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Form 990-PF
Department of the Treasury Internal Revenue Service

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

For	alen	dar year 2012 or tax year beginning AP	PR 1, 2012	, and ending	MAR 31, 201	3
Nar	ne of	foundation			A Employer identification	on number
		EMERIL LAGASSE FOUNDA	****		42-153691	5
		nd street (or P O box number if mail is not delivered to str $ST. CHARLES\ AVE.$	eet address)	Room/suite	B Telephone number (504) 524	-4241
		own, state, and ZIP code			C If exemption application is	
		ORLEANS, LA 70130			if exemption application is	pending, check nere
G	heck	all that apply Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organization	ns, check here
		Final return	Amended return		Foreign organizations r check here and attach	neeting the 85% test,
		Address change	Name change	·-··	check here and attach	computation
H_(_		exempt private foundation Other taxable private founda	ation	E If private foundation st	
<u></u>		ction 4947(a)(1) nonexempt charitable trust Lirket value of all assets at end of year J Accou		X Accrual	under section 507(b)(
		Part II, col. (c), line 16)	Other (specify)	Accidal	F If the foundation is in a under section 507(b)(- 77
(<i>''</i>		5,752,947. (Part I, co		basis.)	under societi oo / b/(T/(b/, chook hore - Last
	irt I	Analysis of Revenue and Expenses	(a) Poyogue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may no necessarily equal the amounts in column (a))	expenses per books	income	income	for chantable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received	2,062,516.		N/A	
	2	Check In the foundation is not required to attach Sch. B.				<u> </u>
	3	Interest on savings and temporary cash investments	110 000	110 000		7.07.2 (1973.473.473.173
	4	Dividends and interest from securities	119,088.	119,088.		STATEMENT 1
Revenue		Gross rents				
		Net rental income or (loss)	112,143.	· · · · · · · · · · · · · · · · · · ·		111-111-1111-1111-111-111-11
	b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 843,744.	· · · · · · · · · · · · · · · · · · ·			
	7	assets on line 6a Capital gain net income (from Part IV, line 2)		112,143.		
	8					
	9	Netshort-termicapital gain			_	
	10a			.,		
	b	and allowances Less Cost of goods sold Gross profit or (loss)				
	1		720 042			STATEMENT 2
	11	Other income	739,843.	0. 231,231.		STATEMENT 2
	12 13	Total: Add lines 1-through-1-1	117,992.	231,231.		0.
	14	Compensation of officers, directors, trustees, etc Other employee salaries and wages	198,045.	0.	_	0.
		Pension plans, employee benefits	12,933.	0.		0.
ses	ı	Legal fees				
ben	b	Accounting fees STMT 3	11,600.	0.		0.
Operating and Administrative Expenso	C	Other professional fees STMT 4	69,825.	0.		0.
tive	17	Interest	22.756			0.
stra	18	Taxes STMT 5	23,756. 1,744.	0.		<u> </u>
Ë	19	Depreciation and depletion	1,/44.	0.		
Agn	20 21	Occupancy Travel, conferences, and meetings	118,787.	0.		0.
P	22	Printing and publications				
g	23	Other expenses STMT 6	997,487.	14,079.		0.
atir		Total operating and administrative				
ber		expenses. Add lines 13 through 23	1,552,169.	14,079.		0.
O	1	Contributions, gifts, grants paid	406,048.			406,048.
	26	Total expenses and disbursements.	1 050 017	14 070		406 040
		Add lines 24 and 25	1,958,217.	14,079.	<u> </u>	406,048.
		Subtract line 26 from line 12	1,075,373.			
		Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	1,010,313.	217,152.	,	1
		Adjusted net income (if negative, enter -0-)		22,,132.	N/A	
2005				·	·	

223501 12-05-12 LHA For Paperwork Reduction Act Notice, see instructions.

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
•	(must agree with end-of-year figure reported on prior year's return)	1	4,892,571.
2	Enter amount from Part I, line 27a	2	1,075,373.
3	Other increases not included in line 2 (itemize) UNREALIZED GAIN ON INVESTMENTS	3	97,034.
4	Add lines 1, 2, and 3	4	6,064,978.
5	Decreases not included in line 2 (itemize) ► PRIOR PERIOD ADJUSTMENT	5	215,929.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	5,849,049.

Part N Capital Gains a	nd Loss	es for Tax on Inve	stment	Income						
) of property sold (e g , re ommon stock, 200 shs M			(b) D	low ac - Purc - Dona	11456	(c) Date a (mo., d	acquired ay, yr)	(d) Date sold (mo , day, yr)
1a PUBLICLY TRADED	SECU:	RITIES								
b										
<u>C</u>										
<u>d</u>		·								
<u>e</u>	(f) Denr	eciation allowed	(n) Cos	t or other basis				(h) G:	ain or (loss	\ \
(e) Gross sales price		allowable)		xpense of sale					(f) minus	
a 843,744.				731,60	1.					112,143.
b										
С										
<u>d</u>										
Complete only for assets showing	a coup up colu	mn (h) and owned by the	foundation	on 12/21/60				Cours /C		
Complete only for assets showing		djusted basis		cess of col (I)			coi	(k), but r	ol. (h) gain not less tha	n -0-) or
(i) F M V as of 12/31/69		of 12/31/69		col (j), if any				Losses	(from col (h))
a										112,143.
b			•	. <u>-</u>						· · · · · · · · · · · · · · · · · · ·
C										
<u>d</u>							,			
e					_		Γ			
2 Capital gain net income or (net cap	utal loss)	If gain, also enter in I If (loss), enter -0- in			}	2		<u>.</u>		112,143.
3 Net short-term capital gain or (loss		in sections 1222(5) and (6	5)		` \					
If gain, also enter in Part I, line 8, c	olumn (c).				•	2			N/A	
If (loss), enter -0- in Part I, line 8 Part V Qualification Ur	nder Sec	tion 4940(e) for Re	educed	Tax on Net	Inv	<u> </u>	nent Inc	ome	IV/ A	·
If section 4940(d)(2) applies, leave this Was the foundation liable for the section of the secti	on 4942 tax y under sect	on 4940(e) Do not compl	lete this pa	rt		_				Yes X No
1 Enter the appropriate amount in ea	COLUMN T	-	uctions dei	ore making any e				Ι		(d)
Base period years Calendar year (or tax year beginning	g In)	(b) Adjusted qualifying distribi	1	Net value of no					Distrit (col (b) div	oùtión ratio rided by col. (c))
2011			038.				5,951 7,919			.081262
2010	<u> </u>		990.			 	$\frac{7,313}{1,397}$.166272
2009		1,223,					4,224			.357446
2007			439.				3,537			.305581
2 Total of line 1, column (d)				_				2		1.511015
3 Average distribution ratio for the 5	-year base pe	riod - divide the total on li	ne 2 by 5,	or by the number	of ye	ars	•			-
the foundation has been in existent	ce if less thai	5 years	,		-			3		.302203
4 Enter the net value of noncharitable	e-use assets	for 2012 from Part X, line	5					4		5,289,598.
5 Multiply line 4 by line 3				.				5		1,598,532.
6 Enter 1% of net investment income	e (1% of Part	I, line 27b)						6		2,172.
7 Add lines 5 and 6								7		1,600,704.
8 Enter qualifying distributions from	Part XII, line	4						8_		406,048.
If line 8 is equal to or greater than I	line 7, check	the box in Part VI, line 1b,	and comp	lete that part usin	g a 1'	% tax	rate			
See the Part VI Instructions		· · · · · · · · · · · · · · · · · · ·								000 75
223521 12-05-12									F	orm 990-PF (2012)

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Fo <u>r</u> m	990-PF(2012) THE EMERIL LAGASSE FOUNDATION 42-1536	915	F	Page 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	nstru	ction	ıs)
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 here and enter 1%	1	4,34	43.
	of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b).			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
3	Add lines 1 and 2	- 4	4,34	43.
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-		4,34	43.
6	Credits/Payments			
а	2012 estimated tax payments and 2011 overpayment credited to 2012 6a			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld 6d			
	Total credits and payments Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8		- 1	84.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		4,42	27.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	Enter the amount of line 10 to be Credited to 2013 estimated tax ▶ Refunded ▶ 11			
	rt 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 or intervene in		Yes	No
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities.			
C	Did the foundation file Form 1120-POL for this year?	10		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ► \$ O . (2) On foundation managers ► \$ O .			
9	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		1	
	managers ▶ \$ 0.		1	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		1	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year? N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.			,,,,, ,, ,
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	Х	
	If "Yes," complete Part II, col. (c), and Part XV.			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	LA			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
	of each state as required by General Instruction G? If "No," attach explanation	8b	x]	
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 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		X
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X
		n 990 -	·PF (2	2012)

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orm	990-PF (2012) THE EMERIL LAGASSE FOUNDATION 42-153	6915		Page 5
Pa	rt VII-A Statements Regarding Activities (continued)			
11	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		х
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? Website address EMERIL • ORG	13	Х	
14	The books are in care of ► CAROL RIPLEY Telephone no. ► (504)	524	-42	41
• •	Located at ▶829 ST. CHARLES AVE., NEW ORLEANS, LA ZIP+4 ▶7			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			$\overline{\Box}$
	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			
Pε	ert 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?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes No			
	(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) Yes X No			
t	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)?	1b		X
	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))			
a	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? Yes X No			
	If "Yes," list the years \blacktriangleright			
t	Are there any years listed in 2a for which the foundation is not 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)	2b		ļ
C	If the provisions of section 4942(a)(2) are being applied to any 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? Yes X No			
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.) . N/A	3b		v
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			v
	had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4b		X

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions.)
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	4,242,182.
b		1b	4,242,182. 1,127,968.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	5,370,150.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	5,370,150.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	80,552.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	80,552. 5,289,598.
6	Minimum investment return. Enter 5% of line 5	6	264,480.
ΠĎ	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	d certain	
_	foreign organizations check here and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	264,480.
2a	Tax on investment income for 2012 from Part VI, line 5		
b	Income tax for 2012. (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	4,343. 260,137.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	260,137.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	260,137.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7</u>	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	260,137.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	406,048.
b	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., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	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	406,048.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	406,048.
-	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	ualifies fo	
	4940(e) reduction of tax in those years		

Part XIII Undistributed Income (see instructions)

	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2011	2011	2012
1 Distributable amount for 2012 from Part XI,				
line 7 .			11 11 11 11 11 11 11 11 11 11 11 11 11	260,137.
2 Undistributed income, if any, as of the end of 2012				
a Enter amount for 2011 only	!!		0.	
b Total for prior years		_		
··		0.	' ' ' ' ' ' !: !::!::: ' !:!'! ;:!'	· ii i' ·
3 Excess distributions carryover, if any, to 2012				
a From 2007 797,278.				
b From 2008 1,053,954.		į		
c From 2009 367,386.				
d From 2010 648,950.				
e From 2011 141,487.	2 000 055			
f Total of lines 3a through e	3,009,055.			
4 Qualifying distributions for 2012 from				
Part XII, line 4 ▶ \$ 406,048.			0.	
a Applied to 2011, but not more than line 2a	· '''. ::::::- ::::::- '			
b Applied to undistributed income of prior		0.		
years (Election required - see instructions) c Treated as distributions out of corpus		· · · · · · · · · · · · · · · · · · ·	. 	'to d'
(Election required - see instructions)	0.			
d Applied to 2012 distributable amount				260,137.
e Remaining amount distributed out of corpus	145,911.			200,137.
5 Excess distributions carryover applied to 2012	0.	/// /-//// Hitter MHH-, ////	· · · · · · · · · · · · · · · · · · ·	0.
(if an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:			***************************************	
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	3,154,966.			
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				
amount - see instructions		0.		·····
e Undistributed income for 2011 Subtract line				
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	707 270			
not applied on line 5 or line 7	797,278.			······································
9 Excess distributions carryover to 2013.	2 257 600			
Subtract lines 7 and 8 from line 6a	2,357,688.			
Analysis of line 9				
a Excess from 2008 b Excess from 2009 1,053,954. 367,386.				
640 050				
141 405				
d Excess from 2011 141,487. e Excess from 2012 145,911.				
E LAUGOS HUIII ZUIZ TEO () TEO () TEO	·	<u>_</u> <u>_</u>	1	Form 000 DE (2012)

	ERIL LAGASSE				36915 Page 1
Part XIV Private Operating I			I-A, question 9)	N/A	
1 a If the foundation has received a ruling		, , ,			
foundation, and the ruling is effective for		•	▶ └_		
b Check box to indicate whether the foun		ng foundation described		4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(1) 0044	Prior 3 years	(4) 0000	<u> </u>
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					<u> </u>
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 alternative test relied upon:			:		
a "Assets" alternative test - enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter	-				
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
secunties loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from			· · ·		-
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	on had \$5.000 or m	ore in assets
at any time during				. ,	
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wi	_	than 2% of the total con	tributions received by	the foundation before the clo	se of any tax
year (but only if they have contributed i	more than \$5,000) (See s	ection 507(d)(2))	_		-
EMERIL J. LAGASSE II	I				
b List any managers of the foundation will other entity) of which the foundation has			(or an equally large po	rtion of the ownership of a p	partnership or
NONE	-				
2 Information Regarding Contribut	ion, Grant, Gift I can	Scholarship etc. D	rograms.	-	
			-	s not accept unsolicited requ	usete for funde. If
the foundation makes gifts, grants, etc					
a The name, address, and telephone num	······································	-		· · · · · · · · · · · · · · · · · · ·	
b The form in which applications should NOT APPLICABLE	be submitted and informat	tion and materials they s	hould include		
c Any submission deadlines NOT APPLICABLE					
d Any restrictions or limitations on award	s, such as by geographica	ıl areas, charitable fields	kinds of institutions,	or other factors	
NOT APPLICABLE					

3 Grants and Contributions Paid During the		Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Contribution	Amount
a Paid during the year				
ALAQUA ANIMAL REFUGE 914 WHITFIELD ROAD	NONE	PUBLIC CHARITY	LIFE SKILLS DEVELOPMENT	
FREEPORT, FL 32439			DEVELOPMENT	5,000
BRIAN DE LA PUENTE CHARITY DINNER 5800 AIRLINE DRIVE	NONE	PUBLIC CHARITY	DONATION TO FUNDRAISER	
METAIRIE, LA 70003				150
CAMILLE'S ART FOR AUTISM 1415 DEER AVE.	NONE	PUBLIC CHARITY	LIFE SKILLS DEVELOPMENT	5.000
PANAMA CITY, FL 32401				5,000
CHILDREN'S VOLUNTEER P.O. BOX 2142	NONE	PUBLIC CHARITY	LIFE SKILLS DEVELOPMENT	
SANTA ROSA BEACH, FL 32459				5,000
CITY YEAR NEW ORLEANS 805 HOWARD AVENUE	NONE	PUBLIC CHARITY	CHILDREN'S EDUCATION & DONATION TO FUNDRAISER	
NEW ORLEANS, LA 70113	ONTINUATION SHEE	7m / C)	N 22	1,500
b Approved for future payment	MIINOALION SHE	21 (2)	▶ 3a	424,781
NONE				
Total			▶ 3b	0

Part XVI-A	Analysis	of Income	-Producing	Activities

Program service revenue	(a) Business code	(b) Amount	(C) Exclu- sion	(d)	(e) Related or exempt
a			SION		TOTALOG OF GAGITIDE
a			code	Amount	function income
b					
С					
d					
e		-			
1					
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			14	119,088.	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	112,143. <277,868.>	
9 Net income or (loss) from special events			01	<277,868.>	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b					
C					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		().	<46,637.>	0
13 Total. Add line 12, columns (b), (d), and (e)				13	<46,637

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

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes)			
-				
-				

223621 12-05-12

Part X	Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations								
1 Did ti	ne organization directly or indi		of the followin	n with any other organizati	ion described in secti	on 501(c) of	1	Yes	No
	ode (other than section 501(c					011 00 1(0) 01			
	sfers from the reporting found				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
(1) Cash						1a(1)		Х	
٠,	Other assets		•		•		1a(2)		X
	r transactions					•	10/2/		
	Sales of assets to a noncharita	ble exempt organiza	tion				1b(1)	1	Х
	Purchases of assets from a no				•	•	1b(2)		Х
	Rental of facilities, equipment,		. gaza		•		1b(3)		Х
	Reimbursement arrangements			•			1b(4)		Х
	Loans or loan guarantees			·			1b(5)		Х
	Performance of services or me	embership or fundra	sing solicitatio	ons .			1b(6)		Х
c Shar	ing of facilities, equipment, ma	uling lists, other asse	ets, or paid em	ployees	**		10		X
d If the	answer to any of the above is	"Yes," complete the	following sche	edule Column (b) should a	lways show the fair n	narket value of the goods,	other ass	ets,	
or se	rvices given by the reporting f	oundation If the fou	ndation receiv	ed less than fair market val	lue in any transaction	or sharing arrangement,	show in		
colur	nn (d) the value of the goods,	other assets, or sen	rices received						
(a) Line no	(b) Amount involved	(c) Name o		e exempt organization	(d) Description	of transfers, transactions, and	shanng ar	rangeme	nts
			N/A						
									
					- 				
			· · · · · · · ·						
							<u>-</u>		
						<u> </u>			
				-M-17-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-					
			 						
-	 -								
	 								
ın se	e foundation directly or indirection 501(c) of the Code (others," complete the following sch	r than section 501(c				(c) Description of relations	Yes	X] No
	N/A	-				······			
	Under penalties of perjury, I declare and belief, it is true correct, and correct and corr	ripliete Declaration of p			mation of which preparer	has any knowledge SE CHAIR- Meritan	ay the IRS of turn with th own below X Yes	e prepar (see ins	er
	Print/Type preparer's na	ame	Preparer's s	gnature	Date	Check if PTIN			
			L.	A Acres	1-1-1	self- employed	05.46	266	
				2/3/14		0543			
Prepai		TLETHWAIT	E & NE	TTEKVILLE		Firm's EIN ► 72-1	2024	45	
Use O		TO CALLERY	יז דו א	CME 0100					
	1			., STE 2100		1504	1027	E 0	0.0
	ME ME	TAIRIE, I	A /000	<u>T</u>)837		
						ŀ	orm 990		2012)

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

2012

Name of the organization **Employer identification number** THE EMERIL LAGASSE FOUNDATION 42-1536915 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 foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 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 X 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 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 I, 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).

THE E	MERIL LAGASSE FOUNDATION	42	2-1536915
Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	A. R. GALLO INVESTMENTS		Person X
	2473 JAY ST.	\$6,955.	Payroll Noncash
	NEW ORLEANS, LA 70122		(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	ABITA BREWING COMPANY, LLC		Person X
	P.O. BOX 1510	\$18,000.	Payroll
:	ABITA SPRINGS, LA 70420		(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	B&G FOODS		Person X
	4 GATEHALL DRIVE	\$ 24,500.	Payroll Noncash
	PARSIPPANY, NJ 07054		(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	BANK PLUS		Person X
	1068 HIGHLAND COLONY PKWY, SUITE 300	\$24,500.	Payroll Noncash
	RIDGELAND, MS 39157		(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	BENI DRAGUTSKY	Total Contributions	
	198 CLOISTER GREEN COVE	\$ 7,667.	Person X Payroll Noncash
	MEMPHIS, TN 38120	\$	(Complete Part II if there is a noncash contribution.)
			,
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	BEVERLY BEDSOLE		Person X
	3014 HWY 513	\$69,233.	Payroll Noncash
	MANSFIELD, LA 71052		(Complete Part II if there is a noncash contribution.)

THE EMERIL LAGASSE FOUNDATION

Part I C	Contributors	(see instructions).	Use duplicate co	pies of Part I if ac	ditional space is needed.
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	Continuators (see instructions). Ose duplicate copies of rare in additional	·	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	BRETT & ANN PERSON 4651 SOUTHWINDS III DR. DESTIN, FL 32550	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	BRION WISE PO BOX 1741 SONOMA, CA 95476	\$5,500.	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
9	CAROLE MARKS 30 TRAIL LANE WOODSIDE, CA 94062	\$	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
10	CENTER FOR RESTORATIVE BREAST SURGERY, LLC P.O. BOX 8664 METAIRIE, LA 70011	\$9,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	CITY EATS BY FOOD NETWORK 300 GRAVIER STREET NEW ORLEANS, LA 70130	\$9,000.	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
12	CRESCENT BANK & TRUST P.O. BOX 61813 NEW ORLEANS, LA 70161	\$ 58,655.	Person X Payroll

THE EMERIL LAGASSE FOUNDATION

Part I Contributors (see instructions). Use duplicate copies of Part I if a	additional space is needed.
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Part I	Contributors (see instructions). Use duplicate copies of Part I if add	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	DAVID & SHELLY KIM 9591 JAMES CIRCLE VILLA PARK, CA 92861	\$ <u>24,500.</u>	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
14	DEBORAH GOLDMAN 202 CASCADE DRIVE MILL VALLEY, CA 94941	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
15	DIANE SCRUGGS 700 FAULKNER WOODS PLACE OXFORD, MS 38655	s10,391.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
16	DR. KEVIN D. PLANCHER 1160 PARK AVE. NEW YORK, NY 10128	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
	Name, address, and ZIP + 4 DR. SCOTT SULLIVAN & DR. MICHELE COOPER PO BOX 8664 METAIRIE, LA 70011	* 9,723.	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
18	EMERIL J. LAGASSE III 829 ST. CHARLES AVENUE NEW ORLEANS, LA 70130	\$\$ <u>20,425</u> .	Person X Payroll

THE EMERIL LAGASSE FOUNDATION

Late :	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	FIJI WATER COMPANY 11444 W. OLYMPIC BLVD., #210 LOS ANGELES, CA 90064	\$\$\$	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
20	GARY N. SOLOMON P.O. BOX 11270 NEW ORLEANS, LA 70181	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
21	GOLDRING FAMILY FOUNDATION 809 JEFFERSON HIGHWAY NEW ORLEANS, LA 70121	\$\$.	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
22	GROUPE SEB USA 1 BOLAND DRIVE, SUITE 101 WEST ORANGE, NJ 07052	\$ 24,500.	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
23	HAGAR FAMILY FOUNDATION P.O. BOX 5395 NOVATO, CA 94948	s 100,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
24	HANCOCK BANK/WHITNEY BANK P.O. BOX 4019 GULFPORT, MS 39502	\$\$.	Person X Payroll
223452 12-2	1-12	Schedule B (Form 9	990, 990-EZ, or 990-PF) (2012)

THE EMERIL LAGASSE FOUNDATION

Part I	Contributors (see instructions). Use duplicate copies of Part I if additi	ional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	JAMES FIFIELD 350 EAGLE PARK DR.		Person X Payroll Noncash
	ASPEN, CO 81611	_	(Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
26	JAMES LIAUTAUD	_	Person X
	2212 FOX DR.	\$50,000.	Noncash
	CHAMPAIGN, IL 61820	_	(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
27	JAMES NORTH - JIMMY JOHN'S		Person X
	2212 FOX DR.	\$\$\$	Payroll Noncash
	CHAMPAIGN, IL 61820	_	(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
28	JCPENNEY		Person X
	P.O. BOX 596	\$ 27,000.	Payroll Noncash
	SALT LAKE CITY, UT 84110	_	(Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
29	KAY ANDERSON	_]	Person X
	6480 SOUTH OAKS CIRCLE	_ \\$7,667.	Payroll Noncash
	MEMPHIS, TN 38119	_	(Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4 LA DEPT OF TREASURY (LOUISIANA	Total contributions	Type of contribution
30	SEAFOOD)	_	Person X
	1051 NORTH THIRD STREET, 3RD FLOOR	\$24,500.	Payroll Noncash
	BATON ROUGE, LA 70802		(Complete Part II if there is a noncash contribution.)
223452 12-2		Schedule B (Form	990, 990-EZ, or 990-PF) (2012)

Name of organization

Employer identification number

THE EMERIL LAGASSE FOUNDATION

42-1536915

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
31	LASSIE & HARRY FLOWERS 68 ESON STREET CLARKSDALE, MS 38614	\$ <u>10,000.</u>	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
32	LOWRY & MARLA LOMAX 404 TYLER AVE OXFORD, MS 38655	\$6,142.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
33	MARIO BATALI, LLC 465 SOUTH STREET MORRISTOWN, NJ 07960	\$ 106,853.	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
34	MARTHA STEWART LIVING OMNIMEDIA 601 WEST 26TH STREET NEW YORK, NY 10001	\$5,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
35	MAT MEDIA (PAT ROBERTS & MICHAEL BABICH & BETH WALTERS) 201 SOUTH MONROE ST TALLAHASSE, FL 32301	\$\$	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
36	MICHAEL BROWNE 401 LAGUNA VISTA ROAD SANTA ROSA, CA 94501	\$5,200.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)

THE EMERIL LAGASSE FOUNDATION

terms of the second sec	Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.
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Part I	Contributors (see instructions). Use duplicate copies of Part I if additi	onal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
37	MIKE & VALERIE THOMPSON 3120 MERION DRIVE MIRAMAR BEACH, FL 32550	\$92,050.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
38	MR. & MRS. BERNT & ELIZABETH BODAL 2025 1ST AVENUE, SUITE 900 SEATTLE, WA 98121	- - - -	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
39	MR. & MRS. CRAIG & LYNN BOES 4801 SHERIDAN AVE. METAIRIE, LA 70002	- - \$\$.	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
40	MR. & MRS. FRANK & KATHY DOTZLER 2075 SUMMIT LAKE DRIVE ANGWIN, CA 94508	_ \	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
41	MR. & MRS. MICHAEL & ROXANNE KLEIN PO BOX 317 SONOMA, CA 94576	\$10,000.	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
223452 12-2	MR. & MRS. PAUL & SUZIE FRANK 433 HARBOR ISLAND DR. NEWPORT BEACH, CA 94660	\$ 10,175.	Person X Payroll

THE EMERIL LAGASSE FOUNDATION

42-1536915

Part I	Contributors ((see instructions	. Use duplicate copies of Part I if additional space is needed.
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101	/L\	(2)	1.0
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
43	MR. & MRS. PAUL & STACY JACOBS 9075 LA JOLLA SHORES LANE LA JOLLA, CA 92037	\$ 7,350.	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
44	MR. & MRS. SANDY & ART BOBROW 224 COMMODOR DRIVE JUPITER, FL 33477	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
45	MR. BILL WEIDNER & MRS. SIS WEIDNER P.O. BOX 9455 METAIRIE, LA 70055	\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b) Name, address, and ZIP + 4	(c)	(d)
No.	Name, address, and ZIF + 4	Total contributions	Type of contribution
46	MR. CHUCK WAGNER P.O. BOX 268 RUTHERFORD, CA 94573	* 35,120.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
_	MR. CHUCK WAGNER P.O. BOX 268	_	Person X Payroll Noncash (Complete Part II if there
46 (a)	MR. CHUCK WAGNER P.O. BOX 268 RUTHERFORD, CA 94573 (b)	- \$ 35,120. - (c)	Person X Payroli Noncash (Complete Part II if there is a noncash contribution.)
46 (a) No.	MR. CHUCK WAGNER P.O. BOX 268 RUTHERFORD, CA 94573 (b) Name, address, and ZIP+4 MR. JIM CLENDENEN 4665 SANTA MARIA MESA ROAD	\$ 35,120.	Person X Payroli Noncash (Complete Part II if there is a noncash contribution.) (d) Type of contribution Person X Payroll Noncash (Complete Part II if there
(a) No. 47	MR. CHUCK WAGNER P.O. BOX 268 RUTHERFORD, CA 94573 (b) Name, address, and ZIP+4 MR. JIM CLENDENEN 4665 SANTA MARIA MESA ROAD SANTA MARIA, CA 93454 (b)	\$ 35,120. (c) Total contributions \$ 7,450.	Person X Payroll

223452 12-21-12

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

THE EMERIL LAGASSE FOUNDATION

FAFLE CONTINUTORS (see instructions). Use duplicate copies of Part I if additional space is needed	Part I	ontributors (see instructions). Use duplicate copies of Part I if additional space is needed.
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(c) (d) Name, address, and ZIP + 4 Total contributions Type of contribution Typ		Contributors (see instructions). Ose duplicate copies of Part III addition	onai space is needed.	
Section Sect		• •		1
No. Name, address, and ZIP + 4 Total contributions Type of contribution	49	5911 PITT ST.	\$\$6,208.	Payroli Noncash (Complete Part II if there
B619 RUETTE MONTE CARLO \$ 7,000.		• •		1
No.	50	8619 RUETTE MONTE CARLO	\$\$.	Payroll Noncash (Complete Part II if there
### A935 IVANHOE HOUSTON, TX 77027 ### A935 IVANHOE HOUSTON, TX 77027 ### A035 IVANHOE HOUSTON, TX 77027 ### A036 IVANHOE HOUSTON, TX 77027 ### A036 IVANHOE HOUSTON, TX 77027 ### A036 IVANHOE ### A03		, ,		
No. Name, address, and ZIP + 4 Total contributions Type of contribution	51	4935 IVANHOE	\$\$6,667.	Payroli Noncash (Complete Part II if there
DO NOT HAVE ADDRESS \$ 14,320. Payroll Noncash Complete Part II of there is a noncash contribution.) (a) No. Name, address, and ZIP + 4 Total contributions Person X Payroll Noncash Noncash		• •		1
No. Name, address, and ZIP + 4 Total contributions Type of contribution Person X Payroll Noncash (Complete Part II if there is a noncash contribution) (a) No. Name, address, and ZIP + 4 PARADIGM (AS PART OF AMERICAN FINE WINE COMP.) CLIENT TRUST ACCOUNT AGO PARK AVENUE SOUTH, 16TH FLOOR NEW YORK, NY 10010 New YORK, NY 10010 Total contributions (c) (d) Total contributions Person X Payroll Type of contribution Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)	52		- - \$\$14,320.	Payroll
PO BOX 1531 ANNA MARIA, FL 34216 (Complete Part II if there is a noncash contribution.) (a) No. Name, address, and ZIP + 4 Payroll (Complete Part II if there is a noncash contribution.) (b) No. Name, address, and ZIP + 4 PARADIGM (AS PART OF AMERICAN FINE WINE COMP.) CLIENT TRUST ACCOUNT 360 PARK AVENUE SOUTH, 16TH FLOOR NEW YORK, NY 10010 Payroll Payroll Payroll Complete Part II if there is a noncash contribution.)			•	1
No. Name, address, and ZIP + 4 PARADIGM (AS PART OF AMERICAN FINE WINE COMP.) CLIENT TRUST ACCOUNT 360 PARK AVENUE SOUTH, 16TH FLOOR NEW YORK, NY 10010 Total contributions Type of contribution Person X Payroll Noncash (Complete Part li ff there is a noncash contribution.)	53	PO BOX 1531	\$\$	Payroll
PARADIGM (AS PART OF AMERICAN FINE WINE COMP.) CLIENT TRUST ACCOUNT 360 PARK AVENUE SOUTH, 16TH FLOOR NEW YORK, NY 10010 Person X Payroll Noncash (Complete Part lift there is a noncash contribution.)				•
		PARADIGM (AS PART OF AMERICAN FINE WINE COMP.) CLIENT TRUST ACCOUNT 360 PARK AVENUE SOUTH, 16TH FLOOR	- 60,000	Person X Payroll Noncash (Complete Part II if there
	222452 12 2		Schadula R /Form	<u> </u>

THE EMERIL LAGASSE FOUNDATION

42-1536915

			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
55	PAT ROBERTS		Person X
	201 SOUTH MONROE ST, SUITE 201	\$ 7,500.	Noncash
	TALLAHASSE, FL 32301		(Complete Part II if there is a noncash contribution
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>56</u>	PAT TESSON (TESSON FOUNDATION)		Person X Payroll
	211 ESQUINANCE ST.	\$9,000.	Noncash
	MANDEVILLE, LA 70448		(Complete Part II if there is a noncash contribution
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
57	PENNY LOANE		Person X Payroll
	47 N. GARY GLEN CIRCLE	\$28,608.	Noncash
	SPRING, TX 77382		(Complete Part II if there is a noncash contribution
(a) No.	(b)	(c)	(d)
-	Name, address, and ZIP + 4 PLANCHER ORTHOPAEDICS & SPORTS	Total contributions	Type of contribution
58	MEDICINE, PLLC		Person X
	1160 PARK AVENUE	\$20,000.	Payroll Noncash
	NEW YORK, NY 10128		(Complete Part II if there is a noncash contribution

3119 MEI	RION DR	IVE	
MIRAMAR	BEACH,	${ t FL}$	32250

RALPH & JOYCE BONE

8462-152ND PL.

SAVAGE, MN 55378

RITA & MIKE CASTLE

(b)

Name, address, and ZIP + 4

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Person Payroll

Noncash

Person Payroll

Noncash

(Complete Part II if there

is a noncash contribution.)

(d)

Type of contribution

(Complete Part II if there

is a noncash contribution.)

7,500.

21,450.

(c)

Total contributions

59

(a)

No.

60

THE EMERIL LAGASSE FOUNDATION

Part	Contributors	(see instructions). Use duplicate copies of Part I if additional space is needed.
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/a\	<i>I</i> .\	1	4.5
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
61	P.O. BOX 9455 METAIRIE, LA 70055	\$\$ <u>5,500.</u>	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
62	ROUSES 1301 ST. MARY ST. THIBODAUX, LA 70301	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
63	RUSTY STAUB 403 S. SAPODILLA AVE. #214 WEST PALM BEACH, FL 33401	\$\$	Person X Payroll
(a) No.	(b) ' Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
64	SCOTT HEPPEL 1348 E CRESTWOOD DR MEMPHIS, TN 38119	\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
64 (a) No.	1348 E CRESTWOOD DR MEMPHIS, TN 38119 (b) Name, address, and ZIP + 4	\$ 7,666.	Payroll Noncash (Complete Part II if there
(a)	1348 E CRESTWOOD DR MEMPHIS, TN 38119 (b)	(c)	Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	1348 E CRESTWOOD DR MEMPHIS, TN 38119 (b) Name, address, and ZIP+4 SCRIPPS NETWORKS (CITY EATS BY FOOD NETWORK) P.O. BOX 5685	(c) Total contributions	Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) Type of contribution Person Payroll Noncash (Complete Part II if there
(a) No. 65	1348 E CRESTWOOD DR MEMPHIS, TN 38119 (b) Name, address, and ZIP+4 SCRIPPS NETWORKS (CITY EATS BY FOOD NETWORK) P.O. BOX 5685 CINCINNATI, OH 45201 (b)	(c) Total contributions \$ 8,000.	Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

THE EMERIL LAGASSE FOUNDATION

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.
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(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
67	STEPHEN DUGAS 668 WOODLAND BAYOU DR SANTA ROSA BEACH, FL 32459	- - \$\$40,500.	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
68	TERRI & MARK STARK 1605 4TH STREET, SUITE A SANTA ROSA, CA 95404	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
69	THE PRESERVATION SOCIETY OF NEWPORT COUNTY 424 BELLEVUE AVENUE NEWPORT, RI 02840	\$ <u>17,400</u> .	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
70	THE STANLEY E. HANSON FOUNDATION 2121 VIA BURTON ANAHEIM, CA 92806	\$\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
71	TRADEWINDS VIDEO, INC. 4615 BAYSHORE BLVD TAMPA, FL 33611	\$ 7,500.	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
72	TREY MCCARLEY 201 SOUTH MONROE STREET, SUITE 201 TALLAHASSE, FL 32301	\$ 33,000.	Person X Payroll

THE E	MERIL LAGASSE FOUNDATION	42	<u>-1536915</u>
Part I	Contributors (see instructions). Use duplicate copies of Part I if addit	tional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
73	UNITED HEALTHCARE SERVICES, INC. P.O. BOX 1459 MINNEAPOLIS, MN 55440	\$5,500.	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
74	VIKING RANGE CORPORATION P.O. BOX 956 GREENWOOD, MS 38935	\$16,500.	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 Occash 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 Oncash (Complete Part II if there is a noncash contribution.)

THE EMERIL LAGASSE FOUNDATION

Part II	Noncash Property (see instructions). Use duplicate copies of P	art 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. rom	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	<u></u>
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$Schedule B (Form 9	

Name of orga	inization			Employer identification number			
THE EM	ERIL LAGASSE FOUNDATION			42-1536915			
Part III	Exclusively religious, charitable, etc., individ year. Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc.,	following line entry. For organization contributions of \$1,000 or less for	ons completing Part III, enter	ns that total more than \$1,000 for the			
(a) No.	Use duplicate copies of Part III if additional	space is needed.					
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held			
		<u></u>					
							
-		(e) Transfer of gif	tt				
-	Transferee's name, address, and	ZIP + 4	Relationship of tra	nsferor to transferee			
(a) No.							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held			
		(e) Transfer of gif	it				
-	Transferee's name, address, and	ZIP + 4	Relationship of tra	nsferor to transferee			
				· · · · · ·			
(a) No.							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held			
		···					
			_	 			
		(e) Transfer of gif	t				
	To a section of the s	710 4	5				
-	Transferee's name, address, and	ZIP + 4	Helationship of tra	nsferor to transferee			
,							
(a) No.							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held			
				<u></u>			
.							
-		<u></u>		· · · · · · · · · · · · · · · · · · ·			
-		(e) Transfer of gif	t				
	<u> </u>	- 10 4	_				
\vdash	Transferee's name, address, and	<u> </u>	Relationship of tra	nsferor to transferee			
-							

Part XV Supplementary Information			·	_
3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		.
COMMON THREADS	NONE	DIBITC CHARTTY	DONATION TO FUNDRAISER	
500 N. DEARBORN, SUITE 605			DOMATION TO TOMBANISH	
CHICAGO, IL 60654				327.
CONTEMPORARY ARTS CENTER	NONE	PUBLIC CHARITY	CULTURAL AND ARTS	
900 CAMP STREET			ENRICHMENT	20.000
NEW ORLEANS, LA 70130				30,000.
COVENANT HOUSE	NONE	PUBLIC CHARITY	LIFE SKILLS	
611 N. RAMPART STREET			DEVELOPMENT	10 000
NEW ORLEANS, LA 70112				10,000.
EDIBLE SCHOOLYARD NOLA	NONE	PUBLIC CHARITY	DONATION TO FUNDRAISER	
2319 VALENCE STREET				
NEW ORLEANS, LA 70115				90.
EMERALD COAST CHILDREN'S ADVOCACY	NONE	PUBLIC CHARITY	LIFE SKILLS	
P.O. BOX 1237			DEVELOPMENT	
NICEVILLE, FL 32588				10,000.
FRIENDS OF CITY PARK	NONE	PUBLIC CHARITY	DONATION TO FUNDRAISER	
1 PALM DRIVE				1 000
NEW ORLEANS, LA 70124				1,000.
FRIENDS OF LEAH CHASE FUNDRAISER	NONE	PUBLIC CHARITY	DONATION TO FUNDRAISER	
(EDGAR "DOOKY" JR.) 2301 ORLEANS AVE				
NEW ORLEANS, LA 70119				2,000.
GEORGE RODRIGUE FOUNDATION	NONE	PUBLIC CHARITY	CULTURAL AND ARTS	
747 MAGAZINE STREET NEW ORLEANS, LA 70130			ENRICHMENT; DONATION TO FUNDRAISER	10,290.
GIRLS FIRST	NONE	PUBLIC CHARITY	DONATION TO FUNDRAISER	
201 ST. CHARLES AVENUE, SUITE 4411				1 000
NEW ORLEANS, LA 70170	1			1,000.
HOGS FOR THE CAUSE	NONE	PUBLIC CHARITY	PEEDING/HUNGER	
760 MAGAZINE STREET, UNIT 214			PROGRAMS; DONATION TO	
NEW ORLEANS, LA 70130	1	<u> </u>	FUNDRAISER	10,644.
Total from continuation sheets				408,131.

Part XV Supplementary Information 3 Grants and Contributions Paid During the You				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Ivanie and address (notife of pushiess)	or substantial contributor	recipient		 .
JUNIOR LEAGUE OF NEW ORLEANS 4645 FRERET STREET	NONE	PUBLIC CHARITY	TICKETS TO FUNDRAISER	
NEW ORLEANS, LA 70115				220
KELLY GIBSON CHARITY	NONE	PUBLIC CHARITY	DONATION TO FUNDRAISER	
P.O. BOX 57478 NEW ORLEANS, LA 70157				445
NEW ORDEANS, DA 70137				445
KIDS RETHINK NEW ORLEANS	NONE	PIIRITC CHARTTY	CULINARY AND NUTRITION	
1001 S. BROAD STREET, SUITE 206			EDUCATION; DONATION TO	
NEW ORLEANS, LA 70125			FUNDRAISER	6,000
KIDZ 1ST FUND	NONE	PUBLIC CHARITY		
1400 VILLAGE SQUARE BLVD., SUITE 3-229 FALLAHASSEE, FL 32312			DEVELOPMENT	5,000
KINGSLEY HOUSE	NONE	PUBLIC CHARITY	CHILDREN'S EDUCATION	
1600 CONSTANCE STREET				
NEW ORLEANS, LA 70130		<u> </u>		74,121
LIBERTY'S KITCHEN P.O. BOX 19293	NONE	PUBLIC CHARITY	CULINARY AND NUTRITION EDUATION	
NEW ORLEANS, LA 70179			EDUATION	20,000
LIFE IS BEAUTIFUL FOUNDATION	NONE	PUBLIC CHARITY	DONATION TO FUNDRAISER	
1501 SUPERIOR AVE, STE. 302				
NEWPORT BEACH, CA 92663				22
LSU HEALTH SCIENCES, DEPT OF	NONE	PUBLIC CHARITY	DONATION TO FUNDRAISER	
PSYCHIATRY 433 BOLIVAR ST.				
NEW ORLEANS, LA 70112				2,465
MT. SINAI FUNDRAISER	NONE	PUBLIC CHARITY	DONATION TO FUNDRAISER	
1 GUSTAVE L. LEVY PL.				
NEW YORK CITY, NY 10029				505
NEW ODI PANG PILIV GOGLUGO	VOVE			
NEW ORLEANS FILM SOCIETY 900 CAMP STREET	NONE	PUBLIC CHARITY	CULTURAL AND ARTS ENRICHMENT & TICKETS	
NEW ORLEANS, LA 70130			TO FUNDRAISER	3,178
Total from continuation sheets				

Part XV Supplementary Information Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
NOCCA 2800 CHARTRES STREET	NONE	PUBLIC CHARITY	CULINARY AND NUTRITION EDUCATION	
NEW ORLEANS, LA 70117				10,000
NOLA GREEN ROOTS	NONE	PUBLIC CHARITY		
3101 TULANE AVE.	NONE	PUBLIC CHARITI	DEVELOPMENT	
NEW ORLEANS, LA 70119		<u> </u>		2,500
NEW ORLEANS MUSEUM OF ART (LEAH CHASE	NONE	PUBLIC CHARITY	DONATION TO FUNDRAISER	
GALA) ONE COLLINS C. DIBOLL CIRCLE, CITY				
PARK NEW ORLEANS, LA 70124				2,000
OGDEN MUSEUM OF SOUTHERN ART	NONE	PUBLIC CHARITY	TICKETS TO FUNDRAISER	
925 CAMP STREET NEW ORLEANS, LA 70130				600
OPPORTUNITY VILLAGE	NONE	PUBLIC CHARITY	CHILDREN'S EDUCATION	
6300 W. OAKEY BLVD.				
LAS VEGAS, NV 89146		<u> </u>		2,500
PARKWAY PARTNERS 1137 BARONNE ST.	NONE	PUBLIC CHARITY	TICKETS TO FUNDRAISER	
NEW ORLEANS, LA 70113				200
PARTNERSHIP FOR YOUTH DEVELOPMENT	NONE	PUBLIC CHARITY	TICKETS TO FUNDRAISER	
1618 ST. CHARLES AVE. NEW ORLEANS, LA 70130				300
MIN O(2211110), 21. 70230				
SECOND HARVEST FOOD BANK	NONE	PUBLIC CHARITY	PEEDING/HUNGER	
700 EDWARDS AVE.			PROGRAMS	
NEW ORLEANS, LA 70123				25,000
SONOMA VINTNERS ASSOCIATION 3637 WESTWIND BLVD,	NONE	PUBLIC CHARITY	DONATION TO FUNDRAISER	
SANTA ROSA, CA 95403				474
SOUTHERN FOODWAYS ALLIANCE	NONE	PUBLIC CHARITY	CULINARY AND NUTRITION	
UNIVERSITY OF MS, P.O. BOX 1848			EDUCATION	1 000
UNIVERSITY, MS 38677 Total from continuation sheets	<u></u>	<u> </u>		1,000

Part XV Supplementary Information	74			
3 Grants and Contributions Paid During the Y	· · · · · · · · · · · · · · · · · · ·	,		
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	00111110011011	
ST. MICHAEL SPECIAL SCHOOL 1522 CHIPPEWA STREET	NONE	PUBLIC CHARITY	LIFE SKILLS DEVELOPMENT	455.000
NEW ORLEANS, LA 70130				175,000.
UNITED HEALTHCARE CHILDREN'S FOUNDATION	NONE	PUBLIC CHARITY	DONATION TO FUNDRAISER	
P.O. BOX 41				
MINNEAPOLIS , MN 55440				1,000.
UNIVERSITY OF NEW ORLEANS	NONE	PUBLIC CHARITY	TICKETS TO FUNDRAISER	
2000 LAKESHORE DRIVE NEW ORLEANS, LA 70148				250.
		-		
			:	
<u> </u>				
				-
Total from continuation sheets				

FORM 990-PF DIVIDEND	S AND	INTER	EST FROM	SECU	JRITIES	STATEMENT	1
SOURCE		GROSS	AMOUNT		PITAL GAINS DIVIDENDS	COLUMN (A AMOUNT)
INTEREST & DIVIDENDS	•		119,088.		0.	119,0	88.
TOTAL TO FM 990-PF, PART I, I	.N 4		119,088.		0.	119,0	88.
FORM 990-PF	0'	THER I	NCOME			STATEMENT	2
DESCRIPTION			(A) REVENUE PER BOOKS	5	(B) NET INVEST- MENT INCOME	(C) ADJUSTE NET INCO	
GROSS INCOME FROM SPECIAL FUNDRAISING EVENTS			739,8	343.	0.	•	•
TOTAL TO FORM 990-PF, PART I,	LINE	11 _	739,8	343.	0.	•	
FORM 990-PF	AC	COUNTI	NG FEES			STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOME	(D) CHARITA E PURPOS	
ACCOUNTING	1	1,600.		0 .	•		0.
TO FORM 990-PF, PG 1, LN 16B	1.	1,600.		0.			0.
FORM 990-PF C	THER	PROFES	SIONAL FI	EES		STATEMENT	4
DEGENERALON	EXPE	A) NSES BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOME	(D) CHARITA E PURPOS	
DESCRIPTION							
OTHER -	6:	9,825.		0.	•		0.

STATEMENT

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FORM 990-PF	TAX	ES	S	TATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TAXES & LICENSES	194.	0.		0.
PAYROLL TAXES	23,562.	0.		0.
TO FORM 990-PF, PG 1, LN 18	23,756.	0.		0.
FORM 990-PF	OTHER E	XPENSES	S	TATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OFFICE EXPENSES	31,887.	0.		0.
COMPUTER EXPENSE DUES & SUBSCRIPTIONS	3,292. 740.	0.		0.
EDUCATION - STRATEGIC	740.	•		0.
PROJECT	185.	0.		0.
ENTERTAINMENT & MEALS	6,788.	0.		0.
INSURANCE	5,222.	0.		0.
INVESTMENT FEES SERVICE AGREEMENTS	14,079.	14,079.		0.
SERVICE AGREEMENTS SERVICE CONTRACTS - ADP	31,716. 3,256.	0.		0.
CREDIT CARD EXPENSE	43,768.	0.		0.
EVENT COSTS	214,349.	0.		0.
FOOD & BEVERAGE	127,914.	0.		ő.
AUCTION REDEMPTION	148,575.	0.		Ö.
ENTERTAINMENT & PRODUCTION	248,649.	0.		0.
SPONSORSHIPS	18,734.	0.		0.
PROMOTION COSTS	96,934.	0.		0.
AMORTIZATION	1,399.	0.		0.
TO FORM 990-PF, PG 1, LN 23	997,487.	14,079.		0.

FOOTNOTES

SPECIAL RULES FOR SECTION 507(B)(1)(B) TERMINATION - UNDER THESE RULES, THE ORGANIZATION MAY FILE FORM 990-PF WITHOUT PAYING THE TAX BASED ON INVESTMENT INCOME IF IT FILED A CONSENT UNDER SECTION 6501(C)(4) WITH ITS NOTIFICATION TO THE IRS. PLEASE SEE THE ATTACHED LETTER FROM THE IRS ON THE 60-MONTH TERMINATION PERIOD ALONG WITH THE FORM 872-B.

FORM 990-PF DEPRECIATION	OF ASSETS NO	T HELD FOR IN	VESTMENT	STATEMENT 8
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE	FAIR MARKET VALUE
UCI PHONE	2,125.	2,125.	0	. 0.
PENTAL COMPUTER	2,290.	2,290.	0	. 0.
INTEL CORE COMPUTER	1,964.	1,964.	0	
LATITUDE E6510 NOTEBOOK	1,450.	1,032.	418	. 418.
MNMGT SOLUTION SOFTWARE	2,140.	2,140.	0	. 0.
DELL LATITUDE E6420 COMPUTER	1,722.	1,033.	689	. 689.
ADOBE SUITE	1,399.	1,399.	009	
LASERJET PRINTER	551.	331.	220	
TO 990-PF, PART II, LN 14	13,641.	12,314.	1,327	1,327.
FORM 990-PF	CORPORA	TE STOCK	.:	STATEMENT 9
DESCRIPTION		В	OOK VALUE	FAIR MARKET VALUE
CHASE INVESTMENT ACCOUNTS	- EQUITY INVE	STMENTS	2,515,744.	· · · · · · · · · · · · · · · · · · ·
			=,0=0,	2,515,744.
TOTAL TO FORM 990-PF, PART	II, LINE 10B		2,515,744.	2,515,744.
TOTAL TO FORM 990-PF, PART FORM 990-PF		VESTMENTS		· · · · · · · · · · · · · · · · · · ·
	OTHER IN	VESTMENTS ALUATION		2,515,744.
FORM 990-PF	OTHER IN	VESTMENTS ALUATION	2,515,744.	2,515,744. STATEMENT 10 FAIR MARKET

FORM 990-PF	OTHER LIABILITIES		STAT	EMENT 11
DESCRIPTION		BOY AMOUNT	EOY	AMOUNT
ACCRUED PAYROLL AND RELATED LIABILITIES ACCRUED AUCTION		11,28	1.	11,769. 148,575.
TOTAL TO FORM 990-PF, PART II,	LINE 22	11,28	1.	160,344.
	IST OF OFFICERS, D ND FOUNDATION MANA		STAT	EMENT 12
NAME AND ADDRESS	TITLE AND AVRG HRS/WK			EXPENSE ACCOUNT
MARIO BATALI 829 ST. CHARLES AVENUE NEW ORLEANS, LA 70130	DIRECTOR 1.00	0.	0.	0.
MARTI DALTON (RES. FEB 2013) 829 ST. CHARLES AVENUE NEW ORLEANS, LA 70130	DIRECTOR 1.00	0.	0.	0.
PAUL FRANK 829 ST. CHARLES AVENUE NEW ORLEANS, LA 70130	DIRECTOR 1.00	0.	0.	0.
ROB GOLDSTEIN 829 ST. CHARLES AVENUE NEW ORLEANS, LA 70130	DIRECTOR 1.00	0.	0.	0.
ERIC LINQUEST 829 ST. CHARLES AVENUE NEW ORLEANS, LA 70130	DIRECTOR 1.00	0.	0.	0.
MARK C. ROMIG, APR 829 ST. CHARLES AVENUE NEW ORLEANS, LA 70130	DIRECTOR 1.00	0.	0.	0.
GARY SOLOMON 829 ST. CHARLES AVENUE	DIRECTOR 1.00	0.	0.	0.

NEW ORLEANS, LA 70130

THE EMERIL LAGASSE FOUNDATION			42-153	36915
MICHAEL THOMPSON 829 ST. CHARLES AVENUE NEW ORLEANS, LA 70130	DIRECTOR 1.00	0.	0.	0.
MARK STEIN 829 ST. CHARLES AVENUE NEW ORLEANS, LA 70130	DIRECTOR/SECRETARY/	TREASUR 0.	0.	0.
TONY CRUZ 829 ST. CHARLES AVENUE NEW ORLEANS, LA 70130	DIRECTOR/PRESIDENT 2.00	0.	0.	0.
EMERIL J. LAGASSE III 829 ST. CHARLES AVENUE NEW ORLEANS, LA 70130	DIRECTOR/CHAIRMAN 2.00	0.	0.	0.
KRISTIN C. SHANNON 829 ST. CHARLES AVENUE NEW ORLEANS, LA 70130	EXECUTIVE DIRECTOR 40.00 10	7,000.	10,992.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII 10	7,000.	10,992.	0.

2012 DEPRECIATION AND AMORTIZATION REPORT FORM 990-PF PAGE 1

990-PF

Current Year Deduction	0	0.	102.	278.	0	1,033.	1,399.	331,	3,143.						
Current Sec 179									0						
Accumulated Depreciation	1,062.	2,290.	1,862.	754.	2,140.				8,108.				•••		••••
Basis For Depreciation	1,062.	2,290.	1,964.	1,450,	2,140.	861,	1,399.	275.	11,441.		•	*******			
* Reduction In Basis	1,063.					861.		276.	2,200.	. 11	 		•••		
Bus % Excl											·····		 	•	•
Unadjusted Cost Or Basis	2,125.	2,290.	1,964.	1,450,	2,140.	1,722,	1,399.	551	13,641.						
N N	17	11	17	ŽΤ	ო	19B	~	19B					 		
Lrfe	7.00	5.00	5.00	5.00	3M 4	5.00	3M 4	5.00							
Method	200DB	200DB	200DB	200DB		200DB		3000E		 		-			
Date Acquired	103103200DB7.00	041006200085.00	041607	060610200085.00	011511	040412200085.00	040112	040112200085.00		 					
Description	UCI PHONE	2PENTAL COMPUTER	SINTEL CORE COMPUTER041607200DB5.00	INOTEBOOK	MINMGI SOLUTION 5SOFTWARE	DEME TAILTONE E0420	17ADOBE SUITE		* TOTAL 990-PF PG 1 DEPR & AMORT						
Asset No	-	7	m' t	4	T KA	19	17		- 			-	 		

(D) - Asset disposed

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

4562

Internal Revenue Service

Depreciation and Amortization 990-PF

(Including Information on Listed Property)

▶ See separate instructions.

Attach to your tax return.

OMB No 1545-0172

Form 4562 (2012)

Name(s) shown on return Business or activity to which this form relates THE EMERIL LAGASSE FOUNDATION FORM 990-PF PAGE 1 42-1536915 Part | Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 500,000. 1 Maximum amount (see instructions) 2 2 Total cost of section 179 property placed in service (see instructions) 2,000,000. 3 Threshold cost of section 179 property before reduction in limitation 3 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If mamed filling separately, see instructions (a) Description of property (c) Elected cost 7 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2011 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2013. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during 1,137. 14 15 Property subject to section 168(f)(1) election 15 16 Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Do not include listed property.) (See instructions.) **Section A** 380. 17 MACRS deductions for assets placed in service in tax years beginning before 2012 17 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2012 Tax Year Using the General Depreciation System (b) Month and year placed in service (c) Basis for depreciation (business/investment use only - see instructions) (d) Recovery period (a) Classification of property (f) Method (a) Depreciation deduction 19a 3-year property 1,136. 5 YRS. 200DB HY b 5-year property 7-year property C 10-year property 15-year property e 20-year property 25-year property S/L 9 25 yrs. 27.5 yrs. MM S/L h Residential rental property 27.5 yrs. MM S/L MM S/L 39 yrs. i Nonresidential real property MM S/L Section C - Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year S/L 12 yrs 40-year 40 yrs. S/L Part IV | Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. 1,744. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr. 22 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 4562 (2012) THE EMERIL LAGASSE FOUNDATION 42-1536915 Page 2 Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or Part V amusement.) Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable. Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.) 24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? No (b) (c) (e) (i) (d) Date Business/ Basis for depreciation Elected Type of property Recovery Method/ Depreciation Cost or placed in investment section 179 (list vehicles first) period Convention deduction other basis use percentage use only) service cost 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use 25 26 Property used more than 50% in a qualified business use: % % % 27 Property used 50% or less in a qualified business use S/L -% % S/L -% S/L -28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28 29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 29 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles. (a) (b) (c) (d) **(f)** (e) 30 Total business/investment miles driven during the Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle year (do not include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles 33 Total miles driven during the year. Add lines 30 through 32 Yes 34 Was the vehicle available for personal use Yes No Yes No Yes No Yes No Yes No during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your No Yes 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortizati period or pero		(f) Amortization for this year
42 Amortization of costs that begins dur	ng your 2012 tax year:		_			
ADOBE SUITE	040112	1,399.		3M		1,399.
				<u> </u>		
43 Amortization of costs that began before	ore your 2012 tax year	-		. [43	
44 Total. Add amounts in column (f). See	the instructions for whe	re to report		1	44	1,399.

216252 12-28-12

Form 4562 (2012)

المنافر والمنافرة

	Department of the Treasury - Internal Revenue Service	In reply refer to:
Form 872 <i>-</i> B	Consent to Extend the Time to Assess	Texceyer identification Number
(Rev. Dec. 2004)	Miscellaneous Excise Taxes	42-1538915
e Emeril Lagasse Foun		, taxpayer(s)
•	(Name(s))	
829 St. Charles Avenu	e, New Orleans, LA 70130	and the
	(Number, Street, City or Town, State, ZIP Code)	
•	al Revenue consent and agree to the following:	
) The amount of liabil	ty for Chapter 42 Excise Tax tax, (Kind)	imposed on the taxpayer(s) by
ection 4940-4945	of the Internal Revenue Code due for the period April	1, 2010 through March 31, 2015
BC((OI)	(Internal Revenue Code, Revenue Act, stc.)	
	may be assessed at any time on or before	August 15, 2019
2) The self-edge	siens and limitations now in effect will also apply to any tax assessi	(Experien date)
preed-upon period of ting this and the consequer	Your Rights as a Texpayer se to extend the period of limitations or limit this extension to a mutually a Publication 1035, Extending the Tex Assessment Period, provides ces of the choices you may make. If you have not already received a Pub	a more detailed explanation of you dication 1035, the publication can b
blained, free of charge, alling to lifree at 1-800-8 ntifled	from the IDS official who requested that you sign this consent of IMM The	IKS. MED SUB BI WWW ITS GOV OF DY
OUR SIGNATURE HERE	from the IRS official who requested that you sign this consent or from the 29-3676. Signing this consent will not deprive you of any appeal rights to	Which you would oursi wise be
den of brigh erit svari i Jacrit untnue rra	29-3676. Signing this consent will not deprive you of any appeal rights to	
	29-3676. Signing this consent will not deprive you of any appeal rights to	Date simedi
'AXPAYER'S REPRESEN'	29-3676. Signing this consent will not deprive you of any appeal rights to	Date simedi
	29-3676. Signing this consent will not deprive you of any appeal rights to	th in LR.C. § 5501(c)(4)(B). (Date signed)
IGN HERE	29-3676. Signing this consent will not deprive you of any appeal rights to see to see this consent or to limit the extension to mutually agreed-upon issues endfor period of time as sal for ATTVY. As to sign this consent or to first the extension to mutually agreed-upon issues endfor period of time as sal for	th In LR.C. § 8501(c)(4)(8). (Date signed)
TAXPAYER'S REPRESENT SIGN HERE ern sware that I have the right to ref addition, the suppoyer(s) has been CORPORATE AME	29-3676. Signing this consent will not deprive you of any appeal rights to see to see this consent or to limit the extension to mutually agreed-upon issues endfor period of time as sal for ATTVY. As to sign this consent or to first the extension to mutually agreed-upon issues endfor period of time as sal for	th In LR.C. § 8501(c)(4)(8). (Date signed)
IGN HERE are aware that I have the right to refer addition, the usuperperts) has been CORPORATE AME	29-3676. Signing this consent will not deprive you of any appeal rights to see to see this consent or to limit the extension to mutually agreed-upon issues under period of time as sal for ATIVE. As to sign this consent or to limit the extension to mutually agreed-upon issues under period of time as sal for hade severe of treese rights.	th In LR.C. § 8501(c)(4)(8). (Date signed)
FIGN HERE In aware that I have the right to rate addition, the uspercript has been corporate CORPORATE ORPORATE ORPORATE FFICER(S)	29-3676. Signing this consent will not deprive you of any appeal rights to see to see this consent or to limit the extension to mutually agreed-upon issues under period of time as sal for ATIVE. As to sign this consent or to limit the extension to mutually agreed-upon issues under period of time as sal for hade severe of treese rights.	th In LR.C. § 8501(c)(4)(8). (Date signed)
SIGN HERE are aware that I have the right to refer to refer to refer to refer to respond to the components of the compo	29-3676. Signing this consent will not deprive you of any appeal rights to see to expr this consent or to limit the extension to multisally agreed-upon issues endor period of time as sait for ATTVY ARE to sign this consent or to time the extension to militarily agreed-upon issues under period of time as sait to have award of times of these extension. The Emeril Lagesse Foundation (Title)	th in LR.C. § 5501(±)(4)(8). (Date signed) The LR.C. § 6501(±)(4)(8). (Date signed) (Date signed)
SIGN HERE are aware that I have the right to refer addition, the suppoperties have been CORPORATE IAME CORPORATE OFFICER(S) IGN HERE We) are aware that I (ure) have the corporate of the c	29-3676. Signing this consent will not deprive you of any appeal rights to see to sept this consent or to limit the extension to mutually agreed-upon issues ender period of time as sai for ATIVE as to sign this consent or to tank the extension to multivally agreed-upon issues ender period of time as sai to nade service of trees rights. The Emeril Lagesse Foundation (Title)	th in LR.C. § 5501(c)(4)(8). (Date signed) 7
IGN HERE IT aware that I have the right to rat addition, the uspercript has been ORPORATE AME ORPORATE FFICER(S) IGN HERE	29-3676. Signing this consent will not deprive you of any appeal rights to see the special rights to multivally agreed-upon issues under particled time as salt for ATTVE. The Emeril Lagesse Foundation (Tibe) The consent or to limit the extension to multivally agreed-upon issues sandor period of time as salt to have agreed these rights. (Tibe)	(Date signed) 7 5 2010 Thin LR.C. § 8501(c)(4)(8). (Date signed) (Date signed) (Date signed) (Date signed) (Date signed)
SIGN HERE and aware that I have the right to risk addition, the suppoperties have been corporate lame. CORPORATE CORPORATE OFFICER(S) IGN HERE We) are aware that I (ure) have the corporate lame.	29-3676. Signing this consent will not deprive you of any appeal rights to see the special rights to multivally agreed-upon issues under particled time as salt for ATTVE. The Emeril Lagesse Foundation (Tibe) The consent or to limit the extension to multivally agreed-upon issues sandor period of time as salt to have agreed these rights. (Tibe)	th in LR.C. § 5501(c)(4)(8). (Date signed) The Lock of the Coale signed) (Date signed) (Date signed)

THE EMERIL LAGASSE FOUNDATION, INC. NEW ORLEANS, LOUISIANA

NOTES TO FINANCIAL STATEMENTS

3. Investments

As of March 31, the investments of the Foundation consist of the following:

2013	Fair \	/alue	
			Total
Description	Current	Non-Current	Investments
Equity:			
US Large Cap Equity	\$ 1,265,816	\$ -	\$ 1,265.816
US Mid Cap Equity	209,810	•	209,810
US Small/Mid Cap Equity	87,060	-	87,060
EAFE Equity	402,499	-	402,499
Asia ex-Japan Equity	168,324	-	168,324
European Large Cap Equity	33,408	-	33,408
Emerging Market Equity	252,511	-	252,511
Global Equity	77,083	-	77,083
Non-US Equity	19,233	-	19,233
Fixed Income Funds:	·		ŕ
US Fixed Income	1,093,805	-	1,093,803
Non-US Fixed Income	85,126	-	85,126
Foreign Exchange	85,665	-	85,665
Short Term	354,115		354,115
Alternative Mutual Funds	231,902	660,029	891,931
Total	\$ 4,366,357	\$ 660,029	\$ 5,026,386
2012	Fair V	⁷ alue	
	•		Total
Description	Current	Non-Current	Investments
Equity:			
US Large Cap Equity	\$ 1,248,426	\$ -	\$ 1,248,426
US Mid Cap Equity	199,539	-	199,539
US Small/Mid Cap Equity	855	_	855
EAFE Equity	256,713	_	256,713
Asia ex-Japan Equity	83,275	_	83,275
Emerging Market Equity	234,232	_	234,232
Fixed Income Funds:	234,232	-	234,232
US Fixed Income	741,272	834,785	1,576,057
Non-US Fixed Income	31,112		
Foreign Exchange		50,628	81,740
Alternative Mutual Funds	31,173	-	31,173
Total	511.289	e 005 412	511,289
rotar	\$ 3,337.886	\$ 885,413	\$ 4,223,299

Unrealized gains on investments as of March 31, 2013 and 2012 were \$272,261 and \$175,227.



THE EMERIL LAGASSE FOUNDATION ACCT. A43481000 For the Period 3/1/13 to 3/31/13

Equity Detail

	Price	Quantity	Value	Adjusted Tax Cost Original Cost	Unrealized Gain/Loss	Est Annual Inc Accrued Div	Yield
US Large Cap Equity							
BBH FD INC TAX EFFIC EQ N 05528X-60-4 BBTE X	19 20	6,821 194	130,966 92	117,647 31	13,319.61	654 83	0 50%
HARTFORD CAPITAL APPRECIATION FUND 416649-30-9 ITHI X	38 55	1,906 053	73,478 34	61,259 62	12,218 72	659 49	% 06 0
JPM LARGE CAP GROWTH FD - SEL FUND 3118 4812C0-53-0 SEEG X	25 47	1,345 120	34,260 21	32,850 99	1,409 22	141 23	041%
MANNING & NAPIER FUND INC EQUITY SERIES 563821-60-2 EXEY X	19 14	2,182 422	41,771 56	40,137 11	1,634 45	76 38	0 18%
PARNASSUS INCOME TRUST - EQUITY INCOME FUND 701769-10-1 PRBL X	32 81	1,464 805	48,060.25	41,556 52	6,503 73	1,108 85	2 31%
PRIMECAP ODYSSEY FUNDS ODYSSEY STK FD 74160Q-30-1 POSK X	17 93	7,466 925	133,881 97	115,164 15	18,717 82	1,836 86	1 37 %
SPDR S&P 500 ETF TRUST 78462F-10-3 SPY	156 67	1,020 000	159,803 40	142,484 55	17,318 85	3,246 66 707 60	2 03%
Total US Large Cap Equity			\$622,222.65	\$551,100.25	\$71,122.40	\$7,724.30 \$850.42	1.24%

THE EMERIL LAGASSE FOUNDATION ACCT A43481000 For the Period 3/1/13 to 3/31/13

	Price	Quantity	Value	Adjusted Tax Cost Original Cost	Unrealized Gain/Loss	Est Annual Inc Accrued Div	Yield
US Mid Cap Equity	9						ò
ASTON RIVER RD DIV ALL CAP VAL FD 00080Y-87-6 ARID X	12 56	5,610 217	/0,464 33	66,111,54	4,35279	1,997 23 39 27	7 83 %
ISHARES CORE S&P MID-CAP ETF 464287-50-7 IJH	115 07	621 000	71,458 47	58,595 58	12,862 89	958 82	1 34 %
JPM MARKET EXPANSION INDEX FD - SEL FUND 3708 4812C1-63-7 PGMI X	12 01	5,652 590	67,887 61	62,130 26	5,757 35	661 35 185 40	% 26 0
Total US MId Cap Equity			\$209,810.41	\$186,837 38	\$22,973.03	\$3,617.40 \$224.67	1.72%
EAFE Equity							
ARTISAN INTL VALUE FUND - INV 04314H-88-1 ARTK X	32 67	1,710 314	55,875 96	48,360 43	7,515 53	502 83	% 06 0
DODGE & COX INTERNATIONAL STOCK 256206-10-3 DODF X	35 90	3,224 941	115,775 38	110,871 62	4,903 76	2,409 03	2 08 %
ISHARES MSCI EAFE INDEX FUND 464287-46-5 EFA	58 98	1,114 000	65,703 72	61,922 04	3,781 68	1,959 52	2 98%
Total EAFE Equity			\$237,355.06	\$221,154.09	\$16,200.97	\$4,871.38	2.05%
European Large Cap Equity							
VANGUARD FTSE EUROPE ETF 922042-87-4 VGK	49 13	680 000	33,408 40	33,517 92	(109 52)	1,160 76	3 47 %



THE EMERIL LAGASSE FOUNDATION ACCT A43481000 For the Period 3/1/13 to 3/31/13

	Price	Quantity	Value	Adjusted Tax Cost Original Cost	Unrealized Gain/Loss	Est Annual Inc Accrued Div	Yield
Asia ex-Japan Equity							
ABERDEEN ASIA PACIFIC (EX JAPAN) EQUITY FUND - INSTITUTIONAL SERVICE SHARES 003021-69-8 AAPI X	12 09	8,586 359	103,809 08	100,509 52	3,299 56	2,927 94	2 82%
ISHARES MSCI ALL COUNTRY ASIA EX JAPAN INDEX FUND 464288-18-2 AAXJ	59 08	1,092 000	64,515 36	60,655 09	3,860 27	1,145 50	1 78%
Total Asia ex-Japan Equity			\$168,324.44	\$161,164 61	\$7,159.83	\$4,073.44	2 42%
Emerging Market Equity							
JPM CHINA REGION FD - SEL FUND 3810 4812A3-52-8 JCHS X	19 23	1,757 931	33,805 01	34,244 49	(439 48)	87 89	0 26 %
JPM EM MKTS EQUITY FD - SEL FUND 1235 4812A0-62-3 JEMS X	23 60	6,021 009	142,095 81	138,708 88	3,386 93	716 50	0 50 %
VANGUARD FTSE EMERGING MARKETS ETF 922042-85-8 VWO	42 90	1,786 000	76,610 47	77,321 47	(711 00)	1,844 93	2 41%
Total Emerging Market Equity			\$252,511.29	\$250,274.84	\$2,236.45	\$2,649.32	1.05%

J.P.Morgan

THE EMERIL LAGASSE FOUNDATION ACCT A43481000 For the Period 3/1/13 to 3/31/13

	Price	Quantity	Estimated Value	Cost
Hedge Funds				
EATON VANCE MUT FDS TR GB MACRO ABSOLUTE RTN I 277923-72-8 EIGM X	9 88	10,437 556	103,123 05	104,620 20
GATEWAY FUND - Y 367829-88-4 GTEY X	28 01	4,305 417	120,594 73	116,179 28
PIMCO FDS UNCONSTR BD 72201M-45-3 PUCP X	11 55	10,395 117	120,063 60	119,855 70
Total Hedge Funds			\$581,949.25	\$584,450.70



THE EMERIL LAGASSE FOUNDATION ACCT A43481000 For the Period 3/1/13 to 3/31/13

	Quantity/Original Commitment Amount	Cost/Net Capital Called Since Inception	Net Distributions Since Inception	Estimated Value	Est Annual Inc Accrued Div	Yield
Real Estate & Infrastructure JPM REALTY INCOME FD - INSTL FUND 1372 904504-50-3 URTL X	8,422 05	96,884 27		103,001 65	1,852 85 949 50	1 80 %

date (underlying fund value date) prior to the period covered by this statement. The values provided by the underlying fund have been adjusted for any cash flows between your account For private equity funds, Estimated Values are based on estimates provided by the underlying funds that are generally presented on a US GAAP basis, which records investments at fair marked-to-market Estimated Value shown herein for a private equity fund may be materially different from the value reflected on such fund's audited financial statements (which are also underlying funds present their audited financial statements using the Income Tax Basis of Accounting, which records investments "at cost" based on the accrual basis of accounting for Amounts shown above under "Estimated Value" for private equity funds are estimates based on the latest fund values received from each underlying fund, which value may be as of a value, or "marked-to-market". Most of these underlying funds also present their audited financial statements on a US GAAP basis (i.e., "marked-to-market"). However, some of these Federal income taxes Where the underlying fund provides periodic estimates on a "marked-to-market" basis but reflects investments "at cost" in its audited financial statements, the and such fund that have occurred subsequent to the underlying fund value date to derive the "Estimated Value" Therefore, such "Estimated Value" may not reflect the value of your interest shown on any fund's actual books and records as of the date of this statement. For additional information, please contact your JP Morgan representative based on the audited financial statements of the underlying fund)

			Estimated	
	Price	Quantity	Value	Cost
Hard Assets				
PIMCO COMMODITIES PLUS STRATEGY P 72201P-16-7 PCLP X	11 03	9,770 176	107,765 04	107,904 37
POWERSHARES DB COMMODITY INDEX TRACKING FUND 73935S-10-5 DBC	27 31	1,099 000	30,013 69	32,555 88

J.P.Morgan

THE EMERIL LAGASSE FOUNDATION ACCT. A43481000 For the Period 3/1/13 to 3/31/13

	Price	Quantity	Estimated Value	Cost
Hard Assets				
SPDR GOLD TRUST 78463V-10-7 GLD	154 47	448 000	69,202 56	73,056 80
Total Hard Assets			\$206,981.29	\$213,517.05



THE EMERIL LAGASSE FOUNDATION ACCT. A43481000 For the Period 3/1/13 to 3/31/13

Note 1 This is the Annual Percentage Yield (APY) which is the rate earned if balances remain on deposit for a full year with compounding, there is no change in the interest rate and all interest is left in the account

Cash & Fixed Income Detail

	Price	Quantity	Value	Adjusted Tax Cost Original Cost	Unrealized Gain/Loss	Est Annual Income Accrued Interest	Yield
Cash us dollar	1 00	94,293 40	94,293 40	94,293 40		9 42	0 01%
US Fixed Income							
PAYDEN HIGH INCOME FUND 704329-57-2	7 40	10,677 16	79,010 97	77,201 21	1,809 76	5,071 65	6 42%
DOUBLELINE FDS TR TTL RTN BD I 258620-10-3	11 34	7,399 15	83,906 36	83,166 45	739 91	4,816 84	5 74%
EATON VANCE FLOATING RATE I 277911-49-1	921	12,557 31	115,652 86	113,204 29	2,448 57	5,085 71	4 40%
JPM HIGH YIELD FD - SEL FUND 3580 4812C0-80-3	8 25	13,109 47	108,153 09	104,697 55	3,455 54	6,830 03 550 60	6 32%
JPM SHORT DURATION BOND FD - SEL FUND 3133 4812C1-33-0	10 98	10,136 32	111,296 79	111,525 79	(229 00)	1,327 85	1 19%
JPM TR I INFL MANAGED BD - SEL 48121A-56-3	10 83	6,352 63	68,798 97	68,065 35	733 62	1,067 24 50 82	1 55%



THE EMERIL LAGASSE FOUNDATION ACCT A43481000 For the Period 3/1/13 to 3/31/13

	Price	Quantity	Value	Adjusted Tax Cost Original Cost	Unrealized Gain/Loss	Est Annual Income Accrued Interest	Yreld
US Fixed Income							
VANGUARD FI SECS F INTR TRM CP PT FUND 71 922031-88-5	10 19	11,033 77	112,434 07	111,362 10	1,071 97	3,850 78	3 42%
BLACKROCK HIGH YIELD BOND 091929-63-8	8 23	8,110 83	66,752 12	61,894 04	4,858 08	4,055 41	6 08%
Total US Fixed Income			\$746,005.23	\$731,116.78	\$14,888 45	\$32,105.51 \$1,413.06	4.30%
Foreign Exchange & Non-USD Fixed Income	4)						
DREYFUS LAUREL EMG MKT DEBT LOC C-1 261980-49-4	15 28	5,571 10	85,126 42	83,669 20	1,457 22	1,192 21	1 40%
JPM INTL CURRENCY INCOME FD 4812A3-29-6	11 19	7,655 46	85,664 61	86,412 55	(747 94)	43.94	
Total Foreign Exchange & Non-USD Fixed Income			\$170,791.03	\$170,081.75	\$709.28	\$1,192.21 \$43.94	0.70%

F. Morgan

THE EMERIL LAGASSE FOUNDATION ACCT W48878008 For the Period 3/11/13 to 3/31/13

	Price	Quantity	Value	Adjusted Tax Cost Original Cost	Unrealized Gain/Loss	Est Annual Inc Accrued Div	Yield
US Large Cap Equity							
AFLAC INC 001055-10-2 AFL	52 02	310 000	16,126 20	15,700 19	426 01	434 00	2 69%
AIR PRODUCTS & CHEMICALS INC 009158-10-6 APD	87 12	175 000	15,246 00	13,357 10	1,888 90	497 00 124.25	3 26 %
APACHE CORP 037411-10-5 APA	77 16	100 000	7,716 00	8,412 00	(00 969)	80 00	1 04 %
ARCHER DANIELS MIDLAND CO 039483-10-2 ADM	33 73	375 000	12,648 75	10,954 19	1,694 56	285 00	2 25%
AT&T INC 00206R-10-2 T	36 69	440 000	16,143 60	16,982 72	(839 12)	792 00	4 91%
BECTON DICKINSON & CO 075887-10-9 BDX	95 61	150 000	14,341 50	11,761 60	2,579 90	297 00	2 07 %
BIO-RAD LABORATORIES INC CL A 090572-20-7 BIO	126 00	105 000	13,230 00	9,833 50	3,396 50		
CATERPILLAR INC 149123-10-1 CAT	86 97	140 000	12,175 80	12,383 55	(207 75)	291 20	2 39%
CISCO SYSTEMS INC 17275R-10-2 CSCO	20 90	825 000	17,238 38	17,329 70	(91 32)	462 00	2 68%
COMPUTER SCIENCES CORP 205363-10-4 CSC	49 23	325 000	15,999 75	16,437 00	(437 25)	260 00 65 00	1 63%
CONAGRA FOODS INC 205887-10-2 CAG	35 81	200 000	17,905 00	11,788.76	6,116 24	200 00	2 79%
EXELON CORP 30161N-10-1 EXC	34 48	335 000	11,550 80	14,546 64	(2,995 84)	703 50	% 60 9
FEDEX CORP 31428X-10-6 FDX	98 20	150 000	14,730 00	12,010 46	2,719 54	84 00 21 00	0 57%

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THE EMERIL LAGASSE FOUNDATION ACCT W48878008 For the Period 3/1/13 to 3/31/13

	Price	Quantity	Value	Adjusted Tax Cost Original Cost	Unrealized Gain/Loss	Est Annual Inc Accrued Div.	Yield
US Large Cap Equity							
HARRIS CORP DEL 413875-10-5 HRS	46 34	345 000	15,987 30	14,178 10	1,809 20	510 60	3 19%
INTERNATIONAL BUSINESS MACHINES CORP 459200-10-1 IBM	213 30	100 000	21,330 00	11,403 00	9,927 00	340 00	1 59%
ISHARES S&P 500/BARRA GROWTH INDEX FUND 464287-30-9 IVW	82 38	750 000	61,785 00	42,991 75	18,793 25	1,077 00	1 74 %
ISHARES S&P 500/BARRA VALUE INDEX FUND 464287-40-8 IVE	73 80	750 000	55,350 00	40,300 55	15,049 45	1,194 00	2 16%
JOHNSON & JOHNSON 478160-10-4 JNJ	81.53	200 000	16,306 00	12,528 71	3,777 29	488 00	2 99 %
JP MORGAN CHASE & CO 46625H-10-0 JPM	47 46	295 000	14,000 70	11,945 85	2,054 85	354 00	2 53%
KELLOGG CO 487836-10-8 K	64 43	250 000	16,107 50	11,055 05	5,052 45	440 00	2 73%
LINCOLN ELECTRIC HOLDINGS INC 533900-10-6 LECO	54 18	350 000	18,963 00	9,589 50 **	N/A	280 00 70 00	1 48%
MARATHON PETROLEUM CORPORATION 56585A-10-2 MPC	09 68	207 000	18,547 20	5,348 99	13,198 21	289 80	1 56%
MARRIOTT INTERNATIONAL INC CL A 571903-20-2 MAR	42 23	300 000	12,669 00	9,725 45	2,943 55	156 00	1 23%
MERCK AND CO INC 58933Y-10-5 MRK	44.20	450 000	19,890 00	15,721 75	4,168 25	774 00 193 50	3 89%
MICROS SYSTEMS INC 594901-10-0 MCRS	45 51	320 000	14,563 20	15,159 38	(596 18)		



THE EMERIL LAGASSE FOUNDATION ACCT W48878008 For the Period 3/1/13 to 3/31/13

2.16%	\$13,926 05 \$667 05	\$129,816.97	\$504,402 66	\$643,593.13			Total US Large Cap Equity
1 86%	408 70	10,441 35	11,500 35	21,941 70	305 000	71 94	YUM BRANDS INC 988498-10-1 YUM
1 49%	280 50	4,426 42	14,452 88	18,879 30	330 000	57 21	UNITEDHEALTH GROUP INC 91324P-10-2 UNH
1 76%	338 00 84 50	7,900 40	11,303 85	19,204 25	325 000	60 69	STATE STREET CORP 857477-10-3 STT
161%	254 40	1,072 66	14,739 89	15,812 55	265 000	59 67	REINSURANCE GROUP AMERICA 759351-60-4 RGA
2 41%	456 00	6,954 07	11,998 43	18,952 50	285 000	99 20	PNC FINANCIAL SERVICES GROUP INC 693475-10-5 PNC
2 72%	397 75	2,027 07	12,608 28	14,635 35	185 000	79.11	PEPSICO INC 713448-10-8 PEP
1 88%	266 60	3,171.50	11,023 40	14,194 90	155 000	91 58	PARKER-HANNIFIN CORP 701094-10-4 PH
3 27 %	435 20 108 80	(1,663 45)	14,986 35	13,322 90	170 000	78 37	OCCIDENTAL PETROLEUM CORP 674599-10-5 OXY
0 73%	124 80	5,818 56	11,161 44	16,980 00	240 000	70 75	NATIONAL-OILWELL VARCO INC 637071-10-1 NOV
1 96 %	375 00	(63.30)	19,182 30	19,119 00	300 000	63 73	MURPHY OIL CORP 626717-10-2 MUR
							US Large Cap Equity
Yield	Est Annual Inc Accrued Div	Unrealized Gam/Loss	Adjusted Tax Cost Original Cost	Value	Quantity	Price	

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THE EMERIL LAGASSE FOUNDATION ACCT. W48878008
For the Period 3/1/13 to 3/31/13

	Price	Quantity	Value	Adjusted Tax Cost Original Cost	Unrealized Gain/Loss	Est Annual Inc Accrued Div	Yield
US Small Cap Equity ISHARES CORE S&P SMALL-CAP ETF 464287-80-4 IJR	87 06	1,000 000	87,060 00	42,977 03	44,082.97	1,296 00	1 49%
Non-US Equity EATON CORP PLC G28183-10-3 ETN	61 25	314 000	19,232 50	16,219 67	3,012 83	527 52	2 74%
EAFE Equity ISHARES MSCI EAFE INDEX FUND 464287-46-5 EFA	58 98	2,800 000	165,144 00	196,879 11	(31,735 11)	4,925 20	2 98 %
Global Equity ISHARES S&P GSSI NATURAL RESOURCES INDEX FUND 464287-37-4 IGE	40 57	1,900 000	77,083 00	84,641 58	(7,558 58)	1,229 30	1 59%



THE EMERIL LAGASSE FOUNDATION ACCT. W48878008 For the Period 3/1/13 to 3/31/13

	Price	Quantity	Value	Adjusted Tax Cost Original Cost	Unrealized Gain/Loss	Est Annual Income Accrued Interest	Yield
Short Term	2						
WILLIAMSON CNTY TN BUILD AMERICA BONDS UNLIMITED TAX 2 1/4% APR 01 2013 DTD 12/03/2009 FED TAXABLE HELD BY DTC BOOK ENTRY ONLY 969871-W4-0 NR /AAA	100 02	25,000 00	25,004 00	25,119 50	(115 50)	562 50 282 80	0 32 %
PRIVATE EXPORT FUNDING 3 55% APR 15 2013 DTD 04/08/2008 742651-DF-6 AA+ /AAA	100 13	50,000 00	50,064 00	52,640 00	(2,576 00)	1,775 00 818 45	0 25%
LYON CNTY NV SCH DIST BUILD AMERICA BONDS DIRECT PAY SCH IMPT PERM SCH GTD FUND LIMITED TAX 3 4% A JUN 01 2013 DTD 07/21/2009 FED TAXABLE HELD BY DTC B/E ONLY 552002-MY-0 AAA /NR	100 50	25,000 00	25,125 00	25,460 75	(335 75)	850 00 283 32	%68 0
FNMA 254920 6.5% 08/01/13 31371L-DZ-9	109 94	544 94	599 12	571 16	27 96	35 42 2 95	
FHLB 4.5% 09/16/13 3133X1-BV-8 AA+ /AAA	102 00	50,000 00	51,001 00	52,922 70	(1,921 70)	2,250 00 93 75	0 13%
METLIFE INC 2 3/8% FEB 06 2014 DTD 08/06/2010 59156R-AW-8 A- /A3	101 43	50,000 00	50,713 00	50,485 00	228 00	1,187 50	% 89 0
BEXAR CNTY TX HOSP DIST BUILD AMERICA BONDS LIMITED TAX 1 676% FEB 15 2014 DTD 08/15/2010 FED TAXABLE HELD BY DTC BOOK ENTRY ONLY 088365-ES-6 AA+ /AA1	101 02	50,000 00	50,510 00	49,434 50	1,075 50	838 00 107 05	0 20%



	Price	Quanlity	Value	Adjusted Tax Cost Original Cost	Unrealized Gain/Loss	Est Annual Income Accrued Interest	Yield
Short Term							
HSBC FINANCE CORP MTN 2 1/2% FEB 15 2014 DTD 02/03/2011 40429X-YV-2 A /BAA	100 99	50,000 00	50,492 50	50,000 00	492 50	1,250 00 159 70	1 36%
TEVA PHARM FIN III 17% MAR 21 2014 DTD 03/21/2011 88166D-AA-4 A- /A3	101 21	50,000 00	50,606 00	49,800 50	805 50	850 00 23.60	0 45%
Total Short Term			\$354,114.62	\$356,434.11	(\$2,319.49)	\$9,598.42 \$1,953.02	0.53%
US Fixed Income							
COMMONWEALTH FING AUTH PA REV BUILD AMERICA BONDS 3 733% JUN 01 2014 DTD 11/12/2009 FED TAXABLE HELD BY DTC BOOK ENTRY ONLY 20281P-CV-2 AA- /A1	103 33	25,000 00	25,832 50	26,352 50	(520 00)	933 25 311 07	% 98 0
FHLB 5.25% 06/18/14 3133X7-FK-5 AA+ /AAA	106 13	20,000 00	53,066 00	54,970 70	(1.904 70)	2,625 00 751 00	0 19%
JPMORGAN CHASE & CO SR NOTES 3 7% JAN 20 2015 DTD 09/18/2009 46625H-HP-8 A /A2	105 02	50,000 00	52,509 00	51,606 50	902 50	1,850 00 364 85	%680



THE EMERIL LAGASSE FOUNDATION ACCT. W48878008 For the Period 3/1/13 to 3/31/13

	Price	Quantity	Value	Adjusted Tax Cost Original Cost	Unrealized Gain/Loss	Est. Annual Income Accrued Interest	Yield
US Fixed Income							
MS DEV BK SPL OBLIG MS DEPT OF CORRECTIONS 3 622% A AUG 01 2015 DTD 05/21/2010 FED TAXABLE HELD BY DTC BOOK ENTRY ONLY 60534R-VS-5 AA- /NR	106 24	50,000 00	53,122 00	50,892 00	2,230 00	1,811 00 301 80	0 91%
BALTIMORE MD CITY HSG AUTH LEASE REV BUILD AMERICA BONDS CUSTODIAL RCPTS 4 26% JAN 01 2016 DTD 03/31/2010 FED TAXABLE HELD BY DTC BOOK ENTRY ONLY 059206-AC-6 A+ /NR	102 38	25,000 00	25,594 25	25,000 00	594 25	1,065 00 266 25	3 35 %
GNMA 150149 10% 01/15/16 362150-WJ-9	107 93	4,570 02	4,932.37	5,027 01	(94 64)	457 00 38 08	0 56%
GNMA II 5% APR 20 2017 DTD 04/01/2002 POOL NO 3220 36202D-SH-5	105 77	17,415 46	18,419 64	18,493 04	(73 40)	870 77 72 55	146%
FHLMC GOLD P10032 4.5% 05/01/18 312848-A9-8	105 44	7,035 51	7,418 45	7,237 79	180 66	316 59 26 38	1 37 %
FNMA MA0071 4.5% 05/01/19 31417Y-CH-8	108 30	11,284 32	12,221 37	11,834 45	386 92	507 79 42 31	0 68%
FHLMC GOLD M30034 4% 12/01/20 31282C-BB-2	105 06	11,451 15	12,030 23	11,766 06	264 17	458 04 38 16	1 46%
FNMA 995517 5.5% 01/01/24 31416B-4A-3	109 03	16,840 92	18,361 32	18,146 10	215 22	926 25	251%

THE EMERIL LAGASSE FOUNDATION ACCT. W48878008 For the Period 3/1/13 to 3/31/13

				Adjusted Tax Cost	Unrealized	Est Annual Income	
	Price	Quantity	Value	Original Cost	Gain/Loss	Accrued Interest	Yield
US Fixed Income							
GNMA II 4% JAN 20 2024 DTD 01/01/2009 POOL NO 4321	107 81	2,855 90	3,078 95	2,913 02	165 93	114 23 9 51	1 70%
36202E-YS-2							
FHLMC GOLD J10557 4% 08/01/24 3128PP-TN-3	105 90	24,046 14	25,465 10	24,790 05	675 05	961 84 80 14	1 58 %
GNMA 405478 7% 08/15/25 36206A-M3-4	115 94	30,831 35	35,746 80	34,068 66	1,678 14	2,158 19 179 83	2 39 %
Total US Fixed Income		\$	\$347,797.98	\$343,097.88	\$4,700.10	\$15,054.95 \$2,559.11	1.31%

Form • 8868

(Rev. January 2013) Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No. 1545-1709

11125-1-2-1-2-1-2	The a sepa	arate app	ilcaudit iut each retui it.					
	re filing for an Automatic 3-Month Extension, comple	-	****			► X		
• If you a	re filing for an Additional (Not Automatic) 3-Month Ex							
	omplete Part II unless you have already been granted a c filing (e-file) . You can electronically file Form 8868 if y		atic 3-month extension on a previous a 3-month automatic extension of tin			corporation		
	o file Form 990-T), or an additional (not automatic) 3-mo							
of time to	file any of the forms listed in Part I or Part II with the exi	ception of	Form 8870, Information Return for	Transfers	Associated With	n Certain		
Personal !	Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions). For more details of	on the ele	ctronic filing of t	his form,		
visit www.	.irs.gov/efile and click on e-file for Charities & Nonprofits							
Part 1	Automatic 3-Month Extension of Time	Only s	submit original (no copies nee	eded).				
A corpora	ition required to file Form 990-T and requesting an autor	natic 6-mo	onth extension - check this box and	complete		-		
Part I only	/					▶ ــــا		
	corporations (including 1120-C filers), partnerships, REM ome tax returns	IICs, and t	trusts must use Form 7004 to reques	t an exte	nsion of time			
Type or print	Name of exempt organization or other filer, see instru	Employe	Employer identification number (EIN) or					
File by the	THE EMERIL LAGASSE FOUNDAT:		42-1536915					
due date for filing your	Number, street, and room or suite no. If a P.O. box, s 829 ST. CHARLES AVE.	ox, see instructions.			ocial security number (SSN)			
return. See instructions								
	,			-				
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 4		
Application	on	Return	Application	-	Return			
is For		Code	Is For	Code				
Form 990	or Form 990-EZ	01	Form 990-T (corporation)	07				
Form 990	-BL_	02	Form 1041-A	08				
Form 472	0 (individual)	03	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					
	CAROL RIPLEY	_						
	oks are in the care of \triangleright 829 ST. CHARLES one No. \triangleright (504) 524-4241	AVE		- 7	0130			
	rganization does not have an office or place of business		FAX No.					
	s for a Group Return, enter the organization's four digit					in shock this		
box ▶ [. If it is for part of the group, check this box							
	quest an automatic 3-month (6 months for a corporation				Dela bie exteriak	#115 JOE.		
	NOVEMBER 15, 2013, to file the exemp				The extension			
ıs fo	or the organization's return for:	· · · g						
▶[alendar year or							
▶ [X tax year beginning APR 1, 2012	, an	d ending MAR 31, 2013		_ ·			
2 If th	e tax year entered in line 1 is for less than 12 months, c	heck rese	on: Inftal return	Final retu	m			
	Change in accounting period		On:					
	2 Only of the control							
	is application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069, e	nter the tentative tax, less any					
	refundable credits. See instructions.			3a	\$	0.		
	is application is for Form 990-PF, 990-T, 4720, or 6069,	•			1.	•		
	mated tax payments made. Include any pnor year overp			<u>3b</u> _	\$	0.		
	ance due. Subtract line 3b from line 3a. Include your pa Ising EFTPS (Electronic Federal Tax Payment System). 3	•		3c	s	0.		
	If you are going to make an electronic fund withdrawal v							
	or Privacy Act and Paperwork Reduction Act Notice,					B (Rev. 1-2013)		

223841 01-21-13

Form 8868 (Rev. 1-2013)					Page 2			
 If you are filing for an Additional (Not Automatic) 3-Month E 	xtension, c	complete only Part II and check this	box		X			
Note. Only complete Part II if you have already been granted an								
 If you are filing for an Automatic 3-Month Extension, compl 								
Part II Additional (Not Automatic) 3-Month	Extension	n of Time. Only file the origin	al (no co	pies need	ied).			
		Enter filer's	identifyir	g number,	see instructions			
Type or Name of exempt organization or other filer, see instr	ructions				n number (EIN) or			
print		,,						
File by the THE EMERIL LAGASSE FOUNDATI	42-1536915							
due date for Number, street, and room or suite no. If a P.O. box.	tions.	Social security number (SSN)						
eturn. See 829 ST. CHARLES AVE.	()							
City, town or post office, state, and ZIP code. For a NEW ORLEANS, LA 70130	foreign add	ress, see instructions.						
Enter the Return code for the return that this application is for (f	file a separa	te application for each return)			04			
Application	Return	Application			Return			
ls For	Code	ls For		Code				
Form 990 or Form 990-EZ	01							
Form 990-BL	02	Form 1041-A			08			
Form 4720 (individual)		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	orm 8870			12			
STOP! Do not complete Part II if you were not already grants CAROL RIPLEY The books are in the care of 829 ST. CHARLE				0130	8			
Telephone No. ▶ <u>(504)</u> 5 <u>24-4241</u>		FAX No. 🕨						
 If the organization does not have an office or place of busine 								
 If this is for a Group Return, enter the organization's four digit 	it Group Exe	emption Number (GEN)	If this is fo	r the whole (group, check this			
box L. If it is for part of the group, check this box L.		ch a list with the names and EINs o	f all memb	ers the exte	nsion is for.			
4 I request an additional 3-month extension of time until		ARY 15, 2014		24 0				
	For calendar year, or other tax year beginning APR 1, 2012, and ending MAR 31, 2013							
6 If the tax year entered in line 5 is for less than 12 months,	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							
		R THE INFORMATION	NECES	SARY T	O FILE A			
COMPLETE AND ACCURATE RETURN.	<u> </u>							
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720	05 6060 0	principle to topic the loss and						
nonrefundable credits. See instructions.	, ur 0005, e	riter the territative tax, less any	8a	\$	4,343.			
b If this application is for Form 990-PF, 990-T, 4720, or 6069		anti-matchin condition and actionated	- 00	*	1/0150			
tax payments made. Include any prior year overpayment			į.					
	anoweu as a	Credit and any amount paid	8b	ŝ	0.			
c Balance due. Subtract line 8b from line 8a. Include your p		to this form if marriand burning	- ×	-	<u>_</u>			
EFTPS (Electronic Federal Tax Payment System). See ins	•	in this form, it required, by using	8c	Ś	4,343.			
		st be completed for Part II		<u> </u>	2,010			
Under penalties of perjury, I declare that I have examined this form, incli it is true, correct, and complete, and that I am authorized to prepare this	uding accomp	-	_	f my knowled	ge and belief,			
Signature > Sylvan to. Carriel Title >	CPA		Date	> nl1	3113			
					868 (Rev. 1-2013)			