATEMENT 12 | | | | | |
| b List any managers of the foundation who ca partnership or other entity) of which the NONE | own 10% or more of foundation has a 10 | the stock of a corp)% or greater intere | oration (or an equa st. | lly large portion of the | e ownership of |
| 2 Information Regarding Contribution, Gran Check here ► X if the foundation only requests for funds. If the foundation make complete items 2a, b, c, and d | nakes contributions | to preselected char | ritable organizations | and does not accept nizations under other | unsolicited conditions, |
| a The name, address, and telephone number | er of the person to v | vhom applications s | hould be addressed | 1 | |
| b The form in which applications should be s | submitted and inforr | mation and material | s they should includ | le | |
| c Any submission deadlines | | | | | |
| d Any restrictions or limitations on awards, s | such as by geograph | hical areas, charitat | ole fields, kinds of in | nstitutions, or other fa | actors. |
| BAA | | E A02101 07/14/11 | | | form 990-PF (2011) |
| UAA | 16 | EA0310L 07/14/11 | | Г | Sim 220-11 (2011) |

| 3 Grants and Contributions Paid During the Yea | r or Approved for Futu | re Payment | | |
|---|---|------------|--------------|---------|
| Recipient | Purpose of grant or contribution | Amount | | |
| | substantial contributor | recipient | | |
| Name and address (home or business) a Paid during the year SEE STATEMENT 13 | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | recipient | CONTROLLOR | |
| | | | | |
| Total | |] | <u>▶</u> ?- | 071 621 |
| Total b Approved for future payment | | | ► 3a ► 3b | |

Part XVI-A Analysis of Income-Producing Activities

| nter gross amounts unless otherwise indicated | Unrelated | business income | Excluded by | section 512, 513, or 514 | (e) |
|---|-------------------------|----------------------|-------------------------------|--------------------------|--|
| Program service revenue: | (a) Business code | (b) Amount | (c) Exclu- sion code | (d) Amount | Related or exempt function income (See instructions) |
| a | | | | | |
| b | | | | | |
| С | | | | | <u>. </u> |
| d | | | | | |
| e | | | <u> </u> | | |
| f | | | | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash investments | | | 14 | 367,187. | |
| 4 Dividends and interest from securities | | | 14 | 99,474. | |
| 5 Net rental income or (loss) from real estate | | | | | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal property | | | | | |
| 7 Other investment income | | · | | | |
| 8 Gain or (loss) from sales of assets other than inventory | | | 18 | 13,721. | |
| 9 Net income or (loss) from special events | | | | | |
| 10 Gross profit or (loss) from sales of inventory | | | | | |
| 11 Other revenue: | | | | | |
| a BEACH POINT | 1 | | 14 | -10,942. | |
| b POST LTD HIGH YIELD | | | 14 | 424,100. | |
| С | | | | | |
| d | | | | | |
| е | | | | | |
| 12 Subtotal Add columns (b), (d), and (e) | | | | 893,540. | |
| 13 Total. Add line 12, columns (b), (d), and (e) | | | | 13 | 893,540. |
| See worksheet in line 13 instructions to verify calculation | s.) | | | | |

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

| Line No. ▼ | Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See instructions.) | | | | | | |
|---------------|---|--|--|--|--|--|--|
| N/A | | | | | | | |
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Form 990-PF (2011) THE SANDRA AND LAWRENCE POST FAMILY 95-4442473 Part XVIII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

| 1 Dot the organization directly or indirectly engage in any of the following with any other organization described in section 50 (cg) or indirectly an individual in a section 50 (cg) organizations or in section 527, relating to political organizations? 1 Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash (2) Other assets b Other transactions. 1 Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash (2) Purchases of assets from a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Sales to Glocities, equipment, or other assets (4) Reimbursement arrangements (4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundriasing solicitations (6) Performance of services or membership or fundriasing solicitations (6) Performance of services or membership or fundriasing solicitations (6) Performance of services or membership or fundriasing solicitations (6) Performance of services or membership or fundriasing solicitations (6) Performance of services or membership or fundriasing solicitations (6) Performance of services or membership or fundriasing solicitations (7) Performance of services grown by the reporting foundation. If the foundation received issistant far market value of the goods, other assets, or services grown by the reporting foundation. If the foundation received issistant far market value of the goods, other assets, or services grown by the reporting foundation. If the foundation received issistant far market value of the goods, other assets, or services grown by the reporting foundation. If the foundation received issistant far market value of the goods of the contraction of the contrac | | | | | | | | | | Yes | s No |
|--|---------------------------------------|---|--|---|---|----------------------------|---|-------------------|-------------|-------------------------|----------|
| relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash (2) Other assests b Other transactions. (1) Sales of assests to a noncharitable exempt organization (2) Purchases of assests from a noncharitable exempt organization (3) Rential of facilities, equipment, or other assests (4) Rembursement arrangements (5) Loans or loan guarantees (6) Loans or loan guarantees (6) Loans or loan guarantees (6) Loans or loan guarantees (7) Table answer to any of the above is Yes, complete the following schedule: Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value of the goods, other assets, or services received. (6) Line to (6) Amount molec. (6) Line to (7) Name of organization. (6) Line to (7) Name of organization. (7) Name of organization. (8) Name of organization. (9) Name of org | 1 Did | the organization directly scribed in section 501(c) o | or indirectly en | ngage in any of the follower than section 501(c | llowing with | any other o | rganization section 52 | 7. | | | |
| (2) Other assets b Other transactions. (1) Sales of assets to a noncharitable exempt organization (2) Furnises of assets to a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Rembusement arrangements (5) Loans or loan guarantees (6) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations (7) Sharing of facilities, equipment, mailing lists, other assets, or paid employees (8) Performance of services or membership or fundraising solicitations (9) Performance of services or membership or fundraising solicitations (9) Performance of services or membership or fundraising solicitations (1) Ethics (1) Ethics (1) Ethics (1) Ethics (2) X (3) Rental of facilities, equipment, mailing lists, other assets, or paid employees (1) Ethics (1) Ethics (1) Ethics (1) Ethics (1) Ethics (2) Ethics (3) Ethics (4) Ethics (4) Ethics (5) Loans or loan guarantees (6) Line are with a service symbol by the reporting foundation. If the foundation received less than fair market value in a market value or the epodes, other assets, or services received. (6) Line are (6) Line are (6) Aroust involved (6) Aroust involved (6) Name of inordialitable exempt organization (6) Description of transfairs, transactors, and sharing arrangements (9) Description of transfairs, transactors, and sharing arrangements (9) Type of organization (9) Description of transfairs, transactors, and sharing arrangements (9) Name of organization (9) Type of organization (9) Description of transfairs, transactors, and sharing arrangements (1) A Stansactors, and sharing arrangements are severed. (1) A Stansactors of the service of the servi | rel | ating to political organizat | ions? | 1101 111011 30011011 301(0 | J(O) Organiz | auons, or | 7 50000011 52 | , | | | |
| (2) Other assets be their transactions. (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (7) Sales of assets from a noncharitable exempt organization (8) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (10) Loans or loan guarantee, mailing lists, other assets, or paid employes d If the answer to any of the above is "Yes," complete the following schedule: Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation, if the foundation received less than fair market value of the goods, other assets, or services given by the reporting foundation, if the foundation received less than fair market value of the value of the goods, other assets, or services story services story services story services story except services, or services story services story except services or services given by the reporting foundation, if the foundation received less than fair market value of the goods, other assets, or services story except story services or services, so revices story except story in complete the following schedule: (a) Name of organization (b) Amount involved (c) Name of organization (b) Type of organization (c) Description of reliationship b) If "Yes, Complete the following schedule: (a) Name of organization (b) Type of organization (c) Description of reliationship Discription of pression of press | · · · | | | | | | | | | | V |
| b Other transactons. (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundratising solicitations (7) Sharing of facilities, equipment, mailing lists, other assets, or paid employees (8) Performance of services or membership or fundratising solicitations (9) Performance of services or membership or fundratising solicitations (1) Loans or loan guarantees (1) Loans or loan guarantees (1) Experiment of facilities, equipment, mailing lists, other assets, or paid employees (1) Experiment of facilities, equipment, mailing lists, other assets, or paid employees (1) Experiment of facilities, equipment, mailing lists, other assets, or paid employees (1) Experiment of facilities, equipment, mailing lists, other assets, or paid employees (1) Experiment of facilities, equipment, mailing lists, other assets, or paid employees (1) Experiment of facilities, equipment, mailing lists, other assets, or paid employees (2) Interest of the goods, other assets, or services received. (3) List on the standard of the following schedule Column (b) should always show the fair market value of the goods, other assets, or services received. (4) Name of the facilities of the fair market value of the goods, other assets, or services received. (4) Name of organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations (6) Description of transfers, transactions, and sharing arrangements (a) Name of organization (b) Type of organization (c) Description of relationship (a) Name of organization (b) Type of organization (c) Description of relationship (c) Desc | ··· | | | | | | | | | | |
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| (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan quarantees (6) Performance of services or membership or fundraising solicitations (7) Extra or formation of facilities, equipment, mining lists, other assets, or paid employees (8) Performance of services or membership or fundraising solicitations (9) Extra or formation or facilities, equipment, maining lists, other assets, or paid employees (9) If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services received. (9) Line no (b) Amount involved (c) Name of noncharitable exempt organization (9) Line no (b) Amount involved (c) Name of noncharitable exempt organization (9) Line no (b) Amount involved (c) Name of noncharitable exempt organization (9) Description of transfers, transactions, and sharing arrangements (9) Line no (b) Color the Code (other than section 501(c)) of the Code (oth | | | icharitable exer | mpt organization | | | | | | 1b(1) | Х |
| (a) Rental of facilities, equipment, or other assets (b) Loans or loan guarantees (c) Loans or loan guarantees (d) Performance of services or membership or fundrasing solicitations (e) Performance of services or membership or fundrasing solicitations (e) Sharing of facilities, equipment, mailing lists, other assets, or paid employees d if the answer to any of the above is "Yes," complete the following schedule (a) Line or (b) Amount involved (c) Name of inancharitable eventy surgicial events of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (b) the value of the goods, other assets, or services received (a) Line or (b) Amount involved (c) Name of inancharitable eventy erganization (d) Description of transfers, transactions, and sharing arrangements 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Tyes \(\times\) No bif "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A Dubler penalties accuracy, ideative that I have against the starty, including accompanying activities and statements, and to the level of my knowledge and belief, it is from, controlling to the controlling of the controlling of the controlling of the property is based on all information of which pregames, and to the level of my knowledge and belief, it is from, controlling organization of separative controlling or incompanying to based on all information of which pregames are incompanying to be additionally and the property is property in the set of my knowledge and belief, it is from, controlling organization of separative controlling organization of which pregames are incompanying to be additionally an appropriate page and the property is premised. Print Print Print Pri | · · · · · · · · · · · · · · · · · · · | | | | | | | | | | |
| (5) Leans or loan guarantess (6) Performance of services or membership or fundraising solicitations (7) Expansion of facilities, equipment, mailing lists, other assets, or paid employees d if the answer to any of the above is "Yes," complete the following schedule (8) Line 10 (6) Amount moved (9) Line 10 (6) Amount moved (9) Line 10 (6) Amount moved (9) Line 10 (6) Amount moved (10) Line 10 (6) Lin | | | | , , | | | | | | 1 b (3) | X |
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| d if the answer to any of the above is 'Yes,' complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received large seems and a market value in any transaction or sharing arrangement, show in column (b) the value of the goods, other assets, or services received. (a) line no (b) Amount inclined (c) Name of inacharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements. N/A 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? (a) Name of organization (b) Type of organization (c) Description of relationship N/A (b) Type of organization (c) Description of relationship (e) Description of relationship (f) Type of organization (high transport of which prepare has any knowledge and statements, and to the best of my knowledge and belief, it is true, country to the second of the prepare to the my knowledge and statements, and to the best of my knowledge are supported to the prepare of the my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and belief, it is true, country to prepare the series of the my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and belief, it is true, to the prepare to the my knowledge and statements, and to the best of my knowledge and statements, and to the best of my knowledge and belief, it is true, to the prepare to the my knowledge and statements, | (6) | Performance of services | or membershi | p or fundraising solici | tations | | | | | 1b (6) | |
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| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No b f Yes, 'complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A | N/A | | | | | | | | | | |
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| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No b f Yes, 'complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A | | | | | | | | | | | |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No b f Yes, 'complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A | | | | | | | | | | | |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No b f Yes, 'complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A | | | | | | | | | | | |
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| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No b f Yes, 'complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A | | | | | | | | | | | |
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| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No b f Yes, 'complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A | | | | | | | | | · - · · · - | | |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No b f Yes, 'complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A | | | <u> </u> | | | | | | | | |
| b if 'Yes,' complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of geniury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer of the than taxpayer) is based on all information of which preparer has any knowledge Sign Here Signature of officer or trustee Print/Type preparer's name JOSEPH BAYEWITCH Print/Type preparer's name Preparer's signature Preparer Use Only Date Title Check of PTIN Self-employed Firm's name RBZ LLP Firm's name PRBZ LLP Firm's address 11755 WILSHIRE BLVD NINTH FL LOS ANGELES, CA 90025 Phone no (310) 478-4148 | 2a Is 1 des | the foundation directly or i scribed in section 501(c) o | indirectly affilia of the Code (otl | ted with, or related to her than section 501(c | , one or moi :)(3)) or in si | re tax-exem ection 527° | npt organiza | itions | | ∏Yes Σ | No |
| Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and corribely Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge May the IRS discuss this return with the preparer shown below (see instructions)? X Yes No | | • • • | , | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | | | |
| Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and confiple Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge May the IRS discuss this return with the preparer shown below (see instructions)? X Yes No | | (a) Name of organizati | on | (b) Type of o | rganization | | (0 |) Description | of relation | onship | |
| Sign Here Signature of officer or trustee Date Title | N/A | | | | | | | | | | |
| Sign Here Signature of officer or trustee Date Title | | | | | | | | | | | |
| Sign Here Signature of officer or trustee Date Title | | | | | | | | | | | |
| Sign Here Signature of officer or trustee Date Title | | | | | | | | . <u> </u> | | | |
| Sign Here Signature of officer or trustee Date Title | | Under penalties of periury. I decla | re that I have exam | uned this return, including ac | companying sc | hedules and sta | atements and t | to the best of my | knowledge | and belief it is | true |
| Here Signature of officer or trustee Print/Type preparer's name Preparer Signature of officer or trustee Date Print/Type preparer's name Preparer's signature Preparer's signature Title Date Title Print/Type preparer's name Preparer's signature Title Date Check if PTIN PO367570 Prim's name Firm's name Firm's name Firm's address ABZ LLP Firm's EIN Phone no (310) 478-4148 | | correct, and complete Declaration | of preparer (other | than taxpayer) is based on a | all information o | f which prepare | er has any knov | wledge | | | |
| Signature of officer or trustee Print/Type preparer's name JOSEPH BAYEWITCH Preparer Use Only Print/Type preparer's name Preparer's signature Print/Type preparer's name Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Print/T | - 1 | | 2 A | 1 | 1.1. | | 005.r | | | this return with | the |
| Print/Type preparer's name JOSEPH BAYEWITCH Preparer Use Only Print/Type preparer's name Preparer's signature Preparer's signature Total Tota | Here | x/anu/ | 1 []/] | 7 ×/ | 10/12 | _ <u>*</u> | 100/1 | ENV | | (see instruction | |
| Paid Preparer Use Only JOSEPH BAYEWITCH RBZ LLP Firm's address RBZ LLP 11755 WILSHIRE BLVD NINTH FL LOS ANGELES, CA 90025 Phone no (310) 478-4148 | | | me , | | | | te | |), F | | No |
| Preparer Use Only Firm's address RBZ LLP 11755 WILSHIRE BLVD NINTH FL LOS ANGELES, CA 90025 Phone no (310) 478-4148 | De lat | 1 | | | mar. A | / | .11 | ۱ - | 」" ∣ | | n |
| Use Only Firm's address INT | | | | - Jury | Juin | 1 1 | / ' | , , , , , | su II | 3030737 | |
| LOS ANGELES, CA 90025 Phone no (310) 478-4148 | | · - | | SHIRE BLVD NIN | TH FL | | · | 3 = 111 | | | |
| | USE UI | | | | | | | Phone no | (310) | 478-414 | 8 |
| | BAA | | | | | | | | | | |

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF

OMB No 1545 0047

2011

| Name of the organization THE SANDR FOUNDATIO | RA AND LAWRENCE POST FAMILY | 95-4442473 | | | | |
|--|--|--|--|--|--|--|
| Organization type (check one). | | 170 11101/0 | | | | |
| Filers of: | Section: | | | | | |
| Form 990 or 990-EZ | 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not to 527 political organization | | | | | |
| Form 990-PF | Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation | | | | | |
| Check if your organization is cover Note. Only a section 501(c)(7), (8) | red by the General Rule or a Special Rule . , or (10) organization can check boxes for both the General R | Rule and a Special Rule. See instructions | | | | |
| General Rule X For an organization filing Form contributor. (Complete Parts I | n 990, 990-EZ, or 990-PF that received, during the year, \$5,00 and II.) | 00 or more (in money or property) from any one | | | | |
| Special Rules | | | | | | |
| $509(a)(1)$ and $170(b)(1)(A)(v_1)$, | zation filing Form 990 or 990-EZ that met the 33-1/3% support and received from any one contributor, during the year, a co orm 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complet | intribution of the greater of (1) \$5,000 or | | | | |
| total contributions of more than | (10) organization filing Form 990 or 990-EZ that received from \$1,000 for use <i>exclusively</i> for religious, charitable, scientific ildren or animals. Complete Parts I, II, and III | m any one contributor, during the year, , literary, or educational purposes, or | | | | |
| contributions for use exclusive If this box is checked, enter he purpose Do not complete any | (10) organization filing Form 990 or 990-EZ that received from the following form 990 or 990-EZ that received from the following the second from the total contributions that were received during the year for the parts unless the General Rule applies to this organization. | ons did not total to more than \$1,000 for an <i>exclusively</i> religious, charitable, etc, tion because it received nonexclusively | | | | |
| religious, charitable, etc, contr | ributions of \$5,000 or more during the year | ► \$ | | | | |
| 990-PF) but it must answer 'No' or | ot covered by the General Rule and/or the Special Rules does in Part IV, line 2, of its Form 990, or check the box on line H o is not meet the filing requirements of Schedule B (Form 990, 9 | of its Form 990-EZ or on Part I, line 2, of its | | | | |
| BAA For Paperwork Reduction A 990EZ, or 990-PF. | Act Notice, see the Instructions for Form 990, | Schedule B (Form 990, 990-EZ, or 990-PF) (2011) | | | | |

| Schedule | B (Form 990, 990-EZ, or 990-PF) (2011) | Page | 1 of 1 of Part 1 |
|---------------|--|-------------------------------|--|
| Name of org | anization ANDRA AND LAWRENCE POST FAMILY | ' - | identification number |
| Part I | Contributors (see instructions). Use duplicate copies of Part I if additional sp | ace is needed. | |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | LAWRENCE AND SANDRA POST 1160 TOWER ROAD BEVERLY HILLS, CA 90210 | \$1,200,000. | Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$\$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash |

(Complete Part II if there is a noncash contribution)

Page

1 to

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

of Part II

nante or organization

BAA

THE SANDRA AND LAWRENCE POST FAMILY

95-4442473

Employer identification number

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed (d) Date received (a) No. from Part I (b) (c) FMV (or estimate) Description of noncash property given (see instructions) N/A (d) Date received (a) No. from Part I (c) FMV (or estimate) (see instructions) (b) Description of noncash property given (a) (c) (d) FMV (or estimate) No. from Description of noncash property given Date received Part I (see instructions) (c) FMV (or estimate) (see instructions) (d) (a) (b) No. from Description of noncash property given Date received Part I (a) No. from (c) FMV (or estimate) (see instructions) (d) Description of noncash property given Date received Part I (a) (c) (d) Description of noncash property given FMV (or estimate) No. from Date received Part I (see instructions)

Page

1 to

of Part III

Name of organization
THE SANDRA AND LAWRENCE POST FAMILY

Employer identification number 95-4442473

Exclusively religious, charitable, etc, individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete cols (a) through (e) and the following line entry.

For organizations completing Part III, enter total of *exclusively* religious, charitable, etc, contributions of **\$1,000** or less for the year (Enter this information once. See instructions.) Use duplicate copies of Part III if additional space is needed

\$ N/A

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---------------------------|---------------------------------------|--|--|
| | N/A | | |
| | | | |
| | | · | |
| | Transferee's name, address, | (e) Transfer of gift and ZIP + 4 | Relationship of transferor to transferee |
| | | | |
| | | | |
| (-) | (1) | 4.5 | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | | |
| | | | |
| | Transferee's name, address, | (e) Transfer of gift and ZIP + 4 | Relationship of transferor to transferee |
| | | | |
| | | | |
| | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | · · · · · · · · · · · · · · · · · · · | |
| | | | |
| | Transferee's name, address, | (e) Transfer of gift and ZIP + 4 | Relationship of transferor to transferee |
| | | | |
| | | | |
| (a) | (b) | (c) | (d) |
| No. from Part I | Purpose of gift | Use of gift | Description of how gift is held |
| | | | |
| | | | |
| | | (e) Transfer of gift | |
| | Transferee's name, address, | and ZIP + 4 | Relationship of transferor to transferee |
| | | | |
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FEDERAL STATEMENTS

PAGE 1

THE SANDRA AND LAWRENCE POST FAMILY FOUNDATION

95-4442473

| STATEMENT 1 | |
|---------------------------|----|
| FORM 990-PF, PART I, LINE | 11 |
| OTHER INCOME | |

| (A) | (B) NET | (C) |
|-----------|------------|------------|
| REVENUE | INVESTMENT | ADJUSTED |
| PER BOOKS | INCOME | NET INCOME |
| | | |

BEACH POINT POST LTD HIGH YIELD

\$ -10,942. 424,100. TOTAL \$ 413,158.\$ 0.\$ 0.

STATEMENT 2 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES

| | EX PEI | | NET (C STMENT ADJU COME NET I | | _ |
|-----------------|-----------|-----------------------|-------------------------------------|-------|----|
| TAX PREPARATION | TOTAL \$ | 16,336. 16,336. \$ | 0. \$ | 0. \$ | 0. |

STATEMENT 3 FORM 990-PF, PART I, LINE 16C OTHER PROFESSIONAL FEES

| | | (A) EXPENSES PER BOOKS | (B) NET INVESTMENT INCOME | ADJUSTED NET INCOME | CHARITABLE PURPOSES |
|---|-------|------------------------------------|------------------------------------|------------------------|---------------------|
| BROKER FEES INVESTMENT MANAGEMENT FEES | TOTAL | \$ 3,777. 46,145. \$ 49,922. | \$ 3,777. 46,145. \$ 49,922. | <u>\$</u> 0. | <u>\$</u> 0. |

STATEMENT 4 FORM 990-PF, PART I, LINE 18 TAXES

| | | (A) EXPENSE PER BOOK | | | (C) JUSTED INCOME | (D) CHARITABLE PURPOSES |
|---|------|----------------------------|----------------------|-------|-------------------------|-------------------------------|
| FEDERAL NET INVESTMENT EXCISE STATE FEE | OTAL | \$ 35,0 \$ 35,0 | 00. .0. .0. \$ | 0. \$ | 0. | \$ 0. |

| 2011 | | STATEMENTS AWRENCE POST FAM | II V | PAGE 2 |
|--|---------------------|---|---|--|
| | | NDATION | L | 95-444247 |
| STATEMENT 5 FORM 990-PF, PART I, LIN OTHER EXPENSES | E 23 | | | |
| | | (A) (B) NET ENSES INVESTMENT BOOKS INCOME | (C) T ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
| BANK CHARGES LICENSES & PERMITS | \$ TOTAL \$ | 366. \$ 366 150. 516. \$ 366 | 5. 5. \$ 0. | <u>\$</u> 0. |
| CORPORATE STOCKS STOCKS | 41E 3100NO | VALUATION METHOD COST \$ TOTAL \$ | VALUE | FAIR MARKET VALUE 228,645. 228,645. |
| STATEMENT 7 | | | | : |
| FORM 990-PF, PART II, LIN INVESTMENTS - CORPOR | NE 10C ATE BONDS | | | |
| FORM 990-PF, PART II, LIN | NE 10C ATE BONDS | VALUATION METHOD | BOOK VALUE | FAIR MARKET VALUE |
| FORM 990-PF, PART II, LIN INVESTMENTS - CORPOR | NE 10C ATE BONDS | | VALUE 3,475,022. \$ | |
| FORM 990-PF, PART II, LIN INVESTMENTS - CORPORA | ATE BONDS | <u>METHOD</u> _ COST \$ | VALUE \$ 3,475,022. \$ | VALUE 3,769,831. |
| FORM 990-PF, PART II, LIN INVESTMENTS - CORPORA CORPORATE BONDS BONDS STATEMENT 8 FORM 990-PF, PART II, LIN | ATE BONDS | <u>METHOD</u> _ COST \$ | VALUE 3 3,475,022. \$ 3 3,475,022. \$ | VALUE 3,769,831. |

TOTAL \$ 5,854,777. \$ 5,708,934.

| 7 | n | 4 | 1 |
|---|---|---|---|
| L | u | | |

FEDERAL STATEMENTS

THE SANDRA AND LAWRENCE POST FAMILY FOUNDATION

PAGE 3

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STATEMENT 9 FORM 990-PF, PART II, LINE 22 OTHER LIABILITIES

INVESTMENT PAYABLE

\$ 10,000.

TOTAL \$ 10,000.

STATEMENT 10 FORM 990-PF, PART III, LINE 3 OTHER INCREASES

NON-DIVIDEND DISTRIBUTION

STATEMENT 11 FORM 990-PF, PART IV, LINE 1 CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

| | | (B) HOW | (C) DATE | (D) DATE |
|-----------------------|---------------------------------|-----------|------------|------------|
| <u>ITEM</u> | | ACQUIRED | ACQUIRED | SOLD |
| 1 | 250,000 ALPHA NATURAL RESOURCES | PURCHASED | 5/18/2011 | 5/19/2011 |
| 2 | 135,000 AMER CASINO & ENT | PURCHASED | 5/31/2011 | 5/31/2011 |
| 3 | 250,000 APERAM | PURCHASED | 3/25/2011 | 3/25/2011 |
| 4 | 500,000 ATLANTIC RICHFIELD | PURCHASED | 6/02/2010 | 4/11/2011 |
| 2 3 4 5 6 | 1,000,000 ATP OIL | PURCHASED | 9/16/2011 | 9/16/2011 |
| 6 | 1,000,000 BOISE CASCADE | PURCHASED | 1/13/2011 | 1/13/2011 |
| 7 | 250,000 BON-TON DEPT STORES | PURCHASED | 6/30/2011 | 6/30/2011 |
| 8 9 | 1,080,000 BUCCANEER MERGER | PURCHASED | 1/19/2011 | 1/19/2011 |
| 9 | 1,000,000 CAPMARK FINANCIAL | PURCHASED | 6/14/2011 | 6/14/2011 |
| 10 | 2,000,000 CAPMARK FINANCIAL | PURCHASED | 8/12/2011 | 8/12/2011 |
| 11 | 500,000 CC HOLDINGS | PURCHASED | 1/11/2011 | 1/11/2011 |
| 12 | 1,000,000 CDW LLC | PURCHASED | 4/25/2011 | 4/25/2011 |
| 13 | 500,000 CHEMTURA CORP | PURCHASED | 10/12/2011 | 10/12/2011 |
| 14 | 325,000 CITIZENS COMMUNICATIONS | PURCHASED | 1/05/2011 | 1/05/2011 |
| 15 | 1,000,000 CLAIR'S ESCROW CORP | PURCHASED | 5/06/2011 | 5/06/2011 |
| 16 | 500,000 CLOROX CO | PURCHASED | 11/14/2011 | 11/14/2011 |
| 17 | 950,000 COMPLETE PRODUCTION | PURCHASED | 4/05/2011 | 4/05/2011 |
| 18 | 500,000 CUMULUS MEDIA | PURCHASED | 5/11/2011 | 5/11/2011 |
| 19 | 1,500,000 DYNEGY HOLDINGS | PURCHASED | 11/08/2011 | 11/08/2011 |
| 20 | 1,000,000 FMG RESOURCES | PURCHASED | 12/02/2011 | |
| 21 | 500,000 FMG RESOURCES | PURCHASED | 8/08/2011 | 8/08/2011 |
| 22 | 1,000,000 GANNETT CO | PURCHASED | 1/06/2011 | 1/06/2011 |
| 23 | 500,000 GREAT ATLANTIC | PURCHASED | 1/12/2011 | 1/12/2011 |
| 24 | 1,000,000 GRIFOLS INC | PURCHASED | 8/29/2011 | 8/29/2011 |
| 25 | 1,000,000 HARRAHS OPERATING | PURCHASED | 3/10/2011 | 3/10/2011 |
| 26 | 750,000 HARRAHS OPERATING | PURCHASED | 2/16/2011 | 2/16/2011 |
| 27 | 500,000 HCA INC | PURCHASED | 9/27/2011 | 9/27/2011 |
| 28 | 500,000 HCA INC | PURCHASED | 7/26/2011 | 7/27/2011 |
| 29 | 1,000,000 HERCULES OFFSHORE | PURCHASED | 3/22/2011 | 3/22/2011 |
| 30 | 175,000 HOA RESTAURANT | PURCHASED | 10/18/2011 | 10/18/2011 |
| 31 | 250,000 INERGY | PURCHASED | 1/19/2011 | 1/20/2011 |
| 32 | 250,000 JAGUAR | PURCHASED | 11/15/2011 | 11/16/2011 |
| 33 | 1,000,000 KANSIS CITY | PURCHASED | 1/04/2011 | 1/04/2011 |
| 34 | 250,000 KOHL'S CORP | PURCHASED | 10/12/2011 | 10/12/2011 |
| 35 | 1,000,000 LEHMAN BROTHERS HLD | PURCHASED | 1/26/2011 | 1/26/2011 |
| | | | | |
| | | | | |

FEDERAL STATEMENTS

THE SANDRA AND LAWRENCE POST FAMILY FOUNDATION

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STATEMENT 11 (CONTINUED) FORM 990-PF, PART IV, LINE 1 CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

| Tmm. | (A) DECORTORION | (B) HOW | (C) DATE | (D) DATE SOLD |
|-------------------|---|------------------------|-------------------------|------------------------|
| <u>ITEM</u> 36 | (A) DESCRIPTION 1,000,000 LEHMAN BROTHERS HLD 500,000 LEVEL 3 COMM 400,000 MARQUETTE TRANS | ACQUIRED PURCHASED | ACQUIRED 1/14/2011 | 1/14/2011 |
| 30 37 | 500 000 TEVEL 3 COMM | PURCHASED | 1/11/2011 | 1/11/2011 |
| 38 | 400 000 MAROUETTE TRANS | PURCHASED | 12/14/2011 | 12/14/2011 |
| 39 | 400,000 MF GLOBAL HLDGS | PURCHASED | 11/21/2011 | 11/21/2011 |
| 40 | 250,000 MIRABELA NICKEL | PURCHASED | 4/07/2011 | 4/07/2011 |
| 41 | 250,000 NEEDLE MERGER | PURCHASED | 3/03/2011 | 3/03/2011 |
| 42 | 1,000,000 NEEDLE MERGER | PURCHASED | 12/01/2011 | 12/01/2011 |
| 43 | 1,000,000 NEWPAGE CORP | PURCHASED | 6/13/2011 | 6/13/2011 |
| 44 | 1,450,000 NEWPAGE CORP | PURCHASED | 2/23/2011 | 2/23/2011 |
| 45 | 1,000,000 OPTI CANADA INC | PURCHASED | 2/02/2011 | 2/02/2011 |
| 46 | 1,000,000 OPTI CANADA INC | PURCHASED | 2/01/2011 | 2/01/2011 |
| 47 | 1,000,000 OPTI CANADA INC | PURCHASED | 2/15/2011 | 2/15/2011 3/09/2011 |
| 48 | 2,000,000 OPTI CANADA INC 1,000,000 OPTI CANADA INC | PURCHASED PURCHASED | 3/09/2011 2/24/2011 | 2/24/2011 |
| 49 50 | 1,000,000 OPTI CANADA INC 1,000,000 OPTI CANADA INC | PURCHASED | 4/28/2011 | 4/28/2011 |
| 51 | 250,000 OSI RESTAURANT | PURCHASED | 9/01/2011 | 9/01/2011 |
| 52 | 655 OOO PARTER HOLDING | PURCHASED | 2/03/2011 | 2/03/2011 |
| 53 | 1,000,000 PHH CORP | PURCHASED | 3/07/2011 | 3/07/2011 |
| 54 | 1,000,000 PHILLIPS-VAN HEUSEN | PURCHASED | 12/22/2011 | 12/22/2011 |
| 55 | 1,000,000 PHH CORP 1,000,000 PHILLIPS-VAN HEUSEN 500,000 PLAINS EXPLORATION 1,000,000 RAINBOW NATL 1,000,000 REALOGY CORP 1,000,000 ROUSE CO 787,000 ROYAL CARIBBEAN 800,000 RRI ENERGY 250,000 SANDRIDGE ENERGY 1,000,000 SELECT MEDICAL 1,000,000 STANDARD PACIFIC 338,000 STEINWAY MUSICAL 1,000,000 STERLING MERGER 1,000,000 STONEMOR/CORNERSTN 895,000 SUSSER HOLDINGS 4,000,000 TAKEFUJI 3,000,000 VALEANT PHARM 1,000,000 WMG ACQUISITION | PURCHASED | 9/22/2011 | 9/22/2011 |
| 56 | 1,000,000 RAINBOW NATL | PURCHASED | 2/07/2011 | 2/07/2011 |
| 57 | 1,000,000 REALOGY CORP | PURCHASED | 3/14/2011 | 3/14/2011 |
| 58 | 1,000,000 ROUSE CO | PURCHASED | 8/04/2011 | 8/04/2011 |
| 59 60 | /8/,UUU KUIAL CAKIBBLAN | PURCHASED PURCHASED | 3/04/2011 2/14/2011 | 3/04/2011 2/14/2011 |
| 60 61 | 250 000 CANDRIDGE ENERGY | PURCHASED | 3/02/2011 | 3/03/2004 |
| 62 | 1 000 000 SEALY MATTRESS | PURCHASED | 10/26/2011 | 10/26/2011 |
| 63 | 200.000 SELECT MEDICAL | PURCHASED | 10/11/2011 | 10/11/2011 |
| 64 | 1.000.000 STANDARD PACIFIC | PURCHASED | 7/21/2011 | 7/21/2011 |
| 65 | 338,000 STEINWAY MUSICAL | PURCHASED | 3/08/2011 | 3/08/2011 |
| 66 | 1,000,000 STERLING MERGER | PURCHASED | 7/20/2011 | 7/20/2011 |
| 67 | 1,000,000 STONEMOR/CORNERSTN | PURCHASED | 5/17/2011 | 5/17/2011 |
| 68 | 895,000 SUSSER HOLDINGS | PURCHASED | 3/17/2011 | 3/17/2011 |
| 69 | 4,000,000 TAKEFUJI | PURCHASED | 2/04/2011 | 2/04/2011 2/04/2011 |
| 70 71 | 3,000,000 TAKEFUJI 250 000 VALEANT DUADM | PURCHASED PURCHASED | 2/04/2011 6/10/2011 | 6/10/2011 |
| 72 | 1,000,000 WMG ACQUISITION | PURCHASED | 7/25/2011 | 7/25/2011 |
| 73 | 1,000,000 YCC HOLDINGS | PURCHASED | 12/05/2011 | 12/05/2011 |
| 74 | 500,000 YCC HOLDINGS | PURCHASED | 7/07/2011 | 7/07/2011 |
| 75 | 90,000 AMERIGAS PTRN | PURCHASED | 6/10/2009 | 2/22/2011 |
| 76 | CEDAR BRAKES | PURCHASED | VARIOUS | 9/01/2011 |
| 77 | 55,000 FELCOR LODGING | PURCHASED | 7/21/2010 | 6/01/2011 |
| 78 | 80,000 GENERAL MTRS | PURCHASED | | 11/15/2011 |
| 79 | 751 JSC MMC | PURCHASED | 10/20/2011 | 11/03/2011 |
| 80 | 2,000 LMP CAP INC FD | PURCHASED | 9/26/2008 | 3/25/2011 |
| 81 | 3,000 LMP CAP INC FD 328,000 MGIC INVT | PURCHASED PURCHASED | 9/26/2008 12/15/2010 | 3/28/2011 9/15/2011 |
| 82 83 | 200,000 MORGAN STANLEY | PURCHASED | 2/05/2008 | 6/01/2011 |
| 84 | 300,000 SPX CORP | PURCHASED | 6/09/2005 | 1/18/2011 |
| 85 | 250,000 UNITED PARCEL SVC | PURCHASED | 12/28/2009 | 6/21/2011 |
| 86 | 65,000 VENTAS REALTY | PURCHASED | 5/26/2010 | 7/26/2011 |
| 87 | 518,000 VENTAS REALTY | PURCHASED | 1/07/2011 | VARIOUS |
| 88 | 17,000 WESTVACO CORP | PURCHASED | 7/10/2009 | 3/15/2011 |
| 89 | .1567 FIRST TR STRATEGIC | PURCHASED | 7/28/2011 | 10/04/2011 |
| 90 | 2203.23529 COHEN & STEERS | PURCHASED | 5/21/2007 | 10/13/2011 |
| 91 | 293.76471 COHEN & STEERS | PURCHASED | 4/17/2008 | 10/13/2011 |
| | | | | |

FEDERAL STATEMENTS

THE SANDRA AND LAWRENCE POST FAMILY FOUNDATION

PAGE 5 95-4442473

STATEMENT 11 (CONTINUED) FORM 990-PF, PART IV, LINE 1 CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

| ITEM | | (A) DES | SCRIPTION | | (B) ACQU | HOW | | DATE QUIRED | (D) DATE SOLD |
|---------------------------------|--|------------------------------------|--|--|----------------------------------|-------------------------------|----------------|--|---|
| 92 93 94 95 | 2800 LMP C 2000 LMP C 200 LMP CA 1 E-TRADE | AP INC FD AP INC FD P INC FD | JONET 110H | • *** | PURCH PURCH PURCH PURCH | IASED IASED IASED | 8/ 8/ 8/ | 04/2005 04/2005 04/2005 VARIOUS | 3/22/2011 3/22/2011 3/22/2011 10/28/2011 |
| 96 97 98 | PER K-1 BE PER K-1 BE | ACH POINT 1 ACH POINT 1 | | | PURCH PURCH PURCH | IASED IASED | | VARIOUS VARIOUS VARIOUS | VARIOUS VARIOUS VARIOUS |
| <u>ITEM</u> | (E) GROSS SALES | (F) DEPREC. ALLOWED | (G) COST BASIS | (H) GAIN (LOSS) | (I) FMV 12/31/69 | (J) ADJ. I <u>12/31</u> | BAS. | (K) EXCESS (I)-(J) | (L) GAIN (LOSS) |
| 1 2 3 4 5 6 7 | 250,625. 144,113. 255,000. 535,000. | | 250,000. 143,944. 250,000. 520,000. | 625. 169. 5,000. 15,000. | | | | | \$ 625. 169. 5,000. 15,000. |
| 8 | 830,000. 987,500. 250,625. 1142100. | | 829,375. 986,875. 250,000. 1139400. | 625. 625. 625. 2,700. | | | | | 625. 625. 625. 2,700. |
| 9 10 11 12 | 585,000. 1101250. 550,000. 1007500. | | 584,375. 1100000. 549,375. 1006250. | 625. 1,250. 625. 1,250. | | | | | 625. 1,250. 625. 1,250. |
| 13 14 15 16 | 500,000. 341,250. 980,625. 496,060. | | 498,750. 340,844. 980,000. 495,485. | 1,250. 406. 625. 575. | | | | | 1,250. 406. 625. 575. |
| 17 18 19 20 | 1003438. 506,250. 1113750. 997,500. | | 1002250. 505,625. 1112813. 996,250. | 1,188. 625. 937. 1,250. | | | | | 1,188. 625. 937. 1,250. |
| 21 22 23 24 | 490,000. 1001250. 445,000. 1002500. | | 488,750. 1000625. 444,375. 1001250. | 1,250. 625. 625. 1,250. | | | | | 1,250. 625. 625. 1,250. |
| 25 26 27 28 | 911,250. 855,938. 500,625. 501,250. | | 910,000. 855,000. 500,000. 500,000. | 1,250. 938. 625. 1,250. | | | | | 1,250. 938. 625. 1,250. |
| 29 30 31 | 1015000. 154,875. 251,250. | | 1012500. 154,000. 250,000. | 2,500. 875. 1,250. | | | | | 2,500. 875. 1,250. |
| 32 33 34 35 | 251,563. 1005625. 249,125. 241,250. | | 250,000. 1005000. 248,628. 240,000. | 1,563. 625. 497. 1,250. | | | | | 1,563. 625. 497. 1,250. |
| 36 37 38 39 | 250,000. 493,750. 400,000. 124,000. | | 248,750. 490,865. 399,000. 123,500. | 1,250. 2,885. 1,000. 500. | | | | | 1,250. 2,885. 1,000. 500. |
| 40 41 42 43 44 | 255,625. 251,250. 933,750. 923,125. 965,156. | | 255,313. 250,000. 927,500. 922,500. 964,250. | 312. 1,250. 6,250. 625. 906. | | | | | 312. 1,250. 6,250. 625. 906. |
| 77 | 703, 130. | | JU4, 4JU. | 300. | | | | | 500. |

FEDERAL STATEMENTS

THE SANDRA AND LAWRENCE POST FAMILY FOUNDATION

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STATEMENT 11 (CONTINUED) FORM 990-PF, PART IV, LINE 1 CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

| | (E) | (F) | (G) | (H) | (I) | (J) | (K) | (L) |
|----------|----------------------|--------------------|----------------------|----------------------|-------------------|-----------------------|---------------------|---------------------|
| ITEM | GROSS SALES | DEPREC. ALLOWED | COST BASIS | GAIN (LOSS) | FMV _12/31/69_ | ADJ. BAS. 12/31/69 | EXCESS (I) - (J) | GAIN (LOSS) |
| 45 | 935,625. | | 932,500. | 3,125. | | | | \$ 3,125. |
| 46 47 | 573,750. 950,000. | | 572,500. 948,750. | 1,250. 1,250. | | | | 1,250. 1,250. |
| 48 | 550,000. | | 548,750. | 1,250. | | | | 1,250. 625. |
| 49 50 | 545,625. 528,750. | | 545,000. 527,500. | 625. 1,250. | | | | 1,250. |
| 51 52 | 257,188. 701,259. | | 256,875. 700,850. | 313. 409. | | | | 313. 409. |
| 53 | 1093750. | | 1092500. | 1,250. | | | | 1,250. |
| 54 55 | 1090000. 502,500. | | 1089375. 501,875. | 625. 625. | | | | 625. 625. |
| 56 | 1006500. 992,500. | | 1006000. 991,250. | 500. 1,250. | | | | 500. 1,250. |
| 57 58 | 1000000. | | 998,750. | 1,250. | | | | 1,250. |
| 59 60 | 844,451. 805,000. | | 843,074. 804,500. | 1,377. 500. | | | | 1,377. 500. |
| 61 | 252,500. | | 250,000. | 2,500. | | | | 2,500. |
| 62 63 | 982,500. 176,000. | | 981,250. 174,750. | 1,250. 1,250. | | | | 1,250. 1,250. |
| 64 65 | 1010625. 343,493. | | 1010000. 343,070. | 625. 423. | | | | 625. 423. |
| 66 | 1035625. | | 1035000. | 625. | | | | 625. |
| 67 68 | 1035000. 975,550. | | 1034375. 974,431. | 625. 1,119. | | | | 625. 1,119. |
| 69 | 552,500. | | 550,000. | 2,500. | | | | 2,500. 1,875. |
| 70 71 | 414,375. 247,188. | | 412,500. 246,563. | 1,875. 625. | | | | 625. |
| 72 73 | 1061250. 892,500. | | 1060000. 890,000. | 1,250. 2,500. | | | | 1,250. 2,500. |
| 74 | 509,375. | | 508,750. | 625. | | | | 625. |
| 75 76 | 90,000. 0. | | 88,875. 1,424. | 1,125. -1,424. | | | | 1,125. -1,424. |
| 77 78 | 55,000. 80,000. | | 56,375. 65,100. | -1,375. 14,900. | | | | -1,375. 14,900. |
| 79 | 22,981. | | 15,794. | 7,187. | | | | 7,187. |
| 80 81 | 26,259. 39,389. | | 23,942. 35,912. | 2,317. 3,477. | | | | 2,317. 3,477. |
| 82 | 328,000. | | 328,918. | -918. -10. | | | | -918. -10. |
| 83 84 | 200,000. 300,000. | | 200,010. 302,260. | -2,260. | | | | -2,260. |
| 85 86 | 247,500. 68,731. | | 237,550. 68,738. | 9,950. -7. | | | | 9,950. -7. |
| 87 | 547,733. | | 549,080. | -1,347. | | | | -1,347. |
| 88 89 | 17,000. 2. | | 14,811. 2. | 2,189. 0. | | | | 2,189. 0. |
| 90 91 | 35,335. 4,711. | | 69,773. 7,362. | -34,438. -2,651. | | | | -34,438. -2,651. |
| 92 | 36,313. | | 50,540. | -14,227. | | | | -14,227. |
| 93 94 | 25,938. 2,594. | | 36,100. 3,614. | -10,162. -1,020. | | | | -10,162. -1,020. |
| 95 | 113,031. | | 114,774. | -1,743. | | | | -1,743. -42,956. |
| 96 97 | 0. 0. | | 42,956. 38,631. | -42,956. -38,631. | | | | -38,631. |
| | | | | | | | | |

| _ | ^ | 4 | 4 |
|---|---|---|---|
| A | u | | |

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THE SANDRA AND LAWRENCE POST FAMILY FOUNDATION

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STATEMENT 11 (CONTINUED)
FORM 990-PF, PART IV, LINE 1
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

| | (E) | (F) | (G) | (H) | (I) | (J) | (K) | (L) |
|------|---------|---------|-------|---------|----------|-----------|-----------|------------|
| | GROSS | DEPREC. | COST | GAIN | FMV | ADJ. BAS. | EXCESS | GAIN |
| ITEM | SALES | ALLOWED | BASIS | (LOSS) | 12/31/69 | 12/31/69 | (I) - (J) | (LOSS) |
| 98 | 23,778. | | 0. | 23,778. | | | | \$ 23,778. |
| | | | | | | | TOTAL | \$ 13,721. |
| | | | | | | | | |

STATEMENT 12 FORM 990-PF, PART XV, LINE 1A FOUNDATION MANAGERS - 2% OR MORE CONTRIBUTORS

LAWRENCE POST SANDRA POST

STATEMENT 13 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

| NAME AND ADDRESS | DONEE RELATIONSHIP | FOUND- ATION STATUS | PURPOSE OF GRANT | AMOUNT |
|--|-----------------------|---------------------------|------------------------------|------------|
| MILKEN INSTITUTE 1250 4TH ST SANTA MONICA, CA 90401 | NONE | EXEMPT | MEDICAL RESEARCH | \$ 20,000. |
| MUSIC CENTER 135 N. GRAND AVE LOS ANGELES, CA 90012 | NONE | EXEMPT | ARTS EDUCATION | 4,449. |
| CHILDREN'S BURN FOUNDATION 5000 VAN NUYS BLVD # 300 SHERMNA OAKS, CA 91403 | NONE | EXEMPT | AID TO CHILD BURN VICTIMS | 9,533. |
| WHEELS FOR HUMANITY 12750 N. RAYMER ST. UNIT 4 NORTH HOLLYWOOD, CA 91605 | NONE | EXEMPT | WHEELCHAIRS FOR DISABLED | 35,000. |
| CEDAR SINAI 8635 W. 3RD ST # 590W LOS ANGELES, CA 90048 | NONE | EXEMPT | CANCER RESEARCH | 180,450. |
| BEIT T' SHUVAH 8831 VENICE BLVD LOS ANGELES, CA 90034 | NONE | EXEMPT | DRUG ABUSE RECOVERY | 500. |
| SALVATION ARMY 900 W. JAMES WOOD BLVD LOS ANGELES, CA 90015 | NONE | EXEMPT | GENERAL DONATIONS | 350. |

FEDERAL STATEMENTS THE SANDRA AND LAWRENCE POST FAMILY FOUNDATION

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STATEMENT 13 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

| NAME AND ADDRESS | DONEE RELATIONSHIP | FOUND- ATION STATUS | PURPOSE OF GRANT | AMOUNT |
|--|-----------------------|---------------------------|---|------------|
| PLANNED PARENTHOOD 1920 MARENGO ST. LOS ANGELES, CA 90033 | NONE | EXEMPT | TO HELP FUND GYNECOLOGICAL SERVICES FOR POOR WOMEN | \$ 62,500. |
| LIBRARY FOUNDATION 630 W. 5TH ST LOS ANGELES, CA 90071 | NONE | EXEMPT | LA PUBLIC LIBRARY | 14,363. |
| JEWISH FEDERATION 6505 WILSHIRE BLVD LOS ANGELES, CA 90048 | NONE | EXEMPT | RELIGIOUS CHARITY | 258,100. |
| WOMENS GUILD CEDARS-SINAI PO BOX 48750 ROOM 2416 LOS ANGELES, CA 90048 | NONE | EXEMPT | CANCER RESEARCH | 1,985. |
| MIDDLE EAST FORUM 1500 WALNUT ST, STE 1050 PHILADELPHIA, PA 19102 | NONE | EXEMPT | PROMOTE AMERICAN INTEREST IN MIDDLE EAST | 1,000. |
| VARIOUS UNDER \$250 | NONE | EXEMPT | VARIOUS ORGANIZED CHARITIES | 8,709. |
| DAVID HOROWITZ FREEDOM CENTER 14148 MAGNOLIA BLVD #300 SHERMAN OAKS, CA 91403 | NONE | EXEMPT | PRESERVING THE CONSTITUTION | 30,500. |
| FASTER CURES 509 7TH ST NW WASHINGTON, DC, 20004 | NONE | EXEMPT | SPEED UP DRUG APPROVAL | 15,000. |
| FISHER HOUSE 1401 ROCKVILLE PIKE, STE 600 ROCKVILLE, MD 20852 | NONE | EXEMPT | SUPPORT FOR MILLITARY | 500. |
| INVESTIGATIVE PROJECT ON TERRORISM 5505 CONNECTICUT AVE. NW #431 WASHINGTON, DC, 20015 | NONE | EXEMPT | TERRORISM RESEARCH | 2,500. |
| WILSHIRE BLVD TEMPLE 3663 WILSHIRE BLVD LOS ANGELES, CA 90010 | NONE | EXEMPT | RELIGIOUS CHARITY | 104,300. |

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THE SANDRA AND LAWRENCE POST FAMILY FOUNDATION

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STATEMENT 13 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

| NAME AND ADDRESS | DONEE RELATIONSHIP | FOUND- ATION STATUS | PURPOSE OF GRANT | AMOUNT |
|--|-----------------------|---------------------------|--|---------|
| AMERICAN FRIENDS OF THE ISRAEL MUSEUM 500 FIFTH AVE STE 2540 NEW YORK, NY 10110 | NONE | EXEMPT | MUSEUM | \$ 1,45 |
| BEAR NECESSITIES 23 W. HUBBARD ST. 3RD FL. CHICAGO, IL 60610 | NONE | EXEMPT | PEDIATRIC CANCER FOUNDATION | 49 |
| CONGREGATION ETZ CHAIM 1710 HIGHLAND AVE LOMBARD, IL 60148 | NONE | EXEMPT | RELIGIOUS CHARITY | 54 |
| CHRISTIANS UNITED FOR ISRAEL PO BOX 1307 SAN ANTONIO, TX 78295 | NONE | EXEMPT | PRO-ISRAEL GROUP | 1,00 |
| FOUNDATION FIGHTING BLINDNESS 11435 CRONHILL DR OWINGS MILLS, MD 21117 | NONE | EXEMPT | EYE RESEARCH | 1,00 |
| FRIENDS OF THE ISRAEL DEFENSE FORCES 4640 ADMIRALTY WAY, STE 406 MARINA DEL REY, CA 90290 | NONE | EXEMPT | ISRAEL DEFENSE CHARITY | 1,41 |
| HALLIE FORD MUSEUM, WILLAMETTE UNVSTY 900 STATE STREET SALEM, OR 97301 | NONE | EXEMPT | MUSEUM | 9,00 |
| HERITAGE FOUNDATION 214 MASSACHUSETTS AVE, NE WASHINGTON, DC 20002 | NONE | EXEMPT | POLICY RESEARCH ORGANIZATION | 30 |
| ACT! FOR AMERICA P.O. BOC 12765 PENSACOLA, FL 32591 | NONE | EXEMPT | INSTRUCTION OF DEMOCRATIC VALUES | 2,50 |
| FOUNDATION FOR INDIVIDUAL RIGHTS 601 WALNUT STREET, SUITE 510 PHILADELPHIA, PA 19106 | NONE | EXEMPT | CAMPUS FREE SPEECH ORGANIZATION | 10,00 |
| AMERICAN FREEDOM ALLIANCE 11500 W. OLYMPIC BLVD, SUITE 400 LOS ANGELES, CA 90064 | NONE | EXEMPT | WESTERN VALUES THINK TANK | 8,50 |

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THE SANDRA AND LAWRENCE POST FAMILY FOUNDATION

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| STATEMENT 13 (CONTINUED) | |
|--------------------------------|---|
| FORM 990-PF, PART XV, LINE 3A | |
| RECIPIENT PAID DURING THE YEAR | 8 |

| NAME AND ADDRESS | DONEE RELATIONSHIP | FOUND- ATION STATUS | PURPOSE OF GRANT | AMOUNT |
|---|-----------------------|---------------------------|--|------------|
| ELNET (C/O ISRAEL EMERGENCY ALLIANCE) 6505 WILSHIRE BLVD LOS ANGELES, CA 90048 | NONE | EXEMPT | PRO-ISRAEL ADVOCACY | \$ 12,500. |
| HARMONY PROJECT 817 VINE, SUITE 212 LOS ANGELES, CA 90038 | NONE | EXEMPT | MUSIC PROGRAMS FOR AT-RISK YOUTH | 1,000. |
| ISRAEL CANCER RESEARCH FUN 159 S. BEVERLY DRIVE, SUITE 207 BEVERLY HILLS, CA 90212 | NONE | EXEMPT | CANCER RESEARCH | 500. |
| JEWISH FREE LOAN ASSOCIATION 6505 WILSHIRE BLVD., SUITE 715 LOS ANGELES, CA 90048 | NONE | EXEMPT | FREE LOANS | 1,000. |
| JEWISH JOURNAL 3580 WILSHIRE BLVD., SUITE 1510 LOS ANGELES, CA 90010 | NONE | EXEMPT | EDUCATION | 500. |
| LA PHILHARMONIC 151 SOUTH GRAND LOS ANGELES, CA 90012 | NONE | EXEMPT | MUSICAL | 500. |
| LEADERSHIP INSTITUTE 1101 NORTH HIGHLAND STREET ARLINGTON, VA 22201 | NONE | EXEMPT | STUDENT EDUCATION | 400. |
| MOVE AMERICA FORWARD 8795 FOLSOM BLVD., SUITE 103 SACRAMENTO, CA 95826 | NONE | EXEMPT | SUPPORTS AMERICAN TROOPS AND ANTI-TERRORISM | 400. |
| NGO MONITOR PMB 309 - 100 SPRINGDALE ROAD, #A3 CHERRY HILL, NJ 08033 | NONE | EXEMPT | HUMAN RIGHTS FOUNDATION | 1,000. |
| NYU MEDICAL CENTER 726 BROADWAY, 2ND FL NEW YORK, NY 10003 | NONE | EXEMPT | MEDICAL RESEARCH | 1,000. |
| OFI 824 S. WELLESLY AVE LOS ANGELES, CA 90049 | NONE | EXEMPT | HELPING ORANGUTANS | 50,000. |

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THE SANDRA AND LAWRENCE POST FAMILY FOUNDATION

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STATEMENT 13 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

| NAME AND ADDRESS | DONEE RELATIONSHIP | FOUND- ATION STATUS | PURPOSE OF GRANT | AMOUNT |
|---|-----------------------|---------------------------|---------------------------------------|---------|
| P.S. ARTS 11965 VENICE BLVD., SUITE 201 LOS ANGELES, CA 90066 | NONE | EXEMPT | ARTS EDUCATION | \$ 430. |
| PEF ECONOMIC ISRAEL 317 MADISON AVE., SUITE 607 NEW YORK, NY 10017 | NONE | EXEMPT | ISRAEL CHARITY | 10,000. |
| AMERICAN FRIENDS OF THE HENRY JACK SOC 8TH FL, PARKER TOWER 43-49 PARKERT ST, LONDON, | NONE | EXEMPT | EDUCATION | 3,000. |
| CENTER FOR INDEPENDENT THOUGHT 1420 WALNUT STREET., SUITE 1011 PHILADELPHIA, PA 19102 | NONE | EXEMPT | EDUCATION | 57,820. |
| CLARION FUND 255 W. 36TH STREET, #800 NEW YORK, NY 10018 | NONE | EXEMPT | EDUCATION | 5,000. |
| DADAMES OF THE VHILD CARE LEAGUE 10372 W. SUNSET LOS ANGELES, CA 90077 | NONE | EXEMPT | COMMUNITY PROJECTS | 1,810. |
| FRIENDS OF ROBINSON GARDEN 1008 ELDEN WAY BEVERLY HILLS, CA 90210 | NONE | EXEMPT | HISTORIC PRESERVATION | 1,000. |
| PROCLAIMING JUSTICE TO THE NATIONS PO BOX 682711 FRANKLIN, TN 37068 | NONE | EXEMPT | EDUCATION | 1,000. |
| PROSTATE CANCER FOUNDATION 1250 4TH STREET SANTA MONICA, CA 90401 | NONE | EXEMPT | CANCER RESEARCH | 15,000. |
| RANGE OF MOTION PO BOX 1084 DEERFIELD, IL 60015 | NONE | EXEMPT | REHAB | 500. |
| SIGNS OF HOPE INTERNATIONAL 375 SOUTH MAINE STREET, SUITE 2 ALPINE, UT 84004 | NONE | EXEMPT | EDUCATION FOR THE DEAF IN GHANA | 500. |

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STATEMENT 13 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

| NAME AND ADDRESS | DONEE <u>RELATIONSHIP</u> | FOUND- ATION STATUS | PURPOSE OF GRANT | AMOUNT |
|---|------------------------------|---------------------------|--|----------------|
| ST MARY'S HEALTHCARE 29-01 216TH STREET BAYSIDE, NY 11360 | NONE | EXEMPT | HOSPITAL | \$ 1,500. |
| STAND WITH US 6505 WILSHIRE BLVD LOS ANGELES, CA 90048 | NONE | EXEMPT | ISRAEL EDUCATION ON COLLEGE CAMPUSES | 14,830. |
| TRUE THE VOTE PO BOX 27368 HOUSTON, TX 77227 | NONE | EXEMPT | KEEPING ELECTIONS HONEST | 2,000. |
| UJA 130 EAST 59TH STREET NEW YORK, NY 10022 | NONE | EXEMPT | NY JEWISH FEDERATION | 2,500. |
| | | | TOTAL | \$ 971,631. |



Application for Extension of Time To File an Exempt Organization Return

OMB No 1545 1709

Department of the Treasury Internal Pevenue Service

File a separate application for each return.

| • If you a | e filing for an Automatic 3-Month Extension, com | plete only I | Part lind check this box | | ► [X] |
|--|--|--|---|--|----------------|
| • Ir you a | re filing for an Additional (Not Automatic) 3-Month | n Extension | , complete only Part Ifon page 2 of this i | iorm) | |
| | pplete Part II unless you have already been granted | | | | |
| corporation request an Associated | filing (e-file). You can electronically file Form 8863 required to file Form 990-T), or an additional (not extension of time to file any of the forms listed in With Certain Personal Benefit Contracts, which miling of this form, visitwww.irs.gov/efile and click o | t automatic) Part I or Pa ust be sent | 3-month extension of time. You can ele art II with the exception of Form 8870, In to the IRS in paper format (see instructi | ctronically file Form formation Return fo | r Transfers |
| Part I | Automatic 3-Month Extension of Time. (| Only subn | nit original (no copies needed). | | |
| | on required to life Form 990 T and requesting an | | | emplete Part I only | ▶ |
| | rporations (including 1120-C filers), partnerships, | | | | ne to file |
| income lar | returns | | Enter filer's identif | | |
| | Name of exempt organization or other filer, see instructions | , | | Employer identification | |
| Type or print | THE SANDRA AND LAWRENCE POST I | FAMILY | | X 95-444247 | |
| File by the cue cate for | Number street and room or suite number. If a P.O. box, see it | istructions | | 500 all security min | noer (SSN) |
| liing your return See | 1160 TOWER ROAD | | | <u> </u> | |
| กรรณต์เอาร | City, town or cost office, state, and ZIP code. For a foreign add | ress, see instru | c'ions | | |
| | BEVERLY HILLS, CA 90210 | | | , . | |
| Entor the P | eturn code for the return that this application is fo | or (file a ser | parate application for each return) | | 04 |
| Application Is For | 1 | Return Code | Application Is For | | Return Code |
| Form 990 | | 01 | Form \$90-T (corporation) | | 07 |
| Form 990-E | BL . | 02 | Form 1041-A | | 08 |
| Foun 990 E | Z | 01 | Form 4720 | | 09 |
| Form 990 F | F | 04 | Form 5227 | | 10 |
| Form 990 T | (section 401(a) or 408(a) trust) | 05 | Form 6069 | | 11 |
| Form 990-1 | (trust other than above) | 06 | Form 8870 | | 12 |
| Telephon If the or It this is check to the extension of the control of the extension of t | netic \$\sim 310-278-0642 regarization does not have an office or place of but as for a Group Return enter the organization's four this poy | digit Group check this b ation recurs yanization re _, and endir | e United States, check this box b Exemption Number (GEN) and attach a list with the nated to file Form 990 T) extension of time etuin for the organization named above | | |
| | application is for Form 990-Bt, 990-PF, 990-T, 4 fundable credits. See instructions | 720, or 6069 |), enter the tentative tax, less any | 3a \$ | 3,000. |
| b If this payme | application is for Form 990-PF, 990-T, 4720, or 6 ents made. Include any prior year overpayment at | 069, enter a lowed as a | eny refundable credits and estimated tax credit | 3b \$ | 22,401. |
| c Balan EFTP: | ce due.Suptract line 3p from line 3a - Include your S (Electronic Federal Tax Payment System). See | r payment w instructions | vith this form, if required, by using | 3c \$ | 0. |
| Caution. If payment in: | you are going to make an electronic fund withdra- structions. | wal with this | Form 8868, see Form 8453 EO and For | m 8879 EO tor | |