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Department of the Treasury

Internal Revenue Service

### DLN: 93491062007066

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  $\underline{www.irs.gov/form990pf}$ .

		ndar year 2015, or tax year beginning 01	01-2015	, and ending 12-31-2015						
	e of four INN EMA	ndation NUEL FOUNDATION		A Employer id	entification numb	er				
%	JACKIE <sup>-</sup>	тотн		20-0423348						
Num	ber and	street (or P O box number if mail is not delivered to street addressered STREET 10TH FLOOR	ess) Room/suite	<b>B</b> Telephone nui	mber (see instruction	s)				
80	2 2 LIGO	EROA SIREET 10TH FLOOR		(213) 624-7707	(213) 624-7707					
		state or province, country, and ZIP or foreign postal code 5, CA 900172543	I	<b>C</b> If exemption	application is pendin	g, check here 🕨 🦵				
G Ch	neck all	that apply   Initial return   Initial return of	a former public charity	D.1. Foreign of	raanizatione chock h	oro				
		Final return Amended return Address change Name change		2. Foreign o	D 1. Foreign organizations, check here  2. Foreign organizations meeting the 85% test, check here and attach computation  ▶ □					
H_Ch	eck ty	pe of organization Section 501(c)(3) exempt priv	rate foundation		undation status was t n 507(b)(1)(A), chec					
		1947(a)(1) nonexempt charitable trust Other tax 1st value of all assets at end JAccounting method	Cash Accrual	<del>-  </del>						
ofy	ear <i>(fr</i>	rom Part II, col. (c), \$ 22,458	st be on cash basis.)		ation is in a 60-mont n 507(b)(1)(B), chec					
Pa	rt 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)	Revenue and expenses per (a) books	Net investment (b) income	Adjusted net (c) income	Disbursements for charitable purposes (d) (cash basis only)				
	1	Contributions, gifts, grants, etc , received (attach								
		schedule)	680,995							
	2	Check $ ightharpoonup$ if the foundation is <b>not</b> required to attack	ch							
		Sch B								
	3	Interest on savings and temporary cash investmen	ts							
	4	Dividends and interest from securities	. 31	31	31					
	5a	Gross rents								
	b	Net rental income or (loss)								
₽	6a	Net gain or (loss) from sale of assets not on line 10								
Revenue	b	Gross sales price for all assets on line 6a								
œ	7	Capital gain net income (from Part IV, line 2)	•							
	8	Net short-term capital gain	•							
	9	Income modifications	•							
	10a	Gross sales less returns and allowances								
	b	Less Cost of goods sold								
	C	Gross profit or (loss) (attach schedule)								
	11	Other income (attach schedule)								
	12	Total.Add lines 1 through 11		31	31					
	13	Compensation of officers, directors, trustees, etc	0							
	14	Other employee salaries and wages	-							
Š.	15	Pension plans, employee benefits								
Expenses	16a	Legal fees (attach schedule)								
M X	Ь	Accounting fees (attach schedule)								
	_ c	Other professional fees (attach schedule)								
rati	17	Interest								
Į.	18	Taxes (attach schedule) (see instructions)								
and Administrative	19	Depreciation (attach schedule) and depletion								
₹	20	Occupancy								
Ē	21	Travel, conferences, and meetings								
	22	Printing and publications								
Ę		Total operating and administrative expenses.	·  ———							
Operating	24	Add lines 13 through 23		0		0				
å	25	Contributions, gifts, grants paid	•			723,001				
	26	, - , - , - , - , - , - , - , - , - , -	,			, 23,001				
		Total expenses and disbursements. Add lines 24 and 25	723,001	0		723,001				
	27	Subtract line 26 from line 12  Excess of revenue over expenses and disbursement	s -41,975							
	a b	Net investment income (If negative, enter -0-)	-41,9/5	31						
	l B	Adjusted net income(If negative, enter -0-)			31					
	, -	inguite, check of the								

Pa	rt II	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-inter	est-bearing	(a) BOOK Value 64,433	( <b>B</b> ) Book value 22,458	• •
	2		porary cash investments	3.,.33	22,130	1 22, 30
	3		able •			
	3		for doubtful accounts ►			
	4		ble ►			
	4		for doubtful accounts -			
	_		le			
	5		from officers, directors, trustees, and other			
	6					
	_		ons (attach schedule) (see instructions)			
	7		· · · · · · · · · · · · · · · · · · ·			
			for doubtful accounts -			
<u>\$</u>	8		sale or use			
ssets	9	•	es and deferred charges			
ď	10a	schedule)	S and state government obligations (attach			
	Ь		orporate stock (attach schedule)			
	С		orporate bonds (attach schedule)			
	11	Investments—la	nd, buildings, and equipment basis 🟲			
		Less accumulat	ted depreciation (attach schedule) 🟲			
	12	Investments—m	ortgage loans			
	13	Investments—of	ther (attach schedule)			
	14	Land, buildings,	and equipment basis 🟲			
		Less accumulat	ted depreciation (attach schedule) 🟲			
	15	Other assets (de	escribe 🟲)			
	16	Total assets(to b	pe completed by all filers—see the			
		instructions Als	so, see page 1, Item I)	64,433	22,458	22,458
	17	Accounts payab	le and accrued expenses			
	18	Grants payable				
<u>\$</u>	19	Deferred revenu	e			
abilities	20	Loans from office	ers, directors, trustees, and other disqualified persons			
	21	Mortgages and o	other notes payable (attach schedule)			
コ	22	O ther liabilities	(describe <b>▶</b> )			
	23	Total liabilities(	add lines 17 through 22)		(	
		Foundations tha	t follow SFAS 117, check here 🕨 🔽			
90		and complete lin	es 24 through 26 and lines 30 and 31.			
ä	24	Unrestricted .		64,433	22,458	3
Balance	25	Temporarily rest	tricted			
귤	26	Permanently res	tricted			
Fund		Foundations tha	t do not follow SFAS 117, check here 🕨 🦵			
2		and complete lin	es 27 through 31.			
	27	Capital stock, tr	ust principal, or current funds			
Assets	28	Paid-in or capita	ıl surplus, or land, bldg , and equipment fund			
	29	Retained earning	gs, accumulated income, endowment, or other funds			
Ř	30	Total net assets	or fund balances(see instructions)	64,433	22,458	3
	31	Total liabilities a	and net assets/fund balances(see instructions)	64,433	22,458	В
Pa	rt III	Analysis of	Changes in Net Assets or Fund Balances			
1			or fund balances at beginning of year—Part II, column (	a), line 30 (must agi	ree	
			figure reported on prior year's return)			64,433
2			m Part I, line 27a		<u> </u>	-41,975
3			not included in line 2 (itemize)		_ 3	
4			nd 3		4	22,458
5			ncluded in line 2 (itemize) 🏲		_ 5	
6			or fund balances at end of year (line 4 minus line 5)—Pa		e 30 . <b>6</b>	22,458

Part IV Capital Gains	and Losses for Tax on Inve	stment Income			
	the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs		How acquired P—Purchase <b>(b)</b> D—Donation	Date acquired	Date sold (d) (mo , day, yr )
1a					
b					
c					
d					
е					
(e) Gross sales price	Depreciation allower <b>(f)</b> (or allowable)		t or other basıs expense of sale		n or (loss) (f) mınus (g)
a					
b					
С					
d					
e					
Complete only for assets	showing gain in column (h) and owne	ed by the foundation	n on 12/31/69	Gains (Col	(h) gaın mınus
(i) F M V as of 12/31/69	A djusted basis (j) as of 12/31/69		cess of col (1) r col (j), if any		ot less than -0-) <b>o</b> (from col (h))
a					
b					
с					
d					
e					
	al gain or (loss) as defined in sectio  Part I, line 8, column (c) (see instru			3	
Part V Qualification	Under Section 4940(e) for R	Reduced Tax on	Net Investme	<u> </u>	
(For optional use by domestic If section 4940(d)(2) applies,	private foundations subject to the se leave this part blank	ection 4940(a) tax	on net investment	income )	□ Yes ☑ No
If "Yes," the foundation does n	e section 4942 tax on the distributa ot qualify under section 4940(e) Do ount in each column for each year, se	o not complete this	part		y es p no
	l	T The tractions being	T making any ent		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncha	ritable-use assets	<b>(d)</b> Distributio (col (b) divideo	n ratio
2014	542,600		78,352		6 925158
2013	386,319		88,978		4 341736
2012	332,600		115,715		2 874303
2011	329,840		131,075		2 516422
2010  2 Totalof line 1, colum	81,000   n (d)	l	48,914	2	1 655968 18 31358
_ ,	ratio for the 5-year base period—div		e 2 by 5 or by		10 31338
	the foundation has been in existence			3	3 662717
4 Enter the net value o	f noncharitable-use assets for 2015	5 from Part X, line 5	5	4	42,794
5 Multiply line 4 by line	e 3			5	156,74
6 Enter 1% of net inve	stment income (1% of Part I, line 2	7b)		6	
7 Add lines 5 and 6.				7	156.742

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

Enter qualifying distributions from Part XII, line 4. . . . . . . . . . . .

the Part VI instructions

723,001

	990-PF (2015)  t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b),	940(e).	. or 4948—se	ee pag	e 18 of	the inst	ructio		age <b>4</b>		
1a	Exempt operating foundations described in section 4940(d)(2), check here			<del>د. با د.</del> ۱							
Ia	and 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		J	1				0		
	here Fand enter 1% of Part I, line 27b			• •							
С	All other domestic foundations enter $2\%$ of line $27b$ Exempt foreign organization Part I, line $12$ , col (b)	ations e	enter 4% of								
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable four enter -0-)	ndation	s only Othe	ers	2						
3											
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable four enter -0-)	ndation	s only Oth	ers	4						
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, e	nter - 0	)		5						
6	Credits/Payments										
a	2015 estimated tax payments and 2014 overpayment credited to 2015	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				7				0		
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2				8						
9	Tax due.If the total of lines 5 and 8 is more than line 7, enter amount owed .			•	9						
10	Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amoun			•	10						
11	Enter the amount of line 10 to be <b>Credited to 2015 estimated tax</b>	•	Refunded	•	11						
	t VII-A Statements Regarding Activities					<u> </u>					
1a	During the tax year, did the foundation attempt to influence any national, state	e. or loc	al legislatio	n or d	ıd			Yes	No No		
	it participate or intervene in any political campaign?	-	=				1a		No		
ь	Did it spend more than \$100 during the year (either directly or indirectly) for p					ons					
	for definition)?			` 			1b		No		
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities	and co	pies of any i	materia	ls						
	published or distributed by the foundation in connection with the activities.										
С	Did the foundation file Form 1120-POL for this year?						1c		No		
d	Enter the amount (If any) of tax on political expenditures (section 4955) impor	sed dui	ring the yea	r							
	(1) On the foundation  \$ (2) On foundation managers	<b>&gt;</b> \$ _									
e	Enter the reimbursement (if any) paid by the foundation during the year for pol	itical e	xpenditure 1	ax ımp	osed						
	on foundation managers 🕨 \$										
2	Has the foundation engaged in any activities that have not previously been rep	ported	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 $\overline{\boldsymbol{\theta}}$	ts gove	erning instru	ıment,	articles	5					
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conf	ormed o	copy of the c	hanges	· 📆 .		3		No		
4a	Did the foundation have unrelated business gross income of \$1,000 or more d	lurıng t	he year?.				4a		No		
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?						4b				
5	Was there a liquidation, termination, dissolution, or substantial contraction du	ring the	e year <sup>?</sup>				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 $49$	45) sa	tisfied eithe	r							
	By language in the governing instrument, or										
	By state legislation that effectively amends the governing instrument so the										
	that conflict with the state law remain in the governing instrument?						6	$\longmapsto$	No		
7	Did the foundation have at least \$5,000 in assets at any time during the year and Part XV.		s," complete		, col. (c <sub>.</sub>	), 	7	Yes			
8a	Enter the states to which the foundation reports or with which it is registered ( $% \left( 1\right) =\left( 1\right) \left( 1\right) =\left( 1\right) \left( 1\right$	see ins	structions)								
	► CA										
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99										
_	General (or designate) of each state as required by General Instruction G? If				:		8b	Yes			
9	Is the foundation claiming status as a private operating foundation within the r		_								
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (s	ee inst	ructions for	rart >	(1 A ) s		^		N'-		
10	If "Yes," complete Part XIV	" attack		lictina	therr	· · ·	9	$\vdash \vdash \vdash$	No		
10	and addresses.		, a scriedule	nsung		umcs .	10	Yes			
		-	• •	-	-	-		ٺــــــــــــــــــــــــــــــــــــــ			

Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		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)	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	)624	-7707	
	Located at ▶865 S FIGUEROA ST los angeles CA ZIP+4 ▶900172!			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here		▶ □	-
	and enter the amount of tax-exempt interest received or accrued during the year	•	- ,	
			1	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over	م ا	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			· ·
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days )			
ь	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
_	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
Ī	that were not corrected before the first day of the tax year beginning in 2015?	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 2015, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2015? <b>Yes</b> Vo			
	If "Yes," list the years ▶ 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 <b>all</b> years listed, answer "No" and attach statement—see instructions )	2b		No
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
	▶ 20 <u>,</u> , 20 <u>,</u> , 20 <u>,</u> , 20 <u>,</u>			
За	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 2015 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 2015.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		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 2015?	4b		No

لنعم	L£ ATT-B	Statements kega	irding Activitie	S TOF WIN	ich Form 4/20	мау в	se kequirea ( <i>Cont</i>	inuea)
5a	During the	year did the foundation	n pay or incur any a	mount to				
	<b>(1)</b> Carry	on propaganda, or other	rwise attempt to inf	luence leg	ıslatıon (section 49	45(e))7	?	No
	<b>(2)</b> Influe	nce the outcome of any	specific public elec	ction (see s	section 4955), or to	carry		
	on, dır	ectly or indirectly, any	voter registration d	lrıve?				No
	(3) Provid	e a grant to an individu	al for travel, study,	or other si	mılar purposes?		☐ Yes ☑	No
	(4) Provid	e a grant to an organıza	ation other than a c	harıtable, e	etc , organization de	scribed	d	
	ın sec	tion 4945(d)(4)(A)? (se	ee instructions)				<b>┌</b> Yes ▽	No
	(5) Provid	e for any purpose other	than religious, cha	ırıtable, sci	ientific, literary, or			
	educa	tional purposes, or for t	he prevention of cru	uelty to ch	ıldren or anımals?.			No
b	If any ans	werıs "Yes" to 5a(1)–(	(5), did <b>any</b> of the tra	ansactions	fail to qualify under	r the ex	ceptions described in	
	Regulation	ns section 53 4945 or i	ın a current notice r	egarding d	isaster assistance	(see in:	structions)?	. 5b
	O rganızat	ons relying on a curren	it notice regarding o	disaster as	sistance check here	e	▶□	-
c	_	ver is "Yes" to question						
		se it maintained expend					Г <b>Y</b> es Г	No No
		tach the statement requ					·	
6a		ındatıon, durıng the yea				premiu	ıms on	
		benefit contract?	•					No
b	•	ındatıon, durıng the yea					·	
		6b, file Form 8870.	,, ,,		,, ,			
7a		e during the tax year, w	vas the foundation a	a party to a	prohibited tax shel	ter trar	nsaction? <b>TYes</b>	No
	•	the foundation receive			•		·	
		Information About						
Pa		and Contractors					,	
1	List all offi	cers, directors, trustees	s, foundation mana	gers and tl	heir compensation (	see ins	tructions).	
			Title, and ave	rage (c)	Compensation(If		(d)	
(a) Name and address		hours per we	-   ` -	not paid, enter	1	Contributions to ployee benefit plans	Expense account, <b>(e)</b> other allowances	
			(b) devoted to pos	sition	-0-)		eferred compensation	(c) other anowalices
See	Additional [	Data Table						
								_
			-					
			4					
						<u> </u>		. WALCALE !!
	compensat	ion of five highest-paid	employees (otner	tnan tnose	e inciuaea on line 1-	-see ins	Contributions to	iter NONE.
		(a)		d average	() (		employee benefit	Expense account,
ivai		ress of each employee p e than \$50,000	( <b>b</b> ) devoted t	er week	(c) Compensation		plans and deferred	(e) other allowances
			(2) 40.000	розилон		(	<b>d)</b> compensation	

Form 990-PF (2015)		Page <b>7</b>
Part VIII Information About Officers, Directors, Trusto and Contractors (continued)	ees, Foundation Managers, High	ly Paid Employees,
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>(b)</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 released organizations and other beneficiaries served, conferences convened, research papers produced.		Expenses
1	uccu, cic	
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	•	A mount
1	,	
		$\dashv$
		$\dashv$
2		
-		-
		$\dashv$
All other program-related investments See instructions		
3		
3		$\dashv$
		$\dashv$
Total. Add lines 1 through 3		<u> </u>
iotai. Add illes I tillough 5		<b>7</b>

#### Part X Minimum Investment Return

Pa	(All domestic foundations must complete this part. Foreign foundations, see instruction	s.)	
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	0
b	Average of monthly cash balances	1b	43,446
c	Fair market value of all other assets (see instructions)	<b>1</b> c	0
d	<b>Total</b> (add lines 1a, b, and c)	1d	43,446
e	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	0
3	Subtract line 2 from line 1d	3	43,446
4	Cash deemed held for charitable activities $$ Enter 1 $$ 1/2 $$ % of line 3 (for greater amount, see		
	ınstructions)	4	652
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	42,794
6	Minimum investment return. Enter 5% of line 5	6	2,140
Pai	t XI  Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and ceil check here ► □ and do not complete this part.)	rtaın f	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	2,140
2a	Tax on investment income for 2015 from Part VI, line 5 2a 0		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b		
С	Add lines 2a and 2b	2c	0
3	Distributable amount before adjustments Subtract line 2c from line 1	3	2,140
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	2,140
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	2,140
	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	4 -	722.001
	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	723,001
	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
_	purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	0
ь	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	723,001
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	723,001
	<b>Note:</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	ier the	roundation qualifies for

P	art XIIII Undistril	<b>buted Income</b> (see inst	ructions)				
			(a) Corpus	(b) Years prior to 2014	<b>(c)</b> 2014	( <b>d)</b> 2015	
1	Distributable amount fo	r 2015 from Part XI, line 7					2,140
2	Undistributed income, i	fany, as of the end of 2015					
а	-	only			0		
b		2013 , 2012 , 2011		0			
3	Excess distributions ca						
а	From 2010		1				
b	From 2011	323,286	5				
С	From 2012	326,815	5				
d	From 2013	381,870	)				
е	From 2014	538,682	2				
f	Total of lines 3a through	he	1,649,207				
4	Qualifying distributions	for 2015 from Part					
	XII, line 4 🕨 \$	723,001					
а	Applied to 2014, but no	t more than line 2a			0		
b	Applied to undistributed	l income of prior years					
	•	ınstructıons)					
С	Treated as distributions required—see instructions						
d	Applied to 2015 distrib	utable amount					2,140
е	Remaining amount distr	ributed out of corpus	720,861				
5	Excess distributions ca	rryover applied to 2015					
	(If an amount appears in same amount must	column (d), the be shown in column (a).)					
6	Enter the net total of e indicated below:	each column as					
а	Corpus Add lines 3f, 4c	, and 4e Subtract line 5	2,370,068				
	Prior years' undistribute						
	line 4b from line 2b			0			
C	Enter the amount of prio	The state of the s					
	income for which a notic	•					
	been issued, or on which	ithe section 4942(a)					
d	Subtract line 6c from lin						
u		· · · · · · · · · · · · · · · · · · ·		0			
е	Undistributed income fo						
	4a from line 2a Taxable	amount—see					
	instructions				U		
f	Undistributed income fo						
	lines 4d and 5 from line be distributed in 2015.						0
7	Amounts treated as dist						
•	corpus to satisfy require						
	section 170(b)(1)(F) or	4942(g)(3) (Election may					
	•	ctions)					
8	Excess distributions ca	•	78,554				
_	applied on line 5 or line						
9	Excess distributions car Subtract lines 7 and 8 fi		2,291,514				
10	Analysis of line 9						
	Excess from 2011.	323,286					
	Excess from 2012	· ·					
	Excess from 2013						
	Excess from 2014		2				
е	Excess from 2015	720,863					

	Private Operating Foundat	•			19)	
1a	If the foundation has received a ruling or determ					
	foundation, and the ruling is effective for 2015,					
	Check box to indicate whether the organization		ting foundation de		1 4942(j)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for each	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	
	year listed					
<b>b</b> 8	35% of line 2a					
c	Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	Amounts included in line 2c not used					
	directly for active conduct of exempt activities					
e	Qualifying distributions made directly					
•	for active conduct of exempt activities					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets		1			
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3		1			
-	of minimum investment return shown in					
	Part X, line 6 for each year listed					
C	"Support" alternative test—enter					
	(1) Total support other than gross					
	investment income (interest, dividends, rents, payments					
	on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt organizations as provided in					
	section $4942(j)(3)(B)(iii)$					
	(3) Largest amount of support					
	from an exempt organization					
	(4) Gross investment income					
Pa	rt XV Supplementary Information (C			e organizatio	n had \$5,000 o	r more in
	assets at any time during the	<u>year—see ins</u>	tructions.)			
L a	<b>Information Regarding Foundation Managers:</b> List any managers of the foundation who have co	ontributed more th	nan 2% of the tota	ıl contributions rec	eived by the found	lation
	before the close of any tax year (but only if they					ideloli
b	List any managers of the foundation who own 10				large portion of th	е
	ownership of a partnership or other entity) of wh	ich the loundation	inas a 10% or gre	eaterinterest		
	Total Control Control Control City	Cabalanak	:t- B			
2	Information Regarding Contribution, Grant, Gift					
	Check here ► ✓ If the foundation only makes counsolicited requests for funds. If the foundation					
	other conditions, complete items 2a, b, c, and d		its, etc. (see ilisti)	actions) to marvia	dais of organizatio	iis uiidei
а	The name, address, and telephone number or e	mail address of th	e nerson to whom	annlications shou	ld he addressed	
u	The name, address, and telephone number of el	man address of th	e person to whom	applications shou	ia be addressed	
b	The form in which applications should be submi	tted and informat	ion and materials t	they should includ	e	
C	Any submission deadlines					
_	A					
d	Any restrictions or limitations on awards, such factors	as by geographic	aı areas, charitabl	e neias, kinds of ii	nstitutions, or othe	Γ

Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 723,001 **b** Approved for future payment

Form 990-PF (2015)  Part XVI-A Analysis of Income-Produc	ing Activitie	:S			Page <b>1</b> 2
nter gross amounts unless otherwise indicated		ısıness income	Excluded by section	n 512, 513, or 514	(e)
1 Program service revenue	(a) Business code	<b>(b)</b> A mount	(c) Exclusion code	(d) A mount	Related or exempt function income (See
-					instructions )
a b					
с					
d					
e f			+		_
<b>g</b> Fees and contracts from government agencies					
Membership dues and assessments  Interest on savings and temporary cash investments			14	31	
Dividends and interest from securities			11	31	
Net rental income or (loss) from real estate					
a Debt-financed property b Not debt-financed property					
Net rental income or (loss) from personal					
property					
Other investment income					
Gain or (loss) from sales of assets other than inventory					
Net income or (loss) from special events Gross profit or (loss) from sales of inventory .					
Other revenue a					
b					
c					
e					
Subtotal Add columns (b), (d), and (e).  Total.Add line 12, columns (b), (d), and (e).			:	31 <b>13</b>	
(See worksheet in line 13 instructions to verify art XVI-B Relationship of Activities to		plishment of I	Exempt Purpos	es	
Explain below how each activity for whithe accomplishment of the foundation's instructions )	ich income is re	ported in column i	(e) of Part XVI-A c	ontributed importa	
,					

Part	XVII	Information Re Noncharitable					sactions	s and I	Relationships	With			
		ganization directly or ii 01(c) of the Code (othe	ndırectly e	engage	ın any of	the following wi						Yes	No
org	anızatı	ons?											
<b>a</b> Tra	nsfers	from the reporting four	dation to	a noncl	narıtable	exempt organız	ation of						
(1)	Cash										1a(1)		No
(2)	Othe	rassets									1a(2)		No
<b>b</b> 0 th	ner trar	nsactions											
(1)	Sales	of assets to a noncha	rıtable exe	empt or	ganızatıo	n					1b(1)		No
(2)	Purch	nases of assets from a	noncharit	able ex	empt orga	nnızatıon					1b(2)		No
(3)	Renta	al of facilities, equipme	nt, or othe	erasset	s						1b(3)		No
(4)	Reim	bursement arrangemen	ts								1b(4)		No
(5)	Loans	s or loan guarantees.									1b(5)		No
		mance of services or m									1b(6)		No
<b>c</b> Sha	aring of	f facılıtıes, equipment, i	mailing lis	ts, othe	er assets,	or paid employ	ees				1c		No
of t	he goo iny trai	wer to any of the above ds, other assets, or se nsaction or sharing arra (b) Amount involved	rvices giv angement	en by th , show i	ne reporti n column	ng foundation	If the foun If the good	dation r ls, other	eceived less tha	n fair marke ces receive	et value ed		at c
(a) Line	INO	(b) Amount involved	(C) Name	or nonch	antable exe	empt organization	(4)	escription	or transfers, transac	tions, and sna	illiy allai	igenien	11.5
des	cribed	ndation directly or indii in section 501(c) of the complete the following s (a) Name of organization	e Code (d schedule		an sectio		'ın sectioi			ption of relation		s 🔽	No
Sign Here	the Infor	er penalties of perjury, best of my knowledge a mation of which prepar ******	nd belief, er has any	ıt ıs tru	e, correct		Declarat			May ti May ti return with ti below	r) is bas he IRS dis he prepar	ed on scuss th	all iis vn
							Date		Check if self-	PTIN	, .	_	
		Print/Type preparer's BARBARA EDMONI		Prepa	rer's Sıgn	ature	Date		employed ▶		000027	23	
Paid Prepa Use	arer	Firm's name ► EDMONDS & EDMON	DS LLP						Firm's EIN ▶				
Use Only		Firm's address ►  3300 IRVINE AVE SUITE 235 NEWPORT BEACH, CA 92660							Phone no (213)624-7707				

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

compensation	compensation						
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances			
JACQUELINE TOTH	SECRETARY	0	0	0			
865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES,CA 900172543	0						
DAVID HENRI	TREASURER	0	0	0			
865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 900172543	0						
ROBERT JUMAN	DIRECTOR	0	0	0			
865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 900172543	0						
STEVEN MADISON	DIRECTOR	0	0	0			
865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 900172543	0						
JOHN B QUINN	PRESIDENT &	0	0	0			
865 S FIGUEROA STREET 10TH FLOOR LOS ANGELES, CA 900172543	DIRECTOR 0						

### 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
a Paid during the year	or substantial contributor			
826 NATIONAL INC 44 GOUGH STREET SUITE 206 SAN FRANCISCO,CA 94103	NONE	PC	CHARITABLE	25,750
ABA FUND FOR JUSICE & EDUCATION (JIOP) 321 N CLARK STREET 21ST FLOOR CHICAGO,IL 60654	NONE	PC	CHARITABLE	4,000
AMERICAN CANCER SOCIETY 250 WILLIAMS STREET NW ATLANTA, GA 30303	NONE	PC	CHARITABLE	10,000
ANTI-DEFAMATION LEAGUE 10495 SANTA MONICA BLVD LOS ANGELES, CA 90025	NONE	PC	CHARITABLE	21,500
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	4,000
LEGAL AID FOUNDATION OF LA 1102 CRENSHAW BLVD LOS ANGELES, CA 90019	NONE	PC	CHARITABLE	7,000
LUCILE PACKARD CHILDREN'S HOSPITAL-STANFORD 400 HAMILTON AVE 340 PALO ALTO,CA 94301	NONE	PC	CHARITABLE	850
NAITONAL CENTER FOR LAW AND ECONOMIC JUSTICE NCLEJ 275 7TH AVENUE SUITE 1506 NEW YORK,NY 10001	NONE	PC	CHARITABLE	25,000
NEW YORK LAWYERS FOR THE PUBLIC INTEREST 151 W 30TH STREET 11TH FLOOR NEW YORK,NY 10001	NONE	PC	CHARITABLE	25,000
PRO BONO PARTNERSHIP 237 MAMARONECK AVENUE SUITE 300 WHITE PLAINS, NY 10605	NONE	PC	CHARITABLE	20,000
THE HISTORICAL SOCIETY OF THE NEW YORK COURTS 170 CENTRAL PARK WEST NEW YORK,NY 10024		PC	CHARITABLE	7,500
THE HONORABLE TINA BROZMAN FOUNDATION 31 WEST 52ND STREET SUITE 4-22 NEW YORK,NY 10019		PC	CHARITABLE	25,000
THE LEGAL AID SOCIETY 199 WATER STREET NEW YORK,NY 10038		PC	CHARITABLE	50,000
Total				723,001

## 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	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
ACADEMY FOUNDATION 218 WEST 40TH STREET 5TH FLOOR NEW YORK,NY 10018	NONE	PC	CHARITABLE	50,000
ADVOCATES FOR CHILDREN OF NEW YORK 151 W 30TH STREET 5TH FLOOR NEW YORK,NY 10001	NONE	PC	CHARITABLE	10,000
AMERICAN JEWISH WORLD SERVICES 1801 AVENUE OF THE STARS LOS ANGELES, CA 90067	NONE	PC	CHARITABLE	10,000
ALBERT EINSTEIN COLLEGE OF MEDICINE 1300 MORRIS PARK AVE BRONX,NY 10461	NONE	PC	CHARITABLE	7,500
ALI FORNEY CENTER 224 W 35TH STREET 15TH FLOOR NEW YORK,NY 10001	NONE	PC	CHARITABLE	12,500
ARCHDIOSESAN YOUTH EMPLOYMENT SERVICES 3965 S VERMONT AVE LOS ANGELES, CA 90037	NONE	PC	CHARITABLE	16,250
Catholic Charities Archdiocese of New York 1011 FIRST AVENUE 11TH FLOOR NEW YORK,NY 10022	NONE	PC	CHARITABLE	10,000
center for reproductive rights 199 WATER STREET NEW YORK,NY 10038	NONE	PC	CHARITABLE	5,000
CHILDREN OF BELLEVUE 462 1ST AVENUE ME-15 NEW YORK,NY 10016	NONE	PC	CHARITABLE	5,000
CHILDREN'S SCHOLARSHIP FUND 8 W 38TH STREET 9TH FLOOR NEW YORK,NY 10018	NONE	PC	CHARITABLE	5,000
CITY BAR JUSTICE CENTER 42 WEST 44TH STREET NEW YORK,NY 10036	NONE	PC	CHARITABLE	12,500
Community Legal Services in East Palo Alto 2117 University Ave EAST PALO ALTO,CA 94303	NONE	PC	CHARITABLE	1,500
East Harlem Tutorial Program 2050 2ND AVENUE NEW YORK,NY 10029	NONE	PC	CHARITABLE	15,000
FEDERAL BAR COUNCIL 123 MAIN STREET SUITE L100 WHITE PLAINS,NY 10601	NONE	PC	CHARITABLE	9,500
GREATER NEW YORK COUNCILS BSA 1481 CRYSTAL LAKE ROAD NARROWSBURG,NY 12764	NONE	PC	CHARITABLE	10,000
Total				723,001

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

		<i>.</i>	the real of Approved for	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
INNER-CITY SCHOLARSHIP FUND 1011 1ST AVENUE 1400 NEW YORK,NY 10022	NONE	PC	CHARITABLE	7,500
JDRF 26 BROADWAY 14TH FLOOR NEW YORK,NY 10004	NONE	PC	CHARITABLE	15,000
LEGAL AID JUSTICE CENTER 1000 PRESTON AVENUE CHARLOTTESVILLE,VA 22903	NONE	PC	CHARITABLE	2,750
LEGAL SERVICES OF HUDSON VALLEY 90 MAPLE AVENUE WHITE PLAINS,NY 10601	NONE	PC	CHARITABLE	5,400
LESBIAN & GAY COMMUNITY SERVICES CENTER INC 208 W 13TH STREET NEW YORK,NY 10011	NONE	PC	CHARITABLE	5,000
New York Police & Fire Widows & Childrens Benefi 156 W 56TH STREET SUITE 901 NEW YORK, NY 10019	NONE	PC	CHARITABLE	1,300
PACE WOMEN'S JUSTICE CENTER 78 N BROADWAY WHITE PLAINS,NY 10603	NONE	PC	CHARITABLE	5,000
POLICE ATHLETIC LEAGUE 658 INDIANTOWN ROAD W SUITE 201 JUPITER,FL 33458	NONE	PC	CHARITABLE	10,500
SABA 4415 FORTRAN CT SAN JOSE, CA 95134	NONE	PC	CHARITABLE	10,000
SIDEWALK ANGELS FOUNDATION PO Box 356 BEDFORD HILLS,NY 10507	NONE	PC	CHARITABLE	30,000
THE GLOBAL MOUNTAIN FUND 139 MADISON ST NE ALBUQUERQUE,NM 87108	NONE	PC	CHARITABLE	129,151
LAW FOUNDATION-SILICON VALLEY 152 N 3RD STREET 3 SAN JOSE, CA 95112	NONE	PC	CHARITABLE	38,150
THE POWER TO CARE FUND PO BOX 42329 PITTSBURGH,PA 15203	NONE	PC	CHARITABLE	2,500
WOUNDED WARRIOR PROJECT 4899 BELFORT ROAD SUITE 300 JACKSONVILLE,FL 32256	NONE	PC	CHARITABLE	15,400
Total			▶ 3a	723,001

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### **TY 2015 Depreciation Schedule**

Name: QUINN EMANUEL FOUNDATION

**EIN:** 20-0423348

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As Filed Data -

DLN: 93491062007066

Schedule B

Name of the organization

**QUINN EMANUEL FOUNDATION** 

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

Department of the Treasury Internal Revenue Service

#### **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 <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

OMB No 1545-0047

2015

**Employer identification number** 

			20-0423348
Organi	zation type (check or	ne)	
Filers	of:	Section:	
Form 99	90 or 990-EZ	□ 501(c)( ) (enter number) organization	
		☐ 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation	
		☐ 527 political organization	
Form 99	90-PF	▼ 501(c)(3) exempt private foundation	
		501(c)(3) taxable private foundation	
Genera  ⊽	For an organization	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions to any one contributor. Complete Parts I and II. See instructions for determining a contributor.	• '
Specia	l Rules		
	under sections 509(a) received from any one	escribed in section $501(c)(3)$ filing Form 990 or 990-EZ that met the $33^1 \mbox{\ensuremath{\beta}}\%$ suppoint and $170(b)(1)(A)(vi)$ , that checked Schedule A (Form 990 or 990-EZ), Part I be contributor, during the year, total contributions of the greater of <b>(1)</b> \$5,000 or <b>(</b> Form 990-EZ, line 1 Complete Parts I and II	ll, line 13, 16a, or 16b, and that
·	during the year, total of	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received contributions of more than \$1,000 exclusively for religious, charitable, scientific, cruelty to children or animals. Complete Parts I, II, and III	
·	during the year, contr this box is checked, e purpose Do not comp	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received butions exclusively for religious, charitable, etc., purposes, but no such contributer here the total contributions that were received during the year for an excludete any of the parts unless the <b>General Rule</b> applies to this organization becatic, contributions totaling \$5,000 or more during the year	utions totaled more than \$1,000 lf usively religious, charitable, etc, use 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

**Employer identification number** 

QUINN EMANUEL FOUNDATION 20-0423348 Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed Part I (d) (b) (c) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution See Additional Data Table Person **Payroll** Noncash \$ (Complete Part II for noncash contribution) (d) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash \$ (Complete Part II for noncash contribution) (a) (b) (c) (d) **Total contributions** Name, address, and ZIP + 4 Type of contribution No. Person Payroll \$ Noncash (Complete Part II for noncash contribution) (b) (c) (d) (a) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person **Payroll** Noncash \$ (Complete Part II for noncash contribution) (b) (c) (d) (a) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** Person **Payroll** Noncash \$ (Complete Part II for noncash contribution) (d) (a) (b) (c) **Total contributions** Type of contribution Name, address, and ZIP + 4 No. Person **Payroll** Noncash \$ (Complete Part II for noncash contribution)

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

chedule B (Form 990,	990-EZ, or 990-PF) (2015)		Page <b>4</b>
<b>ame of organization</b> UINN EMANUEL FO	UNDATION		Employer identification number 20-0423348
total more line entry of \$1,000 c	than \$1,000 for the year from any	one contributor. Complete co : III, enter the total of e <i>xclusive</i> rmation once. See instruction	ribed in section 501(c)(7), (8), or (10) that clumns (a) through (e) and the following ely religious, charitable, etc., contributions
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
·   -	Transferee's name, address, ar	(e) Transfer of gilland ZIP4	ft Relationship of transferor to transferee
(a) o.from Part I	- (b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, ar	(e) Transfer of gr	ft Relationship of transferor to transferee
-	-		
(a) p.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	Transferee's name, address, ar	(e) Transfer of gri	ft Relationship of transferor to transferee
(a) o.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, ar	(e) Transfer of gri	ft Relationship 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
			Person 🔽
	_		Payroll
	ANDREW BERDON		Payroll
	865 S FIGUEROA STREET 10TH FLOOR	\$ 12,112	Noncash
	LOS ANGELES, CA 90017		
			(Complete Part II for noncash contribution )
			Person 🔽
	A NIDDEW DOSSMAN		Payroll
	ANDREW ROSSMAN  865 S FIGUEROA STREET 10TH FLOOR	\$ 8,946	-
		<del>\$</del> 6,940	Noncash
	LOS ANGELES, CA 90017		(Complete Deat II S
			(Complete Part II for noncash contribution )
			Person 🔽
	<del>- </del>		, F
	CHRISTINE CHUNG		Payroll
	865 S FIGUEROA STREET 10TH FLOOR	\$ 6,194	Noncash
	LOS ANGELES, CA 90017		
			(Complete Part II for noncash contribution )
			Person 🗹
	_		Payroll
	COREY WORCESTER  865 S FIGUEROA STREET 10TH FLOOR		Payron
	605 5 FIGUEROA SIREET TOTH FLOOR	\$ 5,130	Noncash
	LOS ANGELES, CA 90017		
			(Complete Part II for noncash contribution )
	+		Person 🔽
	_		
	DAN BROCKETT		Payroll <b>「</b>
	865 S FIGUEROA STREET 10TH FLOOR	\$ 17,076	Noncash
	LOS ANGELES, CA 90017		
			(Complete Part II for noncash contribution )
			Person 🔽
	<del>- </del>		
	DAN CUNNINGHAM		Payroll
	865 S FIGUEROA STREET 10TH FLOOR	\$ 16,405	Noncash
	LOS ANGELES, CA 90017		
			(Complete Part II for
	l	I	noncash contribution )

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7			Person 🔽
	JAMES TECCE		Payroll
	865 S FIGUEROA STREET 10TH FLOOR	\$ 8,174	Noncash
	LOS ANGELES, CA 90017		(Complete Part II for noncash contribution )
			Person <u></u> ✓
8	DAVID ELSBERG		Payroll
	865 S FIGUEROA STREET 10TH FLOOR	\$ 9,947	Noncash
	LOS ANGELES, CA90017		(Complete Part II for noncash contribution )
9			Person 🔽
	JENNIFER BARRETT		Payroll 「
	865 S FIGUEROA STREET 10TH FLOOR	\$ 8,418	Noncash
	LOS ANGELES, CA 90017		(Complete Part II for noncash contribution )
10			Person 🔽
	ERIC HUANG		Payroll
	865 S FIGUEROA ST 10TH FLOOR	\$ 11,618	Noncash
	LOS ANGELEG, CA 90017		(Complete Part II for
			noncash contribution )
11			Person /
	ERIC WINSTON 865 S FIGUEROA ST 10TH FLOOR	\$ 10,143	Payroll Noncash
	LOS ANGELES, CA 90017		Holicasii
			(Complete Part II for noncash contribution )
12			Person 🔽
	FAITH GAY		Payroll 🗀
	865 S FIGUEROA ST 10TH FLOOR	\$ 22,166	Noncash
	LOS ANGELES, CA 90017		
			(Complete Part II for noncash contribution)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	JANE BYRNE		Person 🔽 Payroll
	865 S FIGUEROA ST 10TH FLOOR LOS ANGELES, CA 90017	\$ 7,201	Noncash
	· ·		(Complete Part II for noncash contribution )
14	JONATHAN OBLAK		Person ▼ □ Payroll □
	865 S FIGUEROA ST 10TH FLOOR	\$ 8,247	Noncash
	LOS ANGELES, CA90017		(Complete Part II for noncash contribution )
15	JONATHAN PICKHARDT		Person
	865 S FIGUEROA ST 10TH FLOOR	\$ 10,692	Noncash
	LOS ANGELES, CA 90017		(Complete Part II for noncash contribution )
16			Person 🗸
	VARIOUS - LESS THAN 5000 - SEE AT 865 S FIGUEROA ST 10TH FLOOR	\$ 170,206	Payroll Noncash
	LOS ANGELES, CA 90017		(Complete Part II for noncash contribution )
17			Person 🔽 Payroll 🗆
	KATHLEEN SULLIVAN 865 S FIGUEROA STREET 10TH FLOOR	\$ 19,048	Noncash
	LOS ANGELES, CA 90017		(Complete Part II for noncash contribution )
18			Person 🔽
	KEN CHIATE 865 S FIGUEROA STREET 10TH FLOOR	\$ 19,731	Payroll 「 Noncash
	LOS ANGELES, CA 90017		(Complete Part II for noncash contribution )

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19			Person 🔽
	MIKE CARLINSKY		Payroll 🔽
	865 S FIGUEROA STREET 10TH FLOOR	\$ 10,496	Noncash
	LOS ANGELES, CA 90017		(Complete Part II for noncash contribution )
			Person 🔽
20	MIKE ZELLER		Payroll
	865 S FIGUEROA STREET 10TH FLOOR	\$ 5,643	Noncash
	LOS ANGELES, CA 90017		(Complete Part II for noncash contribution )
21			Person 🔽
	PETER CALAMARI		Payroll 🗀
	865 S FIGUEROA STREET 10TH FLOOR	\$ 12,099	Noncash
	LOS ANGELES, CA 90017		(Complete Part II for noncash contribution )
			Person 🔽
22	PHILIPPE SELENDY		Payroll
	865 S FIGUEROA STREET 10TH FLOOR	\$ 24,918	Noncash
	LOS ANGELES, CA 90017		(Complete Part II for noncash contribution )
23			Person
23	QUINN EMANUEL URQUHART SULLIVAN		Payroll
	865 S FIGUEROA STREET 10TH FLOOR	\$ 23,958	Noncash
	LOS ANGELES, CA 90017		(Complete Part II for
			noncash contribution )  Person
24	_		Payroll
	RAY NIMROD 865 S FIGUEROA STREET 10TH FLOOR	\$ 15,177	Noncash
	LOS ANGELES, CA 90017	4 23/2	NONCASH
	LOS ANGELES, CA 9001/		(Complete Part II for noncash contribution )

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25			Person 🔽
	RICK WERDER		Payroll 🗆
	865 S FIGUEROA STREET 10TH FLOOR	\$ 41,853	Noncash
	LOS ANGELES, CA 90017		(Complete Part II for noncash contribution )
			Person <b>▽</b>
26	ROBERT JUMAN		Payroll
	865 S FIGUEROA STREET 10TH FLOOR	\$ 8,488	Noncash
	LOS ANGELES, CA90017		(Complete Part II for noncash contribution )
27			Person 🔽
	JOHN QUINN		Payroll 「
	865 S FIGUEROA STREET 10TH FLOOR	\$ 15,000	Noncash
	LOS ANGELES, CA 90017		(Complete Part II for noncash contribution )
			Person 🔽
28	SASCHA RAND		Payroll
	865 S FIGUEROA STREET 10TH FLOOR	<u>\$ 16,553</u>	Noncash
	LOS ANGELES, CA 90017		(Complete Part II for noncash contribution )
20			Person -
29	CHETLA PIRMPALIM		Payroll
	SHEILA BIRNBAUM 865 S FIGUEROA STREET 10TH FLOOR	\$ 6,670	Noncash
	LOS ANGELES, CA 90017		(Complete Part II for noncash contribution )
30			Person -
30	VICTORIA MAROULIS		Payroll
	865 S FIGUEROA STREET 10TH FLOOR	\$ 8,059	Noncash
	LOS ANGELES, CA 90017		
			(Complete Part II for noncash contribution )

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
31			Person 🔽
	MANISHA SHETH		Payroll
	865 S FIGUEROA ST 10TH FLOOR	\$ 7,900	Noncash
	LOS ANGELES, CA 90017		(Complete Part II for noncash contribution )
			Person 🔽
32	MARC GREENWALD		Payroll
	865 S FIGUEROA ST 10TH FLOOR	\$ 8,948	Noncash
	LOS ANGELES, CA 90017		(Complete Part II for noncash contribution )
33			Person 🔽
	MARCUS GROSCH		Payroll $ extstyle  extsty$
	865 S FIGUEROA ST 10TH FLOOR	\$ 16,893	Noncash
	LOS ANGELES, CA 90017		(Complete Part II for noncash contribution )
34			Person 🗹
	MARK CHEFFO		Payroll
	865 S FIGUEROA ST 10TH FLOOR	\$ 9,174	Noncash
	LOS ANGELES, CA 90017		(Complete Part II for noncash contribution )
			Person
35			Payroll
	MICHAEL WILLIAMS 865 S FIGUEROA ST 10TH FLOOR	\$ 11,588	Noncash
	LOS ANGELES, CA 90017		(Complete Part II for
			noncash contribution )
36			Person 🔽
	NICK CERRITO		Payroll 🗀
	865 S FIGUEROA ST 10TH FLOOR	\$ 7,171	Noncash
	LOS ANGELES, CA 90017		(Complete Deat II f
			(Complete Part II for noncash contribution)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
37			Person 🗸
	ROBERT LOIGMAN		Payroll
	865 S FIGUEROA ST 10TH FLOOR	\$ 7,745	Noncash
	LOS ANGELES, CA 90017		(Complete Part II for noncash contribution )
			Person 🔽
38	SEAN PAK		Payroll
	865 S FIGUEROA ST 10TH FLOOR	\$ 9,659	Noncash
	LOS ANGELES, CA 90017		(Complete Part II for noncash contribution )
39			Person 🗸
	STEPHEN NEUWIRTH		Payroll $\Gamma$
	865 S FIGUEROA ST 10TH FLOOR	\$ 9,151	Noncash
	LOS ANGELES, CA 90017		(Complete Part II for noncash contribution )
40			Person 🔽
	SUSHEEL KIRPALANI		Payroll
	865 S FIGUEROA ST 10TH FLOOR	\$ 17,625	Noncash
	LOS ANGELES, CA 90017		(Complete Part II for
			noncash contribution )
41			Person F
	TAI HENG CHENG 865 S FIGUEROA ST 10TH FLOOR		Payroll
		\$ 8,338	Noncash
	LOS ANGELES, CA 90017		(Complete Part II for noncash contribution )
42			Person 🔽
	THOMAS PEASE		Payroll 🖰
	865 S FIGUEROA ST 10TH FLOOR	\$ 6,435	Noncash
	LOS ANGELES, CA 90017		
			(Complete Part II for noncash contribution )