

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



## Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0052

Treated as a Private Foundation

Note The foundation may be able to use a copy of this return to satisfy state reporting requirements 12/01, 2011, and ending 11/30.2012 For calendar year 2011 or tax year beginning Name of foundation A Employer identification number 20-0429029 EMMETT FOUNDATION Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) C/O HOLTHOUSE CARLIN & VAN TRIGT, LLP. (818) 849-3140 15760 VENTURA BLVD. 1700 City or town, state, and ZIP code If exemption application is pending, check here ENCINO, CA 91436 Initial return Initial return of a former public charity G Check all that apply D 1 Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach Address change Name change | X | Section 501(c)(3) exempt private foundation H Check type of organization E If private foundation status was terminate Other taxable private foundation Section 4947(a)(1) nonexempt charitable trust under section 507(b)(1)(A), check here . J Accounting method | X Cash Accrual Fair market value of all assets at end F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here . of year (from Part II, col (c), line Other (specify) 6,675,550. (Part I, column (d) must be on cash basis) *16)* ▶ \$ Part I Analysis of Revenue and Expenses (The (d) Disbursements (a) Revenue and (c) Adjusted net (b) Net investment for charitable total of amounts in columns (b), (c), and (d) expenses per ıncome ıncome may not necessarily equal the amounts in purposes books column (a) (see instructions) ) (cash basis only) 248,183 Contributions, gifts, grants, etc., received (attach schedule) if the foundation is not required to attach Sch B 2 Check 28. 28. 28. ATCH 3 Interest on savings and temporary cash investments 16,644 16,644. 16,644. Dividends and interest from securities ATCH 5a Gross rents . . . . . . . . . . . . . . . . . . Net rental income or (loss) -347,426Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 157,401 assets on line 6a Capital gain net income (from Part IV, line 2) . Net short-term capital gair Income modifications 10 a Gross sales less returns and allowances ळ b Less Costro goods sold cost Gross profit or (loss) (attach scheoule Ç 11 Other income (attach schedule) -82,571. 16,672. 16,672. Total. Add lines (through-1) 13 14 Other employee salaries and wages Expenses 15 Pension plans, employee benefits 16a Legal fees (attach schedule) 5,866. 5,866. b Accounting fees (attach schedule)ATCH 3 12, c Other professional fees (attach schedule) . . . 60 60 18 Taxes (attach schedule) (see instructions) . . . . . . . . . Depreciation (attach schedule) and depletion. 20 **2**; 21 Travel, conferences, and meetings . . . . . 22 Printing and publications . . . . . rating, 30 <del>30</del>. Other expenses (attach schedule) ATCH 5 23 24 Total operating and administrative expenses. Oper 5,956 5,956. Add lines 13 through 23 . . . . . . . . . . 437,475. 437,475 č 25 Contributions, gifts, grants paid . . . . . . 443,431. 443,431 C/126 Total expenses and disbursements Add lines 24 and 25 Subtract line 26 from line 12 -526,002 a Excess of revenue over expenses and disbursements 16,672. b Net investment income (if negative, enter -0-) 16,672. c Adjusted net income (if negative, enter -0-).

For Paperwork Reduction Act Notice, see instructions.

JSA \*\* ATCH 4

Form 990-PF (2011)

Ъ	art II	Ralanco Shoots	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End	d of year
_	aitii	Datance Streets	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bear	Ing			
	2	Savings and temporary	cash investments	141,983.	59,857	. 59,857.
	3	Accounts receivable ▶				
		Less allowance for dou	btful accounts ▶			
	4	Pledges receivable ▶_				
		Less allowance for dou	btful accounts ▶			
	5					
	6	Receivables due from	officers, directors, trustees, and other			
		disqualified persons (at	tach schedule) (see instructions)	L		
	7	Other notes and loans i	receivable (attach schedule)			•
			btful accounts ▶			
,,	8		se			
ssets	9					
\ss	-		e government obligations (attach schedule)			
1			stock (attach schedule) ATCH 6	2,136,525.	1,692,649	6,615,693.
			e bonds (attach schedule)	, ,	, , , , , , , , , , , , , , , , , , , ,	
	11	Investments - corporate Investments - land, building and equipment basis Less accumulated deprecia (attach schedule)	s, <b>&gt;</b>			
	12 13 14	Investments - other (atta Land, buildings, and equipment basis Less accumulated deprecia				
	15	(attach schedule)				<del></del>
	16		completed by all filers - see the			
	10	•		2,278,508.	1.752.506	6,675,550.
_	17		accrued expenses	2,210,000.	17,02,000	0,0,0,000.
			l l			
	18					
Liabilities	19		· · · · · · · · · · · · · · · · · · ·		···	
를	20	•	ors, trustees, and other disqualified persons	<del></del>		
Lia	21		otes payable (attach schedule)			-
	22	Other liabilities (describ	e ▶)		•	=
	23	Total liabilities (add line	es 17 through 22)			
_	23					Ä
S	24	and complete lines	low SFAS 117, check here 24 through 26 and lines 30 and 31.			
lances	25					7
		Permanently restricted				7
a E	20	· · · · · · · · · · · · · · · · · · ·			<del> </del>	-
٦			not follow SFAS 117, plete lines 27 through 31. ► X			
<u>_</u>	27		cipal, or current funds	2,899,842.	2,899,842	
S	28			2,000,0121	2,000,012	Ä
set	29	• • •	r land, bldg , and equipment fund ulated income, endowment, or other funds	-621,334.	-1,147,336	=
Net Assets or Fund Ba	30	-	d balances (see instructions)	2,278,508.	1,752,506	
et	31		net assets/fund balances (see	2,210,300.	1,732,300	-
_			· ·	2,278,508.	1,752,506	1
į.	art I	Analysis of Ch			1,732,500	
_			palances at beginning of year - Part I		must agree with	_
1					-   .	2,278,508.
^			. 07			
		r amount from Part I,	0 (dem)		١ ,	<del></del>
		1 4 0 4 0				1 5 5 5 5
			ling 2 (thereign) b			
		reases not included in		no El Dort II antigen (%)	<u>5</u>	1 750 500
<u>6</u>	rota	Thet assets of fund b	alances at end of year (line 4 minus li	(ile 5) - Part II, column (b)	, line 30 6	1,752,506.

	_
ace	.5

Form 990-PF (2011)	EMMETT FOUNDATION			20-04290	29 Page 3
	and Losses for Tax on Inv	estment Income			
	d describe the kind(s) of property sold (	· -	(b) How acquired P-Purchase	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a SEE PART IV SCHEI			D-Donation		
b					
С					
d			-		
<u>e</u>		(a) Cook or other have			<u></u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) minu	
a				<del></del>	
b					
С					···
d					
е		I			
Complete only for assets	showing gain in column (h) and owne	d by the foundation on 12/31/69	(1)	Gains (Col (h) g	aın mınus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		(k), but not less t Losses (from co	han -0-) <b>or</b>
a					
b					
c					
d			ļ		
е		<u>L</u>	<del> </del>		
2 Capital gain net income or		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2	<del>-</del>	347,426.
	or (loss) as defined in sections 12				
_	t I, line 8, column (c) (see inst				
			3		0
	· · · · · · · · · · · · · · · · · · ·	duced Tax on Net Investment I e section 4940(a) tax on net invest		<u> </u>	
If "Yes," the foundation does i	the section 4942 tax on the distrib not qualify under section 4940(e)		•		Yes X No
	ount in each column for each year	, see the instructions before making	any entri		
(a) Base penod years	(b) Adjusted qualifying distributions	(c)  Net value of nonchantable-use assets		(d) Distribution ra	tio
Calendar year (or tax year beginning in)	2,585,440.			(col (b) divided by	
2010	985,730.	3,285,531. 4,343,029.	<del> </del>		0.786917 0.226968
2008	2,994,165.	3,769,372.	<del></del>		0.794341
2007	860,787.	6,419,670.			0.134086
2006	338,438.	5,486,008.			0.061691
2 Total of line 1, column (d)			2		2.004003
	for the 5-year base period - divide				
<u> </u>	dation has been in existence if less		3		0.400801
•		, , , , , , , , , , , , , , , , , , , ,			
4 Enter the net value of non-	charitable-use assets for 2011 fro	m Part X, line 5	4	6,	317,784.
5 Multiply line 4 by line 3			5	2,	532,174.
6 Enter 1% of net investmen	nt income (1% of Part I, line 27b)		6	· · · · -	167.
7 Add lines 5 and 6			7	2,	532,341.
8 Enter qualifying distribution	no from Dort VIII line 4		8		443,431.
If line 8 is equal to or gre Part VI instructions	eater than line 7, check the box	n Part VI, line 1b, and complete t	hat part i	using a 1% tax	rate See the

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	nstru	ctions	;)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1 )			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			167.
	here ► X and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)2			
3	Add lines 1 and 2			167.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0
5	Tax based on investment income Subtract line 4 from line 3 If zero or less, enter -0-			167.
6	Credits/Payments			
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 4,006.			
	Exempt foreign organizations - tax withheld at source 6b			
	Tax paid with application for extension of time to file (Form 8868) 6c			
	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d		4,(	006.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.		3,8	339.
11	Enter the amount of line 10 to be Credited to 2012 estimated tax ▶ 3,839. Refunded ▶ 11		•	
Par	t VII-A Statements Regarding Activities	-	-	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate		Yes	No
	or intervene in any political campaign?	1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the			
	instructions for definition)?	1 b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities			
С	Did the foundation file Form 1120-POL for this year?	1 c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation $\blacktriangleright$ \$(2) On foundation managers $\blacktriangleright$ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	_ 3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	_4a		Х
	If "Yes," has it filed a tax return on Form 990-T for this year?	_4b		Х
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
	If "Yes," attach the statement required by General Instruction T			1
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			1
	By language in the governing instrument, or	ļ		1
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that			1
	conflict with the state law remain in the governing instrument?	6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			1
	CA,	<u> </u>		1
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			1
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8 b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete			1
	Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			1
	and addresses	10		Х
			N DE	

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? . . . . . . . b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011? .

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise

Form 990-PF (2011)

Χ

Х

2b

3 b

				<u> </u>			_
F	on	m	9	90.	-PF	(201	1)

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

°ag	е	7

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "N	ONE."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
otal number of others receiving over \$50,000 for professional services	<u> </u>
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number organizations and other beneficianes served, conferences convened, research papers produced, etc.	of Expenses
1 N/A, THE FOUNDATION MAKES GRANTS TO VARIOUS NON-PROFIT	
ORGANIZATIONS, FOCUSING ON THOSE THAT BENEFIT CONSERVATION,	
EDUCATION, AND PUBLIC HEALTH.	
2	
***************************************	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
	<u> </u>
All other program-related investments. See instructions	
3 NONE	
otal. Add lines 1 through 3	

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	gn foundat	ions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	6,367,952.
b	Average of monthly cash balances	1b	46,042.
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	6,413,994.
е	Total (add lines 1a, b, and c)  Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	6,413,994.
4	Subtract line 2 from line 1d  Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
		4	96,210.
5	Instructions)  Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	6,317,784.
6	Minimum investment return. Enter 5% of line 5	6	315,889.
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ and do not complete this process.	part )	· · · · · · · · · · · · · · · · · · ·
1	Minimum investment return from Part X, line 6	1	315,889.
2a	Tax on investment income for 2011 from Part VI, line 5 2a 167.		
b	Income tax for 2011 (This does not include the tax from Part VI) 2b		
	Add lines 2a and 2b	2c	167.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	315,722.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	315,722.
6		6	
7	Deduction from distributable amount (see instructions)  Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	315,722.
Pa	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
' a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26.	1a	443,431.
b		1b	443,431.
2	Program-related investments - total from Part IX-B  Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	10	
2		2	
3	purposes Amounts set aside for specific charitable projects that satisfy the		<del> </del>
э a		3a	
		3b	
ь 4	Cash distribution test (attach the required schedule)  Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	443,431.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	•	443,431.
J		_	167
6	Enter 1% of Part I, line 27b (see instructions)  Adjusted qualifying distributions. Subtract line 5 from line 4	6	167. 443,264.
0	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when call	L - I.	
	qualifies for the section 4940(e) reduction of tax in those years	culating wr	lettier the foundation

Form **990-PF** (2011)

	990-PF (2011)				Page 9
Pa	rt XIII Undistributed Income (see instru	ctions)			
1	Distributable amount for 2011 from Part XI,	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
	line 7				315,722.
2	Undistributed income, if any, as of the end of 2011				
	Enter amount for 2010 only				
	Total for prior years 20 09 20 08 20 07				
3	Excess distributions carryover, if any, to 2011				
а	From 2006				
	From 2007 471,180.				
	From 2008 2,807,088.				
	From 2009 770,525.				
	From 2010 2,422,189.				
f	Total of lines 3a through e	6,470,982.			
4	Qualifying distributions for 2011 from Part XII, line 4 > \$ 443,431.				
а	Applied to 2010, but not more than line 2a				
b	Applied to undistributed income of prior years (Election required - see instructions)				
С	Treated as distributions out of corpus (Election required - see instructions)				
d	Applied to 2011 distributable amount			<del></del>	315,722.
	Remaining amount distributed out of corpus	127,709.	· · · · · · · · · · · · · · · · · · ·		
5	Excess distributions carryover applied to 2011	•			
6	(If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	6,598,691.			
b	Prior years' undistributed income Subtract				
С	Inne 4b from line 2b  Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
е	amount - see instructions.  Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount - see instructions				
f	Undistributed income for 2011 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2012				
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8	Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2012.				
	Subtract lines 7 and 8 from line 6a	6,598,691.			
10	Analysis of line 9				
а	Excess from 2007				
b	Excess from 2008 2,807,088.				1
С	• • • • • • • • • • • • • • • • • • • •				
	Excess from 2010 2,422,189.				
e	Excess from 2011 127,709.	<u> </u>		<del>-</del>	<u> </u>

Pa	rt XIV Private Oper	rating Foundations	see instructions an	d Part VII-A, question	on 9)	NOT APPLICABLE
1 a	If the foundation has	received a ruling or d	etermination letter tha	at it is a private ope	erating	
	foundation, and the rulin	g is effective for 2011, e	nter the date of the ruling	9 <b></b>	. ▶	
b	Check box to indicate wh					(3) or 4942(j)(5)
_		Tax year		Prior 3 years	<u></u>	<u> </u>
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
	I or the minimum investment		(5) 25 15	(0) 2000	(4/2000	
	return from Part X for each					
	year listed					
b	85% of line 2a				<del>                                     </del>	<del> </del>
С	Qualifying distributions from Part					
	XII, line 4 for each year listed		· · · · · · · · · · · · · · · · · · ·			
đ	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made					
	directly for active conduct of					
	exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the				_	
_	alternative test relied upon					
а	"Assets" alternative test - enter					
	<ol> <li>Value of all assets</li> <li>Value of assets qualifying</li> </ol>			-	<del> </del>	
	under section					
b	4942(j)(3)(B)(i) "Endowment" alternative test-				<del>.   .</del>	
	enter 2/3 of minimum invest-					
	ment return shown in Part X,					
	line 6 for each year listed	-				
С	"Support" alternative test - enter					
	(1) Total support other than gross investment income					
	(interest, dividends, rents,					
	payments on securities loans (section 512(a)(5)),					
	or royalties)					
	(2) Support from general public and 5 or more					
	exempt organizations as					
	provided in section 4942 (j)(3)(B)(iii)					
	(3) Largest amount of sup-					
	port from an exempt organization					
	(4) Gross investment income					
Pa		ary Information (C	omplete this part	only if the found	dation had \$5,000	or more in assets
		during the year - se				
1	Information Regardin		<del></del>			
·a	List any managers of	•		re than 2% of the tot	al contributions receiv	red by the foundation
_					See section 507(d)(2))	
	רא או לא בי אות ב	ישים				
_	DAN A. EMME		own 10% or more o	of the stock of a corr	porotion (or on oqually	Llorge pertian of the
U	ownership of a partne					riarge portion or the
	Ownership or a partite	omp or other entity, o	willon the roundatio	ii iidd a 1070 o'i gicalc	i interest	
	/-					
_	N/A	- 6 - 4 15 - 4 - 6 - 1	0.0.1			
2	Information Regardin					
	Check here ► X If t	he foundation only i	makes contributions	to preselected char	ritable organizations a	and does not accept
				ants, etc (see instruc	ctions) to individuals o	r organizations under
	other conditions, comp					
а	The name, address, a	nd telephone number	of the person to who	m applications should	be addressed	
	ATTACHME	NT 8				
b	The form in which app	lications should be su	bmitted and informat	ion and materials they	y should include	
	N/A					
	Any submission deadl	ines				· · · · · · · · · · · · · · · · · · ·
_	,					
	N/A					
	Any restrictions or I	mitations on awards	such as hy decar	anhical areas chorit	able fields kinds of	institutions or other
u	factors	mitations on awalus	, such as by geogr	apriicai aieas, ciidill	avic licius, Killus Of	manunona, or other
10.4	N/A		<del></del>			
JSA	190 1 000					Form <b>990-PF</b> (2011)

Page 11

Form 990-PF (2011) Part XV Supplementary Information				Page 1
3 Grants and Contributions Paid Dur	ing the Year or App			<del></del>
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
ATTACHMENT 9				
			•	
Total	<del> </del>	<del></del>	▶ 3a	437,47
<b>b</b> Approved for future payment			:	
		1		
	<u> </u>			
Total			▶ 3t	

gross amounts unless otherwise indicated	Unrelate	ed business income	Excluded by s	section 512, 513, or 514	(e) Related or exempt
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income
rogram service revenue			- Lausion case	, <b>.</b>	(See instructions)
	<del></del>			-	
			<del></del>		·
		<del></del>	<del></del>		<del> </del>
			1	-	
					<del></del>
					<del></del>
Fees and contracts from government agencies					
lembership dues and assessments					
iterest on savings and temporary cash investments			14	28.	
ividends and interest from securities			14	16,644.	
et rental income or (loss) from real estate					
Debt-financed property					
Not debt-financed property					
et rental income or (loss) from personal property					
ther investment income					
ain or (loss) from sales of assets other than inventory	,		18	-347,426.	
let income or (loss) from special events					
cross profit or (loss) from sales of inventory					
other revenue a		· · · · · · · · · · · · · · · · · · ·	<del>                                     </del>	•	
			1		
	<b> </b>				
					·
	<b>-</b>		1 1		
				-330 754	
ubtotal Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e)				-330,754. 13	-330,75
oubtotal Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calc	culations )			13	-330,75
otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities	culations ) s to the Acc	omplishment of E	xempt Purpo	13	
oubtotal Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities e No Explain below how each activities	culations) s to the Acc	omplishment of E	xempt Purpo	ses of Part XVI-A contribu	ited importantly to
otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities	culations) s to the Acc	omplishment of E	xempt Purpo	ses of Part XVI-A contribu	ited importantly to
ubtotal Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities e No Explain below how each activity accomplishment of the foundation	culations) s to the Acc	omplishment of E	xempt Purpo	ses of Part XVI-A contribu	•
oubtotal Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities e No Explain below how each activities	culations) s to the Acc	omplishment of E	xempt Purpo	ses of Part XVI-A contribu	ited importantly to
ubtotal Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities e No Explain below how each activity accomplishment of the foundation	culations) s to the Acc	omplishment of E	xempt Purpo	ses of Part XVI-A contribu	ited importantly to
ubtotal Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities e No Explain below how each activity accomplishment of the foundation	culations) s to the Acc	omplishment of E	xempt Purpo	ses of Part XVI-A contribu	ited importantly to
ubtotal Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities e No Explain below how each activity accomplishment of the foundation	culations) s to the Acc	omplishment of E	xempt Purpo	ses of Part XVI-A contribu	ited importantly to
ubtotal Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities e No Explain below how each activity accomplishment of the foundation	culations) s to the Acc	omplishment of E	xempt Purpo	ses of Part XVI-A contribu	ited importantly to
ubtotal Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities e No Explain below how each activity accomplishment of the foundation	culations) s to the Acc	omplishment of E	xempt Purpo	ses of Part XVI-A contribu	ited importantly to
ubtotal Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities e No Explain below how each activity accomplishment of the foundation	culations) s to the Acc	omplishment of E	xempt Purpo	ses of Part XVI-A contribu	ited importantly to
ubtotal Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities e No Explain below how each activity accomplishment of the foundation	culations) s to the Acc	omplishment of E	xempt Purpo	ses of Part XVI-A contribu	ited importantly to
ubtotal Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities e No Explain below how each activity accomplishment of the foundation	culations) s to the Acc	omplishment of E	xempt Purpo	ses of Part XVI-A contribu	ited importantly to
ubtotal Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities e No Explain below how each activity accomplishment of the foundation	culations) s to the Acc	omplishment of E	xempt Purpo	ses of Part XVI-A contribu	ited importantly to
ubtotal Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities e No Explain below how each activity accomplishment of the foundation	culations) s to the Acc	omplishment of E	xempt Purpo	ses of Part XVI-A contribu	ited importantly to
ubtotal Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities e No Explain below how each activity accomplishment of the foundation	culations) s to the Acc	omplishment of E	xempt Purpo	ses of Part XVI-A contribu	ited importantly to
ubtotal Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities e No Explain below how each activity accomplishment of the foundation	culations) s to the Acc	omplishment of E	xempt Purpo	ses of Part XVI-A contribu	ited importantly to
ubtotal Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities e No Explain below how each activity accomplishment of the foundation	culations) s to the Acc	omplishment of E	xempt Purpo	ses of Part XVI-A contribu	ited importantly to
ubtotal Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities e No Explain below how each activity accomplishment of the foundation	culations) s to the Acc	omplishment of E	xempt Purpo	ses of Part XVI-A contribu	ited importantly to
ubtotal Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities e No Explain below how each activity accomplishment of the foundation	culations) s to the Acc	omplishment of E	xempt Purpo	ses of Part XVI-A contribu	ited importantly to
ubtotal Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities e No Explain below how each activity accomplishment of the foundation	culations) s to the Acc	omplishment of E	xempt Purpo	ses of Part XVI-A contribu	ited importantly to
ubtotal Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities e No Explain below how each activity accomplishment of the foundation	culations) s to the Acc	omplishment of E	xempt Purpo	ses of Part XVI-A contribu	ited importantly to
ubtotal Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities e No Explain below how each activity accomplishment of the foundation	culations) s to the Acc	omplishment of E	xempt Purpo	ses of Part XVI-A contribu	ited importantly to
ubtotal Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities e No Explain below how each activity accomplishment of the foundation	culations) s to the Acc	omplishment of E	xempt Purpo	ses of Part XVI-A contribu	ited importantly to
ubtotal Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities e No Explain below how each activity accomplishment of the foundation	culations) s to the Acc	omplishment of E	xempt Purpo	ses of Part XVI-A contribu	ited importantly to
ubtotal Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities e No Explain below how each activity accomplishment of the foundation	culations) s to the Acc	omplishment of E	xempt Purpo	ses of Part XVI-A contribu	ited importantly to
ubtotal Add columns (b), (d), and (e) otal Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activities e No Explain below how each activity accomplishment of the foundation	culations) s to the Acc	omplishment of E	xempt Purpo	ses of Part XVI-A contribu	ited importantly to

	Exempt Organ	nizations						
1 Did	the organization direct	tly or indirectly e	engage in any of the followi	ng with any	y other organization described		Yes	No
ın s	section 501(c) of the Co	ode (other than s	section 501(c)(3) organizatio	ns) or in se	ection 527, relating to political	l i		
org	anizations?							
a Tra	insfers from the reportir	ng foundation to	a noncharitable exempt orga	anization of				
(1)	Cash					1a(1)		Х
(2)	Other assets	. <b></b> .				1a(2)		Х
<b>b</b> Oth	ner transactions							
						1b(1)		X
(2)	Purchases of assets from	om a noncharital	ble exempt organization			1b(2)		X
(3)	Rental of facilities, equ	ipment, or other a	assets			1b(3)		X
(4) Reimbursement arrangements								Х
(5) Loans or loan guarantees								Х
(6) Performance of services or membership or fundraising solicitations								X
						1c		X
					Column (b) should always show			
					If the foundation received less of the goods, other assets, or s			
		1		1	cription of transfers, transactions, and shar			
(a) Line no	N/A	(c) Name of no	oncharitable exempt organization	N/A	inputori of transfers, transactions, and snar	ing arrai	igeme	nts
	N/A	<del> </del>		N/A				
				<del> </del>				
		<del>                                     </del>						
			<del></del>	<u> </u>			-	
			<del>, , , ,,</del>					
					.,,.,.,.,.,.,.,.,.			
		•	iliated with, or related to, o		, ,		_	_
des	scribed in section 501(c)	) of the Code (ot	her than section 501(c)(3)) o	r in section	527?	Ye	s X	No
b_lf "\	Yes," complete the follo							
	(a) Name of organizatio	n	(b) Type of organization		(c) Description of relations	hip		<del></del>
		<del></del>						
		+	· · ·		-			
<del></del>	Under poortion of Gordon 1 deel	are that I have evamin	and the cotum uncluding accompanion	sebodulos and	statements and to the best of my knowledge		alvat vi	
Sign	correct, and complete Declaration of	of preparer (other than ta	ed this return, including accompanying expayer) is based on all information of which	h preparer has ar	statements, and to the best of my knowledg ny knowledge	e and b	ellet, it	is true,
-		7 <del></del>		De A	May the IRS			
Here	Signature of officer or trustee		Date   3   3	Title		eparer s	1 [	below
	orginature or ormor or tradice		Ballo , .	THIC P	(see instruction	S)? A	Yes	No
	Print/Type preparer's	name	Preparer's signature		Date Check If	PTIN		
Paid	NORMAN J. TAM		1/2/		3/7/13 check in self-employed		3029	14
Prepare	er ———	OLTHOUSE CAP	RLIN & VAN TRIGT LLE	<del></del>	Firm's EIN ▶ 95-43			
Use On			A BLVD., SUITE 1700		THIIS EIT P JJ 43	. 1002		
	-	NCINO, CA	,	914	Phone no 818-84	19-31	40	
					THORETO 010 0	904		40044

## Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

## Schedule of Contributors /

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

2011

Name of the organization		Employer identification number			
EMMETT FOUNDATION					
		20-0429029			
Organization type (check one)					
Filers of:	Section:				
Form 990 or 990-EZ	501(c)( ) (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a private four	indation			
	527 political organization				
Form 990-PF	X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundal	tion			
	501(c)(3) taxable private foundation				
, ,	vered by the <b>General Rule</b> or a <b>Special Rule</b> . (8), or (10) organization can check boxes for both the General Rule and a S	Special Rule See			
General Rule					
	ling Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or contributor. Complete Parts I and II	or more (in money or			
Special Rules					
under sections 509(a)	3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support to (1) and 170(b)(1)(A)(vi) and received from any one contributor, during the 200 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form III	e year, a contribution of			
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III					
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use <i>exclusively</i> for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.					
990-EZ, or 990-PF), but it must	not covered by the General Rule and/or the Special Rules does not file Si answer "No" on Part IV, line 2, of its Form 990, or check the box on line F F, to certify that it does not meet the filing requirements of Schedule B (For	chedule B (Form 990, I of its Form 990-EZ or on			

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

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

Name of organization EMMETT FOUNDATION

Employer identification number 20-0429029

			20-0429029
Part I	Contributors (see instructions) Use duplicate copies	of Part I if additional space is need	ded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	DAN EMMETT  808 W. WILSHIRE BLVD. SUITE 200  SANTA MONICA, CA 90401	\$198,183.	Person X Payroll X Noncash  (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2 <u>-</u>	DAN EMMETT  808 W. WILSHIRE BLVD. SUITE 200  SANTA MONICA, CA 90401	\$50,000.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		   \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Employer identification number 20-0429029

		20-	-04
Part II	Noncash Property (see instructions)	Use duplicate copies of Part II if additional space is needed	]

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	100,000 SHARES OF DOUGLAS EMMETT INC		
		\$\$.	12/21/11
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		   \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Name of organization EMMETT FOUNDATION

Employer identification number

20-0429029

Part III	Exclusively religious, charitable, etc., that total more than \$1,000 for the year.	individual contribuear. Complete colur	tions to section 5 nns (a) through (e	01(c)(7), (8), or (10) organizations ) and the following line entry.
	For organizations completing Part III, e contributions of \$1,000 or less for the	year (Enter this inf	ormation once Se	charitable, etc , the instructions ) ►\$
	Use duplicate copies of Part III if addition	onal space is neede	<u>d</u>	
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Transf	er of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relation	nship of transferor to transferee
		<del>.</del>		
(a) No.				
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Transf	er of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relation	nship of transferor to transferee
(a) No from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		er of gift		
	Transferee's name, address, ar	nd ZIP + 4	Relation	nship of transferor to transferee
(a) Na			·	
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Transf	er of gift	L
	Transferee's name, address, ar	nd ZIP + 4	Relation	nship of transferor to transferee
		· · · ·		

## SCHEDULE D (Form 1041)

Department of the Treasury

Internal Revenue Service

## **Capital Gains and Losses**

► Attach to Form 1041, Form 5227, or Form 990-T. See the Instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

Schedule D (Form 1041) 2011

2011

Employer identification number Name of estate or tous EMMETT FOUNDATION 20-0429029 Note: Form 5227 filers need to complete only Parts I and II Short-Term Capital Gains and Losses - Assets Held One Year or Less (f) Gain or (loss) for (a) Description of property (Example 100 shares 7% preferred of "Z" Co) (b) Date acquired (c) Date sold (e) Cost or other basis (d) Sales price the entire year Subtract (e) from (d) (mo, day, yr) (see instructions) (mo, day, yr) 1a b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts 3 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2010 Capital Loss Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, column (3) on the back. Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year (f) Gain or (loss) for (a) Description of property (Example 100 shares 7% preferred of "Z" Co ) (b) Date acquired (e) Cost or other basis the entire year Subtract (e) from (d) (d) Sales price (mo, day, yr) (mo day, yr) (see instructions) 6a b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b. 6b -389,457.Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 8 42,031. Gain from Form 4797, Part I 10 10 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2010 Capital Loss 11 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back . . . . . . . . . -347,426.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

_	dule D (Form 1041) 2011				Page 2
Pai	rt III Summary of Parts I and II		(1) Beneficiaries'	(2) Estate's	(0) T-1-1
	Caution: Read the instructions before completing this p	part	(see instr)	or trust's	(3) Total
13	Net short-term gain or (loss)	13			
14	Net long-term gain or (loss):				
а		14a			-347,426.
	Unrecaptured section 1250 gain (see line 18 of the wrksht)	14b			
C		14c			
	Total net gain or (loss). Combine lines 13 and 14a ▶			-	-347,426.
Note	e: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (c	or Fori	n 990-T, Part I, line 4a	) If lines 14a and	15, column (2), are net
_	s, go to Part V, and <b>do not</b> complete Part IV If line 15, column (3), is a net loss, co	mplete	Part IV and the Capital	Loss Carryover Wo	rksheet, as necessary
	rt IV Capital Loss Limitation				
	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Page 1041).				
a Note Carry	The loss on line 15, column (3) or b \$3,000 or if Form 1041, page over Worksheet in the instructions to figure your capital loss carryover	i, im	e 22 (or Form 990-T, lir	16 one 34), is a loss, co	( 3,000.) Implete the <b>Capital Loss</b>
	Tax Computation Using Maximum Capital Gains Rates	S			
	n 1041 filers. Complete this part only if both lines 14a and 15 in colur		) are gains or an am	ount is entered i	n Part I or Part II and
here	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more	e thar	zero	ount is entered i	in raiti or raitii and
	tion: Skip this part and complete the Schedule D Tax Worksheet in the ii				
	ther line 14b, col (2) or line 14c, col (2) is more than zero, or				
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero				
Forn	n 990-T trusts. Complete this part only if both lines 14a and 15 are	gain	s, or qualified divide	nds are included	d in income in Part I
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part ai	nd co	mplete the Schedule	D Tax Workshe	et in the instructions
teit	her line 14b, col (2) or line 14c, col (2) is more than zero				
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34	4) .	. 17		
18	Enter the smaller of line 14a or 15 in column (2)				
	but not less than zero				
19	Enter the estate's or trust's qualified dividends				
	from Form 1041, line 2b(2) (or enter the qualified				
	dividends included in income in Part I of Form 990-T) 19			ļ	
20	Add lines 18 and 19				
21	If the estate or trust is filing Form 4952, enter the			<b>!</b>	
	amount from line 4g, otherwise, enter -0 ▶ 21				
22	Subtract line 21 from line 20 If zero or less, enter -0		. 22		
23	Subtract line 22 from line 17 If zero or less, enter -0-		23		
24	Enter the smaller of the amount on line 17 or \$2,300		24		
25	Is the amount on line 23 equal to or more than the amount on line 24'				
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box		1		
	No. Enter the amount from line 23		25		
26	Subtract line 25 from line 24		26		
27	Are the amounts on lines 22 and 26 the same?				
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line	22	27		
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28		
29	Subtract line 28 from line 27		29		
30	Multiply line 29 by 15% ( 15)			30	
31	Figure the tax on the amount on line 23 Use the 2011 Tax Rate	Sche	edule for Estates and	d Trusts	<u>-</u> .
	(see the Schedule Ginstructions in the instructions for Form 1041)				
		• • •		· · · · ·   <del>- · ·  </del>	
32	Add lines 30 and 31			32	
33	Figure the tax on the amount on line 17 Use the 2011 Tax Rate	Sch	edule for Estates and	Trusts	· /
-	(see the Schedule Ginstructions in the instructions for Form 1041)				
34	Tax on all taxable income. Enter the smaller of line 32 or line 33 h	ere a	nd on Form 1041 S	chedule	
	G, line 1a (or Form 990-T, line 36)			34	

Schedule D (Form 1041) 2011

EMMETT FOUNDATION  Part II Long-Term Capital Gains a	nd Losses - Asset	s Held More Tha	n One Year	20-042902	
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)
TRUST INC.	10/14/2008	03/05/2012	115,370.	504,827.	-389,457
			<del> </del>		
	-		·		
6b Total. Combine the amounts in column	n (f) Enter here and	d on Schedule D. line	e 6h	J	-389,457

EMMETT FOUNDATION 20-0429029
FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

1	Property	NS AND LO		ription		P) on	Date acquired	Date sold
Gross sale	Depreciation	Cost or	FMV	Adj basis	Excess of	D _	Gain	· · · · · · · · · · · · · · · · · · ·
price less expenses of sale	allowed/ allowable	other basis	as of 12/31/69	as of 12/31/69	FMV over adı basıs		or (loss)	
CAPGINGS OF SAIR	unowasio	TOTAL CAPITA					42,031.	
		10,000 SHARE			C	P	10/14/2008	03/05/2012
115,370.		504,827.					-389,457.	
TOTAL GAIN(L	oss)						_347,426.	
					:			
:	:							
		:						

## - INTEREST ON TEMPORARY CASH INVESTMENTS PART I FORM 990PF,

ADJUSTED NET INCOME	28.	28.
NET INVESTMENT INCOME	28.	28.
REVENUE AND EXPENSES PER BOOKS	28.	28.
		TOTAL
NO	05	
DESCRIPTION	WELLS FARGO	

## PART I - DIVIDENDS AND INTEREST FROM SECURITIES FORM 990PF,

ADJUSTED NET INCOME	16,644.	16,644.
NET INVESTMENT INCOME	16,644.	16,644.
REVENUE AND EXPENSES PER BOOKS	16,644.	16,644.
		TOTAL
DESCRIPTION	TIFF	

# FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES	5,866.	5,866.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	5,866.	5,866.
		TOTALS
DESCRIPTION	ACCOUNTING FEES	

## FORM 990PF, PART I - TAXES

CHARITABLE <u>PURPOSES</u>	10.	.09
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	10.	.09
DESCRIPTION	STATE TAXES REGISTRY OF CHARITABLE TRUSTS	TOTALS

## FORM 990PF, PART I - OTHER EXPENSES

CHARITABLE PURPOSES 23.	30.
ADJUSTED NET INCOME	
NET INVESTMENT INCOME	
REVENUE AND EXPENSES PER BOOKS 23.	30.
	TOTALS
DESCRIPTION POSTAGE OFFICE EXPENSE	

EMMETT FOUNDATION

N	
0	
Η	
Ĭ	
Д	
$\vdash$	
Ж	
$\mathcal{O}$	
S	
回	
$\cap$	

CORPORATE STOCKS - VARIOUS

SING	VALUE
ENI	BOOK

ENDING FMV

6,615,693.

6,615,693.

1,692,649.

1,692,649.

TOTALS

14415C L323 7/10/2013 6:15:15 PM

ı	
AND TRUSTEES	
DIRECTORS,	
DE OFFICERS, DIRECTORS	
- LIST C	
PART VIII	
FORM 990PF,	
	I

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
DAN A. EMMETT 808 WILSHIRE BLVD SUITE 200 SANTA MONICA, CA 90401	DIRECTOR & PRESIDENT	0	0	0
RAE M. EMMETT 808 WILSHIRE BLVD. SUITE 200 SANTA MONICA, CA 90401	DIRECTOR, VP, & SECRETARY	0	0	0
ROSALIND EMMETT NIEMAN 808 WILSHIRE BLVD. SUITE 200 SANTA MONICA, CA 90401	DIRECTOR, VP & ASST. SECRETARY	0	0	0
DANIEL W. EMMETT 808 WILSHIRE BLVD SUITE 200 SANTA MONICA, CA 90401	DIRECTOR, VP, CFO & TREASURER	0	0	,
MORGAN W. EMMETT 808 WILSHIRE BLVD SUITE 200 SANTA MONICA, CA 90401	DRCTR, VP, ASST.SEC. & ASST.TRSR	0	0	0
TYLER A. EMMETT 808 WILSHIRE BLVD SUITE 200 SANTA MONICA, CA 90401	DIRECTOR	0	0	0
	GRAND TOTALS	0	0	0

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

N/A

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR  AND  FOUNDATION STATUS OF RECIPIENT  PURPOSE OF GRANT OR CONTRIBUTION.
NONE  501 (C) (3)  NONE  501 (C) (3)  NONE  501 (C) (3)  NONE  501 (C) (3)  TO BENEFIT EDUCATION  TO ACTIVELY PROMOTE PHILANTHROPY AND BENEFIT  EDUCATION  TO BENEFIT EDUCATION  TO ACTIVELY PROMOTE PHILANTHROPY AND BENEFIT  EDUCATION  TO BENEFIT EDUCATION  TO BENEFIT EDUCATION
ENVIRONMENTAL DEFENSE CENTER 906 GARDEN STREET SANTA BARBARA, CA 93101 HARVARD 125 MOUNT AUBURN STREET CAMBRIDGE, MA 02138 UCLA FOUNDATION 10920 WILSHIRE BLVD, STE 900 LOS ANGELES, CA 90024

V 11-6 5

ATTACHMENT 9 (CONT'D)

# FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

AMOUNT	25,000	10,000	20,000	10,000	20,000	2,500
PURPOSE OF GRANT OR CONTRIBUTION	TO BENEFIT RENEWABLE ENERGY ENDEAVORS IN CALIFORNIA	TO BENEFIT THE ENHANCEMENT OF STATE PARES THROUGH EDUCATIONAL PROGRAMS, CAPITAL PROJECTS, COMPETITIVE GRANTS, AND FUNDRAISING	TO BENEFIT ENDEAVORS TO PROTECT AND RESTORE THE WILDLANDS AND BIODIVERSITY	TO BENEFIT ENDEAVORS TO PROTECT THE FUTURE FOR ALL SPECIES	TO BENEFIT EDUCATION	TO BENEFIT EDUCATION
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NONE	NONE	NONE	NONE	NONE	NONE
	501(C)(3)	501 (C) (3)	501 (C) (3)	501 (C) (3)	501 (C) (3)	501 (C) (3)
RECIPIENT NAME AND ADDRESS	ENERGY INDEPENDENCE NOW COALITION	CALIFORNIA STATE PARKS FOUNDATION	CONSERVATION PATAGONICA	CENTER FOR BIOLOGICAL DIVERSITY	COLUMBIA LAW SCHOOL	COLGATE UNIVERSITY
	120 EAST DE LA GUERRA ST, STE B	50 FRANCISCO STREET, SUITE 110	BUILDING 1062, FT CRONKHITE	351 CALIFORNIA ST , STE 600	116TH STREET AND BROADWAY	13 OAK DRIVE
	SANTA BARBARA, CA 93101	SAN FRANCISCO, CA 94133	SAUSALITO, CA 94965	SAN FRANCISCO, CA 94104	NEW YORK, NY 10027	HAMILTON, NY 13346

ATTACHMENT 9 (CONT'D)

## FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

CONSHIP TO SUBSTANTIAL CONTRIBUTOR  AND  OUNDATION STATUS OF RECIPIENT  AMOUNT  AMOUNT	TO BENEFIT ENDEAVORS TO PROFECT THE ENVIRONMENT 20,000	TO BENEFIT THE ARTS 1,000	TO BENEFIT AND PROMOTE DEMOCRACY THROUGH ETHICS 100,000 AND PUBLIC SERVICES ISSUES	TO BENEFIT ENDEAVORS TO PROTECT AND RESTORE THE 10,000 SANTA BARBARA CHANNEL	TO BENEFIT ENDEAVORS TO PROTECT AND PRESERVE 1,000 WATER FROM POLLUTERS	TO BENEFIT AND PROMOTE ENVIRONMENTAL EDUCATION 25,000
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NONE	NONE	NONE	NONE	NONE	NONE
	501(C)(3)	S01(C)(3)	501 (C) (3)	501(C)(3)	501(C)(3)	501(C)(3)
RECIPIENT NAME AND ADDRESS	NATURAL RESOURCES DEFNESE COUNCIL	CARPINTERIA VALLEY ARTS COUNCIL	THE CENTER FOR PUBLIC INTEGRITY	SANTA BARBARA CHANNELKEEPER	WATERKEEPER ALLIANCE	SOUTH FORK NATURAL HISTORY MUSEUM
	40 WEST 20TH STREET	PO BOX 597	910 17TH STREET, NW, SUITE 700	714 BOND AVE	17 BATTERY PLACE, SUITE 1329	377 BRIDGEHAMPTON / SAG HARBOR TURNPIKE
	NEW YORK, NY 10011	CARPINTERIA, CA 93014	WASHINGTON, DC 20006	SANTA BARBARA, CA 93103	NEW YORK, NY 10004	P O BOX 455

ATTACHMENT 9 (CONT'D)

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

AMOUNT	20,000	1,280	2,500	10,000	10,000	19,450
PURPOSE OF GRANT OR CONTRIBUTION	TO BENEFIT EDUCATION	TO BENEFIT EDUCATION	TO BENEFIT THE RESTORATION OF HETCH HETCHY VALLEY TO ITS ORIGINAL CONDITION	TO BENEFIT ENDEAVORS TO PREVENT OCEAN POLLUTION	TO BENEFIT EDUCATION ABOUT CHEMICALS USED IN CONSUMER PRODUCTS	TO BENEFIT EDUCATION
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NONE 501(C)(3)	NONE 501 (C) (3)	NONE 501(C)(3)	NONE 501(C)(3)	NONE 501(C)(3)	NONE 501(C)(3)
RECIPIENT NAME AND ADDRESS	CLAREMONT MCKENNA COLLEGE 500 E 9TH STREET CLAREMONT, CA 91711	YALE UNIVERSITY NEW HAVEN, CT 06520	RESTORE HETCH HETCHY P O BOX 565 SAN FRANCISCO, CA 94104	HEAL THE OCEAN 1836 STATE STREET SANTA BARBARA, CA 93101	GREEN SCIENCE POLICY INSTITUTE BOX 5455 BERKELEY, CA 94705	STANFORD UNIVERSITY 450 SERRA MALL STANFORD, CA 94305

TOTAL CONTRIBUTIONS PAID

437,475

## Form 8868

(Rev January 2012)

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

File a separate application for each return.

OMB No 1545-1709

	filing for an Automatic 3-Month Extension, of filing for an Additional (Not Automatic) 3-Mo				<b>&gt;</b> X	
•	lete Part II unless you have already been gra				8	
a corporation 8868 to req Return for instructions)	ling (e-file). You can electronically file Form in required to file Form 990-T), or an addition uest an extension of time to file any of the Transfers Associated With Certain Persona For more details on the electronic filing of the tomatic 3-Month Extension of Time. On	nal (not au forms liste I Benefit ( nis form, vis	tomatic) 3-month exten ed in Part I or Part II wi Contracts, which must sit www.irs.gov/efile.and	ision of time You can electronical lith the exception of Form 8870, It to be sent to the IRS in paper for diclick on e-file for Charities & Nonj	lly file Form Information ormat (see	
A corporatio	n required to file Form 990-T and requesting	an automa	atic 6-month extension	- check this box and complete		
Part I only .					▶□	
All other cor	porations (including 1120-C filers), partnersh	ıps, REMIC	Cs, and trusts must use F	Form 7004 to request an extension o	of time	
to file incom				Enter filer's identifying number, se		
Type or print	Name of exempt organization or other filer, see in	structions		Employer identification number	(EIN) or	
File by the	butho EMPLET FOUNDATION A 20-0423023					
due date for	C/O HOLTHOUSE CARLIN & VAN TR			Social security number (SSN)		
filing your return See	City, town or post office, state, and ZIP code For					
instructions	ENCINO, CA 91436	a roroigir ac	arcoo, oco monacatorio			
Enter the Re	eturn code for the return that this application	s for (file a	separate application for	or each return)	. 04	
Littor the rec	train code for the forant that this application		a copulate application is		٠ استا	
Application		Return	Application		Return	
Is For		Code	ls For		Code	
Form 990		01	Form 990-T (corporat	ion)	07	
Form 990-Bl	-	02	Form 1041-A		0.8	
Form 990-E2	2	01	Form 4720		09	
Form 990-PF		04	Form 5227		10	
Form 990-T	(sec 401(a) or 408(a) trust)	05	Form 6069		11	
Form 990-T	(trust other than above)	06	Form 8870	<del></del>	12	
The books	s are in the care of  NORM TAMKIN	<del></del>				
	e No ▶ 818 849-3140		FAX No ▶ 818 849			
	anization does not have an office or place of l				▶∟.	
	or a Group Return, enter the organization's fo				IIS IS	
	e group, check this box		art of the group, check t	this box ▶ 🔲 and att	ach	
	e names and EINs of all members the extens					
	st an automatic 3-month (6 months for a cor					
until		exempt or	ganization return for the	e organization named above. The e	xtension is	
	organization's return for calendar year 20 or					
	tax year beginning 12/0	1 2011	and ending	11/30 <b>20</b> 12		
<b>-</b>	tax year beginning 127		and ending			
	ax year entered in line 1 is for less than 12 m hange in accounting period	onths, ched	ck reason Initial r	eturn Final return		
3a If this	application is for Form 990-BL, 990-PF, 99	90-T, 4720	), or 6069, enter the	tentative tax, less any	<del></del>	
	undable credits. See instructions			3a \$		
<b>b</b> If this	application is for Form 990-PF, 990-T,	4720, or	6069, enter any re	efundable credits and		
estima	ted tax payments made. Include any prior yea	r overpayn	nent allowed as a credit	3 b \$		
	e due. Subtract line 3b from line 3a Include		ent with this form, if re	quired, by using EFTPS	<del></del>	
	onic Federal Tax Payment System) See instru			3c \$		
_	you are going to make an electronic fund v	withdrawal	with this Form 8868,	see Form 8453-EO and Form 88	879-EO for	
payment ins	tructions					

Form 8	3868 (Rev	v 1-2012)					Page 2	
• If y	you are	filing for an Additional (Not Automatic) 3-Me	onth Exten	sion, complete only Part II	and	check this box		
		omplete Part II if you have already been gra						
• If y	you are	filing for an Automatic 3-Month Extension, of	complete o	only Part I (on page 1)				
Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed)								
Enter f						filer's identifying number, see instructions		
	Name of exempt organization or other filer, see instructions				Employer identification number (EIN) or			
Туре	or							
print	1	EMMETT FOUNDATION			X 20-0429029			
File by	the	te for C/O HOLTHOUSE CARLIN & VAN TRIGT, LLP.			Social security number (SSN)			
due da	ate for							
filing y return		City, town or post office, state, and ZIP code. For a foreign address, see instructions						
instruc								
Enter the Return code for the return that this application is for (file a separate application for each return)								
Application			Return	Application			Return	
Is For			Code	Is For			Code	
Form 990			01		<u> </u>			
Form 990-BL			02	Form 1041-A		<u></u>	08	
Form 990-EZ			01	Form 4720			09	
Form 990-PF			04	Form 5227			10	
Form 990-T (sec 401(a) or 408(a) trust)			05	Form 6069			11	
Form 990-T (trust other than above)			06	Form 8870			12	
STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.								
The books are in the care of ► NORM TAMKIN								
Telephone No ► 818 849-3140 FAX No ► 818 849-3141								
If the organization does not have an office or place of business in the United States, check this box								
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)      If this is								
for the whole group, check this box ▶ ☐ If it is for part of the group, check this box ▶ ☐ and attach a								
list with the names and EINs of all members the extension is for								
4	I request an additional 3-month extension of time until 10/15, 20 13							
5	For calendar year, or other tax year beginning12/01 , 20 11 , and ending11/30 , 20 12							
6	If the tax year entered in line 5 is for less than 12 months, check reason Initial return Final return Change in accounting period							
7 State in detail why you need the extension ADDITIONAL TIME IS REQUIRED TO GATHER								
	INFORMATION FOR PREPARATION AND FILING FOR A COMPLETE AND ACCURATE							
	TAX RETURN.							
8a	Ba If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any							
	nonrefundable credits See instructions 8a \$						0	
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and							
		estimated tax payments made Include any prior year overpayment allowed as a credit and any						
	amount paid previously with Form 8868  8b \$					0		
С	Balance Due. Subtract line 8b from line 8a Include your payment with this form, if required, by using EFTPS							
(Electronic Federal Tax Payment System) See instructions 8c   8c   \$								
Signature and Verification must be completed for Part II only.								
Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form								
Signature ▶ Title ▶ Date ▶								
		·		<del></del>		Form 8868 (	Pov. 1 2012)	