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Department of the Treasury

Internal Revenue Service

DLN: 93491180006105

OMB No 1545-0052

Open to Public Inspection

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

▶ Do not enter social security numbers on this form as it may be made public. ► Information about Form 990-PF and its instructions is at <u>www.irs.gov/form990pf</u>.

For	cale	endar year 2014, or tax y	ear beginning 01-	01-2014	, ar	nd ending 1	2-31-2014	
		undation				A Employer id	lentification numbe	er
•		MANUEL FOUNDATION				20-0423348		
Num 86		: TOTH d street (or P O box number if mail is i UEROA STREET 10TH FLOOR	not delivered to street address	Room/suite		B Telephone nu	ımber (see ınstructioi	ns)
		n, state or province, country, and ZIP o SS, CA 900172543	r foreign postal code			C If exemption	application is pendin	g, check here 🕨 🦵
G CI	neck a	Ill that apply	Initial return of a	former public charit	.v	D 1 . Foreign o	rganizations, check h	ere 🕨 🗀
		Final return	A mended return	Total parties of the control of the	·'	•	rganizations meeting	• •
			ge Name change				ck here and attach co undation status was t	mputation '
		ype of organization 🔽 Sectior n 4947(a)(1) nonexempt charita					n 507(b)(1)(A), chec	
		ket value of all assets at end	J Accounting method			F If the found	ation is in a 60-mont	h termination
of '	year <i>(t</i>	from Part II, col. (c), \$ 64,433	Other (specify) (Part I, column (d) must				n 507(b)(1)(B), chec	
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	` '	et investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)		
	1	Contributions, gifts, grants, etc.	c , received (attach					
	_	schedule)		512,356				
	2	Check F If the foundation is	s not required to attach					
	3	Sch B	orary cash investments					
	4	Dividends and interest from se		18		18	18	
Revenue	5a	Gross rents						
	ь	Net rental income or (loss)						
	6a	Net gain or (loss) from sale of	assets not on line 10					
	ь	Gross sales price for all assets	s on line 6 a					
	7	 Capital gain net income (from l	Part IV, line 2)					
	8	Net short-term capital gain .						
	9	Income modifications						
	10a	Gross sales less returns and						
	Ь	allowances Less Cost of goods sold						
	°	Gross profit or (loss) (attach s						
	11	Other income (attach schedule						
	12	Total. Add lines 1 through 11		512,374		18	18	
	13	Compensation of officers, direc	ctors, trustees, etc	0				
	14	Other employee salaries and v	vages					
ŞΦŞ	15	Pension plans, employee bene	fits					
Expenses	16a	Legal fees (attach schedule).						
EX	Ь	Accounting fees (attach sched		-				
		Other professional fees (attack	·					
rati	17	Interest						
Admını strative	18 19	Taxes (attach schedule) (see Depreciation (attach schedule	·					
Ē	20	Occupancy						
Ad	21	Travel, conferences, and meet						
and	22	Printing and publications						
	23	Other expenses (attach sched	lule)					
Operating	24	Total operating and administra	ative expenses.					
ž		Add lines 13 through 23		0		0		0
ŏ	25	Contributions, gifts, grants pai	ıd	542,600				542,600
	26	Total expenses and disburseme 25	ents. Add lines 24 and	542,600		0		542,600
	27	Subtract line 26 from line 12		342,000		U		342,000
	a	Excess of revenue over expens	ses and disbursements	-30,226				
	ь	Net investment income (if neg	atıve, enter -0-)			18		
	С	Adjusted net income (if negati	ve, enter -0 -)				18	

) a	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year		End of	
		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Boo		(c) Fair Market Value
		Cash—non-interest-bearing	94,657		64,433	64,433
		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 schedule) 🟲				
		Less allowance for doubtful accounts 🟲				
اع	8	Inventories for sale or use				
sets	9	Prepaid expenses and deferred charges				
4	10a	Investments—U S and state government obligations (attach schedule)				
	ь	Investments—corporate stock (attach schedule)				
	С	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis 🟲			_	
		Less accumulated depreciation (attach schedule)				
	12	Investments—mortgage loans				
		Investments—other (attach schedule)				
		Land, buildings, and equipment basis	†			
		Less accumulated depreciation (attach schedule)				
	15	Other assets (describe				
		Total assets (to be completed by all filers—see the	' <u> </u>			
		instructions Also, see page 1, item I)	94,657		64,433	64,433
	17	Accounts payable and accrued expenses	, 22		, -	, :-
		Grants payable				
ا ي		Deferred revenue				
DIIITIES		Loans from officers, directors, trustees, and other disqualified persons				
ā	21	Mortgages and other notes payable (attach schedule)	' 			
ן ⊏		Other liabilities (describe >				
		Total liabilities (add lines 17 through 22)	<u> </u>		0	
-	23	Foundations that follow SFAS 117, check here				
اي		and complete lines 24 through 26 and lines 30 and 31.				
ž	24	Unrestricted	94,657		64,433	
<u>ල</u>			94,037		04,433	
oo		Temporarily restricted	-			
틸	26	Permanently restricted				
or Fund Balances		Foundations that do not follow SFAS 117, check here				
		and complete lines 27 through 31.				
띩		Capital stock, trust principal, or current funds				
Assets		Paid-in or capital surplus, or land, bldg , and equipment fund				
	29	Retained earnings, accumulated income, endowment, or other funds				
ĕ	30	Total net assets or fund balances (see instructions)	94,657		64,433	
	31	Total liabilities and net assets/fund balances (see instructions)	94,657		64,433	
Pa	rt II				, ,	
1		Total net assets or fund balances at beginning of year—Part II, column	(a), line 30 (must ag	ree		
		with end-of-year figure reported on prior year's return)			1	94,657
2		Enter amount from Part I, line 27a			2	-30,226
3		Other increases not included in line 2 (itemize)			3	2
4		Add lines 1, 2, and 3			4	64,433
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)—P	art II, column (b), lır	ne 30 .	6	64,433

the Part VI instructions

Form 990-PF (2014)					Page 3
(a) List and descri	s and Losses for Tax on Inve be the kind(s) of property sold (e g , re ehouse, or common stock, 200 shs M	eal estate,	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a					
(e) Gross sales price	(f) Depreciation allowe (or allowable)	1	t or other basis opense of sale		or (loss)) mınus (g)
a					
b					
С					
d					
е					
Complete only for asset	s showing gain in column (h) and owne				(h) gaın mınus
(i) F M V as of 12/31/6	(j) Adjusted basis as of 12/31/69		cess of col (ı) col (j), ıf any		less than -0-) or om col (h))
a					
b					
С					
d					
e					
	oital gain or (loss) as defined in section In Part I, line 8, column (c) (see instru			3	
Part V Qualification	n Under Section 4940(e) for R	teduced Tax or	Net Investme	nt Income	
For optional use by domesti	c private foundations subject to the se	ection 4940(a) tax	on net investment	ıncome)	
fsection 4940(d)(2) applie	s, leave this part blank				
	the section 4942 tax on the distribute not qualify under section 4940(e)			eriod?	┌ Yes ┌ No
1 Enter the appropriate ai	mount in each column for each year, s	ee instructions befo	ore making any ent	rıes	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncha		(d) Distribution (col (b) divided	n ratio
2013	386,319		88,978	(55. (5) 417 1464	4 341736
2012	332,600		115,715		2 874303
2011	329,840		131,075		2 516422
2010	81,000		48,914		1 655968
2009	73,150		45,238	_	1 617003
•	umn (d)			2	13 005432
	on ratio for the 5-year base period—dir rs the foundation has been in existence			3	2 601086
	e of noncharitable-use assets for 2014			4	78,352
5 Multiply line 4 by I	ine 3			5	203,800
	vestment income (1% of Part I, line 2		_	6	· · · · · · · · · · · · · · · · · · ·
				7	203,800
	stributions from Part XII, line 4		_	8	542,600
· · · · · · · · · · · · · · · · · · ·	or greater than line 7, check the box		<u> </u>	nort using a 10/ to	

	990-PF (2014)			age 4				
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the in	structio	ns)					
1a	Exempt operating foundations described in section 4940(d)(2), check here Tand enter "N/A" on line 1							
	Date of ruling or determination letter(attach copy of letter if necessary–see instructions)							
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0				
	here F and enter 1% 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)							
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0				
3	Add lines 1 and 2			0				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)							
5 6	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			0				
a	2014 estimated tax payments and 2013 overpayment credited to 2014 6a							
b	Exempt foreign organizations—tax withheld at source 6b							
c	Tax paid with application for extension of time to file (Form 8868) 6c							
d	Backup withholding erroneously withheld 6d							
7	Total credits and payments Add lines 6a through 6d			0				
8	Enter any penalty for underpayment of estimated tax. Check here T if Form 2220 is attached 8							
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed							
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ► 10							
11	Enter the amount of line 10 to be Credited to 2015 estimated tax Refunded 11							
	t VII-A Statements Regarding Activities							
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No				
	It participate or intervene in any political campaign?	. 1a		No				
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions							
_	for definition)?	1b		No				
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials							
	published or distributed by the foundation in connection with the activities.							
С	c Did the foundation file Form 1120-POL for this year?							
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year							
	(1) On the foundation ► \$ (2) On foundation managers ► \$							
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed							
	on foundation managers 🕨 \$							
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	. 2		No				
	If "Yes," attach a detailed description of the activities.							
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles							
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	. з		No				
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No				
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b						
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	. 5		No				
	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	J]					
	that conflict with the state law remain in the governing instrument?	. 6		No				
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c),							
	and Part XV.	. 7	Yes					
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)							
	► <u>CA</u>							
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	Yes					
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 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)?							
	If "Yes," complete Part XIV	. 9		No				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names		\ , _					
	and addresses.	. 10	Yes					

De	TABLE A Continued Departing Activities (continued)	-		age 5
	rt VII-A Statements Regarding Activities (continued) At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		1	Ι
11	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	111		No
40		<u> </u>		NO
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)			
40		12	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ▶			
14	The books are in care of ►JACKIE TOTH Telephone no ►(213)	<u>) 624</u> -	-7707	
	Located at ▶865 S FIGUEROA ST los angeles CA ZIP+4 ▶9001725	43		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here			► F
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over		Yes	No
10	a bank, securities, or other financial account in a foreign country?	16	165	140
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial	<u> </u>		
	Accounts (FBAR) If "Yes", enter the name of the foreign country			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
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? Yes V No			
	(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? Yes V No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V 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) A gree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations	۱		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,	١		l <u>.</u> .
_	that were not corrected before the first day of the tax year beginning in 2014?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2014? Yes V No			
	If "Yes," list the years • 20, 20, 20			
b	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		No
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
_	► 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
-	any time during the year?			
b	If "Yes," did it have excess business holdings in 2014 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 2014.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	ļ	No
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 2014?	4b	1	No

Pai	rt VII-B	Statements Rega	rdir	ng Activities for	W	nich Form 4720	May	Be Required (cont	inue	d)	<u>_</u>
5a		e year dıd the foundatıor						•			
	(1) Carry	on propaganda, or other	wise	attempt to influenc	e leg	ıslatıon (section 49	45(e)) [?]	√ No		
	(2) Influe	nce the outcome of any	spec	ıfıc publıc election (see	section 4955), or to	car	ry			
	on, dıı	rectly or indirectly, any	/oter	registration drive?.				⊤ Yes ▽	- No		
		de a grant to an individua						☐ Yes Ϝ			
	(4) Provid	de a grant to an organıza	tıon	other than a charita	ble,	etc , organization de	scrib	ped			
	ın sec	tion 4945(d)(4)(A)? (se	e ins	structions)				┌ Yes ┌	- No		
		de for any purpose other									
								Yes 🔽	√ No		
ь								exceptions described in			
								instructions)?		5b	
								. ⊦ Γ			
c		wer is "Yes" to question									
_		•	-	• •		·		 Y es	- _{No}		
		attach the statement requi					-	,,			
6a		undation, during the yea		-			nrer	muums on			
ou		Il benefit contract?							- No		
ь								benefit contract?		6b	No
		o 6b, file Form 8870.	ι, μα	y premiums, unecci	y 01 1	nunectry, on a perso	Jilai	benefit contract	•		140
7-		•	nc +1	a foundation a parti	+	nrobibited tay abol	tar t	rancastion? E Vos E	- No		
7a 	a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☐ b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?										
										7b	No
Pai		and Contractors	. On	ncers, Directors	S, II	rustees, rounda	ιτιοι	n Managers, Highly	Paid	Ешр	ioyees,
1		icers, directors, trustees	, foi	ındation managers a	nd t	heir compensation (see i	nstructions).			
			(b)	Title, and average	(c) Compensation		(d) Contributions to	(0) 5	vnonc	o account
	(a) Nar	me and address	hours per week devoted to position			If not paid, enter		mployee benefit plans	(e) Expense account, other allowances		
		D . T				-0-) and		deferred compensation			
See	Additional	Data Table									
2	Compensat	tion of five highest-paid	emp	loyees (other than	thos	e included on line 1-	-see	instructions). If none, er	nter "N	NONE."	•
	•							(d) Contributions to			
(a)		address of each employ	ee	(b) Title, and aver hours per week		(c) Compensation	n	employee benefit			e account,
	paid n	nore than \$50,000		devoted to positi		(-,		plans and deferred compensation	oti	her all	owances
								Compensation			
				1							
Tota	I number of	f other employees paid o	vers	50,000 							

Information About Officers, Directors, Truste	es, Foundation Managers, Hi	ghly Paid Employees,
and Contractors (continued) 3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON	 VE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Total number of others receiving over \$50,000 for professional services.	•	
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rele		r of Expenses
organizations and other beneficiaries served, conferences convened, research papers produ	ced, etc	
2		
3		
4		
Part IX-B Summary of Program-Related Investments (
Describe the two largest program-related investments made by the foundation during t	ne tax year on lines 1 and 2	A mount
<u>-</u>		
2		
All other program-related investments See instructions 3		
<u> </u>		
Total. Add lines 1 through 3		▶

Pa	Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	oreign foi	undations,
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	(
b	Average of monthly cash balances	1b	79,54!
c	Fair market value of all other assets (see instructions)	1c	(
d	Total (add lines 1a, b, and c)	1d	79,54!
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	(
3	Subtract line 2 from line 1d	3	79,54!
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	1,19
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	78,35
6	Minimum investment return. Enter 5% of line 5	6	3,918
Pai	TXI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private oper certain foreign organizations check here and do not complete this part.)	ratıng fou	ndations and
1	Minimum investment return from Part X, line 6	1	3,918
2a	Tax on investment income for 2014 from Part VI, line 5 2a		
b	Income tax for 2014 (This does not include the tax from Part VI) 2b		
С	Add lines 2a and 2b	2c	(
3	Distributable amount before adjustments Subtract line 2c from line 1	3	3,918
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	3,918
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	3,918
Par	t 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	542,600
b	Program-related investments—total from Part IX-B	1b	(
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	(
3	A mounts 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	542,600
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 (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	542,600
	Note: The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whet	her the for	indation qualifies for

the section 4940(e) reduction of tax in those years

	olidistributed filcollie (see liisti	uctions)			
		(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
4	Distributable amount for 2014 from Part XI, line 7	Corpus	rears prior to 2013	2013	3,918
	•				3,510
	Undistributed income, if any, as of the end of 2014			0	
	Enter amount for 2013 only		0		
	Total for prior years 2012, 2011, 2010		U		
	Excess distributions carryover, if any, to 2014				
	From 2009				
	From 2010				
	From 2011				
	From 2012				
	From 2013				
	Total of lines 3a through e	1,181,413			
4	Qualifying distributions for 2014 from Part				
	XII, line 4 🕨 \$542,600			0	
	Applied to 2013, but not more than line 2a			0	
b	Applied to undistributed income of prior years				
_	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
А	Applied to 2014 distributable amount				3,918
	Remaining amount distributed out of corpus	538,682			5,510
	· · · · · · · · · · · · · · · · · · ·	330,002	+		1
Э	Excess distributions carryover applied to 2014				
	(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				
Ŭ	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,720,095			
	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 Subtract line 6c from line 6b Taxable amount				
a	—see instructions		0		
_	Undistributed income for 2013 Subtract line				
_	4a from line 2a Taxable amount—see				
	Instructions			0	
f	Undistributed income for 2014 Subtract				
	lines 4d and 5 from line 1 This amount must				0
_	be distributed in 2015				· · · · · · · · ·
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (Election may				
	be required - see instructions)				
8	Excess distributions carryover from 2009 not				
	applied on line 5 or line 7 (see instructions)	70,888			
9	Excess distributions carryover to 2015.	4 640 665			
	Subtract lines 7 and 8 from line 6a	1,649,207			
	Analysis of line 9				
а	Excess from 2010				
b	Excess from 2011 323,286				
C	Excess from 2012 326,815				
d	Excess from 2013 381,870				
е	Excess from 2014 538,682				

Check here F if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

- a The name, address, and telephone number or email address of the person to whom applications should be addressed
- b The form in which applications should be submitted and information and materials they should include
- c Any submission deadlines
- **d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

See Additional Data Table	Recipient Name and address (home or business) Tracibination in the year See A dditional Data Table If recipient is an individual, show any relationship to any foundation manager or substantial contributor Total	Part XV Supplementary Inform	nation (continued)			Page 11
Name and address (home or business) Name and address (home or business) Amount See Additional Data Table See Additional Data Table Total. Purpose of grant or contribution Purpose of grant or contribution Amount Purpose of grant or contribution Amount Amount	Name and address (home or business) a Paid during the year see A diditional Data Table Total Total Approved for future payment Amount Show any relationship to any function manager or substantial contributor Show any relationship to any function and the function of the function	3 Grants and Contributions Paid		proved for F	uture Payment	
a Paid during the year See Additional Data Table Total	Total		show any relationship to any foundation manager	status of	Purpose of grant or contribution	A mount
See Additional Data Table Total	Total		or substantial contributor	recipient		
·	b Approved for future payment	a Paid during the year See Additional Data Table	or substantial contributor	recipient	Contribution	
·	b Approved for future payment					
b Approved for future payment				<u> </u>		542,600

Form 990-PF	<u> </u>					Page 12
	A Analysis of Income-Producion amounts unless otherwise indicated		s usiness income	Excluded by section	n 512, 513, or 514	(e)
1 Program s	service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	Related or exempt function income (See instructions)
b						
e						
g Fees ar2 Members3 Interest	nd contracts from government agencies thip dues and assessments on savings and temporary cash ents			14	18	33
5 Net renta	s and interest from securities al income or (loss) from real estate					
b Not deb 6 Net renta	nanced property					
8 Gain or (vestment income loss) from sales of assets other than y · · · · · · · · · · · · · · · · · · ·					
10 Gross pro	me or (loss) from special events ofit or (loss) from sales of inventory venue a					
с						
12 Subtotal 13 Total. Ad	Add columns (b), (d), and (e) Id line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify ca			:	18	
	Relationship of Activities to Explain below how each activity for whice the accomplishment of the foundation's instructions)	the Accomp	ported in column ((e) of Part XVI-A c	ontributed importa	
+						
						

Form 990-P	PF (2014)										Pa	ge 13
Part XV	Information R Noncharitable					actio	ns and I	Relationships	With			
section	organization directly or 501(c) of the Code (oth	ındırectly e	engage	ın any of	the following wit						Yes	No
organiza						_						
	rs from the reporting fou											.
, ,	sh									1a(1)		No
	ner assets									1a(2)		No
	ansactions	b.l.l.			_					41.743		
	es of assets to a noncha chases of assets from a											No No
	ntal of facilities, equipme											No
	mbursement arrangeme									1b(3)		No
	ins or loan guarantees.									1b(5)		No
	ormance of services or i									1b(6)		No
	of facilities, equipment,									⊢ <u>`</u> ´		No
d If the ar	nswer to any of the above ods, other assets, or see ansaction or sharing ari	e is "Yes," ervices giv rangement	compl en by t , show	ete the fol the reporti in column	llowing schedule ng foundation I	e Colum f the fou f the god	nn (b) sho undation r ods, other	uld always show t eceived less than	the fair ma fair mark es receive	rket va et value ed	1	nte
(a) Line No	(b) Amount involved	(C) Name	Of HOTIC	nantable ext	empt organization	(u)	Description	or transfers, transacti	ons, and sin	alling alla	ngemer	11.5
describe	oundation directly or ind ed in section 501(c) of t " complete the following (a) Name of organization	he Code (c schedule		nan sectio	•	ın sectı	-		tion of relati	. 厂 Y€	s F	, No
the	e best of my knowledge formation of which prepa	and belief, rer has any	ıt ıs tr	<u> </u>					May the return with the			all
	Signature of officer or t	trustee			Date		Title		below (see ins	tr)? 🔽 <u>\</u>	∕es	No
	Print/Type preparer's BARBARA L EDMO		Prepa	arer's Sign	nature	Date		Check if self- employed ▶	PTIN P	000027	723	
Paid Prepare Use		IDS LLP	I .			1		Firm's EIN ►	I			
Only	Firm's address ► 3300 IRVINE AVE S CA 92660		Phone no (213)624-770) 7							

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OMB No 1545-0047

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

2014

Employer identification number

QUINN EMANUEL FOU	INDATION	20-0423348
Organization type (che	eck 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	te foundation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private for	undation
	501(c)(3) taxable private foundation	
other property) f	ion filing Form 990, 990-EZ, or 990-PF that received, during the year, con from any one contributor Complete Parts I and II See instructions for dete	- · · · · · · · · · · · · · · · · · · ·
Special Rules		
under sections 5 received from ar	ion described in section $501(c)(3)$ filing Form 990 or 990-EZ that met the $509(a)(1)$ and $170(b)(1)(A)(vi)$, that checked Schedule A (Form 990 or 98 by one contributor, during the year, total contributions of the greater of (1 or (ii) Form 990-EZ, line 1 Complete Parts I and II	90-EZ), Part II, line 13, 16a, or 16b, and that
during the year,	ion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ total contributions of more than \$1,000 <i>exclusively</i> for religious, charitable of cruelty to children or animals. Complete Parts I, II, and III	
during the year, this box is check purpose Do not	ion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ contributions <i>exclusively</i> for religious, charitable, etc., purposes, but no sed, enter here the total contributions that were received during the year complete any of the parts unless the General Rule applies to this organishe, etc., contributions totaling \$5,000 or more during the year	such contributions totaled more than \$1,000 If for an exclusively religious, charitable, etc, nization because it received nonexclusively

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 its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization
QUINN EMANUEL FOUNDATION

Employer identification number

20-0423348

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
	See Additional Data Table	\$	Person Payroll Noncash (Complete Part II for noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contribution)

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Name of organization **Employer identification number** QUINN EMANUEL FOUNDATION 20-0423348 Noncash Property (see instructions) Use duplicate copies of Part II if additional space is Part II (a) No. (c) (b) (d) from FMV (or estimate) Date received Description of noncash property given Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) \$ (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) \$ (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions)

Schedule	B (Form 990, 990-EZ, or 990-PF) (2014)			Page 4
	organization			Employer identification number
SOINN E	MANUEL FOUNDATION			20-0423348
Part III		om any one er the total of tructions)	contributor. Complet	cribed in section 501(c)(7), (8), or (10) e columns (a) through (e) and the following line thantable, etc, contributions of \$1,000 or less for \$
(a) No. from Part I	(b) Purpose of gift) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and a		Transfer of gift Relatio	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and 2		Transfer of gift Relatio	enship of transferor to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I				_
	Transferee's name, address, and a		Transfer of gift Relatio	enship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—				
	Transferee's name, address, and 2		Transfer of gift Relatio	enship of transferor to transferee

Software ID: Software Version:

EIN: 20-0423348

Name: QUINN EMANUEL FOUNDATION

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ANDREW BERDON 865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 90017	\$ \$	Person F Payroll F Noncash F (Complete Part II for noncash contribution)
_2	ANDREW ROSSMAN 865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 90017	\$5,36 <u>5</u>	Person F Payroll F Noncash F (Complete Part II for noncash contribution)
_3	A WILLIAM URQUHART 865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 90017	\$6,000 	Person F Payroll F Noncash F (Complete Part II for noncash contribution)
4	CHRIS KERCHER 865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 90017	\$5,651 	Person F Payroll F Noncash F (Complete Part II for noncash contribution)
_ 5	DAN BROCKETT 865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 90017	\$6,594 	Person Payroll Noncash (Complete Part II for noncash contribution)
6	DAN CUNNINGHAM 865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 90017	\$10,208	Person Payroll Noncash (Complete Part II for noncash contribution)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	DAVID EISEMAN 865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 90017	\$6,000 	Person F Payroll F Noncash F (Complete Part II for noncash contribution)
8	DAVID ELSBERG 865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 90017	\$6,532 	Person F Payroll F Noncash F (Complete Part II for noncash contribution)
9	ED DEFRANCO 865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 90017	\$6,976	Person F Payroll F Noncash F (Complete Part II for noncash contribution)
10	ERIC HUANG 865 S FIGUEROA ST 10TH FLOOR LOS ANGELEG, CA 90017	\$	Person F Payroll F Noncash F (Complete Part II for noncash contribution)
_11	ERIC WINSTON 865 S FIGUEROA ST 10TH FLOOR LOS ANGELES, CA 90017	\$5,750 	Person F Payroll F Noncash F (Complete Part II for noncash contribution)
_12	FAITH GAY 865 S FIGUEROA ST 10TH FLOOR LOS ANGELES, CA 90017	\$15,538 	Person F Payroll F Noncash F (Complete Part II for noncash contribution)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	JANE BYRNE 865 S FIGUEROA ST 10TH FLOOR LOS ANGELES, CA 90017	\$\$	Person F Payroll F Noncash F (Complete Part II for noncash contribution)
14	JONATHAN OBLAK 865 S FIGUEROA ST 10TH FLOOR LOS ANGELES, CA 90017	\$10,581	Person F Payroll F Noncash F (Complete Part II for noncash contribution)
15	JONATHAN PICKHARDT 865 S FIGUEROA ST 10TH FLOOR LOS ANGELES, CA 90017	\$9,425	Person F Payroll F Noncash F (Complete Part II for noncash contribution)
16	VARIOUS - LESS THAN 5000 - SEE AT 865 S FIGUEROA ST 10TH FLOOR LOS ANGELES, CA 90017	\$143,848	Person F Payroll F Noncash F (Complete Part II for noncash contribution)
17	KATHLEEN SULLIVAN 865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 90017	\$\$ 9,853	Person F Payroll F Noncash F (Complete Part II for noncash contribution)
18	KEN CHIATE 865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 90017	\$15,000	Person F Payroll F Noncash F (Complete Part II for noncash contribution)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	MIKE CARLINSKY 865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 90017	\$10,148	Person F Payroll F Noncash F (Complete Part II for noncash contribution)
20	MIKE ZELLER 865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 90017	\$	Person P Payroll Noncash (Complete Part II for noncash contribution)
21	PETER CALAMARI 865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 90017	\$\$ 9,452	Person P Payroll Noncash (Complete Part II for noncash contribution)
	PHILIPPE SELENDY 865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 90017	\$ <u>8,913</u>	Person F Payroll F Noncash F (Complete Part II for noncash contribution)
_23	QUINN EMANUEL URQUHART SULLIVAN 865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 90017	\$ <u>109,585</u>	Person P Payroll Noncash (Complete Part II for noncash contribution)
24	RAY NIMROD 865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 90017	\$\$	Person P Payroll Noncash (Complete Part II for noncash contribution)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	RICK WERDER 865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 90017	\$\$	Person F Payroll F Noncash F (Complete Part II for noncash contribution)
_26	ROBERT JUMAN 865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 90017	\$11,174	Person F Payroll F Noncash F (Complete Part II for noncash contribution)
27	ROBERT WILSON 865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 90017	\$5,507	Person F Payroll F Noncash F (Complete Part II for noncash contribution)
28	SASCHA RAND 865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 90017	\$7,674	Person F Payroll F Noncash F (Complete Part II for noncash contribution)
29	SHEILA BIRNBAUM 865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 90017	\$5,603	Person P Payroll Noncash (Complete Part II for noncash contribution)
30	VICTORIA MAROULIS 865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 90017	\$6,000	Person F Payroll F Noncash F (Complete Part II for noncash contribution)

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TY 2014 Depreciation Schedule

Name: QUINN EMANUEL FOUNDATION

EIN: 20-0423348



TY 2014 Other Increases Schedule

Name: QUINN EMANUEL FOUNDATION

EIN: 20-0423348

Description	Amount
ROUNDING	2

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
	or substantial contributor			<u> </u>
a Paid during the year	NONE	D.C.	CHARTTARIS	45.000
826 NATIONAL INC 44 GOUGH STREET SUITE 206 SAN FRANCISCO,CA 94103	NONE	PC	CHARITABLE	45,000
ABA FUND FOR JUSICE & EDUCATION (JIOP) 321 N CLARK STREET 21ST FLOOR CHICAGO,IL 60654	NONE	PC	CHARITABLE	1,000
ALM 120 BROADWAY 5TH FLOOR NEWYORK,NY 10271	NONE	PC	CHARITABLE	6,000
AMPAS FOUNDATION 111 E 9TH STREET NEW YORK,NY 10022	NONE	PC	CHARITABLE	50,000
AMERICAN CANCER SOCIETY 250 WILLIAMS STREET NW ATLANTA,GA 30303	NONE	PC	CHARITABLE	5,000
ANTI-DEFAMATION LEAGUE 10495 SANTA MONICA BLVD LOS ANGELES,CA 90025	NONE	PC	CHARITABLE	1,500
ASIAN AMERICAN LEGAL DEFENSE AND EDUCATION FUND 99 HUSDON STREET 12TH FLOOR NEW YORK,NY 10013	NONE	PC	CHARITABLE	13,000
ASIAN AMERICAN BAR ASSOCIATION OF NEW YORK 45 ROCKAFELLER PLAZA 20TH FLOOR NEW YORK, NY 10111	NONE	PC	CHARITABLE	7,500
BRAZIL FOUNDATION 345 7TH AVENUE 1401 NEWYORK,NY 10001	NONE	PC	CHARITABLE	2,000
CAL INDEPENDENT SCHOLARS NETWORK 109 CESAR CHAVEZ STUDENT CENTER BERKELEY,CA 94720	NONE	PC	CHARITABLE	5,250
CATS FOUNDATION (SAMSUNG HOPE) 85 CHALLENGER ROAD RIDGEFIELD PARK,NJ 07660	NONE	PC	CHARITABLE	30,000
CATHOLIC CHARITIES 2050 BALLENGER AVENUE SUITE 400 ALEXANDRIA, VA 22314	NONE	PC	CHARITABLE	7,700
COLD SPRING LIBRARY FRIENDS FOUNDATION 95 HARBOR ROAD COLD SPRING HARBOR,NY 11724	NONE	PC	CHARITABLE	50,000
FRIENDS OF ISLAND ACADEMY 127 W 127TH STREET SUITE 127 NEW YORK,NY 10027	NONE	PC	CHARITABLE	200
FUND FOR MODERN COURTS 28 W 39TH STREET NEW YORK,NY 10018	NONE	PC	CHARITABLE	5,000
Total			🕨 3a	542,600

Form 990PF Part XV Line 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	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor			
a Paid during the year				
GIRLS INCORPORATED OF NEW YORK CITY 120 WALL STREET 1804 NEW YORK,NY 10005	NONE	PC	CHARITABLE	5,000
GODDARD RIVERSIDE COMMUNITY CENTER 593 COLUMBUS AVENUE NEW YORK, NY 10024	NONE	PC	CHARITABLE	12,500
HUDSON GUILD 119 9TH AVENUE NEW YORK, NY 10011	NONE	PC	CHARITABLE	5,000
HUMAN RIGHTS WATCH 350 5TH AVENUE 34TH FLOOR NEW YORK,NY 10118	NONE	PC	CHARITABLE	15,000
JALBCA 1324 LEXINGTON AVENUE PMB 324 NEW YORK, NY 10128	NONE	PC	CHARITABLE	25,000
JOAN'S WISH LIST 865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 90017	NONE	PC	CHARITABLE	16,900
LAW FOUNDATION OF SILICON VALLEY 152 N 3RD STREET 3RD FLOOR SAN JOSE, CA 95112	NONE	PC	CHARITABLE	26,750
LEGAL FOUNDATION 1102 CRENSHAW BLVD LOS ANGELES, CA 90019	NONE	PC	CHARITABLE	5,000
LEGAL AID FOUNDATION OF LA 1102 CRENSHAW BLVD LOS ANGELES, CA 90019	NONE	PC	CHARITABLE	3,000
LUCILE PACKARD CHILDREN'S HOSPITAL-STANFORD 400 HAMILTON AVE 340 PALO ALTO,CA 94301	NONE	PC	CHARITABLE	600
NAITONAL CENTER FOR LAW AND ECONOMIC JUSTICE NCLEJ 275 7TH AVENUE SUITE 1506 NEW YORK, NY 10001	NONE	PC	CHARITABLE	25,000
NATIONAL LGBT BAR FOUNDATION 1301 K STREET NW 1100E WASHINGTON,DC 20005	NONE	PC	CHARITABLE	15,000
NYLPI 151 W 30TH STREET 11TH FLOOR NEW YORK,NY 10001	NONE	PC	CHARITABLE	10,000
OFFICE OF THE APPELLATE DEFENDER 11 PARK PLACE SUITE 1601 NEW YORK,NY 10007	NONE	PC	CHARITABLE	5,000
OC REGENTS CHILDREN'S HOSPITAL 1201 W LA VETA AVENUE ORANGE,CA 92868	NONE	PC	CHARITABLE	5,000
Total				542,600

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
	or substantial contributor			
a Paid during the year				
PRO BONO PARTNERSHIP 237 MAMARONECK AVENUE SUITE 300 WHITE PLAINS,NY 10605	NONE	PC	CHARITABLE	10,000
SHAKESPEARE THEATRE COMPANY 516 8TH STREET SE WASHINGTON,DC 20003	NONE	PC	CHARITABLE	3,500
THE HISTORICAL SOCIETY OF THE NEW YORK COURTS 170 CENTRAL PARK WEST NEW YORK, NY 10024		PC	CHARITABLE	10,000
THE HONORABLE TINA BROZMAN FOUNDATION 31 WEST 52ND STREET SUITE 4-22 NEW YORK,NY 10019		PC	CHARITABLE	12,500
UC SAN DIEGO FOUNDATION 9500 GILMAN DRIVE MC 0940 LA JOLLA,CA 92093		PC	CHARITABLE	10,000
USC BARBARA GITLITZ CANCER RESEARCH FUND 1441 EASTLAKE AVENUE LOS ANGELES,CA 90089		PC	CHARITABLE	200
UJA - FEDERATION OF NEW YORK 130 E 59TH STREET NEW YORK,NY 10022		PC	CHARITABLE	12,500
VIASAT INC 6155 EL CAMINO REAL CARLSBAD,CA 92009		PC	CHARITABLE	5,000
VIOLENCE INTERVENTION PROGRAM 1721 GRIFFIN AVENUE LOS ANGELES, CA 90031		PC	CHARITABLE	5,000
WASHINGTON BUSINESS JOURNAL 1555 WILSON BLVD 400 ARLINGTON,VA 22209		PC	CHARITABLE	5,000
NATIONAL LEGAL AID & DEFENDERS 1901 PENNSYLVANIA AVENUE NW SUITE 500 WASHINGTON, DC 20006		PC	CHARITABLE	25,000
SCS FOUNDATION (SELF HELP) 520 8TH AVENUE NEWYORK,NY 10018		PC	CHARITABLE	10,000
THE LEGAL AID SOCIETY 199 WATER STREET NEW YORK, NY 10038		PC	CHARITABLE	25,000
826 NYC 372 5TH AVENUE BROOKLYN,NY 11215		PC	CHARITABLE	5,000
Total				542,600

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

Compensation				
(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
JACQUELINE TOTH	SECRETARY 0	0	0	0
865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 900172543				
DAVID HENRI	TREASURER 0	0	0	0
865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 900172543				
ROBERT JUMAN	DIRECTOR 0	0	0	0
865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 900172543				
STEVEN MADISON	DIRECTOR 0	0	0	0
865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 900172543				
JOHN B QUINN	PRESIDENT & DIRECTOR 0	0	0	0
865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 900172543				