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Form **990**

Department of the Treasury Internal Revenue Service

A For the 2011 calendar year, or tax year beginning JUL 1, 2011

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

► The organization may have to use a copy of this return to satisfy state reporting requirements.

and ending JUN 30, 2012

2011

Open to Public Inspection

В	Check if	C Name of organization		D Employer identi	fication number
	TAddre	_ 1			
누	chang □Name			95_	6191816
늗	lchang □ Initial				
F	return Termii	Number and street (or P.O. box if mail is not delivered to street address) 646 NORTH ROBERTSON BOULEVARD	Suite	E Telephone numb	er -657-1731
F	- ated Amen	dod	\dashv	G Gross receipts \$	15176027.
F	return Applic		ŀ	H(a) Is this a group	
_	Ition pendii		-	for affiliates?	Yes X No
		SAME AS C ABOVE		H(b) Are all affiliates i	
$\overline{}$	Tax-ex	empt status.	527		a list. (see instructions)
		te: N/A	,	H(c) Group exempt	,
			Year o		M State of legal domicile: CA
	art I	Summary			<u>* </u>
_	1	Briefly describe the organization's mission or most significant activities: THE HOLI	LYW	OOD FOREIG	N PRESS
Governance		ASSOCIATION (THE ASSOCIATION) WAS ORGANIZED	TO	PROMOTE T	HE
r a	2	Check this box I if the organization discontinued its operations or disposed of	more	than 25% of its net	assets.
ove.	3	Check this box If the organization discontinued its operations or disposed of Number of voting members of the governing body (Part VI, line 1a)		La	9
<u>ග</u> න	4	Number of independent voting members of the governing body (Part VI Tired b)			ı
es	5	Total number of individuals employed in calendar year 2011 (Part Villia 2a) Total number of volunteers (estimate if necessary)	<u>ም</u>) [
viti	6	Total number of volunteers (estimate if necessary)	> /	/ /	
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), lurg to) <i>[[</i>	7	
_	b	Not unrelated business tayable income from Form QQQ.T. line 871 V	<u>F</u>	7	ь 245675.
ができたいでした evenue		Contributions and grants (Part VIIII, line 1b)	<u> </u>	Prior Year	Current Year
<u> </u>	1	Contributions and grants (Fart VIII, line III)	\perp	0	
ق ⊆	9	Program service revenue (Part VIII, line 2g)	_	7832441	
Revenue	1	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		28768	
<i>–</i>	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-780 <u>4</u>	
3 —		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	 	7853405	
,		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		1812050	1598000.
:	I	Benefits paid to or for members (Part IX, column (A), line 4)	-	0 1060148	$\frac{0}{1246024}$
Ses 3	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1060148	. 1246024.
Expenses		Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25)	-	<u> </u>	• • •
ᄶ			\vdash	5787273	. 14955304.
_	1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		8659471	17799328.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	-	-806066	
- X		Revenue less expenses. Subtract line 18 from line 12	Bar		
its or		Tatal assets (Doubly line 40)	Def	ginning of Current Yea 21389143	
Asse	20 21	Total assets (Part X, line 16)	-	0	
Net Asset: Fund Balar	22	Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20	\vdash	21389143	13753648.
	art II	Signature Block		21303113	10,000
		lities of perjury, I declare that I have examined this return, including accompanying schedules and s	tateme	ents, and to the best of	my knowledge and belief, it is
	•	t, and complete. Declaration of preparer (other than officer) is based on all information of which pre		· ·	,
_	<u></u>	Misson	<u> </u>		113/12-
Sig	n	Signature of officer		Date	11118
Her		ALI SAR, TREASURER			
		Type or print name and title			
		Print/Type preparer's name Preparer's sygnature/	ı	ate Check	X PTIN
Paid	i	ALEX HERSHTIK, CPA WY HOMME	0	5/09/13 self-emp	P00899644
Pre	parer	Firm's name THE CPA ADVANTAGE		Firm's EIN	
Use	Only	Firm's address 16055 VENTURA BLVD., SUITE 407			
_		ENCINO, CA 91436		Phone no.	818-986-7572
Ma	the II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No
1320	01 01-2	3-12 LHA For Paperwork Reduction Act Notice, see the separate instructions.			Form 990 (2011)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	990 (2011) HOLLYWOOD FOREIGN PRESS ASSOCIATION 95-61	191816 Page 2
	t III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response to any question in this Part III	
1	Briefly describe the organization's mission. NONE	
		· · · · · · · · · · · · · · · · · · ·
2	Did the organization undertake any significant program services during the year which were not listed on	
_	the prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
•	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured	by expenses.
•	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and	
	others, the total expenses, and revenue, if any, for each program service reported.	
4a	(Code) (Expenses \$ 5324024 •including grants of \$ 1598000 •) (Revenue \$	10177670.)
70	THE ASSOCIATION PROVIDES GRANTS DESIGNED TO PROMOTE THE DEVEL	
	MOTION PICTURE, TELEVISION, DRAMATIC, MUSICAL AND COMEDY THE	
	AUDIO VISUAL RECORDING ART FORMS.	
	NODIO VIDOME RECORDING INCL. LONGID.	
41	1. \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
4b	(Code) (Expenses \$	/
		
4c	(Code) (Expenses \$) (Revenue \$))
		
		
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$	
<u>4e</u>	Total program service expenses ► 5324024.	
		Form 990 (2011)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			-
	If "Yes," complete Schedule A	1_		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		ļ
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			.,
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			37
_	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide	_		v
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent		1	X
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		_^
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	1		
_	as applicable		}	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Х	
ь		110		
•	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
Ŭ	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d				
-	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25° If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	<u> </u>	X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	_	X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			١,,
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	<u> </u>	<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	X	ļ
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			v
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	-	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			x
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	-	<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		X
10	1c and 8a? If "Yes," complete Schedule G, Part II	18	 -	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	10		Х
20-	complete Schedule G, Part III	19 20a	-	X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20b		 ^
U	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	1200		1

Form 990 (2011) HOLLYWOOD FOREIGN

Part IV Checklist of Required Schedules (continued) HOLLYWOOD FOREIGN PRESS ASSOCIATION

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	1		
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	ļ	
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			ļ
	Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27	ļ	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	ļ	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			1,7
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			.,
_	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			v
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			v
	Schedule N, Part II	32	 	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	l		17
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?	١	v	
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	<u>X</u>	· ·
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	├	X
ь	, , , , , , , , , , , , , , , , , , , ,			v
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	-	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		U	
	If "Yes," complete Schedule R, Part V, line 2	36	X	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	 	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		v	
	Note. All Form 990 filers are required to complete Schedule O	38	X	<u> </u>

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<u>Form</u>	990 (2011) HOLLYWOOD FOREIGN PRESS ASSOCIATION	95-6191	816	P	age 5
Pai	rt V Statements Regarding Other IRS Filings and Tax Compliance				
	Check if Schedule O contains a response to any question in this Part V				
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	34			
þ	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and repor	table gaming			
	(gambling) winnings to prize winners?		1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return 2a	75			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		За	X	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other auth	ority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account	ount)?	4a		X
b	If "Yes," enter the name of the foreign country	•			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial According	ounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	n?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the or	rganization solicit			
	any contributions that were not tax deductible?		6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions	or gifts			
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services	s provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was re-	equired			
	to file Form 8282?		7с		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7c	1			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contr	act?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	}	7 f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form	8899 as required?	7g		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	า file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the	e supporting			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any	time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12	а]
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	b			
11	Section 501(c)(12) organizations. Enter:				
а	Gross income from members or shareholders	a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	ь			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 104	12	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?	!	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans	b			
С	Enter the amount of reserves on hand				
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
_	If "Voe " how this do Form 700 As we not the angular to the NIA I I moved on a surface than a Cohort to O	· ·	4.41		Γ

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	990 (2011) HOLLYWOOD FOREIGN PRESS ASSOCIATION 95-6191			<u> 19e 6</u>
Pai	TVI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a	"No" r	espon	se
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions			
	Check if Schedule O contains a response to any question in this Part VI			X
<u>Sec</u>	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 9		1	
	if there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0			
b	Enter the number of voting members included in line 1a, above, who are independent 5		1	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		<u>X</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3_		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		<u>X</u>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	Χ	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		_X_
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	,,,,,,		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a_		_X_
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			,
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			_
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a	X	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b	Х	
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶CA			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	avaılat	ole	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finai	ncial	
-	statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	tion:	• _	
	HOLLYWOOD FOREIGN PRESS ASSOCIATION - 310-657-1731			
	646 N. ROBERTSON BLVD.,, WEST HOLLYWOOD, CA 90069			
13200 01-23	12	Form	990	(2011)

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter 0 in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)	(B)				2)			(D)	(E)	(F)	
Name and Title	Average	(40		Position not check more than one			ne.	Reportable	Reportable	Estimated	
	hours per	box, unless person is both an officer and a director/trustee)				ıs botl	an	compensation	compensation	amount of	
	week	-	cer an	dad	recto	or/trus	(ee)	from	from related	other	
	(describe	or director						the	organizations	compensation	
	hours for related	p io a	黟			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization	
	organizations	Individual trustee	nstitutional trustee		88	ladur		(44-2/1099-141130)		and related	
	in Schedule	dual	ngt.	<u>.</u>	Key employee	2 st C	5			organizations	
	O)	퉏	lustp	Officer	Keye	Highest compensated employee	Former			•	
(1) PHILIP BERK										-	
BOARD OF DIRECTORS-CHAIRMA	4.00	X						0.	0.	0 .	
(2) RUBEN V. NEPALES								_		_	
BOARD OF DIRECTORS-CHAIRMA	4.00	X	L	L.,				0.	0.	0 .	
(3) YORAM KAHANA											
BOARD OF DIRECTORS	4.00	X						0.	0.	0 .	
(4) MEHER TATNA	4 00	,,							_	0	
BOARD OF DIRECTORS	4.00	X			-			0.	0.	0	
(5) THEO KINGMA	4.00	X						0.	0.	0	
BOARD OF DIRECTORS-ALTERNATE	4.00	^							0.	0	
(6) LORENZO SORIA BOARD OF DIRECTORS	4.00	X						0.	0.	0	
(7) YUKIKO NAKAJIMA	4.00	<u> </u>				-		•		<u> </u>	
BOARD OF DIRECTORS	4.00	X		ļ				0.	0.	0	
(8) HELEN HOEHNE										<u> </u>	
BOARD OF DIRECTORS	4.00	X						0.	0.	0	
(9) DIERK SINDERMANN											
BOARD OF DIRECTORS-ALTERNATE	4.00	X						0.	0.	0	
(10) DR. AIDA TAKLA-O'REILLY											
PRESIDENT	30.00			X				84612.	0.	0	
(11) JORGE CAMARA											
VICE PRESIDENT	20.00	<u> </u>		X				40472.	0.	0	
(12) ALI SAR											
TREASURER	20.00	<u> </u>		X		-		45989.	0.	0	
(13) SERGE RAKHLIN	0000							41500			
EXECUTIVE SECRETARY	20.00	<u> </u>		X	_			41589.	0.	0	
(14) ERKKI KANTO	20.00					'		22120		0	
BOARD OF DIRECTORS/IT DIRE	20.00	 -		X	-	├		33139.	0.	0	
		 	-			\vdash					
		1									
	-		_	-				_			
122007 01 22 12										Form 990 (2011	

Form 990 (2011) HOLLY WOO.	D FOREIG	Ν ε	Ph	<u>(E)</u>	<u> </u>	A	550	OCTATION	95-61	<u>91</u>	<u> </u>	Pa	ige č
Part VII Section A. Officers, Directors, Tru	istees, Key Er	mple	yee	s, a	nd l	High	est	Compensated Employ	ees (continued)				
(A) Name and title	(B) Average hours per week	erage Urs per Urs per Veek Position (do not check more than one box, unless person is both an officer and a director/trustee)					h an	(D) Reportable compensation from	(E) Reportable compensation from related		(F) Estimated amount of other		
	(describe hours for related organizations in Schedule O)	related 왕 anizations 문 Schedule 물		Officer	Кеу етріоуве	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS		orgai	m the nızatı relate	e on ed
1b Sub-total c Total from continuation sheets to Part V	II. Section A				<u> </u>	>		245801.		0.			0
d Total (add lines 1b and 1c) 2 Total number of individuals (including but roompensation from the organization		nose	liste	ed a	bov	e) wl	no re	245801. eceived more than \$100	,000 of reportable	0.			0 .
compensation from the organization	·										1	Yes	No
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s	uch individual			•	•	·		•			3		х
 4 For any individual listed on line 1a, is the si and related organizations greater than \$15 5 Did any person listed on line 1a receive or an armonic process. 	0,000? <i>If "Ye</i> s,	" co	mple	ete S	Sch	edul	e J 1	for such individual			4		Х
rendered to the organization? If "Yes," com	•										5	_	X
Section B. Independent Contractors									#100 000 of a series				
 Complete this table for your five highest co the organization. Report compensation for 	-									Jens	ation ire	OIII	
(A) Name and business	address							(B) Description of s		c	(C) compen		n
O'MELVENY & MYERS LLP, 4 STREET 26TH FLOOR, LOS AN LOEB & LOEB LLP, 10100 S.	NGELES,	CZ	A 9	900				LEGAL SERVIC	ES		1213	393	91
#2200, LOS ANGELES, CA 9		., 10	-A		V		_	LEGAL SERVIC	ES	<u></u>	10	23	26.
				_									
			-										

Form **990** (2011)

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

	, ,	otatement of never	inue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts	1 a	Federated campaigns	1a					······································
na u		Membership dues	1b		1			
S, G		Fundraising events	1c					
a High		I Related organizations	1d					
is,		Government grants (contribu	tions) 1e					
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, gran	nts, and					
ξĔ		similar amounts not included abo	ove 1f		į			
	g	Noncash contributions included in lines	s 1a-1f \$					
<u>3 g</u>	h	Total. Add lines 1a-1f	 	<u> </u>				
				Business Code				
<u>8</u>	2 a		AWARD SH	711300	9894788.		0.5.5.0.0	9894788.
e Z		SPONSORSHIP		711300	275000.		275000.	1.700
n S	c	MEMBERSHIP DUES	5	711300	1739.			1739.
è a	d	i						
Program Service Revenue	е			711200				
"		All other program service reve	enue	711300	10171527			
\dashv		Total. Add lines 2a-2f		<u> </u>	10171527.			
	3	Investment income (including	i dividends, inter	est, and	4516.			4516.
		other similar amounts)		oroceeds	4310.			4310.
	4 5	Income from investment of ta	x-exempt bond p	oroceeds				
	3	Royalties	(i) Real	(II) Personal				
	6 a	Gross rents	(I) Neal	(ii) Feisonai				
		Less: rental expenses						
		Rental income or (loss)		<u> </u>				
		Net rental income or (loss)	·	·	†			
		Gross amount from sales of	(ı) Securities	(II) Other	_			
		assets other than inventory	5000000.					
	b	Less: cost or other basis						
		and sales expenses	4998357.	· i				
	c	Gain or (loss)	1643.]			
	d	Net gain or (loss)			1643.			1643.
<u>o</u>	8 a	Gross income from fundraising	ng events (not					
Other Revenu		including \$	of					
چ ا		contributions reported on line	e 1c). See					
<u>ē</u>		Part IV, line 18	а					
튐		Less: direct expenses	b					
		Net income or (loss) from fun	=	<u> </u>	-			
	9 a	Gross income from gaming a						
	_	Part IV, line 19	a .		-			
		Less: direct expenses	b	· L	-		-	
		Net income or (loss) from gar	_					
	IU a	Gross sales of inventory, less						
		and allowances	a b		-			
		 Less: cost of goods sold Net income or (loss) from sale 		'L	-		•	
t		Miscellaneous Revent		Business Code				
ŀ	11 2	UNREALIZED CAP		711300	-16.		:	-16.
	b					_		
						-	<u> </u>	
	0							
	-	Total. Add lines 11a-11d			-16.			
	12	Total revenue. See instructions		•	10177670.	0.	275000.	9902670.
13200						<u> </u>	·	Form 990 (2011)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do r	Check if Schedule O contains a respons not include amounts reported on lines 6b.	(A)	(B)	(C)	(D) Fundraising
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	expenses
1	Grants and other assistance to governments and	1572000	1572000		
	organizations in the United States See Part IV, line 21	1573000.	1573000.		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the	25000	25000		
_	United States. See Part IV, lines 15 and 16	25000.	25000.		
4	Benefits paid to or for members				1111
5	Compensation of current officers, directors,	245001	245001		
	trustees, and key employees	245801.	245801.		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	832024.	832024.		
7	Other salaries and wages	032024.	032024.		·
8	Pension plan accruals and contributions (include	9213.	9213.		
_	section 401(k) and section 403(b) employer contributions)	52346.	52346.		
9	Other employee benefits	106640.	106640.	<u>.</u>	
0	Payroll taxes	100040.	100040.		
11	Fees for services (non-employees)				
a	Management	12327002.		12327002.	
b	Legal	50185.		50185.	
_	Accounting	30163.		30103.	
d	Lobbying				-
e	Professional fundraising services See Part IV, line 17		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
f	Investment management fees				
_	Other			-	
12	Advertising and promotion			_	
13	Office expenses				
14	Information technology			-	
15	Royalties	41762.		41762.	
16	Occupancy	999641.	999641.	41/02.	
17	Travel	333041.	333041.		
18	Payments of travel or entertainment expenses	i			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings			-	
20	Interest	_			
21	Payments to affiliates	30978.		30978.	
22	Depreciation, depletion, and amortization	50973.	50973.	30310	
23	Insurance	303/3.	30313.		
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0)	142021.	142021		
	FEDERAL AND STATE INCOM	317268.	142021. 317268.		
Ь	BANQUET OUTSIDE SERVICES				
С.	OUTSIDE SERVICES	215698.	215698. 129716.		•
d	MEETING AND PRESS CONFE	129716.		25377.	
	All other expenses	650060.	624683.	12475304.	0
	Total functional expenses. Add lines 1 through 24e	17799328.	5324024.	124/3304	
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation	Į.		l l	

Par	1 X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		2426456.	1	11500800.	
i	2	Savings and temporary cash investments		11605737.	2		
	3	Pledges and grants receivable, net			3		
	4	Accounts receivable, net		119.	4	250.	
	5	Receivables from current and former officers, di	rectors	. trustees, kev			-
		employees, and highest compensated employee					
		of Schedule L		5			
	6	Receivables from other disqualified persons (as	d under section				
		4958(f)(1)), persons described in section 4958(c)					
		employers and sponsoring organizations of sect	=				
		employees' beneficiary organizations (see instru		6			
Assets	7	Notes and loans receivable, net			7		
ISS	8	Inventories for sale or use		10347.	8		
	9	Prepaid expenses and deferred charges		23530.	9		
		Land, buildings, and equipment: cost or other		Ī			
		basis. Complete Part VI of Schedule D	10a	2775725.			
	ь	Less. accumulated depreciation	10b	463572.	2323254.	10c	2312153
	11	Investments - publicly traded securities		11			
	12	Investments - other securities. See Part IV, line 1		4999700.	12		
	13	Investments - program-related See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equa	21389143.	16	13813203		
	17	Accounts payable and accrued expenses		.,	0.	17	59555
	18	Grants payable		18			
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities			20		
ဂ္ဂ	21	Escrow or custodial account liability. Complete I	Part IV	of Schedule D		21	
II I	22	Payables to current and former officers, director		r			······································
Liabilities		highest compensated employees, and disqualifi					
5		of Schedule L	•	'		22	
	23	Secured mortgages and notes payable to unrela	ted th	rd parties	•	23	
	24	Unsecured notes and loans payable to unrelated		·		24	
	25	Other liabilities (including federal income tax, par	vables	to related third			
		parties, and other liabilities not included on lines					
		Schedule D		'		25	
	26	Total liabilities. Add lines 17 through 25			0.	26	59555
		Organizations that follow SFAS 117, check he	ere 🕨	and complete			
တ္ထ		lines 27 through 29, and lines 33 and 34.		-			
ğ	27	Unrestricted net assets				27	
ga	28	Temporarily restricted net assets				28	
<u> </u>	29	Permanently restricted net assets				29	
5		Organizations that do not follow SFAS 117, cl	neck h	ere ▶ X and			
o		complete lines 30 through 34.					
şt	30	Capital stock or trust principal, or current funds			0.	30	0.
SSI	31	Paid-in or capital surplus, or land, building, or eq	ulpme	nt fund	0.	31	0 .
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in			21389143.		13753648
ž	33	Total net assets or fund balances	,		21389143.	33	13753648
					21389143.		13813203

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

If the organization answered "Yes" to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B Do not complete Part II-A.

	Section 501(c)(4), (5), or (6) organiza	· · · · · · · · · · · · · · · · · · ·	ky rak), or r orm 050-1	.L, r are v, line ooc (i roxy	ax, aicii
	me of organization			Emp	loyer identification number
		OD FOREIGN PRES			95-6191816
P	art I-A Complete if the org	ganization is exempt un	der section 501(c) or is a section 527 o	rganization.
1	Provide a description of the organiz	zation's direct and indirect polit	ical campaign activities	s in Part IV.	
2	Political expenditures			▶\$;
3	Volunteer hours				
					· · · · · · · · · · · · · · · · · · ·
P	art I-B Complete if the org	ganization is exempt un	der section 501(c)(3).	
1	Enter the amount of any excise tax	incurred by the organization ur	nder section 4955	▶ 9	
2	Enter the amount of any excise tax	incurred by organization mana-	gers under section 495	5 5 ► \$)
3	If the organization incurred a section	on 4955 tax, did it file Form 472	0 for this year?		Yes No
4	a Was a correction made?				Yes No
	b If "Yes," describe in Part IV.				
Pi	art I-C Complete if the org	ganization is exempt un	der section 501(c), except section 501	(c)(3).
1	Enter the amount directly expended	d by the filing organization for s	ection 527 exempt fun	ction activities	
2	Enter the amount of the filing organ	ization's funds contributed to d	other organizations for	section 527	
	exempt function activities			▶ 9	S
3	Total exempt function expenditures	s. Add lines 1 and 2. Enter here	and on Form 1120-PO	L,	
	line 17b			▶ 9	S
4	Did the filing organization file Form	1120-POL for this year?			Yes No
5	Enter the names, addresses and er	mployer identification number (E	EIN) of all section 527 p	political organizations to which	ch the filing organization
	made payments. For each organiza	ition listed, enter the amount pa	aid from the filing organ	nization's funds. Also enter t	ne amount of political
	contributions received that were pr	omptly and directly delivered to	o a separate political or	ganization, such as a separa	ate segregated fund or a
	political action committee (PAC). If	additional space is needed, pro	ovide information in Pai	rt IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's	contributions received and
				funds. If none, enter -0	promptly and directly delivered to a separate
					political organization
					If none, enter -0
		-			
					
			-		
					

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. LHA

Schedule C (Form 990 or 990-EZ) 2011

Schee Par	dule C (Form 990 or 990-EZ) 2011 t II-A Complete if the org					ON 95-	6191816 Page 2
	(election under sec			npt under sectiv			
▲ Ch				listed group (and list)	n Part IV each affiliated	araua mambar'a na	ma address FIN
- 011	expenses, and sha				in Part IV each anniated	group members na	ne, address, EIN,
R Ch	. —			•	anda anala		
<u>OII</u>	eck / It the liling organiza	mon check	ed box A ai	nd "limited control" pr	ovisions apply.	(-) Files -	(In) Affiliant and amount
			bying Expe leans amou	nditures ints paid or incurred	.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a	Total lobbying expenditures to infl	uence pub	lic opinion (grass roots lobbying)		···	
	Total lobbying expenditures to infl	•	• •	, ,,			
	Total lobbying expenditures (add l		_	.y (aaat 1000)ig/			
	Other exempt purpose expenditur		u , u,				
	Total exempt purpose expenditure		e 1c and 1c	n	-		
	Lobbying nontaxable amount. Ent	•		•	th columns		
					1 6		
T I	If the amount on line 1e, column (a) ()r (u) 18:		bying nontaxable an			
	Not over \$500,000			the amount on line 1e			
	Over \$500,000 but not over \$1,00			0 plus 15% of the ex			
	Over \$1,000,000 but not over \$1,5		•		cess over \$1,000,000		
Г	Over \$1,500,000 but not over \$17	,000,000			ess over \$1,500,000.		
L	Over \$17,000,000		\$1,000,0	000.			
g	Grassroots nontaxable amount (er	nter 25% o	f line 1f)				
h	Subtract line 1g from line 1a If zer	o or less, e	enter -0-				
i	Subtract line 1f from line 1c. If zero	o or less, e	nter -0-		Į.		
j	lf there is an amount other than ze	ro on eithe	r line 1h or	line 1ı, did the organi	zation file Form 4720		·
	reporting section 4911 tax for this	year?					Yes No
			it made a s	• •	r Section 501(h) n do not have to comp es 2a through 2f on pa		
		Lobi	ying Exper	ditures During 4-Ye	ear Averaging Period		
	Calendar year (or fiscal year beginning in)	(a) :	2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a	Lobbying nontaxable amount			······································		·····	
	Lobbying ceiling amount						
	(150% of line 2a, column(e))					·····	
_ с	Total lobbying expenditures						
	Grassroots nontaxable amount				}		
	Grassroots celling amount (150% of line 2d, column (e))						

Schedule C (Form 990 or 990-EZ) 2011

Schedule C (Form 990 or 990-EZ) 2011 HOLLYWOOD FOREIGN PRESS ASSOCIATION 95-61918 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description		a)	(t	
	e lobbying activity	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter	-			
	or referendum, through the use of:				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?		<u> </u>		
9	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Pa	till-A Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6).	ion 501(c)(5), or se	ection	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1	Х	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		Х
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		X
1	answered "Yes." Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	tical			
	expenses for which the section 527(f) tax was paid).			1	
а	Current year		2a		
b	•		<u>2b</u>		
C	Total		2c	_	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	-	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political		1	
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5	<u> </u>	
Pai	t IV Supplemental Information				
	plete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5; F	Part II-A; and	d Part II⋅B, II	ne 1. Also, e	complete
this	part for any additional information.				
		_			
			_		
					
				000 55	
		Sched	ule C (Form	1 990 or 991	J-EZ) 2(

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
➤ Attach to Form 990.
➤ See separate instructions.

2011
Open to Public Inspection

Name of the organization

HOLLYWOOD FOREIGN PRESS ASSOCIATION

Employer identification number 95-6191816

Do	Organizations Maintaining Dancy Advises		95-0191010
Pa	= ====		is or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	(a) Donor advised funds	(h) Funda and other econunts
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor adv	
	are the organization's property, subject to the organization's		L Yes L No
6	Did the organization inform all grantees, donors, and donor a	• •	•
	for charitable purposes and not for the benefit of the donor of	r donor advisor, or for any other purpose	
	impermissible private benefit?		Yes No
Pa	Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or e	ducation) Preservation of an h	istorically important land area
	Protection of natural habitat	Preservation of a ce	rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	n of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic str	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 8/17/06, and not on a historic struc	ture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the	ne organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	<u> </u>
	violations, and enforcement of the conservation easements if	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements	during the year 🕨
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements durin	g the year > \$
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 17	O(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservati	on easements in its revenue and expens	se statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	ion's financial statements that describe	s the organization's accounting for
	conservation easements.		
Pai	Till Organizations Maintaining Collections of	f Art, Historical Treasures, or 0	Other Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue state	ement and balance sheet works of art,
	historical treasures, or other similar assets held for public exh	nibition, education, or research in further	ance of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that descri	bes these items.	
b	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue stateme	nt and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed		
	relating to these items:	·	
	(i) Revenues included in Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical treations	asures, or other similar assets for financ	
_	the following amounts required to be reported under SFAS 1		
а	Revenues included in Form 990, Part VIII, line 1	,,	▶ \$
b	Assets included in Form 990, Part X		► \$ ► \$
_	The second secon		·

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2011

Schedule D (Form 990) 2011

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of Cost or end-of-yea	
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
_(B)			
(C)			
_(D)			
(E)			
(F)			
(G)			
(H)			
(1)		······································	
Total. (Col (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII Investments - Program Related.	See Form 990, Part X, line 13		
(a) Description of investment type	(b) Book value	(c) Method o Cost or end-of-ye	
(1)			
(2)			
(3)			
(4)			
(5)		. <u></u>	
(6)			
(7)			
(8)			
(9)			
(10)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Total. (Col (b) must equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, Im			(b) Book value
) Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(8)			
(9)			
(10)	15)		•
Total. (Column (b) must equal Form 990, Part X, col (B) lii Part X Other Liabilities. See Form 990, Part X			
(a) December of behalts.		b) Book value	
··· · · · · · · · · · · · ·		, 2001, 10100	
(1) Federal income taxes		-	
(2)			
(3)			
(4)			
(5)	_		
(6)			
(7)		-	
(8)			
(9)			
(11)			
Total. (Column (b) must equal Form 990, Part X, col (B) lii FIN 48 (ASC 740) Pootnote In Part XIV, provide the text of the footnote	ne 25) to the organization's financial stateme	nts that reports the organization's liability for	uncertain tax positions under

Schedule D (Form 990) 2011

	dule D (Form 990) 2011 HOLLYWOOD FOREIGN PRESS AS			_	6191816	Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to	Audited Finar	<u>icial State</u>	ement	ts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	_		
2	Total expenses (Form 990, Part IX, column (A), line 25)		2			
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3			
4	Net unrealized gains (losses) on investments		4			
5	Donated services and use of facilities		5			
6	Investment expenses		6			
7	Prior period adjustments		7			
8	Other (Describe in Part XIV.)		8			
9	Total adjustments (net). Add lines 4 through 8		9		_	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and		10			
	t XII Reconciliation of Revenue per Audited Financial Stateme	ents With Reve	nue per l	Returr	1	
1	Total revenue, gains, and other support per audited financial statements			1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1				
a	Net unrealized gains on investments	2a		4 1		
Ь	Donated services and use of facilities	2b		-		
С	Recoveries of prior year grants	2c		4		
d	Other (Describe in Part XIV.)	2d		- 1		
_	Add lines 2a through 2d			2e		
3	Subtract line 2e from line 1			3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 . 1				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		-		
D.	Other (Describe in Part XIV.) Add lines 4a and 4b	4b		-		
				4c		
D ₂	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) † XIII Reconciliation of Expenses per Audited Financial Statement	onte With Evn	oncoc noi	5 Potu		
1	Total expenses and losses per audited financial statements	ents with Exp	enses per	1	10 0 0	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			-		
_ a	Donated services and use of facilities	2a				
b	Prior year adjustments	2b		- 1		
c	Other losses	2c		7		
ď	Other (Describe in Part XIV.)	2d		7		
e	Add lines 2a through 2d			2e		
3	Subtract line 2e from line 1			3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV.)	4b		7		
С	Add lines 4a and 4b			4c		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5		
Par	t XIV Supplemental Information					
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part II e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comp					4; Part
			_			<u></u>
				_		
				Sabor	tulo D /Form 00	2011

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

➤ Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.
➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047
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2011
Open to Public
Increation

Department of the Treasury Internal Revenue Service

Employer identification number

ivam	e or the organization					Employer identi	rication number
HO]	LLYWOOD FOREI	GN PRESS	ASSOCIA	TION		95-61918	16
Pa	rt i General Info	rmation on A	ctivities Out	tside the United States. Comple	ete if the orgar		
	to Form 990, Par						
1				ds to substantiate the amount of its gra			Yes X No
	the grantees' eligibility to	or the grants or a	assistance, and	the selection criteria used to award the	grants or assi	stance? L	Yes X No
2	For grantmakers, Desc	ribe in Part Vithe	e organization's i	procedures for monitoring the use of its	s arants and o	ther assistance ou	tside the
_	United States.		organization o	procedures for mornitoring the dec of ite	granto ano o		10,00
3	Activities per Region. (T	he following Part	I, line 3 table ca	an be duplicated if additional space is r	needed.)		
	(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in region		vity listed in (d)	(f) Total
		offices in the region	employees, agents, and independent	(by type) (e.g., fundraising, program	•	gram service,	expenditures for and
		in the region	contractors	services, investments, grants to recipients located in the region)		e specific type ce(s) in region	investments in region
			in region				in region
							
	· ·				: 		
	-						
						 	
3 a	Sub-total	0	0		,		0.
	Total from continuation		-		······	······	
	sheets to Part I	0	0			·····	0.
С	Totals (add lines 3a						
	and 3b)	0	. 0				0.
LHA	For Paperwork Reduct	ion Act Notice,	see the Instruc	tions for Form 990.		Schedule F	(Form 990) 2011

HOLLYWOOD FOREIGN PRESS ASSOCIATION

95-6191816

Page 2

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any

Schedule F (Form 990) 2011

Part II

recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000

Part II can be duplicated if additional space is needed.

_					
(i) Method of valuation (book, FMV, appraisal, other)					
(h) Description of non-cash assistance					
(g) Amount of non-cash assistance	o				
(e) Amount (f) Manner of of cash grant cash disbursement	CHECK				
(e) Amount of cash grant	25000,CHECK				
(d) Purpose of grant	FOR THE LONG-TERM RECOVERY PROGRAMS OF CHILDREN AFFECTED BY TROPICAL STORM				
(c) Region	EAST ASIA AND THE PACIFIC				
(b) IRS code section and EIN (if applicable)					
1 (a) Name of organization					

SEE PART V FOR COLUMN (D) DESCRIPTIONS

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by

the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Enter total number of other organizations or entitles

Q

Schedule F (Form 990) 2011

HOLLYWOOD FOREIGN PRESS ASSOCIATION

Page 3

95-6191816

Schedule F (Form 990) 2011
Part III Grants and Other

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

1	i	, I	i	l	İ	!)			I —
(h) Method of valuation (book, FMV, appraisal, other)										Schedule F (Form 990) 2011
(g) Description of non-cash assistance										Schedu
(f) Amount of non-cash assistance										
(e) Manner of cash disbursement										
(d) Amount of cash grant										:
c) Number of recipients										
(b) Region										
(a) Type of grant or assistance (b) Region										

Part	IV Foreign Forms	
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	Yes X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Yes X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	Yes X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes X No
		Schedule F (Form 990) 2011

Schedul	le F (Fo	r <u>m</u> 990)	2011	НО	LLY	MOOD	FOR	EIGN	PRESS	ASSOCIAT	ION	95	-6 <u>1</u> 91816	Page 5
Part \		upple		al Inf	orma	tion								
	Co	mplete	this p	art to p	rovide	the info	rmation	required	by Part I, Iir	ne 2 (monitoring of	funds); Part I, line	3, colu	mn (f) (accounting	method;
	an	nounts	of Inve	stment	s vs. e	xpenditi	ıres per	region);	Part II, line 1	(accounting meth	od); Part III (accou	ıntıng n	nethod), and Part	III, column
	(c)	(estima	ated no	umber d	of recip	<u>ents), a</u>	is applic	able. Als	o complete	this part to provide	e any additional inf	ormatic	on.	
שמעת	тт	CO		T (D										
PART	11,		LUMI	<u>и (</u> D):									
REGI	ON:	EAS	r As	SIA	AND	THE	PAC	IFIC						
(5)	DUDE		~ =	an.		700		T 037	a ====.		DD04D1144	0.0	01177 DD 5117	
(D)	PURE	OSE	OF.	GRA	N.T. :	FOR	THE	LONG	G-TERM	RECOVERY	PROGRAMS	OF.	CHILDREN	
AFFE	СТЕГ) BY	TRO	OPTC	AT.	STOR	M SE	NDON	G					
	<u> </u>					<u> </u>		TI DOIL	<u> </u>					
														
									· · · · · · · · · · · · · · · · · · ·					
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	<u>-</u>							<u>-</u>						
		_												

SCHEDULE 1 (Form 990) Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

2011
Copen to Public Inspection

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

Name of the organization	NOTAGOA	OOSSW SSEEd	MOTERTOOSSK				Employer identification number 95_6191816
Part I General Information on Grants and Assistance	and Assistance	1	NOT TUT				
Does the organization maintain records to substantiate the amount of	to substantiate th		s or assistance, the	grantees' eligibility	for the grants or ass	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	
	stance?			,			X Yes No
낋	ocedures for mon	toring the use of grant	funds in the Unite	d States.			
Part If Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990. Part IV, line 21, for any received more than \$5,000. Check this box if no one recipient facewed more than \$5,000. Part II can be duplicated if additional space is needed	Governments an	d Organizations in the shox if no one recipler	e United States. C	complete if the organs \$5.000. Part II	inization answered "Y can be duolicated if	'es" to Form 990, Part	IV, line 21, for any ded
1 (a) Name and address of organization or government	(a)	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
REMLEYLEVY ARTS FOUNDATION 8546 HILLSIDE AVE., LOS ANGELES CA 90069	45-3866412	501(C)(3)	3000	o			DONATION
	95-3735188	501(C)(3)	1570000.	0			CHARITIES TO ENTERTAINMENT RELATED ORGANIZATIONS
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	and government o	rganizations listed in the	ne line 1 table				A
٦	s see the Instruc	tions for Form 990.					Schedule I (Form 990) (2011)

Schedule I (Form 990) (2011)

26

132102 01-27-12

Page 2

95-6191816

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

HOLLYWOOD FOREIGN PRESS ASSOCIATION

Schedule I (Form 990) (2011)
Part III | Grants and Othe

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Name of the organization

HOLLYWOOD FOREIGN PRESS ASSOCIATION

Employer identification number 95-6191816

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

DEVELOPMENT OF MOTION PICTURE, TELEVISION, DRAMATIC, MUSICAL AND COMEDY
THEATER, AND AUDIO VISUAL RECORDING ART FORMS. THE ASSOCIATION IS A

BUSINESS LEAGUE OF JOURNALISTS AND PHOTOGRAPHERS COVERING THE
ENTERTAINMENT INDUSTRY FOR FOREIGN PUBLICATIONS. THE PRESS CONFERENCES
HOSTED BY THE ASSOCIATION HELP STIMULATE AND PROMOTE INTEREST IN THE
MOTION PICTURE, TELEVISION, THEATRICAL ARTS AND VISUAL RECORDING ART
INDUSTRIES IN THE UNITED STATES AND ABROAD. THE ASSOCIATION ANNUALLY
SPONSORS THE GOLDEN GLOBE AWARDS WHICH RECOGNIZE OUTSTANDING
ACHIEVEMENT IN THE FIELDS OF MOTION PICTURES, THEATER, TELEVISION, AND
THE VISUAL AND RECORDING ARTS. THE PUBLICITY GENERATED BY THIS
INTERNATIONALLY RECOGNIZED AWARDS PROGRAM PROMOTES SUCH FIELDS OF
ENDEAVOR.

FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION HAS 83 ACTIVE,

INDEPENDENT VOTING MEMBERS WHO ARE WRITERS OR PHOTOGRAPHERS IN THE

ENTERTAINMENT INDUSTRY. IN ADDITION, THE ORGANIZATION HAS SEVEN LIFETIME

AND AFFILIATE MEMBERS WHO ARE NOT ACTIVE AND HAVE NO VOTING RIGHTS.

FORM 990, PART VI, SECTION A, LINE 7A: THE ORGANIZATION'S 83 ACTIVE,

INDEPENDENT VOTING MEMBERS ELECT, ANNUALLY, THE OFFICERS OF THE ASSOCIATION

(PRESIDENT, VICE PRESIDENT, TREASURER, AND EXECUTIVE SECRETARY), AND FIVE

ADDITIONAL MEMBERS TO THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION A, LINE 7B: ALL DECISIONS OF THE BOARD OF

DIRECTORS, SUCH AS APPROVAL OF THE BOARD'S ELECTION OR REMOVAL OF MEMBERS

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2011)

132211
132212

Schedule O (Form 990 or 990-EZ) (2011) Page 2 **Employer identification number** Name of the organization HOLLYWOOD FOREIGN PRESS ASSOCIATION 95-6191816 OF THE BOARD, OR MEMBERS OF THE ASSOCIATION, MUST BE APPROVED BY 2/3 OF THE VOTING MEMBERS. FINANCIAL EXPENDITURES IN EXCESS OF \$3,000 MUST BE APPROVED BY THE MAJORITY OF THE VOTING MEMBERS AS WELL. FORM 990, PART VI, SECTION B, LINE 11: FORM 990 IS SUBMITTED TO THE FINANCIAL COMMITTEE AND BOARD OF DIRECTORS FOR REVIEW. ONCE APPROVED, THE RETURN IS SIGNED BY THE PRESIDENT. FORM 990, PART VI, SECTION B, LINE 15: THE PROCESS FOR DETERMINING COMPENSATION LEVELS GOES THROUGH COMPARABILITY DATA WITH SIMILAR TAX EXEMPT ENTERTAINMENT RELATED ORGANIZATIONS. ALL COMPENSATION CHANGES MUST BE APPROVED BY A MAJORITY OF THE VOTING MEMBERS. FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS, CONFLICT OF INTEREST, AND FINANCIAL STATEMENTS AVAILABLE UPON REQUEST FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS: PRIOR PERIOD ADJUSTMENTS: -13837.FORM 990, PART XII, LINE 2(C) COMPILED FINANCIAL STATEMENTS:

THE ORGANIZATION'S FINANCIAL COMMITTEE CONFIRMS, ANNUALLY, AN INDEPENDENT ACCOUNTANT TO COMPILE THE FINANCIAL STATEMENTS. THE COMPLETED FINANCIAL STATEMENTS ARE REVIEWED BY THE FINANCIAL COMMITTEE, AND THEN SUBMITTED TO THE BOARD OF DIRECTORS. FORM 990, PART XII, LINE 2(D):

WE CONTINUE TO ISSUE THE FINANCIAL STATEMENTS OF THE HOLLYWODD FOREIGN

PRESS ASSOCIATIONS AND THE HOLLYWODD FOREIGN PRESS ASSOCIATION

Schedule O (Form 990 or 990-EZ) (2011)

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization HOLLYWOOD FOREIGN PRESS ASSOCIATION	Employer identification number 95-6191816
CHARITABLE TRUST ON CONSOLIDATED BASIS.	
CHARTIADED TROOF ON CONDUITATED DAOID.	
	
	

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Name of the organization

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

▼ See sepa	
.066	
to Form	
Attach	

HOLLYWOOD FOREIGN PRESS ASSOCIATION

2011	Open to Public	Inspection

:

OMB No 1545-0047

rate instructions.

Employer identification number 95-6191816

Part i	Identification of Disregarded Entities (Complete If the organization answered "Yes" to Form 990, Part IV, line 33.)	if the organization answered "Yes"	to Form 990, Part IV, line 33	(
	(e)	(b)	(6)				(f)
	name, address, and Ein of disregarded entity	rimary activity	foreign country)				entity
						 -	
					· · · · · · · · · · · · · · · · · · ·		
Part II	Identification of Related Tax-Exempt Organizations (Complete If the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)	tions (Complete if the organization a	nswered "Yes" to Form 990,	Part IV, line 34 be	cause it had one o	r more related tax-exen	npt
	(a)	(q)	(၁)	(p)	(e)	ω	(g)
	Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section	Direct controlling entity	controlled entity?
	•				501(c)(3))		Yes No
HOLLYW	HOLLYWOOD FOREIGN PRESS ASSOCIATION CHARITABLE TRUST - 95-3735188, 646 NORTH	CHARITIES TO ENTERTAINMENT					:
ROBERT	ROBERTSON BLVD.,, WEST HOLLYWOOD, CA 90069	RELATED ORGANIZATIONS	CALIFORNIA	501(C)(3)	ORGANIZATION	N/A	×
					_		

Schedule R (Form 990) 2011

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

95-6191816

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Schedule R (Form 990) 2011 HOLLYWOOD FOREIGN PRESS ASSOCIATION

Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a)	9	(3	(P)	(e)	e	(5)	3	€	9	8
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	trolling y	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share	of /ear is	rtion-	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?	General or Percentage managing ownership partner/
										<u>!</u>
Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year)	janizations Taxable a	as a Corp	oration or Trust (Co year)	mplete if the organiz	ation answered "Yes"	to Form 990, Par	t IV, line 34	because it had o	ne or mor	e related
(a) Name, address, and EIN of related organization	Z		(b) Primary activity	(c) Ity Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) I total Share of end-of-year assets	e of Fyear ets	(h) Percentage ownership
							_			
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Schedule R (Form 990) 2011 HOLLYWOOD FOREIGN PRESS ASSOCIATION

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Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	å
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ns with one or more re	lated organizations listed	ın Parts II·IV?			
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		×
b Giff, grant, or capital contribution to related organization(s)				đ	×	
c Gift, grant, or capital contribution from related organization(s)				10		×
d Loans or loan guarantees to or for related organization(s)				P		×
e Loans or loan guarantees by related organization(s)				1		×
f Sale of assets to related organization(s)				+		×
g Purchase of assets from related organization(s)				19		×
h Exchange of assets with related organization(s)				ŧ		×
i Lease of facilities, equipment, or other assets to related organization(s)				1		×
i Lease of facilities, equipment, or other assets from related organization(s)				=		×
k Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)			÷		×
Performance of services or membership or fundraising solicitations by	anization(s)			=		×
m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	tion(s)			T E		×
n Sharing of paid employees with related organization(s)				1n		×
o Reimbursement paid to related organization(s) for expenses				5		×
				0		×
						:
 Qther transfer of cash or property to related organization(s) 				5		× :
				-		\times
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	who must complete the	is line, including covered	relationships and transaction thresholds.			
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved			
HOLLYWOOD FOREIGN PRESS ASSOCIATION (1) CHARITABLE TRUST	В	1570000.				
(2)						
(6)						
(4)						
(5)						
(9)						
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Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.) Part VI Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(8)	ral or Percentage					
9	-UBI Ger box 20 ma lle K-1 Pa				-	
E	hspropor- tocations 0	93 93				
(0)	of /ear is					
€	રુ [±]					
3	Are all partners sec 501(c)(3) orgs. 7	X CES NO	 			
Suilent partifersings.	t income related, om tax					
Sion for certain mive	micile oreign ry)					
inctions regarding exclusive (b)	Primary activity					
inat was not a related organization. See instructions regarding excusion to certain investment partners inps.	Name, address, and EIN of entity					

Schedule H	Supplemental Information	95-6191816 Page 5
rait vii	Supplemental Information	uational
	Complete this part to provide additional information for responses to questions on Schedule R (see instru	uctions).
		
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		·

Current Year Deduction		2629.	172.	177.	327.	413,	256.	112.	1018.	. 66	171.	ф	86.	114.	76.	38.	107.	1224.	
Current Sec 179		:													- ""	······	,,		
Accumulated Depreciation		31549.	2043.	2104.	3800.	4800.	2975.	1302.	11746.	1134.	1958.	377.	.776	1286.	856.	421.	1180.	13077.	
Basis For Depreciation		105170.	6875.	7097.	13070.	16500.	10235.	4468.	40709.	3975.	6825.	1300.	3433.	4569.	3021.	1500.	4285.	48972.	
Reduction In Basis																			
Bus % Excl	*						 -		+	!								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Unadjusted Cost Or Basis		105170.	6875.	7697.	13070.	16500.	10235.	4468.	40709.	3975.	6825.	1300.	3433.	4569.	3021.	1500.	4285.	48972.	
Line		.0017	0017	.0017	0017	0017	00 17	0017	0017	0017	0017	0017	0017	0017	0017	.0017	.0017	.0017	
Lıfe		40.0	40.0	40.0	40.0	40.00	40.0	40.00	40.0	40.0	40.0	40.0	40.0	40.0	40.0	40.0	40.0	40.0	
Method		ADS	ADS	ADS	ADS	ADS	ADS	ADS	ADS	ADS	ADS	ADS	ADS	ADS	ADS	ADS	ADS	ADS	
Date Acquired		063099ADS	082499	[ELECTO 81999ADS	C111799ADS	120299	[PAINT121099ADS	[ELECT121099ADS	122299	012600	013100	013100ADS	022800	[GENERO 32 90 DADS	[GENERO41400ADS	PLUMBO 60200ADS	062600	ROOF 1110600ADS	
			[PLUMB082499ADS	ELECT	[AIR C	[ROOF]120299ADS	[PAINT	[ELECT	[GENER122299ADS	[ROOF]012600ADS	[GENERO13100ADS	[FIRE	[GENERO22800ADS	GENER	[GENER	[PLUMB	[GENER 626 0 0 ADS	[ROOF]	
Description	BUILDINGS	58BUILDING	NTS	LEASEHOLD IMPROVEMENTS	LEASEROLD IMPROVEMENTS FEASEROTD	NTS	IMPROVEMENTS	LEASEROLD IMPROVEMENTS	LEASEROLD IMPROVEMENTS	NTS	LEASEROLD IMPROVEMENTS	IMPROVEMENTS	IMPROVEMENTS	LEASEHOLD IMPROVEMENTS	LEASEHOLD IMPROVEMENTS	LEASEROLD IMPROVEMENTS	LEASEROLD IMPROVEMENTS	LEASEHOLD 92IMPROVEMENTS	
Asset No		58	09	19	67	89	69	7.0	71	78	79	80	81	82	84	68	06	92	

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

Current Year Deduction	922.	76.	142.	17.	48.	35.	27.	27.	88	22.	37.	ထ်	36.	74.	31.	69	41.	m
Current Sec 179																		
Accumulated Depreciation	10165.	832.	1402.	166.	470.	343,	264.	260.	840.	208.	350.	76.	338.	688*	244.	709.	306	342
Basis For Depreciation	36867.	3049.	5674.	674.	1907.	1400	1065.	1063.	3500.	886.	1462.	300*	1428.	2966.	1232.	3700.	1640.	2101.
Reduction in Basis																		
Bus % Excl																		
Unadjusted Cost Or Basis	36867.	3049.	5674.	674.	1907.	1400.	1065.	1063.	3500.	886.	1462.	300.	1428.	2966.	1232.	3700.	1640.	2101.
No S	.0017)17)17	.0017	.0017	.0017)17	710	017)17	.0017)17)17)17	0017	.0017	.0017	. 6017
Life	40.00	40.001	40.001	40.00	40.00	40.00	40.001	40.001	40.001	40.001	40.0	40.001	40.001	40.001	40.00	40.00	40.0	40.0
Method	ADS	ADS	ADS	ADS	ADS	ADS	ADS	ADS	1ADS	ADS	ADS	ADS	ADS	ADS	ADS	ADS	ADS	ADS
Date Acquired	010100	772500	081001	090601	092501	092601	92601	112101	120601	012302	012302	013102	022202	031402	081303	111303	010704	01070505
	[GENERO10100ADS	[KITCH072500ADS	[BRICK081001ADS	[BRICK090601ADS	[KITCH092501ADS	[CABIN092601ADS	[SECUR092601ADS	[SECURI12101ADS	[KITCH12060	[KITCH012302ADS	[CABIN012302ADS	[GENERO13102ADS	[GENER022202ADS	GENERO 31 402ADS	FRONTO81303ADS	[DOOR/111303ADS	[DOOR/010704ADS	LEM MEN
Description	LEASEHOLD 93IMPROVEMENTS	LEASEHOLD 97LMPROVEMENTS	LEASEHOLD 116 IMPROVEMENTS	LEASEHOLD 117 IMPROVEMENTS					LEASEHOLD 122 <mark>IMPROVEMENTS</mark>	LEASEHOLD 123IMPROVEMENTS		LEASEHOLD IMPROVEMENTS	LEASEHOLD 126IMPROVEMENTS	LEASEHOLD 127LMPROVEMENTS	LEASEHOLD 193IMPROVEMENTS	LEASEHOLD IMPROVEMENTS	LEASEHOLD IMPROVEMENTS	LIGHTING SYSTEM
Asset No	93	97	116	117	118	119	120	121	122	123	124	125	126	127	193	194	195	229

(D) - Asset disposed

Current Year Deduction	115.	28.	112.	.99	25.	# 85 F	158.	54.	25.	25.	49.	42.	61.	172.	147.	147.	27.	106.
Current Sec 179																		
Accumulated Depreciation	714.	169.	667.	377.	118.	730.	730.	245.	103.	103.	198.	166.	226.	624.	521.	521.	.68	340.
Basis For Depreciation	4590.	1100.	4464.	2640.	1000.	6300.	6300.	2150.	1000.	1000.	1975.	1675.	2450.	6886.	5886.	5886.	1092.	4235.
* Reduction In Basis																		
Bus % Excl			***	(+) () 	· · · · · ·			·· · · · · · · · · · · · · · · · · · ·				·····	***					
Unadjusted Cost Or Basis	4590.	1100.	4464.	2640.	1000.	6300.	6300.	2150.	1000.	1000.	1975.	1675.	2450.	6886.	5886	5886.	1092.	4235.
No Pi	0017	0017	0017	0017	00 17	0017	0017	0017	0017	0017	0017	0017	0017	0017	0017	0017	0017	0017
Life	40.0	40.0	40.0	40.0	40.0	40.0	40.0	40.0	40.0	40.0	40.0	40.0	40.0	40.0	40.0	40.0	40.0	40.0
Method	ADS	ADS	ADS	ADS	506ADS	ADS	306ADS	ADS	ADS	ADS	ADS	ADS	ADS	ADS	407ADS	ADS	ADS	ADS
Date Acquired	041205ADS	060205ADS	072705ADS	ARELOG 70 SADS	02506	10206	.11306	22006	50807	52307	60507	71807	101607ADS	11607ADS	21	.22707ADS	032508ADS	040108ADS
Description	DOORS (CONFERENCE 230ROOM)		۶	266CIRCUITS-OFFICE AREL	288SEAL, STAIN & PAINT102	289SEAL, STAIN & PAINT110206ADS	290SEAL, STAIN & PAINT111	S.	» El «	æβ.	. 7	308SALTILLO TILE FLOORO 7180 7ADS	309CUSTOM IRON FENCE	310WALLS & CEILING 1	311custom iron fence 1	312CUSTOM IRON FENCE 1	314 CUSTOM IRON FENCE	315WALLS & CEILING C
Asset	230	231	265	266	288	289	290	291	292	293	294	308	309	310	311	312	314	315

(D) - Asset disposed

Asset	Description	Date Acquired N	Method	Life	No 00	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
339	1E ()	011409ADS		40.001	17	1995.			1995.	123.		50
340	340GTOREROOM	032309ADS		40.001	<u>~</u>	1779.			1779.	101.		44.
341	SHELVES IN 341STOREROOM	032309ADS		40.001	17	2001.	.,		2001.	115.		50,
342	342TOILET	051809ADS		40.0017	~	714.			714.	38		18*
410	410CARPET	070611ADS	•	40.0020C	20C	1475.	· · · · ·		1475.			35.
411	411CARPET	081111ADS		40.0020c	200	1475.		,	1475.			32.
412	PANEL	112111ADS		40.0020C	20C	959.	++		959.			15.
	* 990 PAGE 10 TOTAL BUILDINGS FIDNITHIDE 6					423945.		0	423945.	106606.	Ö	10590.
									4,44			
34	FIXTURES	0616932	00DB	00.	17	350.	·····		350.	350.		• 0
63	TIXTURES [DOORBOX	S083099200DB7.	000B	00	17	853.	•		853.	853.	•	0.
76	FURNITURE	011900200DB7.	0.0 DB	00	17	75000.			75000.	75000.		ő
7.7	FURNITURE FIXTURES [01119002	OODB	00	17	900	·		900	.006		0
83	FURNITURE & FIXTURES	040400200DB7	8000	00.	17	98179.			98179.	98179.		0.
82	FURNITURE & FIXTURES	050200200DB7.	00DB	00	17	964.		•	964.	964.		0.
80		062600200DB7.	00DB	00	<i>ţ</i> ~	1125.			1125.	1125.		0
91		050301200DB7.	00DB	00	17	2000.	•		2000.	2000.		0
102	FURNITURE & 102FIXTURES [GE REFRIC	REFRIG092801200DB7.	00DB	00	17	2468.			2468.	2468.		0

(D) - Asset disposed

Current Year Deduction	0	0	0.	*0	0.	0.	0	0.	0.	0.	0	0.	0.	0.	0	22.	89.	119.
Current Sec 179					•													
Accumulated Depreciation	2347.	700.	1400.	396.	244.	304.	508.	1175.	1491.	230.	168.	1116.	90.	120.	310.	479.	1912.	1156.
Basis For Depreciation	2347.	700.	1400.	396.	244.	304.	508.	1175.	1491.	230.	168.	1116.	.06	120.	310.	501.	2001.	1335,
Reduction In Basis												478.	.06	120.	310	501.	2002	
Bus % Excl				··········					-						,,			
Unadjusted Cost Or Basis	2347.	700.	1400.	396.	244.	304.	508.	1175.	1491.	230.	168.	1594.	180.	240.	620.	1002.	4003.	1335.
No e	17	17	17	21	17	17	17	17	17	2	17	7	17	£-	17	t~ ****	17	17
Life	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00
Method	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB
Date Acquired)22502	030202200DB7.0	032802200DB7.0	13102	013102	11502	042602200DB7.00	0426022000B7.0	061702	62002	062002	32703	52003	POTS052003200DB7.0)52003	091404200DB7.0	112304200DB7.0	08 10 05 200DB 7.0
Description	© PRAPERIES 022502200DB7.0	r [RUG]	r [RUG]	PHOTO FRA013102200DB7.0	GLASS-FRA013102200DB7.00	PHOTO FRA041502200DB7.00	[MIRRORS]	[LAMPS]	PHOTO FRA061702200DB7.0	1		[PATIO CAN032703200DB7.0	ECURVED SI052003200DB7.00	& [ROSE	& [WATER FOU052003200DB7.0	ALLATION		
Desc	FURNITURE 106FIXTURES		108FIXTURES	135FIXTURES		137FIXTURES	138FIXTURES	139FIXTURES		FIXTURES	142FIXTURES	144FIXTURES	FURNITURE 146FIXTURES	FURNITURE 147FIXTURES	TURE	196LUNCHEON)	197PRESIDENT)	232WINDOWS CURTAINS
Asset No	106	107	108	135	136	137	138	139	140	141	142	144	146	147	148	39€	197	232

(D) - Asset disposed

Current Year Deduction	14.	22.	30.	16.	9	300.	15.	123,	49.	37.	0	•0	127.	696		0.	0	0.
Current Sec 179							•		•		•••		•	Ö		-	•	
Accumulated Depreciation	135.	189.	266.	136.	46.	2131.	67.	271.	109.	21.				199356.		.066	13279.	667.
Basis For Depreciation	156.	243.	342.	175.	.89	2880	118.	700.	280.	150.			110.	201497.		.066	13279.	667.
Reduction in Basis				-	.89		119.	700.	280.		500.	69	111.	5348.				
Bus % Excl	•	·······								···········							·	
Unadjusted Cost Or Basis	156.	243.	342.	175.	136.	2880.	237.	1400.	560.	150.	500.	.69	221.	206845.		.066	13279.	667.
No o	17	17	17	17	17	11	17	17	17	17	17	17	19¢			17	17	17
Life	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	5.00	7.00			5.00	2.00	5.00
Method	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB		•	200DB	200DB	200DB
Date Acquired	1111005200DB7.0	073106200DB7.0	073106200DB7.0	122606200DB7.00	012408200DB7.0	012407200DB7.0	012609200DB7.0	071709200DB7	081009200DB7.00	072210200DB7.00	010711200DB7.00	0525112000B5.00	041112200DB7.00			111599200DB5.00	111699200DB5.00	121599
Description	TV STAND	280FLOOR LAMP	2812 FLOOR LAMP	282FLOOR LAMP	307FLOOR LAMP	313AIR CONDITIONER	336FLOOR LAMP		344DOOR	374OFFICE CHAIR	375FLOOR LAMPS	380paper shredder	FFICE LAMP	<u>z</u>]	MACHINERY & EQUIPMENT		VIDEO EQUIPMENT 66[PROJECTOR]	72(D)C.T.F. EQUIPMENT 21599200DB5.0
Asset No	233TV	280	281	282	307	313	336	343	344	374	375	380	389			65	99	72

128102 05-01-11

(D) · Asset disposed

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

Asset No	Description	Date Acquired	Method	Life	S C	Unadjusted Cost Or Basis	Bus % Excl	* Reduction in Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
201	HEADSET, TRANSMITTER &	HEADB032405200DB5.0	200DB	2.00	17	214.			214.	214.		0
202	202TRANSCRIPTION SYSTE0 42 80 52 00 DB5.0	042805	200DB	5.00	17	413.			413.	413.		0
204	PMENT NT)	073004200DB5.0	200DB	5.00	17	750.		375.	375.	375.		0
207	,	112904200DB5.0	200DB	5.00	2.1	399.		200.	199.	199.		0
208	COMPOLER	121604200DB5.0	200DB	5.00	17	1840		920.	920	920.		0
205	COMPUT	121604200DB5.0	200DB	5.00	2.1	1840.		920.	920	920.		0
210	BACKUP DKIVE (FOK 210SERVER)	122004200DB5	200DB	2.00	17	379.		190.	189.	189.		0
21]	211LASER COLOR PRINTER010405200DB5.0	010405	200DB	5.00	11	536.	- 		536.	536.		0
212	212LASER COLOR PRINTER012605200DB5.0	012605	200DB	2.00	17	649.	_ 		649.	649		0
21!	215(COMPUTER)	032205200DB5.0	200DB	5.00	1.7	86.			98	86.		0,
222	COMPUTER NETWORK 222CARD	052405200DB5.0	200DB	2.00	17	97.			97.	. 76		0
22.	223EPSON SCANNER	052705200085.0	200DB	5.00	17	214.			214.	214.		0
22	PRINTER (MANAGING 224DIRECTOR)	053105200DB5.0	200DB	5.00	17	202			202.	202.		0
234	234TRANSCRIBER	072505200DB5.0	200DB	5.00	£ #	269.			269.	269.		*0
2364	64 CORDLESS PHONE	120905200DB5.0	200DB	2.00	17	359.		•	359.	359.		0
23.	237DS360 DISC SHREDDER032006200DB5	032006	200DB	5.00	17	130.			130	130.		Ó
23(HAWKING BROADBAND 238BOOSTER	092105200DB5.C	200DB	5.00	17	85.	— 		85.	85.		0
24(240computer-imac	082205200085.0	200DB	5.00	17	1453.			1453.	1453.		0

(D) · Asset disposed

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29, 85, 12 ¢ O 0 0 0 39 Current Year Deduction Current Sec 179 163, 130. 208. 364. 301. 711, 320, 74. 2716. 634, 175, 194, 469, 1754 1397 4777 Accumulated Depreciation 498 4777 163 130 208 364 301 711 320 74 2716 1754 1482 673 186 206 Basis For Depreciation * Reduction In Basis Bus % Excl 208. 364. 711. 130, 301, 673, 186. 206. 498, 163, 320 74 2716. 4777 1754 1482 Unadjusted Cost Or Basis SE SE 17 00. 050906200DB5.00 060106200DB5.00 251COMPUTER FLASH CARD092105200DB5.00 101905200085.00 264bravo II DISC PUBL |0228|06|200DB|5.00 092706200DB5.00 01206200DB5.00 22606200DB5.00 01/1807/200DE5.00 10/13/05/2000B/5.00 022706200DB5.00 03|08|06|200DB|5.00 03/16/06/2000 BB . 00 04|06|06|200DB|5.00 062606200DB5.00 Ļ 02506200DB5 Method Date Acquired ISK COPIER-PRIMERA 267COMPUTER EQUIPMENT PRINTER (MAGICOLOR SACKUP HARD DRIVES EQUIPMENT RECORDER (OLYMPUS (PHOTO PRINTER (BROTHER MONITOR (LCD 19" 244LAPTOP ADAPTER 263PLAZMA TV 42" Description 245TRANSCRIBER MEMORY CARD 248HP-5250DNT) TARD DRIVE 269MAC/BACKUP HARD DRIVE 249 (COMPUTER) 250bs2200XLP) 270|(COMPUTER) COMPUTER 243STORAGE) 241|[SERVER] 268|(SERVER) 2712550) 247GEM) Asset No

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

152,

161

16.

262.

278

278

161

022707200DB5.00

273belkin/Internet

272USB DRIVER

012907200DB5.00

Description	Date Acquired	Method	Life	No No	Unadjusted Cost Or Basis	Bus % Excl	Reduction in Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
274MONITOR	031907200DB5.00	200DB	2.00	17	307.			307.	289.		18.
275BACKUP/BATTERY	0518072000B5.00	200DB	5.00	2	87.			87	82.		ę,
2832 DIGITAL RECORDERS092706200DB5.00	092706	200DB	2.00	17	633.			633.	597		36.
284NESPRESSO MACHINE	122606200DB5.00	200DB	5.00	17	377.			377.	355.		22.
285PHONE (PANASONIC)	012907200DB5.00	200DB	2.00	17	304.	++	~ ~~	304.	286.	•	18.
KGROU	030507	200DB	5.00	2	161.			161.	152.		6
\sim	101007200DB5.00	200DB	2.00	17	527.			527.	445.		.09
CELLULAR PHONE 296(PRESIDENT)	111907200085.00	200DB	5.00	<i>Ł</i> [420.			420.	355.		47.
LAPTOP 297COMPUTER-ENP668	121107200DB5.00	200DB	2.00	17	1416.			1416.	1195.		161.
298HP PRINTER	121907200085.00	200DB	5.00	7.7	322.			322.	272.		36.
299LAPTOP COMPUTER	122607200DB5.00	200DB	2.00	17	1195.			1195.	1008.		136.
rer Equip	0409082000B5.00	200DE	2.00	<u></u>	1188.		594.	594.	472.		65.
DEO & I	042108200DB5.00	200DB	2.00	17	4396.		2198.	2198.	1747.		241.
CELLULAR PHONE (IT 302DIRECTOR)	061608200DB5.00	200DB	5.00	17	125.		63.	62.	49.		7.
ORIVE	121007200DB5.00	200DB	2.00	17	281.			281.	237.		32.
BACKUP DRIVE (FOR 304SERVER)	121407200DB5.00	200DB	5.00	£	380.			380.	320.		4
3052 DIGITAL RECORDERS121407200DB5.00	5121407	200DB	2.00	17	539.			539.	455.		61.
306LAPTOP COMPUTER	020708200DB5	200DB	5.00	17	1195.		598.	597.	488.		67.

(D) · Asset disposed

892. 446. 446. 318. 1202. 601. 601. 428.
. 601. 601.
32. 16. 11.
737. 369. 368. 262.
431. 431. 307.
150. 75. 75. 53.
502. 251. 251. 178.
360. 180. 180. 128.
22. 22. 15.
20. 10. 7.
40. 39. 20.
34.
92. 5646. 5646. 2936.
63. 82. 81. 42.
42. 71. 37.
97. 149. 148. 77.
54. 77. 40.
1151. 576. 575. 299.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

Current Year Deduction	86	385	31.	7	35.	999	26.	10.	15.	ភ	24.	*66	39.	42.	21.	19,	•0	35.
Current Sec 179									-									
Accumulated Depreciation	264.	158.	84.	20.	95.	178.	71.	29.	42.	14.	65.	268.	105.	114.	56.	52.		22.
Basis For Depreciation	208	303.	162.	86	183.	342.	136.	20.0	80.	27.	124.	516,	202.	219.	108.	66		110.
Reduction In Basis	508.	303.	163.	30	184.	343.	137.	55.	81.	28.	124.	517.	203.	220.	108.	.66	1657.	
Bus % Excl																		
Unadjusted Cost Or Basis	1016.	606.	325.	76.	367.	685.	273.	110.	161.	55.	248.	1033.	405.	439.	216.	198.	1657.	110.
No	17	<u>~</u>	17	2.1	17	}~	17	17	17	£1	17	17	17	17	17	17	17	17
Lıfe	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	2.00	5.00	5.00	5.00	2.00	5.00	2.00	5.00
Method	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB
Date Acquired	031110200DB5.0	121409200DB5.0	121609200DB5.0	1009092000B5.0	012210200DB5.0	102009200DB5.0	092209200DB5.0	111009	3052410	052410200DB5.0	071709	012210200DB5.0	051210200DB5.0	091709200DB5.0	050410200DB5.0	052410200DB5.0	012111200DB5.0	081910200DB5.0
Description		354BACKUP	MONITOR	WINELESS ADAFTER 356FOR PC	357psl ROUTER	22286)	#22232)	360MONITOR (CK #22323)111009200DB5.0	361SCANNER EXPRESS/USB052410200DB5.0	362SERVER DATA BACKUP	363PRINTER (CK #22112)071709200DB5.0	COMPUTER EQUIPMENT 364(CK #22444)	365SMALL NOTE BOOK	니	PRINTER (KODAK 367ESP-7250)	COLOR 368printer/director	52 IPAD	377HEADSET/PRESIDENT
Asset No	353	354	3552	356	357	358	359	360	361	362	363	364	365	366	367	368	3762	377

(D) - Asset disposed

Asset No	Description	Date Acquired	Method	Life	No	Unadjusted Cost Or Basis	Bus % Excl	Reduction in Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
378	<u> </u>	122010	122010200B5.	2.00	17	137.	**	···	137.	27.		• † †
375	379DIRECTOR	070610	070610200DB5	5.00	17	223.	**********		223.	45.		71.
381	S81PHONE/PRESIDENT		121410200DB5.	2.00	17	338.	**		338.	.89		108.
382	IELEFHONE/CE ROOM	090210	0902102000B5.0	2.00	17	1037.			1037.	207.		332.
385	FOOT FEDAL FOR MAC 383COMPUTER	081910	081910200DB5.C	5.00	17	179.			179.	36.		57.
384	384PRINTER/PRESIDENT	062411	062411200DB5	5.00	17	487.		487.				0.
385	385PRINTER	022411	022411200DB5	5.00	17	507.		507.				0
3862	2 PRINTERS	012511	012511200DB5	5.00	17	1093.		1093.	**********			0.
388	388VIDEO CAMERA	041511	041511200DB5.	2.00	17	875.		875.				0
390	Z DIGITAL RECORDERS (EXECUTIVE SECRETA	092811	092811200DB5	5.00	19B	143.		143.				143.
3914	4 CORDLESS PHONE	122011	122011200DB5.	5.00	19B	107.		107.				107.
392		010812	010812200DB5.0	5.00	19B	107.		54.	53,			65.
393		012512	012512200DB5.	2.00	19B	276.		138.	138.			166.
394		072611	072611200DB5.0	5.00	19B	986.		986.				986*
395	COMPUTER EQUIPMENT (PRESIDENT)	072611	072611200DB5.C	2.00	19B	2354.	**	2354.	***			2354.
3963	a reods	082511	082511200DB5	5.00	19B	2053.		2053.	1+11+1+++++			2053.
397	397COMPUTER SERVER	101811	1200DB5.	2.00	19B	5690.		5690.				5690
368	398IPAD	122011	122011200DB5	00.9	19B	632.		632.				632.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

	•	•	•	•	•					•			•	•	- -	•		
Current Year Deduction	385,	97.	62.	149.	52.	232:	497.	17733.		Ö	0		Ó	Ó	o	0	0	0
Current Sec 179		*********					_ 	o			0							
Accumulated Depreciation							-	78220.			0		300.	604.	72.	72.	117.	280.
Basis For Depreciation		80	51.	•••••	43.	193.	414.	87982.		1998235.	1998235.		300	604	73.	72.	117.	280.
Reduction in Basis	385.	8	52.	149.	43.	193.	414.	46641.			0	,		259.	32.	3	50.	120.
Bus % Excl	***	********	•				····	-111111				*********		************	-			***************************************
Unadjusted Cost Or Basis	385.	161.	103.	149.	86.	386.	828.	134623.		1998235.	1998235.		300	863.	105.	103.	167.	400.
No	19B	19B	19B	19B	19B	19B	19B	*******		***************************************			17	16	16	91	16	16
Life	2.00	5.00	2.00	5.00	5.00	5.00	0						5.00	3.00	3.00	3.00	3.00	3.00
Method	200DB	200DB	200DB	200DB	200DB	200DB	200DB			<u>ر</u> ع			200DB	J.			-	
Date Acquired	1227/11200DB5.0	013012200DB5.0	040912200DB5.0	082511200DB5.0	042512200DB5.0	013012	051012200DB5.0			7660E90			012902	1211102SL	121102SL	121102SL	121102SL	012703SL
Description	PRINTERS	ROTHER)	HAKU DKIVE 401(COMPUTER)	ONITOR	Hacotaire	408SYSTEM (PHOTOGRAPHY013012200DB5.0	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$	MACHINERY & EQUIPM	LAND	1	* 990 PAGE 10 TOTAL	MANAGEMENT AND	COMPUTER SOFTWARE 134[MICROSOFT WINDOWS]012902200DB5.0	COMPUTER SOFTWARE	SOFTWARE	SOFTWARE EE]	SOFTWARE .0]	COMPUTER SOFTWARE 160[ANTI-VIRUS]
Asset No	3992	400	401	402	403	408	409			59			134	156	157	158	159	160

(D) - Asset disposed

Current Year Deduction	0	0	0	o	0	0.	ō	0	0	0	0	0	0	Ö	0	0	0	0.	
Current Sec 179																			
Accumulated Depreciation	303.	300.	357.	06	309	252.	. 65	112.	.86	188.	147.	125.	333.	18.	24.	30.	64.	40.	1
Basis For Depreciation	303.	300.	356.	.06	309	252.	. 69	112.	98.	188.	147.	125.	333.	18	24.	30.	64.	40.	
Reduction In Basis	130.	129.	153.	.06	132.	252.	.09	113.	.66	188.	148.	125.	333.	19.	25.				
Bus % Excl				**********							***			`					
Unadjusted Cost Or Basis	433.	429.	509.	180.	441.	504.	119.	225.	197.	376.	295.	250.	.999	37.	49.	30.	64.	40.	į
No	16	16	16	16	16	16	16	16	16	16	16	16	16	91	16	16	16	16	
Life	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	
Method	SI	SI	SI	SI	03SL	SL	$_{ m SI}$	SI	$_{ m SI}$	SI	$_{ m SI}$	SL	4SL	SL	$_{ m SI}$	SI	$_{ m SL}$	SI	
Date Acquired	022603SL	022603SL	X042803SL	051603SL	042103	082803SL	082803SL	092903EL	102903SL	122303SL	012904SL	012904SL	051804	073004SL	112904	PHONE)012605SL	032205SL	032405EL	
Description	COMPUTER SOFTWARE 164[QUICKBOOKS]	165[QUICKBOOKS]		168[ADOBE]	~	172[ADOBE]	173COMPUTER SOFTWARE	175[ANTI-VIRUS]	176[ANTI-VIRUS]	178COMPUTER SOFTWARE	180COMPUTER SOFTWARE	182COMPUTER SOFTWARE	184[SONICWALL]		OMPOTER (WISE-FTF	213(PRESIDENT'S PHONE)	214AUTORUN SOFTWARE	216COMPUTER SOFTWARE	
Asset	164	165	167	168	169	172	173	175	176	178	180	182	184	205	206	213	214	216	128102

(D) - Asset disposed

Asset No	Description	Date Acquired	Method	Life	No	Unadjusted Cost Or Basis	Bus % Excl	Reduction in Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
217	217ACROBAT 7.0 UPGRADE032405	032405	SL	3.00	16	149.			149.	149.		0
218	218ACROBAT 7.0	042805SL		3.00	91	138.			138.	138.		Ó
219	219COMPUTER SOFTWARE	042805SL		3.00	16	17.	+		17.	17.		0
225	225COMPUTER SOFTWARE	053105gr		3.00	16	129.	••••••••		129.	126.		0
227		062805SL	•	3.00	16	40.			40.	40.		0
228	Ω	062805SL		3.00	76	303.			303.	303,		0:
252	COMPUTER SOFTWARE 252LOGMEIN	071405SL		3.00	16	100.	•		100.	100.		0
253	253COMPUTER SOFTWARE	110205EL		3.00	36	162.	•		162.	162.		0
254		11 1605SL		3.00	16	141.	••		141.	141.		0
255		121505EL		3.00	91	80.			80,	80.		0
256	COMPUTER SOFTWARE 256UPGRADING EUDORA	012606SL		3.00	16	40.			40.	40.		0
257	F-4	012606SL		3.00	16	30.	 		30*	30.		0
258		021706SL		3.00	16	32.		·	32.	32.		0
259	₽4	021706SL		3.00	36	159.			159.	159.		0
260		030606SL	- 	3.00	16	29.	+		29.	29.		0
261	261GOOGLE ART	041706SL		3.00	36	30.	 		30.	30.		0
262	COMPUTER 262SOFTWARE-VISUALIZAT092705SL	092705		3.00	16	20.			20.	20.		0
276	276EXPRESSION WEB	052307SL		3.00	16	96.	·······		96	96.		0.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

Reduction In Basis For Basis For Basis 19:	
	0 16 193 0 16 672
	00 16 40.
20.	
25.	2
.86	
449	00 16 897. 449.
20	00 16 39. 20
30	00 16 60. 30
299	00 16 598. 299
100	00 16 199. 10
38	3. 3.
35	
24	
55	
10	00 16 20. 10
195.	00 16 390. 195.
38.	74 74 38

Ja C	12.	10.	167.	450.	100.	:909	85,	36.	78.	
Current Year Deduction		•	16	4	10)9	~	1686	30978	
Current Sec 179			,,,					0	0	
Accumulated Deprectation	17.	16.	42.					8120.	392302.	
Basis For Depreciation	35.	30.	500.				72.	8960	2720619.	
Reduction In Basis	35.	30.		450.	100.	.909	73.	5218.	57207.	
Bus % Excl	,				•••				***	
Unadjusted Cost Or Basis	70.	· 09	500.	450.	100.	*909	145.	14178.	2777826.	
Solu	16	9	16	91	16	9	16			
Life	3.00	3.00	3.00	3.00	3.00	3.00	3.00			
Method	SL	SL	$_{ m ST}$	TS	$_{ m SL}$	$_{ m SI}$	$_{ m SI}$			
Date Acquired	021810SL	121809SL	041311SL	072611	092811SL	101811SL	012512SL			
Description	"LOGMEIN" (CK 372#22477)	373#22393)	MICKOSOFT OFFICE	404QUICKBOOKS SOFTWARE072611SL	405MAC SOFTWARE	406SOFTWARE	407SOFTWARE	ANI	* GRAND TOTAL 990 PAGE 10 DEPR	
Asset No	372	373	387	404	405	406	407			

(D) - Asset disposed