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

**2012**

Department of the Treasury  
Internal Revenue Service

*Note* The foundation may be able to use a copy of this return to satisfy state reporting requirements

For calendar year 2012, or tax year beginning 4/01, 2012, and ending 3/31, 2013

DE MIRANDA FOUNDATION INC  
PO BOX 2127  
PALOS VERDES PEN, CA 90274

**A** Employer identification number  
95-4855401

**B** Telephone number (see the instructions)  
310-377-1199

**C** If exemption application is pending, check here

**D** 1 Foreign organizations, check here   
2 Foreign organizations meeting the 85% test, check here and attach computation

**E** If private foundation status was terminated under section 507(b)(1)(A), check here

**F** If the foundation is in a 60-month termination under section 507(b)(1)(B), check here

**G** Check all that apply

<input type="checkbox"/> Initial return	<input type="checkbox"/> Initial return of a former public charity
<input type="checkbox"/> Final return	<input type="checkbox"/> Amended return
<input checked="" type="checkbox"/> Address change	<input type="checkbox"/> Name change

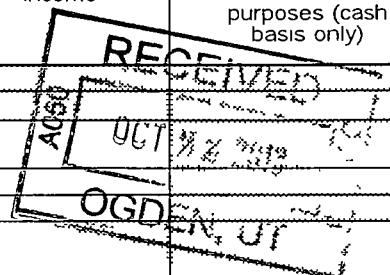
**H** Check type of organization

Section 501(c)(3) exempt private foundation  
 Section 4947(a)(1) nonexempt charitable trust  Other taxable private foundation

**I** Fair market value of all assets at end of year (from Part II, column (c), line 16)  
\$ 4,445,214.

**J** Accounting method  Cash  Accrual  
 Other (specify) \_\_\_\_\_  
*(Part I, column (d) must be on cash basis)*

<b>Part I Analysis of Revenue and Expenses</b> <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
SCANNED OCT 25 2013	1 Contributions, gifts, grants, etc, received (att sch)	231,700.			
	2 <input type="checkbox"/> if the foundn is not req to att Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	251,012.	251,012.		
	5 a Gross rents				
	b Net rental income or (loss)				
	6 a Net gain/(loss) from sale of assets not on line 10	-12,111.			
	b Gross sales price for all assets on line 6a	293,343.			
	7 Capital gain net income (from Part IV, line 2)		0.		
	8 Net short-term capital gain			0.	
	9 Income modifications				
10 a Gross sales less returns and allowances					
b Less Cost of goods sold					
c Gross profit/(loss) (att sch)					
11 Other income (attach schedule)					
<b>12 Total.</b> Add lines 1 through 11	<b>470,601.</b>	<b>251,012.</b>	<b>0.</b>		
ADMINISTRATIVE AND OPERATING EXPENSES	13 Compensation of officers, directors, trustees, etc	0.			
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16 a Legal fees (attach schedule)				
	b Accounting fees (attach sch) SEE ST 1	785.			785.
	c Other prof fees (attach sch)				
	17 Interest				
	18 Taxes (attach schedule)(see instrs) SEE STM 2	105.			105.
	19 Depreciation (attach sch) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
22 Printing and publications					
23 Other expenses (attach schedule) SEE STATEMENT 3	8,438.			8,438.	
<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23	<b>9,328.</b>			<b>9,328.</b>	
25 Contributions, gifts, grants paid STMT 4	182,054.			182,054.	
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	<b>191,382.</b>	<b>0.</b>	<b>0.</b>	<b>191,382.</b>	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	279,219.				
b Net investment income (if negative, enter -0-)		251,012.			
c Adjusted net income (if negative, enter -0-)			0.		



618 21

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end of year amounts only (See instructions.)		Beginning of year	End of year		
		(a) Book Value	(b) Book Value	(c) Fair Market Value			
ASSETS	1	Cash – non-interest-bearing		126,396.	117,538.	117,538.	
	2	Savings and temporary cash investments					
	3	Accounts receivable ▶					
		Less allowance for doubtful accounts ▶					
	4	Pledges receivable ▶					
		Less allowance for doubtful accounts ▶					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)					
	7	Other notes and loans receivable (attach sch) ▶					
		Less allowance for doubtful accounts ▶					
	8	Inventories for sale or use					
	9	Prepaid expenses and deferred charges					
	10 a	Investments – U.S. and state government obligations (attach schedule)					
		b Investments – corporate stock (attach schedule)					
		c Investments – corporate bonds (attach schedule)					
	11	Investments – land, buildings, and equipment basis ▶					
	Less accumulated depreciation (attach schedule) ▶						
12	Investments – mortgage loans						
13	Investments – other (attach schedule)			3,091,988.	3,380,310.	4,327,676.	
14	Land, buildings, and equipment basis ▶						
	Less accumulated depreciation (attach schedule) ▶						
15	Other assets (describe ▶)			245.			
16	<b>Total assets</b> (to be completed by all filers – see the instructions. Also, see page 1, item I)			3,218,629.	3,497,848.	4,445,214.	
LIABILITIES	17	Accounts payable and accrued expenses					
	18	Grants payable					
	19	Deferred revenue					
	20	Loans from officers, directors, trustees, & other disqualified persons					
	21	Mortgages and other notes payable (attach schedule)					
	22	Other liabilities (describe ▶)					
	23	<b>Total liabilities</b> (add lines 17 through 22)			0.	0.	
NET ASSET BALANCES	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. <input type="checkbox"/>						
	24	Unrestricted					
	25	Temporarily restricted					
	26	Permanently restricted					
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. <input checked="" type="checkbox"/>						
	27	Capital stock, trust principal, or current funds					
	28	Paid-in or capital surplus, or land, building, and equipment fund					
	29	Retained earnings, accumulated income, endowment, or other funds			3,218,629.	3,497,848.	
	30	<b>Total net assets or fund balances</b> (see instructions)			3,218,629.	3,497,848.	
	31	<b>Total liabilities and net assets/fund balances</b> (see instructions)			3,218,629.	3,497,848.	

Part III Analysis of Changes in Net Assets or Fund Balances

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	3,218,629.
2	Enter amount from Part I, line 27a	2	279,219.
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	3,497,848.
5	Decreases not included in line 2 (itemize) ▶	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30	6	3,497,848.

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shares MLC Company)	(b) How acquired P — Purchase D — Donation	(c) Date acquired (month day year)	(d) Date sold (month day, year)
1 a SEE STATEMENT 5			
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	— [ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 ] —	2	-12,111.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):	— [ If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8 ] —	3	-4,798.

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  Yes  No

If 'Yes,' the foundation does not qualify under section 4940(e). Do not complete this part

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.			
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (column (b) divided by column (c))
2011	178,014.	3,884,379.	0.045828
2010	104,294.	3,276,787.	0.031828
2009	109,309.	2,213,492.	0.049383
2008	121,103.	2,138,503.	0.056630
2007	85,132.	2,374,123.	0.035858

2 Total of line 1, column (d)	2	0.219527
3 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0.043905
4 Enter the net value of noncharitable-use assets for 2012 from Part X, line 5	4	4,129,625.
5 Multiply line 4 by line 3	5	181,311.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	2,510.
7 Add lines 5 and 6	7	183,821.
8 Enter qualifying distributions from Part XII, line 4	8	191,382.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)**

1 a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter 'N/A' on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary – see instrs)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	2,510.
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0.
3	Add lines 1 and 2	3	2,510.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0.
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-	5	2,510.
6	Credits/Payments:		
a	2012 estimated tax pmts and 2011 overpayment credited to 2012	6 a	1,866.
b	Exempt foreign organizations – tax withheld at source	6 b	
c	Tax paid with application for extension of time to file (Form 8868)	6 c	
d	Backup withholding erroneously withheld	6 d	
7	Total credits and payments. Add lines 6a through 6d	7	1,866.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	7.
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> SEE STATEMENT 6	9	666.
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b>	10	
11	Enter the amount of line 10 to be <b>Credited to 2013 estimated tax</b> Refunded	11	

**Part VII-A Statements Regarding Activities**

	Yes	No
1 a		X
1 b		X
1 c		X
2		X
3		X
4 a		X
4 b		N/A
5		X
6	X	
7	X	
8 a		
8 b	X	
9		X
10		X

BAA

**Part 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)			X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions)			X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <span style="float:right">▶ N/A</span>	X		
14	The books are in care of ▶ <u>JAY R DE MIRANDA</u> Telephone no. ▶ <u>310-377-1199</u> Located at ▶ <u>PO BOX 2127 PALOS VERDES PEN CA</u> ZIP + 4 ▶ <u>90274</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year <span style="float:right">▶ 15</span>		N/A	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, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If 'Yes,' enter the name of the foreign country ▶		Yes	No X

**Part 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
1 a	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(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.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here <span style="float:right">▶ <input type="checkbox"/></span>	1 b	N/A
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?	1 c	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes,' list the years ▶ 20 __ , 20 __ , 20 __ , 20 __		
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement - see instructions)	2 b	N/A
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20 __ , 20 __ , 20 __ , 20 __		
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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.)	3 b	N/A
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4 b	X

BAA

**Part VII-B** Statements Regarding Activities for Which Form 4720 May Be Required (continued)

**5 a** During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  Yes  No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?  Yes  No

(3) Provide a grant to an individual for travel, study, or other similar purposes?  Yes  No

(4) Provide a grant to an organization other than a charitable, etc, organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)  Yes  No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  Yes  No

**b** If any answer is 'Yes' to 5a(1)-(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? **5 b** N/A

Organizations relying on a current notice regarding disaster assistance check here

**c** If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? **N/A**  Yes  No

If 'Yes,' attach the statement required by Regulations section 53.4945-5(d)

**6 a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **6 b** X

If 'Yes' to 6b, file Form 8870

**7 a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Yes  No

**b** If 'Yes,' did the foundation receive any proceeds or have any net income attributable to the transaction? **7 b** N/A

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

**1** List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
JAY R DE MIRANDA PO BOX 2127 PALOS VERDES PEN, CA 90274	PRESIDENT 5.00	0.	0.	0.
MARY HARRIS PO BOX 2127 PALOS VERDES PEN., CA 90274	SECRETARY 1.00	0.	0.	0.
-----				
-----				
-----				

**2** Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter 'NONE.'

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
-----				
-----				
-----				
-----				

Total number of other employees paid over \$50,000 0

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** (continued)

**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
-----		
-----		
-----		
-----		
-----		
<b>Total</b> number of others receiving over \$50,000 for professional services.		0

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc

	Expenses
1 N/A	
2	
3	
4	

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

	Amount
1 N/A	
2	
All other program-related investments See instructions.	
<b>Total.</b> Add lines 1 through 3	0.

BAA

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions )

<b>1</b> Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes		
<b>a</b> Average monthly fair market value of securities	<b>1 a</b>	4,192,513.
<b>b</b> Average of monthly cash balances	<b>1 b</b>	
<b>c</b> Fair market value of all other assets (see instructions)	<b>1 c</b>	
<b>d</b> Total (add lines 1a, b, and c)	<b>1 d</b>	4,192,513.
<b>e</b> Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1 e</b>	0.
<b>2</b> Acquisition indebtedness applicable to line 1 assets	<b>2</b>	0.
<b>3</b> Subtract line 2 from line 1d	<b>3</b>	4,192,513.
<b>4</b> Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	<b>4</b>	62,888.
<b>5</b> Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	<b>5</b>	4,129,625.
<b>6</b> Minimum investment return. Enter 5% of line 5	<b>6</b>	206,481.

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here  and do not complete this part.)

<b>1</b> Minimum investment return from Part X, line 6		<b>1</b>	206,481.
<b>2 a</b> Tax on investment income for 2012 from Part VI, line 5	<b>2 a</b>	2,510.	
<b>b</b> Income tax for 2012 (This does not include the tax from Part VI)	<b>2 b</b>		
<b>c</b> Add lines 2a and 2b		<b>2 c</b>	2,510.
<b>3</b> Distributable amount before adjustments. Subtract line 2c from line 1		<b>3</b>	203,971.
<b>4</b> Recoveries of amounts treated as qualifying distributions		<b>4</b>	
<b>5</b> Add lines 3 and 4		<b>5</b>	203,971.
<b>6</b> Deduction from distributable amount (see instructions)		<b>6</b>	
<b>7</b> Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1		<b>7</b>	203,971.

**Part XII Qualifying Distributions** (see instructions)

<b>1</b> Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes:		
<b>a</b> Expenses, contributions, gifts, etc – total from Part I, column (d), line 26	<b>1 a</b>	191,382.
<b>b</b> Program-related investments – total from Part IX-B	<b>1 b</b>	
<b>2</b> Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	<b>2</b>	
<b>3</b> Amounts set aside for specific charitable projects that satisfy the		
<b>a</b> Suitability test (prior IRS approval required)	<b>3 a</b>	
<b>b</b> Cash distribution test (attach the required schedule)	<b>3 b</b>	
<b>4</b> Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	191,382.
<b>5</b> Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	<b>5</b>	2,510.
<b>6</b> Adjusted qualifying distributions. Subtract line 5 from line 4	<b>6</b>	188,872.

**Note.** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

**Part XIII** Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI, line 7				203,971.
2 Undistributed income, if any, as of the end of 2012				
a Enter amount for 2011 only			76,086.	
b Total for prior years 20___, 20___, 20___		0.		
3 Excess distributions carryover, if any, to 2012				
a From 2007				
b From 2008				
c From 2009				
d From 2010				
e From 2011				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2012 from Part XII, line 4. ▶ \$ 191,382.				
a Applied to 2011, but not more than line 2a			76,086.	
b Applied to undistributed income of prior years (Election required – see instructions)		0.		
c Treated as distributions out of corpus (Election required – see instructions)	0.			
d Applied to 2012 distributable amount				115,296.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.			
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 instructions			0.	
f Undistributed income for 2012 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2013				88,675.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
8 Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2008				
b Excess from 2009				
c Excess from 2010				
d Excess from 2011				
e Excess from 2012				



**Part XV** Supplementary Information (continued)

**3** Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a</i> Paid during the year				
<b>Total</b>				▶ <b>3 a</b>
<i>b</i> Approved for future payment				
<b>Total</b>				▶ <b>3 b</b>





**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

DE MIRANDA FOUNDATION INC

Employer identification number

95-4855401

Organization type (check one)

Filers of:

Form 990 or 990-EZ

Section:

501(c)( \_\_\_\_ ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

**Special Rules**

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc, purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc, purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc, contributions of \$5,000 or more during the year. ▶ \$ \_\_\_\_\_

**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).

**BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990EZ,**

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

Name of organization <b>DE MIRANDA FOUNDATION INC</b>	Employer identification number <b>95-4855401</b>
--	---

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

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JAY DE MIRANDA ----- PO BOX 2127 ----- PALOS VERDES PEN., CA 90274 -----	\$ 225,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)



Name of organization **DE MIRANDA FOUNDATION INC** Employer identification number **95-4855401**

**Part III Exclusively religious, charitable, etc, individual contributions to section 501(c)(7), (8) or (10) organizations that total more than \$1,000 for the year.** Complete columns (a) through (e) and the following line entry.  
 For organizations completing Part III, enter total of *exclusively* religious, charitable, etc, contributions of **\$1,000** or less for the year (Enter this information once See instructions.) ▶ \$                      N/A  
 Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	N/A		

(e) Transfer of gift		Relationship of transferor to transferee
Transferee's name, address, and ZIP + 4		

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift		Relationship of transferor to transferee
Transferee's name, address, and ZIP + 4		

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift		Relationship of transferor to transferee
Transferee's name, address, and ZIP + 4		

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift		Relationship of transferor to transferee
Transferee's name, address, and ZIP + 4		

CLIENT 3145-000

DE MIRANDA FOUNDATION INC

95-4855401

10/02/13

11:28AM

**STATEMENT 1**  
**FORM 990-PF, PART I, LINE 16B**  
**ACCOUNTING FEES**

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	\$ 785.			\$ 785.
<b>TOTAL</b>	<b>\$ 785.</b>	<b>\$ 0.</b>	<b>\$ 0.</b>	<b>\$ 785.</b>

**STATEMENT 2**  
**FORM 990-PF, PART I, LINE 18**  
**TAXES**

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INCOME TAXES	\$ 105.			\$ 105.
<b>TOTAL</b>	<b>\$ 105.</b>	<b>\$ 0.</b>	<b>\$ 0.</b>	<b>\$ 105.</b>

**STATEMENT 3**  
**FORM 990-PF, PART I, LINE 23**  
**OTHER EXPENSES**

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ADMINISTRATIVE EXPENSES	\$ 8,438.			\$ 8,438.
<b>TOTAL</b>	<b>\$ 8,438.</b>	<b>\$ 0.</b>	<b>\$ 0.</b>	<b>\$ 8,438.</b>

**STATEMENT 4**  
**FORM 990-PF, PART I, LINE 25**  
**CONTRIBUTIONS, GIFTS, AND GRANTS**

CASH GRANTS AND ALLOCATIONS

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

EL NIDO FAMILY CENTERS

500 SHATTO PLACE #425  
 LOS ANGELES, CA 90020,

RELATIONSHIP OF DONEE:

NONE

ORGANIZATIONAL STATUS OF DONEE:

PUBLIC CHARITY

AMOUNT GIVEN:

\$ 20,000.

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

UGANDA AIDS ORPHAN CHILDRENS FOUNDATION

PO BOX 64485 11534 GATEWAY BLVD  
 LOS ANGELES, CA 90064

RELATIONSHIP OF DONEE:

NONE

ORGANIZATIONAL STATUS OF DONEE:

PUBLIC CHARITY

AMOUNT GIVEN:

72,000.

CLASS OF ACTIVITY:

CLIENT 3145-000

DE MIRANDA FOUNDATION INC

95-4855401

10/02/13

11 28AM

**STATEMENT 4 (CONTINUED)  
FORM 990-PF, PART I, LINE 25  
CONTRIBUTIONS, GIFTS, AND GRANTS**

DONEE'S NAME: UNATTI FOUNDATION  
DONEE'S ADDRESS: 824 17TH STREET #4  
SANTA MONICA, CA 90403  
RELATIONSHIP OF DONEE: NONE  
ORGANIZATIONAL STATUS OF DONEE: PUBLIC CHARITY  
AMOUNT GIVEN: \$ 14,700.

CLASS OF ACTIVITY:  
DONEE'S NAME: PROMISE CHILD  
DONEE'S ADDRESS: PO BOX 6126  
HUNTINGTON BEACH, CA 92615  
RELATIONSHIP OF DONEE: NONE  
ORGANIZATIONAL STATUS OF DONEE: PUBLIC CHARITY  
AMOUNT GIVEN: 14,400.

CLASS OF ACTIVITY:  
DONEE'S NAME: SOUTH BAY CHILDREN'S HEALTH CENTER  
DONEE'S ADDRESS: 410 S. CAMINO REAL  
REDONDO BEACH, CA 90277  
RELATIONSHIP OF DONEE: NONE  
ORGANIZATIONAL STATUS OF DONEE: PUBLIC CHARITY  
AMOUNT GIVEN: 17,400.

CLASS OF ACTIVITY:  
DONEE'S NAME: MISSION OF HOPE  
DONEE'S ADDRESS: P.O. BOX 60004  
FORT MYERS, FL 33906  
RELATIONSHIP OF DONEE: NONE  
ORGANIZATIONAL STATUS OF DONEE: PUBLIC CHARITY  
AMOUNT GIVEN: 8,400.

CLASS OF ACTIVITY:  
DONEE'S NAME: CROWN JEWEL CLUB  
DONEE'S ADDRESS: 531 MAIN ST #1000  
EL SEGUNDO, CA 90731  
RELATIONSHIP OF DONEE: NONE  
ORGANIZATIONAL STATUS OF DONEE: PUBLIC CHARITY  
AMOUNT GIVEN: 12,504.

CLASS OF ACTIVITY:  
DONEE'S NAME: TOBERMAN NEIGHBORHOOD CENTER  
DONEE'S ADDRESS: 131 N. GRAND AVE  
SAN PEDRO, CA 90731  
RELATIONSHIP OF DONEE: NONE  
ORGANIZATIONAL STATUS OF DONEE: PUBLIC CHARITY  
AMOUNT GIVEN: 8,400.

CLASS OF ACTIVITY:  
DONEE'S NAME: RILEY HOSPITAL FOR CHILDREN  
DONEE'S ADDRESS: 705 RILEY HOSPITAL DRIVE  
INDIANAPOLIS, IN 46202  
RELATIONSHIP OF DONEE: NONE  
ORGANIZATIONAL STATUS OF DONEE: PUBLIC CHARITY  
AMOUNT GIVEN: 250.

CLASS OF ACTIVITY:  
DONEE'S NAME: HARMONY PROJECT

CLIENT 3145-000

DE MIRANDA FOUNDATION INC

95-4855401

10/02/13

11 28AM

**STATEMENT 4 (CONTINUED)**  
**FORM 990-PF, PART I, LINE 25**  
**CONTRIBUTIONS, GIFTS, AND GRANTS**

DONEE'S ADDRESS: 817 VINE STREET  
 LOS ANGELES, CA 90038

RELATIONSHIP OF DONEE:  
 ORGANIZATIONAL STATUS OF DONEE:  
 AMOUNT GIVEN: \$ 6,000.

CLASS OF ACTIVITY:  
 DONEE'S NAME: HELP ME SEE  
 DONEE'S ADDRESS: 20 WEST 36TH STREET STE. #701  
 NEW YORK, NY 10018

RELATIONSHIP OF DONEE:  
 ORGANIZATIONAL STATUS OF DONEE:  
 AMOUNT GIVEN: 7,200.

CLASS OF ACTIVITY:  
 DONEE'S NAME: MILES JESU  
 DONEE'S ADDRESS: 1126 W. MORSE AVE.  
 CHICAGO, IL 60626

RELATIONSHIP OF DONEE:  
 ORGANIZATIONAL STATUS OF DONEE:  
 AMOUNT GIVEN: 800.

TOTAL \$ 182,054.

**STATEMENT 5**  
**FORM 990-PF, PART IV, LINE 1**  
**CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME**

ITEM	(A) DESCRIPTION	(B) HOW ACQUIRED	(C) DATE ACQUIRED	(D) DATE SOLD
1	CASH IN LIEU BLACKROCK ENHANCED EQUITY DIVID TR	PURCHASED	2/29/2012	2/29/2012
2	200 SH BP PRUDHOE BAY RTY TR UNIT BEN INT	PURCHASED	VARIOUS	1/17/2012
3	1300 SH FRONTIER COMMUNICATIONS CORP COM	PURCHASED	8/02/2011	1/17/2012
4	2800 SH GABELLI MULTIMEDIA TR INC	PURCHASED	VARIOUS	7/16/2012
5	950 SH NISKA GAS STORAGE PARTNERS LLC COM UNITS	PURCHASED	VARIOUS	4/25/2012
6	CASH IN LIEU PEMBINA PIPELINE CORPORATION COM NPV ISI	PURCHASED	4/05/2012	4/05/2012
7	475 SH AES TR III 6.75% TR CONV PFD	PURCHASED	VARIOUS	8/02/2012
8	2300 SH B & G FOODS INC NEW COM	PURCHASED	VARIOUS	7/16/2012
9	2400 SH CAPSTONE INFRASTRUCTURE CORPORATION COM	PURCHASED	VARIOUS	4/25/2012
10	900 SH DWS HIGH INCOME OPPORTUNITIES INC COM	PURCHASED	VARIOUS	4/25/2012
11	1200 SH GABELLI MULTIMEDIA TR INC	PURCHASED	11/22/2010	7/16/2012
12	1000 SH GUGGENHEIM S&P GLOBAL OPPORTUNITIES	PURCHASED	11/10/2008	8/20/2012
13	300 SH ISHARES INC MSCI BRAZIL INDEX FUND	PURCHASED	5/14/2007	12/14/2012
14	1039 SH PACE OIL & GAS LTD COM	PURCHASED	VARIOUS	1/17/2012
15	1250 SH PARKLAND FUEL CORP COM	PURCHASED	VARIOUS	9/13/2012
16	100 SH PHILLIPS 66 COM	PURCHASED	5/14/2007	7/16/2012
17	700 SH SAN JUAN BASIN RTY TR UNIT BEN INT	PURCHASED	VARIOUS	4/25/2012
18	1300 SH TEMPLETON EMERGING MKTS FD INC	PURCHASED	VARIOUS	12/14/2012

CLIENT 3145-000

DE MIRANDA FOUNDATION INC

95-4855401

10/02/13

11 28AM

STATEMENT 5 (CONTINUED)  
FORM 990-PF, PART IV, LINE 1  
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

ITEM	(A) DESCRIPTION	(B) HOW ACQUIRED	(C) DATE ACQUIRED	(D) DATE SOLD	(E) GROSS SALES	(F) DEPREC. ALLOWED	(G) COST BASIS	(H) GAIN (LOSS)	(I) FMV 12/31/69	(J) ADJ. BAS. 12/31/69	(K) EXCESS (I) - (J)	(L) GAIN (LOSS)
19	1700 SH TRINIDAD DRILLING LTD SEDOL	PURCHASED	VARIOUS	4/25/2012								
20	1450 SH CENTERPLATE INC EXT SBNT	PURCHASED	VARIOUS	11/20/2012								
1					2.		0.	2.				\$ 2.
2					23,108.		22,126.	982.				982.
3					6,687.		9,314.	-2,627.				-2,627.
4					19,600.		17,942.	1,658.				1,658.
5					11,743.		16,556.	-4,813.				-4,813.
6					15.		15.	0.				0.
7					23,708.		21,714.	1,994.				1,994.
8					60,751.		15,966.	44,785.				44,785.
9					9,438.		12,801.	-3,363.				-3,363.
10					14,206.		23,838.	-9,632.				-9,632.
11					8,402.		8,488.	-86.				-86.
12					12,622.		10,668.	1,954.				1,954.
13					16,168.		16,370.	-202.				-202.
14					4,771.		12,506.	-7,735.				-7,735.
15					22,323.		16,247.	6,076.				6,076.
16					3,555.		3,230.	325.				325.
17					11,139.		27,078.	-15,939.				-15,939.
18					24,769.		24,909.	-140.				-140.
19					10,935.		23,315.	-12,380.				-12,380.
20					9,401.		22,371.	-12,970.				-12,970.
											TOTAL	\$ -12,111.

STATEMENT 6  
FORM 990-PF, PART VI, LINE 9  
TAX DUE

TAX DUE	\$	651.
LATE PAYMENT PENALTY		10.
LATE INTEREST		5.
TOTAL	\$	<u>666.</u>

# Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury  
Internal Revenue Service

▶ **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box.
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

**Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868

**Electronic filing (e-file).** You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on *e-file for Charities & Nonprofits*

**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension – check this box and complete Part I only

*All other corporations (including 1120-C filers) partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns*

Enter filer's identifying number, see instructions

<b>Type or print</b>	Name of exempt organization or other filer. See instructions. <b>DE MIRANDA FOUNDATION INC</b>	Employer identification number (EIN) or <b>95-4855401</b>
	Number, street, and room or suite number. If a P.O. box, see instructions. <b>PO BOX 2127</b>	Social security number (SSN)
File by the due date for filing your return. See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>PALOS VERDES PEN, CA 90274</b>	

Enter the Return code for the return that this application is for (file a separate application for each return) **04**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

● The books are in the care of ▶ JAY R DE MIRANDA -----

Telephone No ▶ 310-377-1199 ----- FAX No. ▶ -----

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension is for.

**1** I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 11/15, 20 13, to file the exempt organization return for the organization named above.  
The extension is for the organization's return for

- ▶  calendar year 20 \_\_\_\_ or
- ▶  tax year beginning 4/01, 20 12, and ending 3/31, 20 13.

**2** If the tax year entered in line 1 is for less than 12 months, check reason:  Initial return  Final return  
 Change in accounting period

<b>3a</b> If this application is for Form 990-BL, 990 PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$	1,860.
<b>b</b> If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$	1,866.
<b>c Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$	0.

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.