

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-PF**

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated às 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 For calendar year 2011, or tax year beginning 7/01 , 2011, and ending 6/30 Employer identification number 95-4663527 CONANT FAMILY FOUNDATION 20322 SW ACACIA STREET #100 В Telephone number (see the instructions) (562) 809-3705 NEWPORT BEACH, CA 92660-1503 С If exemption application is pending, check here Check all that apply: Initial return Initial Return of a former public charity D 1 Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, check Address change Name change here and attach computation . X Section 501(c)(3) exempt private foundation Check type of organization. Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation E If private foundation status was terminated under section 507(b)(1)(A), check here. Fair market value of all assets at end of year J Accounting method: X Cash (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination 2,018,521 (Part I, column (d) must be on cash basis) under section 507(b)(1)(B), check here Part I | Analysis of Revenue and (b) Net investment (c) Adjusted net (a) Revenue and (d) Disbursements Expenses (The total of amounts in income expenses per books income for charitable columns (b), (c), and (d) may not neces-sarily equal the amounts in column (a) purposes (cash basis only) (see instructions)) 80,125 Contributions, gifts, grants, etc, received (att sch) if the foundn is not req to att Sch B Interest on savings and temporary 63,123 63,123. <u>63,123</u> cash investments Dividends and interest from securities. 15,223. 15,223 15,223 5a Gross rents b Net rental income or (loss) STATEMENT 6a Net gain/(loss) from sale of assets not on line 10 REVENUE b Gross sales price for all assets on line 6a 100,000. Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 9 10a Gross sales less returns and allowances **b** Less Cost of goods sold. c Gross profit/(loss) (att sch) 11 Other income (attach schedule). Total. Add lines 1 through 11 12 158,471 78,346 78,34613 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) 1,263 1,263. **b** Accounting fees (attach sch) SEE ST 2 c Other prof fees (attach sch) OCT 2 9 2012 17 Interest 996. 996. 18 Taxes (attach schedule)(see instrs) SEE STM 3 19 Depreciation (attach sch) and depletion Occupancy Travel, conferences, and meetings Printing and publications 23 Other expenses (attach schedule) 15,249. 15,249. SEE STATEMENT 15,309 15,309. Total operating and administrative expenses. Add lines 13 through 23 17,568 15,249. 15,249 17,568. Contributions, gifts, grants paid PART XV 77,500 77,500. Total expenses and disbursements. Add lines 24 and 25 15,249. 15,249 95,068. 95,068 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements. 63,403. 63,097 **b** Net investment income (if negative, enter -0-). 63,097. C Adjusted net Income (if negative, enter -0-)

Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 1 1,913,956. 2 63,403. 2 Enter amount from Part I, line 27a 3 3 Other increases not included in line 2 (itemize) 1,977,359. 4 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) . 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 1,977,359.

(or allowable) plus expense of sale (e) plus e	Gains (Column (h) is column (k), but not less
c d e (e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale (e) plus expense of sale b c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) Fair Market Value as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of column (i) gain minu than -0-) of assets showing gain in column (i) over column (j), if any in as of 12/31/69 (ii) Fair Market Value as of 12/31/69 (iii) Adjusted basis over column (j), if any in as of 12/31/69 (iii) Adjusted basis over column (j), if any in a sof 12/31/69 (iii) Adjusted basis over column (j), if any in a sof 12/31/69 (iii) Adjusted basis over column (j), if any in a sof 12/31/69 (iii) Adjusted basis over column (j), if any in a sof 12/31/69 (iii) Adjusted basis over column (j), if any in a sof 12/31/69 (iii) Adjusted basis over column (j), if any in a sof 12/31/69 (iii) Adjusted basis over column (j), if any in a sof 12/31/69 (iii) Adjusted basis over column (j), if any in a sof 12/31/69 (iii) Adjusted basis over column (j), if any in a sof 12/31/69 (iii) Adjusted basis over column (j), if any in a sof 12/31/69 (iii) Adjusted basis over column (j), if any in a sof 12/31/69 (iii) Adjusted basis over column (j), if any in a sof 12/31/69 (iii) Adjusted basis over column (j), if any in a sof 12/31/69 (iii) Adjusted basis over column (j), if any in a sof 12/31/69 (iii) Adjusted basis over column (j), if any in a sof 12/31/69 (iii) Adjusted basis over column (j), if any in a sof 12/31/69 (iiii) Adjusted basis over column (j), if any in a sof 12/31/69 (iiiiiii) Adjusted basis over column (j), if any in a sof 12/31/69 (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	Gains (Column (h) is column (k), but not less
d e (e) Gross sales price (f) Depreciation allowed (or allowable)	Gains (Column (h) is column (k), but not less
e (e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale (e) gross sales price a b c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) Fair Market Value as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of column (i) gain minu than -0-) or as of 12/31/69 a b	Gains (Column (h) is column (k), but not less
(e) Gross sales price (f) Depreciation allowed (or allowable) a b c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) Fair Market Value as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of column (i) gain minu over column (j), if any a b	Gains (Column (h) is column (k), but not less
(or allowable) plus expense of sale (e) plus e	Gains (Column (h) is column (k), but not less
b c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) Fair Market Value as of 12/31/69 (j) Adjusted basis (k) Excess of column (i) gain minu than -0-) or column (j), if any	is column (k), but not less
c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) Fair Market Value as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of column (i) gain minu than -0-) or column (j), if any	is column (k), but not less
d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) Fair Market Value as of 12/31/69 (j) Adjusted basis over column (j), if any as of 12/31/69 (l) Excess of column (i) gain minu over column (j), if any a b	is column (k), but not less
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) Fair Market Value as of 12/31/69 (j) Adjusted basis (k) Excess of column (i) gain minu as of 12/31/69 a b	is column (k), but not less
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) Fair Market Value as of 12/31/69 (j) Adjusted basis over column (i) as of 12/31/69 as of 12/31/69 (l) Excess of column (i) gain minu over column (j), if any than -0-) or than -0-	is column (k), but not less
(i) Fair Market Value as of 12/31/69 (j) Adjusted basis over column (j), if any than -0-) of a b	is column (k), but not less
as of 12/31/69 as of 12/31/69 over column (j), if any than -0-) of a b	is column (k), but not less
b	r Losses (from column (h))
d	
e	
2 Capital gain net income or (net capital loss). If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)	
If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	
Part Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income	
If section 4940(d)(2) applies, leave this part blank Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If 'Yes,' the foundation does not qualify under section 4940(e). Do not complete this part 1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.	Yes X No
(a) (b) (c)	(d)
Base period years Adjusted qualifying distributions Net value of Di	istribution ratio) divided by column (c))
2010 110,361. 1,938,047.	0.056944
2009 112,021. 1,954,402.	0.057317
2008 36,636. 1,959,157.	0.018700
2007 50,022. 1,982,942.	0.025226
2006 80,808. 1,748,654.	0.046212
2 Total of line 1, column (d)	0.204399
3 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years 3	0.040880
4 Enter the net value of noncharitable-use assets for 2011 from Part X, line 5	1,973,403.
	80,673.
5 Multiply line 4 by line 3	
5 Multiply line 4 by line 3 6 Enter 1% of net investment income (1% of Part I, line 27b) 6	631.
6 Enter 1% of net investment income (1% of Part I, line 27b) 6	631. 81,304. 95,068.

Form	990-PF (2011) CONANT FAMILY FOUNDATION 95-4663527	<u> </u>	F	age 4
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructio	ns)		
1 à	Exempt operating foundations described in section 4940(d)(2), check here.			
	Date of ruling or determination letter: (attach copy of letter if necessary — see instrs)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V,		, ,	<u>631.</u>
	check here ► X and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)			1
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			i
	foundations only Others enter -0-)			0.
3	Add lines 1 and 2		1	<u>531.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			<u>0.</u> 531.
			····	331.
	Credits/Payments 2011 estimated tax pmts and 2010 overpayment credited to 2011			
	Exempt foreign organizations – tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868) . 6c			
	Backup withholding erroneously withheld . 6d			1
	Total credits and payments. Add lines 6a through 6d			560.
	Enter any penalty for underpayment of estimated tax. Check here			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed . • 9			71.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	Enter the amount of line 10 to be: Credited to 2012 estimated tax			
Par	t VII-A Statements Regarding Activities			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes			v
	(see the instructions for definition)?	1b		X
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities			[]
c	Did the foundation file Form 1120-POL for this year?	1 c		X
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation \Rightarrow 0. (2) On foundation managers \Rightarrow 0.			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$\Bigsir \\$\$ 0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
_	If 'Yes,' attach a detailed description of the activities			-
•	·			1
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
	If 'Yes,' has it filed a tax return on Form 990-T for this year?	4b	N	/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If 'Yes,' attach the statement required by General Instruction T.	}		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	● By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict			
_	with the state law remain in the governing instrument?	6	X	
	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) CA			
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? If 'No,' attach explanation .	8b	Х	
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	9		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	10		х
BAA	F	orm 99	0-PF	(2011)

BAA

Form 990-PF (2011) CONANT FAMILY FOUR			95-46	53527	Page 6
Part VII-B Statements Regarding Activity		n 4720 May Be Req	uired (continued)		
5a During the year did the foundation pay or incu	•		П., 60	.	
(1) Carry on propaganda, or otherwise attempt	_		Yes X	No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra			Yes X	1 1	
(3) Provide a grant to an individual for travel,	study, or other similar	purposes? .	Yes X	No	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, o 4940(d)(2)? (see instr	rganization described uctions).	Yes X	No	
(5) Provide for any purpose other than religio educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	c, literary, or or animals?	Yes X	No	
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regar	qualify under the excep ding disaster assistance	tions ·	5 b	N/A_
Organizations relying on a current notice rega	rding disaster assistan	ce check here	▶ [
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	sibility for the grant?		N/A Yes	No	
If 'Yes,' attach the statement required by Reg	ulations section 53 494.	5-5(d).			
6a Did the foundation, during the year, receive are on a personal benefit contract?		•	∐Yes X		
b Did the foundation, during the year, pay prem	ums, directly or indirec	ctly, on a personal benef	fit contract? .	6b	X
If 'Yes' to 6b, file Form 8870. 7a At any time during the tax year, was the found	lation a party to a prob	uhited tay shelter transa	ction? Yes X	No	
b If 'Yes,' did the foundation receive any proceed				I/A 7b	
Part VIII Information About Officers, D					
and Contractors			····	·····	
1 List all officers, directors, trustees, foundation					
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allow	account, vances
SEE STATEMENT 5					
		0.	0.		0.
					-
2 Company of the bight of maid and and and	- (-4 4 4	ludad an lina 1 . aas in	estimations) If none of	tor INONE !	
2 Compensation of five highest-paid employee (a) Name and address of each employee	(b) Title, and average		(d) Contributions to	(e) Expense	account
paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	other allov	vances
NONE					
					· · · · · ·
					
		L		<u> </u>	
Total number of other employees paid over \$50,000	TEEA0306L	12/05/11		Form 990 -	0 PF (2011)

3 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		
		
Total number of others receiving over \$50,000 for professional services		0
Part X-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	
List the foundation's four largest direct charitable activities during the tax year. Include relevant organizations and other beneficiaries served, conferences convened, research papers produced, or several papers.	etc.	Expenses
1 DISTRIBUTIONS FOR CHARITABLE AND EDUCATIONA	L PURPOSES	_
		- 77 500
2		77,500.
²		-
		_
3		_
		_
4		-
		-
Rad IX B. Summary of Program-Related Investments (see	instructions)	•
		
Describe the two largest program-related investments made by the foundar	tion during the tax year on lines 1 and 2	Amount
1		-
<u>N/A</u>		-
2		
		_
	· · · · · -	
All other program-related investments. See instructions		
3		-
		-
Total, Add lines 1 through 3		▶ 0.
RAA		Form 990-PF (2011)

Page 8

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes. 1,932,491. 1 a a Average monthly fair market value of securities . 70,964 1 b **b** Average of monthly cash balances 1 c c Fair market value of all other assets (see instructions) 2,003,455 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1c 1 e 0 (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 2,003, 3 Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1-1/2% of line 3 4 30,052. (for greater amount, see instructions) 973,403. Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 5 6 98,670. Minimum investment return. Enter 5% of line 5 Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ► and do not complete this part.) 98,670. 1 Minimum investment return from Part X, line 6. 2a 631 2a Tax on investment income for 2011 from Part VI, line 5 2b b Income tax for 2011. (This does not include the tax from Part VI.) 2 c 631. c Add lines 2a and 2b 98,039. 3 3 Distributable amount before adjustments. Subtract line 2c from line 1 4 Recoveries of amounts treated as qualifying distributions 5 98,039. Add lines 3 and 4 6 Deduction from distributable amount (see instructions) 6 7 98,039. Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1 Part XII | Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: 1 a 95,068. a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1 b b Program-related investments - total from Part IX-B 2 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes 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). 3 b 95,068. 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 ... 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) 5 631 Adjusted qualifying distributions. Subtract line 5 from line 4 6 94,437. 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

Form 990-PF (2011)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
Distributable amount for 2011 from Part XI,				09 030
line 7	-			98,039.
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			ļ	
c From 2008				
d From 2009. 8,897.				
e From 2010 . 14,571 .	_			
f Total of lines 3a through e.	23,468.			
4 Qualifying distributions for 2011 from Part				
XII, line 4: ► \$ 95,068.				
a Applied to 2010, but not more than line 2a			0.	
 Applied to undistributed income of prior years (Election required – see instructions) 		0.		
c Treated as distributions out of corpus (Election required – see instructions)	o.			
d Applied to 2011 distributable amount				95,068.
e Remaining amount distributed out of corpus	0.			•
5 Excess distributions carryover applied to 2011	2,971.			2,971.
(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:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	20,497.			
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.	
f Undistributed income for 2011. Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2012		ĺ		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)	l o.	1		
·				
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	20,497.			
10 Analysis of line 9:				
a Excess from 2007				
b Excess from 2008				
c Excess from 2009 5, 926.				
d Excess from 2010 14,571.				
e Excess from 2011	<u> </u>			F 000 BE (0011)
BAA				Form 990-PF (2011)

Form 990-PF (2011) CONANT FAMILY FOU	95-4663527	Page 10 N/A				
Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)						
1 a If the foundation has received a ruling or or is effective for 2011, enter the date of the	ruling		•		-	
b Check box to indicate whether the foundat		erating foundation o		4942(j)(3) or	4942(j)(5)	
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year_	<u> </u>	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					<u> </u>	
 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 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:						
(1) 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						
Part XV Supplementary Information assets at any time during th	(Complete this e year – see ir	part only if the structions.)	organization ha	d \$5,000 or more	e in 	
1 Information Regarding Foundation Managers as List any managers of the foundation who is close of any tax year (but only if they have NONE)	have contributed m	ore than 2% of the than \$5,000) (See	total contributions re section 507(d)(2))	eceived by the found	ation before the	
b List any managers of the foundation who a partnership or other entity) of which the NONE	own 10% or more of foundation has a 1	of the stock of a cor 10% or greater inter	poration (or an equa est.	ally large portion of the	ne 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	s to preselected cha	aritable organizations	s and does not accep anizations under othe	ot unsolicited er conditions,	
a The name, address, and telephone number	er of the person to	whom applications	should be addressed	<u> </u>		
	·					
b The form in which applications should be	submitted and info	rmation and materia	als they should inclu	de:		
c Any submission deadlines:						
d Any restrictions or limitations on awards,	such as by geogra	ohical areas, charita	able fields, kinds of i	nstitutions, or other f	actors:	

TEEA0310L 07/14/11

BAA

Form **990-PF** (2011)

Page 11

Tait Ava Supplementary information (Co	minueu)			
3 Grants and Contributions Paid During the Y	ear or Approved for Fut	ure Paymen	it	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient		
a Paid during the year				
SEE STATEMENT 6				
				İ
		ļ		
	-			
		1		
		ł		
Total			▶ 3a	77,500.
b Approved for future payment		<u> </u>	<u> </u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
a Approved for fatare payment				
	+			
	1			
Total	_ 	L	. ► 3b	

Part XVI-A Analysis of Income-Producing Activities

Entèr gross	amounts unless otherwise indicated.	Unrelated	business income	Excluded	by section 512, 513, or 514	(e)
		(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income (See instructions)
_	am service revenue:			code		
		 		+		
				+		
		 		+		
		 		++		
e		 	· · · · · ·	+	· · · · · · · · · · · · · · · · · · ·	
T	and contracts from government agencies	 	<u> </u>	+		
-	-			+ +	····	·
	pership dues and assessments ton savings and temporary cash investments	 		14	63,123.	
	ends and interest from securities			14	15,223.	
	ental income or (loss) from real estate:	 		+	10/2201	
	financed property	 	· · · · · · · · · · · · · · · · · · ·	† †		
	ebt-financed property			1 1		
	ntal income or (loss) from personal property	· · · · · · · · · · · · · · · · · · ·				
	investment income			1		
	(loss) from sales of assets other than inventory					
	ncome or (loss) from special events		···			
	profit or (loss) from sales of inventory					
11 Other						
а						
						-,,,
е						
12 Subto	otal Add columns (b), (d), and (e)		·		78,346.	
12 Subto	Add line 12, columns (b), (d), and (e)				78,346. 13	
12 Subto		ons)				
12 Subto 13 Total (See works	Add line 12, columns (b), (d), and (e)		hment of Exemp	ot Purpo	13 _	
12 Subto 13 Total. (See works Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation	Accomplis	ted in column (e) of	Part XVI-A	ses	78,346.
12 Subto 13 Total (See works Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accomplis	ted in column (e) of	Part XVI-A	ses	78,346.
12 Subto 13 Total. (See works Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accomplis	ted in column (e) of	Part XVI-A	ses	78,346.
12 Subto 13 Total. (See works Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accomplis	ted in column (e) of	Part XVI-A	ses	78,346.
12 Subto 13 Total. (See works Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accomplis	ted in column (e) of	Part XVI-A	ses	78,346.
12 Subto 13 Total. (See works Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accomplis	ted in column (e) of	Part XVI-A	ses	78,346.
12 Subto 13 Total. (See works Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accomplis	ted in column (e) of	Part XVI-A	ses	78,346.
12 Subto 13 Total. (See works Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accomplis	ted in column (e) of	Part XVI-A	ses	78,346.
12 Subto 13 Total. (See works Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accomplis	ted in column (e) of	Part XVI-A	ses	78,346.
12 Subto 13 Total. (See works Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accomplis	ted in column (e) of	Part XVI-A	ses	78,346.
12 Subto 13 Total. (See works Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accomplis	ted in column (e) of	Part XVI-A	ses	78,346.
12 Subto 13 Total. (See works Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accomplis	ted in column (e) of	Part XVI-A	ses	78,346.
12 Subto 13 Total. (See works Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accomplis	ted in column (e) of	Part XVI-A	ses	78,346.
12 Subto 13 Total. (See works Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accomplis	ted in column (e) of	Part XVI-A	ses	78,346.
12 Subto 13 Total. (See works Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accomplis	ted in column (e) of	Part XVI-A	ses	78,346.
12 Subto 13 Total. (See works Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accomplis	ted in column (e) of	Part XVI-A	ses	78,346.
12 Subto 13 Total. (See works Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accomplis	ted in column (e) of	Part XVI-A	ses	78,346.
12 Subto 13 Total. (See works Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accomplis	ted in column (e) of	Part XVI-A	ses	78,346.
12 Subto 13 Total. (See works Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accomplis	ted in column (e) of	Part XVI-A	ses	78,346.
12 Subto 13 Total. (See works Part XVI	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accomplis	ted in column (e) of	Part XVI-A	ses	78,346.

<u> </u>	<u></u>	
Part XVII`	Information Regarding Transfers To and Transactions and Relation	ships With Noncharitable
_	Exempt Organizations	<u> </u>

										Yes	No
1 De	d the o	rganization directed in section 501(c	tly or indirectly e	ngage in any of	the following with 501(c)(3) organ	h any other o	organization in section 52	27.			
re	latıng t	o political organiz	zations?								Ì
		from the reporti	ng foundation to	a noncharitable	exempt organiz	ation of:					
٠.	Cash		•	•					1a (1)		$\frac{x}{x}$
	•	r assets	•		•	•	••	•	1a (2)	+ +	
		nsactions: s of assets to a n	anaharitahla aya	mot organization	_				15 (1)		X
		hases of assets fi				•	•	• •	1 b (1)	+	$\frac{\Lambda}{X}$
•		al of facilities, eq		, -	anization .			•	1 b (2)		$\frac{\hat{\mathbf{x}}}{\mathbf{x}}$
		al of facilities, eq ibursement arran	•	assets .					1 b (4)	+	$\frac{x}{x}$
• • •	•	s or loan guarant	-	•				•	1 b (5)	+	X
		ormance of service		in or fundraising	solicitations				1 b (6)		$\frac{\dot{x}}{x}$
		of facilities, equip				ees			. 1c	 	X
	_							• •	<u> </u>		 -
the	e aood:	swer to any of the s, other assets, o saction or sharing	r services given	by the reporting	foundation If th	e foundation	received les	ss than fair r	narket value ır	lue of	
(a) Line		(b) Amount involved		of noncharitable exem					s, and sharing arra	ingements	
N/A		· · · · · · · · · · · · · · · · · · ·							 	. ·	
								·			
											
						_ 					
							-				
_				·							
											
										-	
								 			
	-										
							<u> </u>				
											
20.10	the fee	and otton directly i	ar indirectly offile	otod with or role	atad to ano ar n	oro toy oven	ont organiza	tions			
∠a is de	scribed	undation directly of d in section 501(c	c) of the Code (o	ther than section	501(c)(3)) or in	section 527?	ipt organiza	110115	∏Ye	s XN	10
b lf		complete the follo									
	(a)	Name of organiz	ation	(b) Type	e of organization		(c)	Description of	of relationship		
N/A											
				<u> </u>						•	
											
	11-4		-1			and state		a beat of my line	huladaa aad bakat		
	correct, a	enalties of perjury, I dec and complete Declarat	clare that I have exam ion of preparer (other	than taxpayer) is base	aing accompanying sc ed on all information of	f which preparer	ments, and to the has any knowled	lge	owledge and belief,	it is true,	
Sign	. .		e .	-					May the this retu	IRS discus	is
Here		June	enout	- 	10-12-12	<u> PRES</u>	SIDENT		prepare	shown be	low
	Signat	ure of officer or trustee			Date	Title				Yes	No
		Print/Type preparer's	name	Preparer's	1/1/	Date	0/11/12	Check] _{if} PTIN		
Paid		RUDOLPH VAN D			VAN DAALEN	WETTERS]	···	self-employe		740	
repa	rer	Firm's name		OMPANY, AN ACC		PORATION	F	ırm's EIN ► 9	5-3051519		
Jse O	nly	Firm's address	WOODLAND HIL	A BOULEVARD,	SUITE 100	 			010) 224 45	-1	
		<u> </u>	MOODITAND HIT	LO, CA 91304			<u> </u>	hone no (818) 224-45		
BAA									Form 9 5	90-PF (2	UII)

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		Employer identification number				
CONANT FAMILY FOUNDATION	<u>-</u> _	95-4663527				
Organization type (check one):						
Filers of:	Section:					
Form 990 or 990-EZ	990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treat 501(c)(3) taxable private foundation	ed as a private foundation				
Check if your organization is covered by t Note. Only a section 501(c)(7), (8), or (10	he General Rule or a Special Rule .) organization can check boxes for both the General I	Rule and a Special Rule See instructions				
General Rule X For an organization filing Form 990, 9 contributor (Complete Parts I and II)	90-EZ, or 990-PF that received, during the year, \$5,0	00 or more (in money or property) from any one				
Special Rules						
For a section 501(c)(3) organization fi 509(a)(1) and 170(b)(1)(A)(vi), and re (2) 2% of the amount on (i) Form 990	ling Form 990 or 990-EZ that met the 33-1/3% suppor ceived from any one contributor, during the year, a co , Part VIII, line 1h or (ii) Form 990-EZ, line 1 Comple	rt test of the regulations under sections ontribution of the greater of (1) \$5,000 or the Parts I and II.				
For a section 501(c)(7), (8), or (10) or total contributions of more than \$1,00 the prevention of cruelty to children o	ganization filing Form 990 or 990-EZ that received fro 0 for use <i>exclusively</i> for religious, charitable, scientific r animals Complete Parts I, II, and III	om any one contributor, during the year, c, literary, or educational purposes, or				
contributions for use exclusively for re- if this box is checked, enter here the purpose Do not complete any of the	ganization filing Form 990 or 990-EZ that received fro ligious, charitable, etc, purposes, but these contributi total contributions that were received during the year parts unless the General Rule applies to this organiza	ions did not total to more than \$1,000 for an <i>exclusively</i> religious, charitable, etc,				
religious, charitable, etc, contributions	of \$5,000 or more during the year	► \$				
990.PF) but it must answer 'No' on Part I	red by the General Rule and/or the Special Rules doe V, line 2, of its Form 990, or check the box on line H eet the filing requirements of Schedule B (Form 990,	of its Form 990-EZ or on Part 1, line 2, of its				
RAA For Paparwork Reduction Act Noti	ce see the Instructions for Form 990.	Schedule B (Form 990, 990-EZ, or 990-PF) (2011				

990EZ, or 990-PF.

Schedule	В	(Form 9	90.	990-EZ.	or 990-PF)	(2011)
	_	(, 0, , , ,	,,,	JJU LL,	0, 220 , ,	(2011	,

2 of **Part 1**

Name of organization

CONANT FAMILY FOUNDATION

Page 1 of 2
Employer identification number

95-4663527

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional s	pace is needed	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	NORM REEVES, INC. 20322 SW ACACIA STREET, #100 NEWPORT BEACH, CA 92660-1503	\$22,500.	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
2	COASTAL AUTO SALES, INC. 20322 SW ACACIA STREET, #100 NEWPORT BEACH, CA 92660-1503	\$7,500.	Person X Payroll
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	CERRITOS AUTO RETAIL COMPANY 3 20322 SW ACACIA STREET, #100	\$6,000.	Person X Payroll Noncash (Complete Part II if there
	NEWPORT BEACH, CA 92660-1503		is a noncash contribution.)
(a) Number	NEWPORT BEACH, CA 92660-1503 (b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	(b)	Total	(d)
Number	(b) Name, address, and ZIP + 4 CERRITOS AUTO RETAIL COMPANY 20322 SW ACACIA STREET, #100	Total contributions	(d) Type of contribution Person X Payroll Noncash (Complete Part II if there
4 (a)	(b) Name, address, and ZIP + 4 CERRITOS AUTO RETAIL COMPANY 20322 SW ACACIA STREET, #100 NEWPORT BEACH, CA 92660-1503 (b)	Total contributions \$12,000. (c) Total	(d) Type of contribution Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
4 (a) Number	(b) Name, address, and ZIP + 4 CERRITOS AUTO RETAIL COMPANY 20322 SW ACACIA STREET, #100 NEWPORT BEACH, CA 92660-1503 (b) Name, address, and ZIP + 4 CONANT AUTO RETAIL, SAN DIEGO, 20322 SW ACACIA STREET, #100	Total contributions \$12,000. (c) Total contributions	(d) Type of contribution Person X Payroll Noncash (Complete Part II if there is a noncash contribution) (d) Type of contribution Person X Payroll Noncash (Complete Part II if there

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

Schedule B (Form 990, 990-EZ, or 990-PF) (201	Schedule	В	(Form 9	90,	990-EZ,	or 990-PF)	(2011	I)
---	----------	---	---------	-----	---------	------------	-------	----

Name of organization

CONANT FAMILY FOUNDATION

Page 2 of 2
Employer identification number

95-4663527

Pari I	Contributors (see instructions). Use duplicate copies of Part I if additional s	pace is needed	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	WEST COVINA AUTO RETAIL, INC. 20322 SW ACACIA STREET, #100 NEWPORT BEACH, CA 92660-1503	\$6,750.	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 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.)

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

Page

1 to

of Part II

Name of organization

CONANT FAMILY FOUNDATION

Employer identification number 95-4663527

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

1 to

of Part III

Name of organization
CONANT FAMILY FOUNDATION

Employer Identification number

1

CONANT	FAMILY FOUNDATION			95-4663527	1	
Part III	Exclusively religious, charitable, e organizations that total more than	tc, individual contribution \$1,000 for the year.Comple	ns to section the cols (a) through	501(c)(7), (8), or (10) gh (e) and the following lin	ne entry.	
	For organizations completing Part III, enter contributions of \$1,000 or less for the year Use duplicate copies of Part III if additional	total of <i>exclusively</i> religious, ch (Enter this information once S space is needed.	naritable, etc, ee instructions.)	• \$	N/A	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gif	t is held	
	N/A					
<u> </u>						
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relation	ship of transferor to tran	sferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is hel		
					· · · · · · · · · · · · · · · · · · ·	
	(e)					
	Transferee's name, addres	Relation	ship of transferor to tran	sferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gif	t is held	
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Rela			ship of transferor to tran	sferee	
(a) No. from Part i	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
		(e) Transfer of gift				

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

FEDERAL STATEMENTS 2011 PAGE 1 **CLIENT 03033 CONANT FAMILY FOUNDATION** 95-4663527 STATEMENT 1 FORM 990-PF, PART I, LINE 6A **NET GAIN (LOSS) FROM NONINVENTORY SALES PER BOOKS** ASSETS NOT INCLUDED IN PART IV DESCRIPTION: 100,000 FEDERAL HOME LOAN BANK DATE ACQUIRED: 2/10/2010 HOW ACQUIRED: **PURCHASE** DATE SOLD: 4/20/2012 TO WHOM SOLD: GROSS SALES PRICE: 100,000. COST OR OTHER BASIS: 100,000. BASIS METHOD: COST GAIN (LOSS) 0. TOTAL \$ Ō. **STATEMENT 2** FORM 990-PF, PART I, LINE 16B **ACCOUNTING FEES** (C) (D) (A) (B) NET **EXPÈNSES** INVESTMENT ADJUSTED CHARITABLE PER BOOKS INCOME NET INCOME **PURPOSES** 1,263. 1,263. 1,263. 1,263. BERLINER & COMPANY 0. TOTAL 3 <u>0. ş</u> STATEMENT 3 FORM 990-PF, PART I, LINE 18 **TAXES** (C) (A) (B) NET (D) **EXPENSES** INVESTMENT **ADJUSTED** CHARITABLE PER BOOKS INCOME NET INCOME **PURPOSES** 10. Ś FRANCHISE TAX BOARD \$ 10. 70. 70. GOVERNMENT FILING FEES 91<u>6.</u> 916. INTERNAL REVENUE SERVICE 996. 996. TOTAL \$

STATEMENT 4 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES

	(A) EXPENSES <u>PER BOOKS</u>	(B) NET INVESTMENT INCOME	(C) ADJUSTED <u>NET INCOME</u>	(D) CHARITABLE <u>PURPOSES</u>
BANK CHARGES INVESTMENT MANAGEMENT FEES PROGRAM EXPENSES	\$ 60 15,074 175 TOTAL \$ 15,309	\$ 15,074. 175. \$ 15,249.	\$ 15,074. 175. \$ 15,249.	\$ 60. 15,074. 175. \$ 15,309.

$\Delta \mathbf{n}$	•	4
/11		

FEDERAL STATEMENTS

PAGE 2

CLIENT 03033

CONANT FAMILY FOUNDATION

95-4663527

STATEMENT 5 FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOT				
DAVID M. CONANT 20322 SW ACACIA ST., SUITE 100 NEWPORT BEACH, CA 92260-1503	DIRECTOR 0	\$	0.	\$ 0.	\$ 0.
CATHERINE CONANT 20322 SW ACACIA ST., SUITE 100 NEWPORT BEACH, CA 92660-1503	DIRECTOR 0		0.	0.	0.
MARLENE LEWIS 20322 SW ACACIA ST., SUITE 100 NEWPORT BEACH, CA 92660-1503	DIRECTOR 0		0.	0.	0.
JIM MORTIMER 20322 SW ACACIA ST., SUITE 100 NEWPORT BEACH, CA 92260-1503	DIRECTOR 0		0.	0.	0.
LEE STACY 20322 SW ACACIA ST., SUITE 100 NEWPORT BEACH, CA 92660-1503	DIRECTOR 0		0.	0.	0.
	TOT	AL \$	0.	<u>\$</u> 0.	\$ 0.

STATEMENT 6 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	1	AMOUNT
NEWPORT HARBOR ED. FDN. 404 WESTMINSTER AVE. SUITE 4 NEWPORT BEACH, CA 92663	N/A	N/A	EDUCATIONAL	\$	10,750.
LUDWIG VON MISES INSTITUTE FOR ECONOMICS 518 WEST MAGNOLIA AVENUE AUBURN, AL 36832	N/A	N/A	EDUCATIONAL		40,000.
BOYS & GIRLS CLUB-HARBOR AREA 2131 TUSTIN AVENUE COSTA MESA, CA 92627	N/A	N/A	CHARITABLE		5,750.
GREATER SANTA ANA VITALITY FOUNDATION 2020 N. BROADWAY, SUITE 200 SANTA ANA, CA 92706	N/A	N/A	EDUCATIONAL		500.

2011

FEDERAL STATEMENTS

PAGE 3

CLIENT 03033

CONANT FAMILY FOUNDATION

95-4663527

STATEMENT 6 (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
TEAM PARKINSON 6412 BROADWAY AVENUE WHITTIER, CA 90606	N/A	N/A	CHARITABLE	\$ 5,000.
CAPISTRANO VALLEY HIGH SCHOOL 26301 VIA ESCOLAR MISSION VIEJO, CA 92692	N/A	N/A	EDUCATIONAL	5,000.
DESERT COMMUNITY FOUNDATION 76-375 COUNTRY CLUB DRIVE PALM DESERT, CA 92211	N/A	N/A	EDUCATIONAL	500.
FIRST CONGREGATIONAL CHURCH OF RIPON 220 RANSOM STREET RIPON, WI 54971	N/A	N/A	CHARITABLE	10,000.

TOTAL \$ 77,500.