

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



Form 990-PF

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

Treated as a Private Foundation

OMB No 1545-0052

Department of the Treasury Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2012 or tax year beginning . and ending A Employer identification number Name of foundation THE QUINCY JONES FOUNDATION 61-1553720 Number and street (or P O box number if mail is not delivered to street address) Room/suite **B** Telephone number 10850 WILSHIRE BLVD. STE 1200 (310) 446-0118 City or town, state, and ZIP code C If exemption application is pending, check here 90024 LOS ANGELES, G Check all that apply Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust \_\_\_\_\_ Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method X Cash Accrual F If the foundation is in a 60-month termination (from Part II, col. (c), line 16) .... Other (specify) under section 507(b)(1)(B), check here 30, 476. (Part I, column (d) must be on cash basis.) **\$** Part | Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) ) for charitable purposes (cash basis only) expenses per books ıncome income 2,500. Contributions, gifts, grants, etc., received Check X If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 3 Dividends and interest from securities 5a Gross rents D Net rental Income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 0. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain . Income modifications Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 2,500 0. 0 Total. Add lines 1 through 11 0 0. 0 0. 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits Expenses 16a Legal fees STMT 7,550 0. 0. 0. **b** Accounting fees - 1 2 0 c Other professional fees STMT 77,000 0 0. 17 Interest 60 0. STMT 3 0 0. 18 19 Depreciation and depletion 26 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative 0. 0 84,610 expenses. Add lines 13 through 23 0 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 84,610 0. 0 0. Add lines 24 and 25 27 Subtract line 26 from line 12 -82,110.3 Excess of revenue over expenses and disbursements 0. b Net investment income (if negative, enter -0-)

c Adjusted net income (if negative, enter -0-)

0

b		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	beginning or year	Ellu 0l	<del></del>
	OI L	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	`1	Cash - non-interest-bearing	112,586.	30,476.	30,476.
	2	Savings and temporary cash investments			
		Accounts receivable ►			— F 17 17 181 181 181 181
		Less allowance for doubtful accounts			
	4	Pledges receivable ▶			
		Less, allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	•	disqualified persons			
	7	Other notes and loans receivable			
	'	Less allowance for doubtful accounts			
<b>"</b>	8	Inventories for sale or use			
Assets	l °				
Ass	10-	Prepaid expenses and deferred charges			
	l	Investments - U S and state government obligations			<del></del>
	l	Investments - corporate stock			<del></del>
		Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less. accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis			
		Less. accumulated depreciation			
	15	Other assets (describe ►)			
				1	
	16	Total assets (to be completed by all filers)	112,586.	30,476.	30,476.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Ś	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ā	21	Mortgages and other notes payable			
Ĩ	ı	Other liabilities (describe )	-		
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here	<u> </u>		
		and complete lines 24 through 26 and lines 30 and 31.			
ës	24	Unrestricted			
Ĕ	25	Temporarily restricted			
줐	26	Permanently restricted			
Net Assets or Fund Balanc	20	Foundations that do not follow SFAS 117, check here		<u> </u>	
Ē		·			
ō	27	and complete lines 27 through 31.	0.	0.	
ets	27	Capital stock, trust principal, or current funds	0.	0.	
SS	28	Paid-in or capital surplus, or land, bldg, and equipment fund	112,586.	30,476.	
ž	29	Retained earnings, accumulated income, endowment, or other funds			
Ž	30	Total net assets or fund balances	112,586.	30,476.	
		<b>-</b>	112 506	20 476	
_	31	Total liabilities and net assets/fund balances	112,586.	30,476.	
P	art	Analysis of Changes in Net Assets or Fund Ba	alances		
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)		1	112,586.
2		r amount from Part I, line 27a		2	-82,110.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	30,476.
		eases not included in line 2 (itemize)		5	0.
6	Total	I not accept or fund halances at and at year (line 4 minus line 5) . Part II on	luma (h) lua 20		30 476

61-1553720

Page 2

Form **990-PF** (2012)

THE QUINCY JONES FOUNDATION

Form 990-PF (2012)

(a) List and desc 2-story brick w	cribe the ki arehouse,	nd(s) of property sold (e g or common stock, 200 shs	., real estate, MLC Co )		P	- Purc - Dona		(c) Date (mo , c	acquired day, yr )	(d) Date sold (mo., day, yr)
<u>1a</u>										
b NC	NE				<u> </u>					
C					<u> </u>		-			
<u>d</u>	<u> </u>				├					
	(5)	Depreciation allowed	(a) Coo	t or other basis				(h) (	Sain or (loss	L
(e) Gross sales price	(1)	(or allowable)		xpense of sale					s (f) minus	
<u>a</u>	-					<u>.</u>				
C										<del>-</del>
d								_		
e		· ·			Ì					
Complete only for assets show	ing gain in	column (h) and owned by	the foundation	on 12/31/69					Col (h) gain	
(i) F M V as of 12/31/69		(j) Adjusted basıs as of 12/31/69		cess of col (ı) col (ı), ıf any			CO	(k), but Losses	not less that (from col (	n -0-) <b>or</b> (h))
a					İ					
_b										
C										
d										
<u>e</u>	<u> </u>						ı			
2 Capital gain net income or (net c	apıtal loss	if gain, also enter f (loss), enter -0	r in Part I, line ' - in Part I, line	7 7	}	2				
3 Net short-term capital gain or (lo	ss) as defi	`								
If gain, also enter in Part I, line 8	, column (		(-)		)					
If (loss), enter -0- in Part I, line & Part V Qualification I		A 40 40 / \ /	<u> </u>	- N A	الب	3	4 1			
If section 4940(d)(2) applies, leave Was the foundation liable for the se If "Yes," the foundation does not qu	ction 4942	tax on the distributable an		-	rıod?					Yes X No
1 Enter the appropriate amount in	each colu	mn for each year, see the I	nstructions bef	fore making any e	entries	3				
(a) Base period years Calendar year (or tax year beginr	iluo iu)	<b>(b)</b> Adjusted qualifying dis	tributions	Net value of no	(c) nchai		-use assets		Distril	(d) oution ratio vided by col (c))
2011	<u>g</u> ,		0.			9	8,862	2.	<u> </u>	.000000
2010			5,000.			10	1,210	).		.049402
2009		6	2,565.				0,817			.311552
2008			0.			7	2,114	ł •		.000000
										26005
2 Total of line 1, column (d)	· E +	and manufacture and the state of	an line O to E	au h., 46 4				2		.360954
3 Average distribution ratio for the the foundation has been in exist	-		on line 2 by 5,	or by the number	r ot ye	ars		3		.090239
4 Enter the net value of noncharita	ible-use as	sets for 2012 from Part X.	line 5					4		4,621
										417
5 Multiply line 4 by line 3			•					5_	<del> </del>	
6 Enter 1% of net investment inco	me (1% of	Part I, line 27b)						6		0.
7 Add lines 5 and 6								7_		417
8 Enter qualifying distributions fro	m Part XII	, line 4						8		0
If line 8 is equal to or greater that See the Part VI instructions	ın line 7, cl	neck the box in Part VI, line	1b, and comp	olete that part usin	ng a 1	% tax	rate			

	990-PF			FOUNDATION		<u> </u>			<u>1553</u>			Page 4
Pa	rt VI	Excise Tax Based or	n Investment Ir	ncome (Section 494	Ю(а), 494	0(b), 4940(e),	or 4	948	- see i	nstru	ctior	ns)
1a	Exempt	operating foundations described	d in section 4940(d)(2)	), check here 🕨 🔲 and :	enter "N/A" on	line 1						
		uling or determination letter _										_
b	Domest	c foundations that meet the sect	tion 4940(e) requireme	ents in Part V, check here	and and	enter 1%		. 1	ļ.,			0.
	of Part I	, line 27b										
C	All other	domestic foundations enter 2%	of line 27b Exempt fo	oreign organizations enter 4°	% of Part I, Iir	ne 12, col (b) 丿						_
2	Tax und	er section 511 (domestic sectioi	n 4947(a)(1) trusts and	d taxable foundations only (	Others enter -	0-)		2				0.
3	Add line	s 1 and 2	•					3	ļ			0.
4	Subtitle	A (income) tax (domestic sectio	n 4947(a)(1) trusts an	nd taxable foundations only	Others enter -	-0-)		4				0.
5	Tax bas	<mark>ed on investment Income</mark> . Sub	tract line 4 from line 3	If zero or less, enter -0-				5	ļ			0.
6	Credits/	Payments			1 1							
а	2012 es	timated tax payments and 2011	overpayment credited	to 2012	6a							
b	Exempt	foreign organizations - tax withh	neld at source		6b			;				
C	Tax paid	with application for extension of	of time to file (Form 88)	68)	6c							
d	Backup	withholding erroneously withhel	ld		6d							_
		edits and payments. Add lines 6	•									0.
8	Enter an	y <b>penalty</b> for underpayment of e	estimated tax. Check h	ere 📖 ıf Form 2220 ıs att	ached			8				
		. If the total of lines 5 and 8 is m						9				0.
		ment. If line 7 is more than the		· · · · · · · · · · · · · · · · · · ·		1		10				
		amount of line 10 to be Credit				Refunde	d ►	11				
		A Statements Rega								······································	. 1	
		he tax year, did the foundation a	ittempt to influence any	y national, state, or local legi	slation or did	it participate or inte	ervene	ın			Yes	
		tical campaign?								1a		<u>X</u> _
		end more than \$100 during the		** * * * * * * * * * * * * * * * * * * *	-		-			1b		X
		nswer is "Yes" to 1a or 1b, a		•	nd copies of	f any materials pu	blishe	ed or				
		ted by the foundation in cor		tivities.							1	17
		oundation file Form 1120-POL 1	•							1c		<u>X</u>
		e amount (if any) of tax on politi					^					
		the foundation 🕨 💲					0.					
		e reimbursement (if any) paid by	•	g the year for political expen	diture tax imp	osed on foundation						
	•	rs • \$									1	v
		foundation engaged in any activ	•	viously been reported to the	IRS7					2		<u>X</u>
		" attach a detailed description		44-41-400								
		foundation made any changes,				articles of incorpora	ition, o	r			1	v
		or other similar instruments? If								3		$\frac{x}{x}$
		foundation have unrelated busin has it filed a tax return on <b>Form</b>		s i,000 of more during the ye	arz			N	i/A	48		
				al contraction during the year	2			1.4	/ A	4b 5		X
		re a liquidation, termination, dis " attach the statement requi			•							
		requirements of section 508(e) (	<del>-</del>		aither							
		guage in the governing instrum	-	out through 4545) satisfied	31(1161							
		te legislation that effectively am		strument so that no mandate	ny directions	that conflict with th	o stata	law				
	-	n in the governing instrument?	ones the governing inc	ottamont so that no mandate	17 41100001110	that commot with th	o stato	1411		6		X
7		foundation have at least \$5,000	in assets at any time d	luring the year?						7	Х	
		" complete Part II, col. (c), ar										
		e states to which the foundation		it is registered (see instructi	ons)							
	CA							_				
b		swer is "Yes" to line 7, has the fo	oundation furnished a	copy of Form 990-PF to the	Attornev Gen	eral (or designate)	_	_				
_		state as required by General In		· ·		( g.iato)				8b	X	
9		undation claiming status as a pi		· ·	ection 4942(i	i)(3) or 4942(i)(5) f	or cale	ndar				
		12 or the taxable year beginning	_	_			54.0			9		Х
		persons become substantial co	· ·	•						10		X

orm	990-PF (2012) THE QUINCY JONES FOUNDATION61-1553	720		Page 5
	rt VII-A Statements Regarding Activities (continued)			
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
•	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ► CANNON & COMPANY  Telephone no ► (310)	446	-01	18
	Located at ► 10850 WILSHIRE BLVD. STE 1200, LOS ANGELES, CA ZIP+4 ► 90	024		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		<b>&gt;</b>	
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		_ X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of the foreign			
	country			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	ŀ		
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days )			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2012?	10		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2012?			
	If "Yes," list the years $\blacktriangleright$			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions ) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
	<u> </u>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2012.)	3b	ļ	<u> </u>
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	ļ	X
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 2012?	4b		<u> </u>

Form 990-PF (2012) THE QUINCY JONES FOUNDAT	ION		61-15537	20 Page 6
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be I	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indir	ectly,		
any voter registration drive?		Ye	s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or	for		
the prevention of cruelty to children or animals?			s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described	in Regulations		
section 53 4945 or in a current notice regarding disaster assistance (see instru		•	N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	ere			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it mainta	ined		
expenditure responsibility for the grant?		_ /	es 🔲 No	
If "Yes," attach the statement required by Regulations section 53.494	5-5(d).			,
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				
a personal benefit contract?		Y6	es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X
If "Yes" to 6b, file Form 8870.			Γ	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Y6	es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu	itable to the transaction?		, ,	7b
Information About Officers, Directors, Trust		nagers, Highly	y	
Faid Employees, and Contractors				
1 List all officers, directors, trustees, foundation managers and their	, · · · · · · · · · · · · · · · · · · ·	(c) Compensation	(d) Contributions to	(=) Europea
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	to position	`enter'-0-)	compensation	allowances
QUINCY JONES	TRUSTEE			
10850 WILSHIRE BLVD. STE 1200	F 00			
LOS ANGELES, CA 90024	5.00	0.	0.	0.
		<del> </del>		<del></del>
				<del></del>
2 Compensation of five highest-paid employees (other than those inc	! :luded on line 1). If none,	enter "NONE."	L	
	(b) Title, and average		(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	account, other allowances
NONE			Comparisation	
	1			1
<del></del>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
Total number of other employees paid over \$50,000			<b>_</b>	0

Form 990-PF (2012) THE QUINCY JONES FOUNDATION	61-1	553720 Page 7
Part VIII Information About Officers, Directors, Trustees, Four Paid Employees, and Contractors (continued)	ndation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none,	enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
MADELYN BONNOT		
153 HADLEY ROAD, SUNDERLAND, MA 01375	OUTSIDE SERVICE	77,000.
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant number of organizations and other beneficiaries served, conferences convened, research papers	statistical information such as the s produced, etc.	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		_
Describe the two largest program-related investments made by the foundation during the tax ye	ar on lines 1 and 2	Amount
1 N/A		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3	<b>&gt;</b>	0.

Form **990-PF** (2012)

P	art X Minimum Investment Return (All domestic foundations must complete	this part. Foreign four	idations, s <del>ee</del>	instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purpose	s		
а	Average monthly fair market value of securities		1a	0.
	Average of monthly cash balances	. [	1b	4,691.
	Fair market value of all other assets		10	•
d	Total (add lines 1a, b, and c)		1d	4,691.
	Reduction claimed for blockage or other factors reported on lines 1a and			-
	1c (attach detailed explanation)	0.		
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	4,691.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instruction	s)	4	70.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	·	5	4,621.
6	Minimum investment return. Enter 5% of line 5		6	231.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private foreign organizations check here  and do not complete this part )	operating foundations an	d certain	
1	Minimum investment return from Part X, line 6		1	231.
2a	Tax on investment income for 2012 from Part VI, line 5			
	Income tax for 2012 (This does not include the tax from Part VI )	- "		
C	Add lines 2a and 2b		2c	0.
3	Distributable amount before adjustments Subtract line 2c from line 1		3	231.
4	Recoveries of amounts treated as qualifying distributions		4	0.
5	Add lines 3 and 4	·	5	231.
6	Deduction from distributable amount (see instructions)		6	0.
7_	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1		7	231.
P	art XII Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes			•
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	•	<u> 1a</u>	0.
þ	Program-related investments - total from Part IX-B	•	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purpos	es	2	
3	Amounts set aside for specific charitable projects that satisfy the			
а			3a	
þ	Cash distribution test (attach the required schedule)		3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line	4	4	0.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment			^
	income Enter 1% of Part I, line 27b		5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4		_6	0.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating 4940(e) reduction of tax in those years	whether the foundation (	qualifies for the	section

Form **990-PF** (2012)

# Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI,				
line 7 .		######################################		231.
2 Undistributed income, if any, as of the end of 2012			•	
a Enter amount for 2011 only			0.	** 1*1111111** ** ******* *******
b Total for prior years		^		
3 Excess distributions carryover, if any, to 2012	***	0.	iiiiiii ii i	''!!!'! !''
a From 2007				
b From 2008				
c From 2009 44,136.				
d From 2010				
8 From 2011				
f Total of lines 3a through e	44,136.			
4 Quairfying distributions for 2012 from	11,1001	***************************************		
Part XII, line 4 ►\$ 0.				
a Applied to 2011, but not more than line 2a	,		0.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus			111111111111111111111111111111111111111	
(Election required - see instructions)	0.			
d Applied to 2012 distributable amount		''(i '.iil'.' ,''Intant-r	Hilling to the state of the sta	0.
e Remaining amount distributed out of corpus	0.			
Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))	231.			231.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	43,905.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c 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		0.		
d Subtract line 6c from line 6b Taxable		0.		
amount - see instructions e Undistributed income for 2011 Subtract line		U •		
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2012 Subtract		•••••		
lines 4d and 5 from line 1 This amount must				
be distributed in 2013				0.
7 Amounts treated as distributions out of		\		
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2007				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2013.				
Subtract lines 7 and 8 from line 6a	43,905.	***************************************		
10 Analysis of line 9			-	
a Excess from 2008				
b Excess from 2009 43,905.				
c Excess from 2010				
d Excess from 2011				
e Excess from 2012			<u> </u>	<u> </u>

Form 990-PF (2012) THE QUI	NCY JONES F	OUNDATION		61-15	53720 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part VI	-A, question 9)	N/A	
1 a If the foundation has received a ruling of	r determination letter tha	t it is a private operating			
foundation, and the ruling is effective for	r 2012, enter the date of	the ruling	. ▶		
b Check box to indicate whether the found	dation is a private operati	ng foundation described	in section	4942(J)(3)_or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
investment return from Part X for					
each year listed					
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not		-			
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					<del> </del>
alternative test relied upon					
a "Assets" alternative test - enter (1) Value of all assets					
• •					<del>                                     </del>
(2) Value of assets qualifying					
under section 4942(i)(3)(B)(i)  b "Endowment" alternative test - enter			·- ·		<del> </del>
2/3 of minimum investment return					
shown in Part X, line 6 for each year					
listed					
c "Support" alternative test - enter					
(1) Total support other than gross investment income (interest,					
dividends, rents, payments on				1	
securities loans (section					
512(a)(5)), or royalties)		_			
(2) Support from general public and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(iii)				-	
(3) Largest amount of support from					]
an exempt organization		,			
(4) Gross investment income	<u> </u>	1			
Part XV Supplementary Info			if the foundation	n nad \$5,000 or m	ore in assets
at any time during		ructions.)			
1 Information Regarding Foundation	_				
a List any managers of the foundation will year (but only if they have contributed)			tributions received by th	ne foundation before the clo	ose of any tax
	11016 (11811 \$5,000) (366	3600001 307 (4)(2) )			
NONE		h	/		
<ul> <li>b List any managers of the foundation windown other entity) of which the foundation has</li> </ul>			(or an equally large poi	tion of the ownership of a p	partnership or
NONE	is a 10 % of greater inter-	551			
·			· · · · · · · · · · · · · · · · · · ·		
2 Information Regarding Contribution					
Check here  if the foundation the foundation makes gifts, grants, etc					
	·			Complete items 2a, b, c, an	
a The name, address, and telephone num QUINCY JONES	nber or e-mail of the pers	on to whom applications	snould be addressed		
	CUITME 120	ר דרכ אויכים	. EC	12.4	
10850 WILSHIRE BLVD					
b The form in which applications should ENTITY NAME, DESCRII					
c Any submission deadlines	. I I OI DI				
NOVEMBER 15, 2013					
d Any restrictions or limitations on award	ls, such as by geographi	cal areas, charitable fields	, kınds of ınstıtutions, o	r other factors	
N/A					
	···				<del></del>

Total

#### Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated	Unrelati	ed business income		ded by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue	code		code		
ā			<del> </del>		
b			-		
<u> </u>					
d		<del></del>	-	<u> </u>	<del></del>
·			ļ		
i			<u> </u>		
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			ļ	1000 100 100	· · · · · · · · · · · · · · · · · · ·
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
					_
d	1	<b>-</b>			
d					
8		0.		0.	0.
12 Subtotal Add columns (b), (d), and (e)		1 0.			0.
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations)				13 _	<u></u>
Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco the foundation's exempt purposes (other than	me is reported	ın column (e) of Part XVI-A			nplishment of
			· -		
223621					- 000 55
223621 12-05-12					Form <b>990-PF</b> (2012)

Part	XVII	Information Re Exempt Organ		sfers To a	and Transactions a	ind Relation	ships With None	charitable	€
1 D	d the oro			of the following	g with any other organization	on described in sec	ction 501(c) of		Yes No
	•	•			7, relating to political organ				
	•	rom the reporting found:							
(1	) Cash			•				1a(1)	X_
(2	) Other	assets			•			1a(2)	X
b O	ther trans	actions							
(1	) Sales	of assets to a noncharita	ble exempt organizati	ion				1b(1)	X
(2	) Purch	ases of assets from a no	ncharitable exempt o	rganization				1b(2)	X
(3	) Rentai	of facilities, equipment,	or other assets		•			1b(3)	X
(4	l) Reimb	ursement arrangements						1b(4)	X
•	-	or loan guarantees						1b(5)	X
		mance of services or me						1b(6)	X
	•	facilities, equipment, ma	•		•			1 <u>C</u>	<u> </u>
0	r services	given by the reporting f	oundation If the foun	dation receive	dule Column (b) should alv ed less than fair market valu	-			Sets,
(a) ⊔ne		the value of the goods, (b) Amount involved			exempt organization	(d) Descripti	on of transfers, transactions	, and sharing ar	rangements
				N/A					
				_					
							<del></del>		
						<u> </u>			
						-			
						-			
	+					<del></del>			
	_								
-							· · · · · · · · · · · · · · · · · · ·		
ır	section	501(c) of the Code (othe	r than section 501(c)		or more tax-exempt organition 527?	izations described		Yes	X No
זו מ	Yes, co	mplete the following sch (a) Name of org			(b) Type of organization		(c) Description of rela	tionshin	
		N/A	jamzation		(b) Type of Organization		(E) Description of fold	donomp	
		147 21							
	· <u>-</u>						<del></del>		
		$\overline{}$							
Sigr Here	and be		mplete Declaration of pro		ng accompanying schedules and in taxpayer) is based on all inform	mation of which prepa		return with the	v (see instr )?
	-1 <del>(</del>	Print/Type preparer's na		Preparer's s		Date	Check If F	PTIN	
	\	, po proparo s III		1. K			self- employed		
Paid	1	JEFFREY T.	CANNON		سعسموه	11.14.13	1 ' '	P00548	3787
Pre	parer Only			PANY A	CCOUNTANCY C	ORP	Firm's EIN ► 46		
<del>-</del> 30	~y	Firm's address > 10	850 WTT.SH	TRE BT	., SUITE 120	00			
					0024-4324		Phone no(3	10)446	5-0118
									D-DE (2012)

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

Department of the Treasury Internal Revenue Service

Name of the organization

# **Schedule of Contributors**

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

OMB No 1545-0047

2012

**Employer identification number** 

THE QUINCY JONES FOUNDATION 61-1553720 Organization type (check one): Filers of: Section: \_\_\_ 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. 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 exclusively 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 exclusively 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 \$

LHA 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) (2012)

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part II, line 2 of its Form 990-PF, to

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

<u> Schedule B (Form 990, 990-EZ, or 990-PF) (2012</u>
--

Page 2

Name of organization

Employer identification number

# THE QUINCY JONES FOUNDATION

61-1553720

Part I	Contributors (see instructions). Use duplicate copies of Part I i	f additional space is needed.		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
1	SPOTIFY USA, INC.  45 W. 1875 STREET 7TH FLOOR  NEW YORK, NY 10011	\$\$\$	Person X Payroll	
(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.)	
(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

# THE QUINCY JONES FOUNDATION

61-1553720

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		
		     \$			
(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		

Employer identification number

Part III	Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc. Use duplicate copies of Part III if addition.	ne following line entry. For organizations, contributions of \$1,000 or less for	c)(7), (8), or (10) organizations that total more than \$1,000 for the ons completing Part III, enter r the year (Enter this information once.)		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
-	(e) Transfer of gift  Transferee's name, address, and ZIP + 4  Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
-	Transferee's name, address, a	(e) Transfer of gif	ft  Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
-	(e) Transferee's name, address, and ZIP + 4		Pr of gift  Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		(e) Transfer of gif	ft		
-	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		

FORM 990-PF	ACCOUNTING FEES		STATEMENT 1		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING FEES	7,550.	0.	0.	0.	
TO FORM 990-PF, PG 1, LN 16B	7,550.	0.	0.	0.	
FORM 990-PF C	THER PROFES	SIONAL FEES	Si	PATEMENT 2	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
OUTSIDE SERVICE	77,000.	0.	0.	0.	
TO FORM 990-PF, PG 1, LN 16C	77,000.	0.	0.	0.	
FORM 990-PF	M 990-PF TAXES		Si	TATEMENT 3	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
STATE INCOME TAX	60.	0.	0.	0.	
TO FORM 990-PF, PG 1, LN 18	60.	0.	0.	0.	

* If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box  Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.  * If you are filing for an Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).  Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).  Enter filer's identifying number, see instructions  File by the Mark of exempt organization or other filer, see instructions  File by the THE QUINCY JONES FOUNDATION  Aumber, street, and room or suite no If a P.O. box, see instructions  IO 850 WILSHIRE BLVD. STE 1200  City, town or post office, state, and ZIP code. For a foreign address, see instructions.  LOS ANGELES, CA 90024  Enter the Return code for the return that this application is for (file a separate application for each return)  Application  Return Code  Form 990 or Form 990-EZ  Form 990 or Form 990-EZ  Form 990 or Form 990-EZ  Form 990-FP  Out Form 420 (individual)  Out Form 4720 (individual)  Form 990-FP  Out Form 8870  STOPI Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.  CANNON & COMPANY  The books are in the care of ▶ 10.850 WILSHIRE BLVD. STE 1200 - LOS ANGELES, CA 90024  Felephone No ▶ (310) 446-0118  FAX No. ▶ (310) 446-0132  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If this is for a droup Return, enter the organization's four digit Group Exemption Number (GEN)  If this is for and orther extension is for file and attach a list with the names and ElNs of all members the extension is for For calendary year 2012. Or other tax year beginning  5 For calendary year 2012. Or other tax year beginning  5 For calendary year 2012. Or other tax year beginning  Form 900 Time. Only Part III if you were not already granted an automatic 3-month extension is for file an						Page 2
Note. Only bomplete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.  ■ If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).    Part II	nal (Not Automatic) 3-Month E	vtension	complete only Part II and check th	is box		
Part II   Additional (Not Automatic) 3-Month Extension, complete only Part I (on page 1).    Part II   Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).    Enter filer's identifying number, see instruction print	•				8868.	
Part     Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).						
Type or print File by the due date for filenge to the return of the return that this application is for (file a separate application for each return)  The Return code for the return that this application is for (file a separate application for each return)  Today or Form 990-EZ  Form 990 or Form 990-EZ  Form 990-BL  Form 4720 (Individual)  Form 990-T (trust other than above)  The books are in the care of ▶ 10850 WILSHIRE BLVD. STE 1200  STOP! Do not complete Part III if you were not already granted an automatic 3-month extension of to the whole group, check this box ▶ If this is for calendar year 2012, or other tax year beginning  Name of exempt organization or other filer, see instructions  Employer identifying number, see instructions  61-1553720  Social security number (SN)  61-255720  Social security number (SN)  Social security number (SN)  10850 WILSHIRE BLVD. STE 1200  Form 990 or each return)  O  Application  Return  Code is For  Code is For  Code  If orm 4720  OS  Form 990-EZ  Form 990-EZ  O1  Form 990-EZ  O2  Form 1041-A  O6  Form 4720  OS  Form 6069  112  STOP! Do not complete Part III if you were not already granted an automatic 3-month extension on a previously filed Form 8868.  CANNON & COMPANY  The books are in the care of ▶ 10850 WILSHIRE BLVD. STE 1200 – LOS ANGELES, CA 90024  File this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If this is for part of the group, check this box ▶ and attach a list with the names and ElNs of all members the extension is for NOVEMBER 15, 2013.  NOVEMBER 15, 2013.	ot Automatic) 3-Month F	Extension	on of Time. Only file the origin	nal (no c	copies needed)	
Name of exempt organization or other filer, see instructions   Employer identification number (EN files) the considerator for print   THE QUINCY JONES FOUNDATION   61-1553720						
THE QUINCY JONES FOUNDATION  THE QUINCY JONES FOUNDATION  Number, street, and room or suite no. If a P.O. box, see instructions  10 850 WILSHIRE BLVD. STE 1200  City, town or post office, state, and ZIP code. For a foreign address, see instructions.  LOS ANGELES, CA 90024  Enter the Return code for the return that this application is for (file a separate application for each return)  Application  Return Code Is For Code  Form 990-EZ  Form 990-BL  02 Form 1041-A  05  Form 4720 05  Form 990-T (see 401(a) or 408(a) trust)  Form 990-T (trust other than above)  06 Form 8870  17  STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.  CANNON & COMPANY  • The books are in the care of ▶ 10850 WILSHIRE BLVD. STE 1200 - LOS ANGELES, CA 90024  • If this is for a Group Return, enter the organization four digit Group Exemption Number (GEN) If this is for the whole group, check to box ▶ If it is for part of the group, check this box	janization or other filer, see instri	uctions				
Number, street, and room or suite no. If a P.O. box, see instructions 10850 WILSHIRE BLVD. STE 1200						
10850 WILSHIRE BLVD. STE 1200						
Telum See instructions  City, town or post office, state, and ZIP code. For a foreign address, see instructions.  LOS ANGELES, CA 90024  Enter the Return code for the return that this application is for (file a separate application for each return)  Application  Return Application  SFOR Code Is For Code  Form 990 or Form 990-EZ  Form 990-BL  Form 990-BL  Form 4720 (individual)  Form 990-PF  Form 990-PF  Form 990-T (see 401(a) or 408(a) trust)  Form 990-T (trust other than above)  STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.  CANNON & COMPANY  The books are in the care of ▶ 10850 WILSHIRE BLVD. STE 1200 - LOS ANGELES, CA 90024  Telephone No ▶ (310) 446-0118  FAX No. ▶ (310) 446-0132  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If this 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 NOVEMBER 15, 2013.  For calendar year 2012. or other tax year beginning  And ending  Telegonal Return (Application of each return)  O  Return Application  Return Application  See instructions.  Code Is Form  Application  Pett.  Application  Return Application of each return)  O  Form 990-T  Form 990-T  Form 990-EZ  Form 990-EZ  Form 990-BL  O  Form 4720  O  Form 4720  O  Form 4720  O  Form 4720  O  Form 8670  Form 8688.  CANNON & COMPANY  The books are in the care of ▶ 10850 WILSHIRE BLVD. STE 1200 - LOS ANGELES, CA 90024  Telephone No ▶ (310) 446-0132  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If this 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 NOVEMBER 15, 2013.  For calendar year 2012, or other tax year beginning  And ending	due date for Number, street, and room or suite no. If a P.O. box, see instructions.  Social security number.				ecurity number (SS	N)
Enter the Return code for the return that this application is for (file a separate application for each return)  Application  Is For  Code  Form 990 or Form 990-EZ  Form 990-BL  Form 990-BL  Form 990-PF  Form 990-PF  Form 990-T (frust other than above)  STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.  CANNON & COMPANY  The books are in the care of ▶ 10850 WILSHIRE BLVD. STE 1200 - LOS ANGELES, CA 90024  Telephone No ▶ (310) 446-0118  FAX No ▶ (310) 446-0132  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  I request an additional 3-month extension of time until NOVEMBER 15, 2013.  For calendar year 2012, or other tax year beginning  , and ending	IRE BLVD. STE 12	0.0				
Enter the Return code for the return that this application is for (file a separate application for each return)  Application Is For Code Code Is For Code Code Code Code Code Code Code Code	fice, state, and ZIP code. For a f	foreign add	dress, see instructions.			
Application  Is For  Code Is For  1041-A  08  Form 4720 09  Form 990-BL  Form 990-PF  Od Form 5227 10  Form 990-T (trust other than above)  Of Form 8870 11  STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.  CANNON & COMPANY  • The books are in the care of ▶ 10850 WILSHIRE BLVD. STE 1200 - LOS ANGELES, CA 90024  Telephone No ▶ (310) 446-0118  FAX No. ▶ (310) 446-0132  • 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 part of the group, check this box  • If this is for part of the group, check this box  • Ir equest an additional 3-month extension of time until  NOVEMBER 15, 2013.  • And ending  • And ending	, CA 90024					
Application  Is For  Code Is For  1041-A  08  Form 4720 09  Form 990-BL  Form 990-PF  Od Form 5227 10  Form 990-T (trust other than above)  Of Form 8870 11  STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.  CANNON & COMPANY  • The books are in the care of ▶ 10850 WILSHIRE BLVD. STE 1200 - LOS ANGELES, CA 90024  Telephone No ▶ (310) 446-0118  FAX No. ▶ (310) 446-0132  • 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 part of the group, check this box  • If this is for part of the group, check this box  • Ir equest an additional 3-month extension of time until  NOVEMBER 15, 2013.  • And ending  • And ending						<u> </u>
SFor   Code   Is For   Code   Is For   Code   Is For   Form 990 or Form 990	urn that this application is for (fil	le a separa	ate application for each return)			0 4
SFor   Code   Is For   Code   Is For   Code   Is For   Form 990 or Form 990						<del></del>
Form 990 or Form 990-EZ  Form 990-BL  Form 4720 (individual)  Form 970-PF  Form 990-PF  Form 990-T (sec 401(a) or 408(a) trust)  Form 990-T (trust other than above)  STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.  CANNON & COMPANY  The books are in the care of ► 10850 WILSHIRE BLVD. STE 1200 - LOS ANGELES, CA 90024  Telephone No ► (310) 446-0118  FAX No. ► (310) 446-0132  If the organization does not have an office or place of business in the United States, check this box		Return	Application			Return
Form 990-BL  Form 4720 (individual)  Form 990-PF  O4 Form 5227  Form 990-T (sec 401(a) or 408(a) trust)  Form 990-T (trust other than above)  STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.  CANNON & COMPANY  The books are in the care of ▶ 10850 WILSHIRE BLVD. STE 1200 - LOS ANGELES, CA 90024  Telephone No ▶ (310) 446-0118  FAX No. ▶ (310) 446-0132  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 part of the group, check this box ▶ and attach a list with the names and EINs of all members the extension is for  VOVEMBER 15, 2013.  NOVEMBER 15, 2013.	<del></del> -	Code	is For			Code
Form 4720 (individual)  Form 990-PF  04 Form 5227  Form 990-T (sec 401(a) or 408(a) trust)  Form 990-T (trust other than above)  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.  CANNON & COMPANY  The books are in the care of ▶ 10850 WILSHIRE BLVD. STE 1200 - LOS ANGELES, CA 90024  Telephone No ▶ (310) 446-0118  FAX No. ▶ (310) 446-0132  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 part of the group, check this box  I request an additional 3-month extension of time until  NOVEMBER 15, 2013.  NOVEMBER 15, 2013.		01				<del></del>
Form 990-PF  Form 990-T (sec 401(a) or 408(a) trust)  Form 990-T (trust other than above)  STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.  CANNON & COMPANY  The books are in the care of ▶ 10850 WILSHIRE BLVD. STE 1200 - LOS ANGELES, CA 90024  Telephone No ▶ (310) 446-0118  FAX No. ▶ (310) 446-0132  If the organization does not have an office or place of business in the United States, check this box	<del></del>	+				08
Form 990-T (sec 401(a) or 408(a) trust)  Form 990-T (trust other than above)  STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.  CANNON & COMPANY  The books are in the care of \( \bigcup \) 10850 WILSHIRE BLVD. STE 1200 - LOS ANGELES, CA 90024  Telephone No \( \bigcup \) (310) 446-0118  FAX No. \( \bigcup \) (310) 446-0132  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 \( \bigcup \) and attach a list with the names and EINs of all members the extension is for NOVEMBER 15, 2013.  For calendar year 2012, or other tax year beginning, and ending, and ending		<del> </del>				09
Form 990-T (trust other than above)  STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.  CANNON & COMPANY  • The books are in the care of ▶ 10850 WILSHIRE BLVD. STE 1200 - LOS ANGELES, CA 90024  Telephone No ▶ (310) 446-0118  • 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 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  5 For calendar year 2012, or other tax year beginning , and ending		04				10
STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.  CANNON & COMPANY  The books are in the care of ▶ 10850 WILSHIRE BLVD. STE 1200 - LOS ANGELES, CA 90024  Telephone No ▶ (310) 446-0118  FAX No. ▶ (310) 446-0132  If the organization does not have an office or place of business in the United States, check this box	Form 990-T (sec 401(a) or 408(a) trust)		Form 6069			11
CANNON & COMPANY  • The books are in the care of ▶ 10850 WILSHIRE BLVD. STE 1200 - LOS ANGELES, CA 90024  Telephone No ▶ (310) 446-0118 FAX No. ▶ (310) 446-0132  • 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 ▶ □ 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  5 For calendar year 2012, or other tax year beginning , and ending	<del></del>		·			12
Telephone No ► (310) 446-0118 FAX No. ► (310) 446-0132  If the organization does not have an office or place of business in the United States, check this box			matic 3-month extension on a pre-	riously file	ed Form 8868.	<del></del>
Telephone No ► (310) 446-0118  FAX No. ► (310) 446-0132  • If the organization does not have an office or place of business in the United States, check this box						0.4
• If the organization does not have an office or place of business in the United States, check this box		BLVD			SS, CA 900	<u> </u>
<ul> <li>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 to box</li></ul>						
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  I request an additional 3-month extension of time until  For calendar year 2012, or other tax year beginning, and ending						
4 I request an additional 3-month extension of time until NOVEMBER 15, 2013.  5 For calendar year 2012, or other tax year beginning, and ending,						
5 For calendar year 2012, or other tax year beginning, and ending				r all memb	pers the extension	IS TOF
		NOVEM				
						<del></del>
	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  State in detail why you need the extension						
ADDITIONAL TIME IS REQUESTED TO REVIEW, ANALYZE AND OBTAIN INFORMATION						
NECESSARY TO PREAPARE A COMPLETE AND ACCURATE RETURN.						
MECESSARI TO PREAFARE A COMPUSIE AND ACCURATE RETURN:	FREAFARE A COMPIL	EIE A	ND ACCORATE RETURN	•		
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	m 990 PL 990 PE 990 T 4720	05.6060.0	enter the tentative tax less any		1	······
		01 0009, 6	site the terrative tax, less arry	90	•	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated	nonrefundable credits. See instructions.		oa	<b>4</b>		
· · · · · · · · · · · · · · · · · · ·						
	tax payments made Include any prior year overpayment allowed as a credit and any amount paid			- Oh		0.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using	<u>.</u>					
	0.					
Signature and Verification must be completed for Part II only.			st he completed for Part II		1 Ψ	
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,	hat I have examined this form, includ	ding accomp	-	-	of my knowledge and	belief,
it is true, correct, and complete, and that I am authorized to prepare this form.	hat I am authorized to prepare this fo	orm.				•
Signature \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Title >	( P.	A	Date	P 8.4.13	

Date ► 8 · 14 · 13
Form 8868 (Rev 1-2013)