

**PUBLIC
DISCLOSURE
COPY**

Form **990**

Return of Organization Exempt From Income Tax

2011

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public Inspection

The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2011 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input checked="" type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization ENTERTAINMENT INDUSTRY FOUNDATION Doing Business As		D Employer identification number 95-1644609
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1201 WEST 5TH ST T-700	E Telephone number 213-240-3900	
	City or town, state or country, and ZIP + 4 LOS ANGELES, CA 90017		G Gross receipts \$ 46,554,512.
	F Name and address of principal officer: LISA PAULSEN SAME AS C ABOVE		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶

I Tax-exempt status: 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527

J Website: ▶ WWW.EIFFOUNDATION.ORG

K Form of organization: Corporation Trust Association Other ▶ **L Year of formation:** 1942 **M State of legal domicile:** CA

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>TO COORDINATE THE PHILANTHROPY OF THE ENTERTAINMENT INDUSTRY.</u>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	16
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	16
	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	56
	6 Total number of volunteers (estimate if necessary)	6	2600
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	128,110,563.	41,245,872.
	9 Program service revenue (Part VIII, line 2g)	0.	0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	259,734.	243,955.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	-85,090.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	128,370,297.	41,404,737.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	95,448,519.	43,323,904.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	5,293,385.	5,479,219.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	1,720,557.	1,363,980.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 7,534,816.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	22,111,071.	9,686,002.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	124,573,532.	59,853,105.
19 Revenue less expenses. Subtract line 18 from line 12	3,796,765.	-18,448,368.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 66,820,651.	End of Year 53,176,013.
	21 Total liabilities (Part X, line 26)	15,655,166.	20,572,024.
	22 Net assets or fund balances. Subtract line 21 from line 20	51,165,485.	32,603,989.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer	Date			
	MERRILY NEWTON, CFO Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name RICHARD L. RUVELSON	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN P00234075
	Firm's name ▶ GREEN HASSON & JANKS LLP	Firm's EIN ▶ 95-1777440			
	Firm's address ▶ 10990 WILSHIRE BLVD., 16TH FLOOR LOS ANGELES, CA 90024-3929	Phone no. (310) 873-1600			

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III [X]

1 Briefly describe the organization's mission: THE ENTERTAINMENT INDUSTRY FOUNDATION, AS THE LEADING CHARITABLE ORGANIZATION OF THE ENTERTAINMENT INDUSTRY, HARNESSSES THE COLLECTIVE POWER OF THE ENTIRE INDUSTRY TO RAISE AWARENESS AND FUNDS FOR CRITICAL HEALTH, EDUCATIONAL AND SOCIAL ISSUES IN ORDER TO MAKE A POSITIVE

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [X] Yes [] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 34,455,874. including grants of \$ 33,903,381.) (Revenue \$) STAND UP TO CANCER INITIATIVE (SU2C)

SU2C IS DESIGNED TO RAISE FUNDS TO ACCELERATE GROUND-BREAKING CANCER RESEARCH AND BRING NEW THERAPIES TO PATIENTS SOONER TO SAVE LIVES. SU2C UTILIZES THE ENTERTAINMENT INDUSTRY TO BUILD BROAD PUBLIC SUPPORT AND TO ENHANCE AWARENESS OF THE DEVASTATING IMPACT CANCER HAS IN THIS COUNTRY. SU2C'S GOAL IS TO BRING TOGETHER THE BEST AND BRIGHTEST IN THE CANCER COMMUNITY ENCOURAGING COLLABORATION INSTEAD OF COMPETITION.

4b (Code:) (Expenses \$ 2,046,402. including grants of \$ 2,019,362.) (Revenue \$) WOMEN'S CANCER PROGRAM INITIATIVE (WCP)

THE FOCUS OF THIS INITIATIVE IS TO SAVE LIVES BY RAISING AWARENESS ABOUT THE IMPORTANCE OF EARLY DETECTION OF BREAST AND REPRODUCTIVE CANCERS, TO FUND RESEARCH FOR EARLY DETECTION METHODS, TO SUPPORT COMMUNITY PROGRAMS THAT ASSIST WOMEN AT RISK OF OR AFFECTED BY CANCER, AS WELL AS TO CONSOLIDATE EIF'S EFFORTS TO SUPPORT THE FIGHT AGAINST WOMEN'S CANCER THAT ARE NOT ADDRESSED BY ITS OTHER INITIATIVES.

4c (Code:) (Expenses \$ 9,965,868. including grants of \$ 7,401,161.) (Revenue \$) OTHER COMMUNITY SUPPORT:

EIF IS ABLE TO CHAMPION A WIDE VARIETY OF WORTHY CAUSES. EIF RAISES AWARENESS AND CRUCIAL FUNDS TO ADDRESS LEADING HEALTH AND SOCIAL ISSUES. EIF GRANTS FUNDS TO VARIOUS PUBLIC CHARITIES ALL ACCROSS THE U.S.

IN 2011, THE FOUNDATION LAUNCHED ITS VETERAN'S INITIATIVE TO RAISE CRITICAL FUNDS AND AWARENESS TO SUPPORT ESSENTIAL REINTEGRATION SERVICES FOR VETERANS AND THEIR LOVED ONES. THE NEEDS OF VETERANS RETURNING FROM IRAQ AND AFGHANISTAN ARE A FIRST TIER ISSUE. THIS INITIATIVE CREATES A CALL TO ACTION FOR ALL AMERICANS TO JOIN IN

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 46,468,144.

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	X	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b	<i>If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?</i>		

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	X	
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

Input box for Schedule O response

Main table with columns for question number, description, and Yes/No responses. Includes rows for Form 1096, Form W-2G, Form W-3, Form 990-T, Form 8886-T, Form 8282, Form 1098-C, Form 4947(a)(1), and Form 720.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included in line 1a, above, who are independent; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed: AL, AK, AZ, AR, CA, CT, FL, GA, HI, IL, KS, KY
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[X] Own website [] Another's website [X] Upon request
19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:
STEPHEN J. CERYANEK - (213)240-3900
1201 WEST 5TH ST., STE T-700, LOS ANGELES, CA 90017

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) PAMELA ABDY BOARD MEMBER	1.00	X						0.	0.	0.
(2) OREN AVIV BOARD MEMBER	1.00	X						0.	0.	0.
(3) DAVID BEAUBAIRE BOARD MEMBER	1.00	X						0.	0.	0.
(4) PRESTON BECKMAN BOARD MEMBER	1.00	X						0.	0.	0.
(5) KEVIN BERG BOARD MEMBER	1.00	X						0.	0.	0.
(6) DYLAN CLARK BOARD MEMBER	1.00	X						0.	0.	0.
(7) LYNN HARRIS BOARD MEMBER	1.00	X						0.	0.	0.
(8) KEVIN HUVANE BOARD MEMBER	1.00	X						0.	0.	0.
(9) ADAM ISAACS BOARD MEMBER	1.00	X						0.	0.	0.
(10) DAVID LONNER BOARD MEMBER	1.00	X						0.	0.	0.
(11) MITCH METCALF BOARD MEMBER	1.00	X						0.	0.	0.
(12) VANESSA MORRISON BOARD MEMBER	1.00	X						0.	0.	0.
(13) CHRIS SILBERMANN BOARD MEMBER	1.00	X						0.	0.	0.
(14) SHERRY LANSING BOARD CHAIR	1.00	X		X				0.	0.	0.
(15) JEFF BADER SECRETARY	1.00	X		X				0.	0.	0.
(16) JAY SURES TREASURER	1.00	X		X				0.	0.	0.
(17) LISA PAULSEN PRESIDENT/CEO	40.00			X				414,855.	0.	31,024.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) SUSAN FRANK COO	40.00			X				265,904.	0.	14,524.
(19) MERRILY NEWTON CFO	40.00			X				200,192.	0.	14,524.
(20) MICHAEL BALAOING EMPLOYMENT ENDED 10/11) SVP/PROGRAMS	40.00				X			228,805.	0.	14,524.
(21) KATHLEEN LOBB VP/COMMUN. EAST COAST	40.00			X				197,734.	0.	14,524.
(22) THOMAS CHIODO SVP/DEVELOPMENT	40.00					X		166,846.	0.	14,524.
(23) CATHY JAMES VP/DEVELOPMENT	40.00					X		162,788.	0.	14,524.
(24) BRINLEY TURNER VP/STRATEGIC PLAN./INTERACTIVE VENTURE	40.00					X		153,115.	0.	14,524.
(25) CAROL RAMSEY VP/PROGRAMS	40.00					X		144,823.	0.	14,524.
(26) STEPHAN CERYANEK VP/CONTROLLER	40.00					X		133,027.	0.	14,524.
1b Sub-total								2,068,089.	0.	161,740.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								2,068,089.	0.	161,740.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **16**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
ROBERTSON SCHWARTZ AGENCY 2326 TOPANGA CYN BLVD., TOPANGA, CA 90290	MARKETING/PUBLIC REL./PROF. FUNDRAISE	1,998,636.
THE DAVIS GROUP, 400 CONTINENTAL BLVD., STE 275, EL SEGUNDO, CA 90245	PROFESSIONAL FUNDRAISER	622,885.
PATRIOT COMMUNICATIONS, LLC P.O. BOX 92899, LOS ANGELES, CA 90009	WEB SITE MANAGEMENT	368,333.
SACKS PRODUCTIONS, 23622 CALABASAS RD., STE. 351, CALABASAS, CA 91302	EVENT MANAGEMENT	329,950.
ID PUBLIC RELATIONS 7060 HOLLYWOOD BLVD, LOS ANGELES, CA 90028	PUBLICITY & PUBLIC RELATIONS	219,358.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **12**

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	4,457,791.				
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	36788081.				
	g Noncash contributions included in lines 1a-1f: \$		1,019,602.				
	h Total. Add lines 1a-1f		41245872.				
	Program Service Revenue	2 a _____		Business Code			
		b _____					
c _____							
d _____							
e _____							
f All other program service revenue							
g Total. Add lines 2a-2f							
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		273,650.			273,650.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real					
		(ii) Personal					
		b Less: rental expenses					
		c Rental income or (loss)					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	866,358.				
		(ii) Other					
		b Less: cost or other basis and sales expenses	896,053.				
		c Gain or (loss)	-29,695.				
	d Net gain or (loss)		-29,695.			-29,695.	
	8 a Gross income from fundraising events (not including \$ 4,457,791. of contributions reported on line 1c). See Part IV, line 18	a	4168632.				
		b Less: direct expenses	4253722.				
c Net income or (loss) from fundraising events			-85,090.			-85,090.	
9 a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses						
	c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold						
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a _____							
	b _____						
	c _____						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions.			41404737.	0.	0.	158,865.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Check if Schedule O contains a response to any question in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	42,185,794.	42,185,794.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	1,138,110.	1,138,110.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,307,490.	345,926.	772,932.	188,632.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	3,115,613.	824,307.	1,841,818.	449,488.
8 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)	168,954.	44,701.	99,878.	24,375.
9 Other employee benefits	593,584.	157,046.	350,901.	85,637.
10 Payroll taxes	293,578.	77,673.	173,551.	42,354.
11 Fees for services (non-employees):				
a Management				
b Legal	593,096.		593,096.	
c Accounting	35,350.		35,350.	
d Lobbying	20,000.	20,000.		
e Professional fundraising services. See Part IV, line 17	1,363,980.			1,363,980.
f Investment management fees	34,921.		34,921.	
g Other	5,054,066.	780,050.	569,348.	3,704,668.
12 Advertising and promotion	118,168.	5,508.	6,254.	106,406.
13 Office expenses	1,042,177.	229,137.	228,932.	584,108.
14 Information technology	368,977.	145,130.	71,691.	152,156.
15 Royalties				
16 Occupancy	824,114.	205,033.	477,444.	141,637.
17 Travel	725,254.	148,128.	181,777.	395,349.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	122,080.	24,934.	30,598.	66,548.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	59,462.	12,032.	37,595.	9,835.
23 Insurance	188,041.	30,933.	151,951.	5,157.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a BANK AND MERCHANT FEES	154,675.	102.	56,114.	98,459.
b PUBLIC RELATIONS	116,640.	35,700.	74,930.	6,010.
c SUBS. AND PERMITS	109,345.	49,295.	39,433.	20,617.
d EQUIPMENT RENTAL	95,372.	7,083.	7.	88,282.
e All other expenses	24,264.	1,522.	21,624.	1,118.
25 Total functional expenses. Add lines 1 through 24e	59,853,105.	46,468,144.	5,850,145.	7,534,816.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year	
Assets	1 Cash - non-interest-bearing	422,066.	1	12,280,228.	
	2 Savings and temporary cash investments	30,007,877.	2	17,588,490.	
	3 Pledges and grants receivable, net	30,204,654.	3	17,538,441.	
	4 Accounts receivable, net	508,170.	4	171,691.	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5		
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6		
	7 Notes and loans receivable, net		7		
	8 Inventories for sale or use		8		
	9 Prepaid expenses and deferred charges	622,610.	9	529,433.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 457,526.			
	b Less: accumulated depreciation	10b 341,122.	113,046.	10c 116,404.	
	11 Investments - publicly traded securities	4,887,898.	11	4,898,319.	
	12 Investments - other securities. See Part IV, line 11		12		
	13 Investments - program-related. See Part IV, line 11		13		
	14 Intangible assets		14		
	15 Other assets. See Part IV, line 11	54,330.	15	53,007.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	66,820,651.	16	53,176,013.		
Liabilities	17 Accounts payable and accrued expenses	1,273,288.	17	1,115,139.	
	18 Grants payable	13,956,752.	18	19,334,705.	
	19 Deferred revenue	425,126.	19	122,180.	
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22		
	23 Secured mortgages and notes payable to unrelated third parties		23		
	24 Unsecured notes and loans payable to unrelated third parties		24		
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25		
	26 Total liabilities. Add lines 17 through 25	15,655,166.	26	20,572,024.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27 Unrestricted net assets	-2,003,584.	27	9,433,294.	
	28 Temporarily restricted net assets	53,141,569.	28	23,143,195.	
	29 Permanently restricted net assets	27,500.	29	27,500.	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
	30 Capital stock or trust principal, or current funds		30		
	31 Paid-in or capital surplus, or land, building, or equipment fund		31		
	32 Retained earnings, endowment, accumulated income, or other funds		32		
	33 Total net assets or fund balances	51,165,485.	33	32,603,989.	
34 Total liabilities and net assets/fund balances	66,820,651.	34	53,176,013.		

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	41,404,737.
2	Total expenses (must equal Part IX, column (A), line 25)	2	59,853,105.
3	Revenue less expenses. Subtract line 2 from line 1	3	-18,448,368.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	51,165,485.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-113,128.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	32,603,989.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
2b	Were the organization's financial statements audited by an independent accountant?	X	
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

Form 990 (2011)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization ENTERTAINMENT INDUSTRY FOUNDATION	Employer identification number 95-1644609
--	---

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III - Functionally integrated d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)	
(ii) A family member of a person described in (i) above?	11g(ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	
- h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule A (Form 990 or 990-EZ) 2011

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	25149784.	171281177	76514519.	128110563	41245872.	442301915
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	25149784.	171281177	76514519.	128110563	41245872.	442301915
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						42504103.
6 Public support. Subtract line 5 from line 4.						399797812

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4	25149784.	171281177	76514519.	128110563	41245872.	442301915
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	223,671.	368,471.	493,963.	258,770.	273,650.	1618525.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						443920440
12 Gross receipts from related activities, etc. (see instructions)					12	21,549,289.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here	<input type="checkbox"/>					

Section C. Computation of Public Support Percentage

14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	14	90.06	%
15 Public support percentage from 2010 Schedule A, Part II, line 14	15	90.34	%
16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>		
b 33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2011

Name of the organization

ENTERTAINMENT INDUSTRY FOUNDATION

Employer identification number

95-1644609

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

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

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

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

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization ENTERTAINMENT INDUSTRY FOUNDATION	Employer identification number 95-1644609
--	---

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
1		\$ <u>12,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2		\$ <u>5,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3		\$ <u>4,114,107.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4		\$ <u>2,055,708.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5		\$ <u>1,100,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6		\$ <u>1,019,602.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization ENTERTAINMENT INDUSTRY FOUNDATION	Employer identification number 95-1644609
--	---

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
7	<hr/> <hr/> <hr/> <hr/>	\$ <u>1,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
—	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
—	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
—	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
—	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
—	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
—	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization ENTERTAINMENT INDUSTRY FOUNDATION	Employer identification number 95-1644609
--	---

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
6	DONATED STOCK _____ _____ _____	\$ 1,019,602.	11/30/11
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization ENTERTAINMENT INDUSTRY FOUNDATION	Employer identification number 95-1644609
--	---

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

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2011

Department of the Treasury
Internal Revenue Service

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **See separate instructions.**

Open to Public Inspection

If the organization answered "Yes" to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35c (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization ENTERTAINMENT INDUSTRY FOUNDATION	Employer identification number 95-1644609
--	---

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ▶ \$ _____
- 3 Volunteer hours _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1 a	Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a. If zero or less, enter -0-														
i	Subtract line 1f from line 1c. If zero or less, enter -0-														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?														

Yes No

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a	Lobbying nontaxable amount				
b	Lobbying ceiling amount (150% of line 2a, column(e))				
c	Total lobbying expenditures				
d	Grassroots nontaxable amount				
e	Grassroots ceiling amount (150% of line 2d, column (e))				
f	Grassroots lobbying expenditures				

Schedule C (Form 990 or 990-EZ) 2011

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X	
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?	X		20,000.
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?		X	
j Total. Add lines 1c through 1i			20,000.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A; and Part II-B, line 1. Also, complete this part for any additional information.

PART II-B, LINE 1, LOBBYING ACTIVITIES:

EIF ENCOURAGED THE PUBLIC TO VOTE ON THE CALIFORNIA RESEARCH ACT. THIS ACT WOULD GENERATE FUNDS FOR CANCER RESEARCH.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2011

Open to Public
Inspection

Name of the organization

ENTERTAINMENT INDUSTRY FOUNDATION

Employer identification number

95-1644609

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Yes No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

(ii) Assets included in Form 990, Part X

▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

b Assets included in Form 990, Part X

▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items

(check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	27,500.	27,500.	27,500.	27,500.	
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	27,500.	27,500.	27,500.	27,500.	

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment _____ %
- b Permanent endowment 100.00 %
- c Temporarily restricted endowment _____ %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		62,333.	38,223.	24,110.
d Equipment		395,193.	302,899.	92,294.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				116,404.

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶		

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	

FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	41,404,737.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	59,853,105.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-18,448,368.
4	Net unrealized gains (losses) on investments	4	-113,128.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	-113,128.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	-18,561,496.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	65,527,017.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	24,185,239.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	85,090.
e	Add lines 2a through 2d	2e	24,270,329.
3	Subtract line 2e from line 1	3	41,256,688.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	34,921.
b	Other (Describe in Part XIV.)	4b	113,128.
c	Add lines 4a and 4b	4c	148,049.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	41,404,737.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	84,088,513.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	24,185,239.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	85,090.
e	Add lines 2a through 2d	2e	24,270,329.
3	Subtract line 2e from line 1	3	59,818,184.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	34,921.
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	34,921.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	59,853,105.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4: FUNDS ARE IDENTIFIED AS SCHOLARSHIP FUNDS.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RECLASS SPECIAL EVENT EXPENSES

85,090.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

UNREALIZED LOSS ON INVESTMENST

113,128.

Part XIV Supplemental Information (continued)

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

RECLASS SPECIAL EVENT EXPENSES 85,090.

COPY

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2011

Open to Public
Inspection

Name of the organization: **ENTERTAINMENT INDUSTRY FOUNDATION**
Employer identification number: **95-1644609**

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

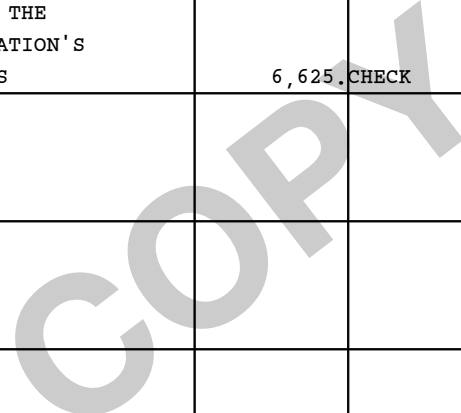
2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
SOUTH AFRICA	0	0	PROGRAM SERVICES	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS .	1,131,485.
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS .	6,625.
3 a Sub-total	0	0			1,138,110.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			1,138,110.

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AFRICA	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS	1130000	WIRE TRANSFER	0	N/A	BOOK
		EAST ASIA AND THE PACIFIC	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS	6,625	CHECK	0	N/A	BOOK



2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 1

3 Enter total number of other organizations or entities 1

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

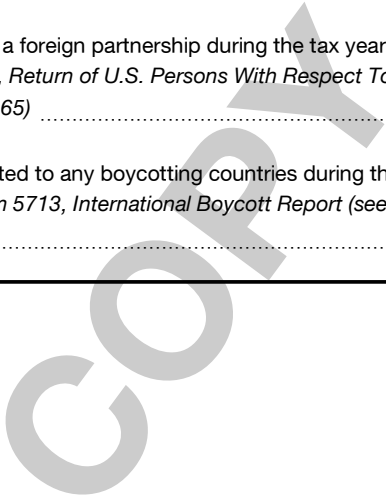
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)

COPY

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)* Yes No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)* Yes No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* Yes No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)* Yes No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)* Yes No

Schedule F (Form 990) 2011



Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

SCHEDULE F, PART I, LINE 2: AS PART OF THE DUE DILIGENCE PROCESS AND BEFORE MAKING GRANTS TO ORGANIZATIONS OUTSIDE THE US, EIF VERIFIES THAT THE CAUSES TO WHICH FUNDING IS DESIGNATED ARE IN FACT CHARITABLE OR THAT MONEY DONATED FOR CHARITABLE CAUSES IS UNLIKELY TO BE DIVERTED TO NON-CHARITABLE PURPOSES. IN COMPLIANCE WITH IRS GUIDELINES, EIF CONDUCTS REVIEWS TO DETERMINE IF POTENTIAL GRANTEES ARE THE FOREIGN EQUIVALENTS OF A US CHARITY. IF SO, AT LEAST ONE REPORT IS REQUIRED EACH YEAR. THESE REPORTS INCLUDE DETAILS ON PROGRESS TOWARD PROGRAM GOALS, AN ASSESSMENT OF THE AGENCY'S PERFORMANCE AND AN ACCOUNTING OF ALL EXPENDITURES. IF NO EQUIVALENCY CAN BE ESTABLISHED, EIF ASSUMES EXPENDITURE RESPONSIBILITY FOR GRANTS MADE. AS PER IRS GUIDELINES, GRANTEES ARE REQUIRED TO HOLD THE MONEY IN A DEDICATED ACCOUNT AND REPORT IN WRITING AT LEAST ONCE A YEAR.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
		REVLON RUN/WALK FOR	LEE NATIONAL FOR DENIM DAY	1	(add col. (a) through col. (c))	
		(event type)	(event type)	(total number)		
Revenue	1	Gross receipts	3,834,148.	2,646,122.	2,146,153.	8,626,423.
	2	Less: Charitable contributions	2,238,885.	1,642,956.	575,950.	4,457,791.
	3	Gross income (line 1 minus line 2)	1,595,263.	1,003,166.	1,570,203.	4,168,632.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes	157,010.	4,402.	103,665.	265,077.
	6	Rent/facility costs	185,568.		171,654.	357,222.
	7	Food and beverages	5,511.		19,707.	25,218.
	8	Entertainment	15,300.			15,300.
	9	Other direct expenses	1,231,874.	998,764.	1,360,267.	3,590,905.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				(4,253,722)
	11	Net income summary. Combine line 3, column (d), and line 10				-85,090.

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1	Gross revenue		
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
7	Direct expense summary. Add lines 2 through 5 in column (d)				(_____)
8	Net gaming income summary. Combine line 1, column d, and line 7				

9 Enter the state(s) in which the organization operates gaming activities: _____
 a Is the organization licensed to operate gaming activities in each of these states? Yes No
 b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No
 b If "Yes," explain: _____

- 11 Does the organization operate gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity operated in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____
 Address ▶ _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c If "Yes," enter name and address of the third party:

Name ▶ _____
 Address ▶ _____

16 Gaming manager information:

Name ▶ _____
 Gaming manager compensation ▶ \$ _____
 Description of services provided ▶ _____

- Director/officer Employee Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: ROBERTSON SCHWARTZ AGENCY

(I) ADDRESS OF FUNDRAISER: 1250 6TH ST., STE 201, SANTA MONICA, CA 90401

(I) NAME OF FUNDRAISER: THE DAVIS GROUP

(I) ADDRESS OF FUNDRAISER:
400 CONTINENTAL BLVD. STE. 275, EL SEGUNDO, CA 90245

Part IV Supplemental Information (continued)

(I) NAME OF FUNDRAISER: 5B EVENTS

(I) ADDRESS OF FUNDRAISER: 10536 CULVER BLVD, STE 6, CULVER CITY, CA 90232

(I) NAME OF FUNDRAISER: FRED SIEGAL PARTNERS LLC

(I) ADDRESS OF FUNDRAISER:

1425 LOCUST ST., STE 16C, PHILADELPHIA, PA 19102

COPY

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

**Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.**

OMB No. 1545-0047

2011

**Open to Public
Inspection**

Name of the organization

ENTERTAINMENT INDUSTRY FOUNDATION

**Employer identification number
95-1644609**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN ASSOCIATION FOR CANCER RESEARCH - 615 CHESTNUT ST., 17TH FLOOR - PHILADELPHIA, PA 19106	23-6251648	501(C)3	32,718,781.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
JONSSON CANCER CENTER FOUNDATION 10833 LE CONTE AVE., 9-627 FACTOR B LOS ANGELES, CA 90095	95-2242757	501(C)3	2,297,386.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
I AM ANGEL FOUNDATION 55 WALLS DR., 3RD FL FAIRFIELD, CT 06824	27-3419857	501(C)3	1,320,547.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
UNIVERSITY OF CHICAGO MEDICAL CENTER - 5841 S. MARYLAND AVENUE, MC 2115 - CHICAGO, IL 60637	36-3488483	501(C)3	375,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
MOVIMIENTO DE ARTE Y CULTURA LATINO AMERICA - 500 S. 1ST ST. - SAN JOSE, CA 95113	77-0251774	501(C)3	360,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
URBAN ARTS PARTNERSHIP 414 BROADWAY, 6TH FLOOR NEW YORK, NY 10013	13-3554734	501(C)3	360,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **97.**
- 3** Enter total number of other organizations listed in the line 1 table

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2011)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COLD SPRING HARBOR LABORATORY 1 BUNGTOWN RD. COLD SPRING HARBOR, NY 11724	11-2013303	501(C)3	300,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
WE ARE THE WORLD FOUNDATION 2425 OLYMPIC BLVD., STE. 220E SANTA MONICA, CA 90404	27-1865560	501(C)3	273,691.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
ACCELERATE BRAIN CANCER CURE 1717 RHODE ISLAND AVE NW, STE. 700 WASHINGTON, DC 20036	52-2320756	501(C)3	250,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
PROVIDENCE ST. JOSEPH FOUNDATION 501 S. BUENA VISTA ST. BURBANK, CA 91505	95-3544877	501(C)3	250,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
NATIONAL BREAST CANCER COALITION 1707 L STREET, NW, SUITE 1060 WASHINGTON, DC 20036	52-1782065	501(C)3	204,362.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
HARVARD MEDICAL SCHOOL-DANA FARBER CANCER INSTITUTE - 44 BINNEY ST. - BOSTON, MA 02115	04-2263040	501(C)3	150,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
REGENTS OF THE UNIVERSITY OF CALIFORNIA - 650 CHARLES E YOUNG DR., FACTOR 12-242 - LOS ANGELES, CA 90095	95-6006143	501(C)3	150,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
BAYLOR COLLEGE OF MEDICINE 1 BAYLOR PLAZA HOUSTON, TX 77030	74-1613878	501(C)3	125,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
JOHNS HOPKINS UNIVERSITY/SIDNEY KIMMEL COMPREHENSIVE CANCER CENTER - 401 N. BROADWAY, STE. 1100 - BALTIMORE, MD 21231	90-0329755	501(C)3	125,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PRESIDENT & FELLOWS OF HARVARD COLLEGE - 240 LONGWOOD AVE. - BOSTON, MA 02115	04-2103580	501(C)3	125,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
VANDERBILT UNIVERSITY MEDICAL CENTER - 2300 PIERCE AVE., 694 PRB - NASHVILLE, TN 37232	62-0476822	501(C)3	125,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
MEMORIAL SLOAN KETTERING CANCER CENTER - 1275 YORK AVE., ROOM C-1091 - NEW YORK, NY 10021	13-1924236	501(C)3	105,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
MIKEROWEWORKS FOUNDATION 10960 WILSHIRE BLVD., 5TH FLOOR LOS ANGELES, CA 90024	26-4324338	501(C)3	100,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
MOUNT CARMEL HEALTH SYSTEM 6150 E. BRAOD ST. COLUMBUS, OH 99024	31-1439334	501(C)3	100,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
NEW VENTURE FUND 734 15TH ST. NW, STE. 600 WASHINGTON, DC 20005	20-5806345	501(C)3	100,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
SAG FOUNDATION 5757 WILSHIRE BLVD. LOS ANGELES, CA 90036	95-3967876	501(C)3	100,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
ALBERT EINSTEIN CANCER CENTER 1300 MORRIS PARK AVE., STE. B BRONX, NY 35459	13-1624225	501(C)3	95,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
CANCER SUPPORT COMMUNITY 1990 S. BUNDY DR., #100 SANTA MONICA, CA 90405	33-0287070	501(C)3	75,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CANCER SUPPORT COMMUNITY 919 18TH STREET NW, STE. 54 WASHINGTON, DC 20006	95-4163931	501(C)3	70,025.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
VIEWPOINT SCHOOL 23620 MULHOLLAND HWY CALABASAS, CA 91032	95-2242261	501(C)3	60,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
ACTORS FUND OF AMERICA 729 SEVENTH AVENUE, 10TH FLOOR NEW YORK, NY 10019	13-1635251	501(C)3	55,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
CANCER CARE INC. 275 SEVENTH AVE. NEW YORK, NY 10001	13-1825919	501(C)3	55,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
GILDA'S CLUB NYC 195 W. HOUSTON STREET NEW YORK, NY 10014	13-4046652	501(C)3	55,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
OVARIAN CANCER NATIONAL ALLIANCE 910 17TH STREET, NW WASHINGTON, DC 20006	31-1581756	501(C)3	55,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
ACTORS FUND OF AMERICA 729 7TH AVE., 10TH FL NEW YORK, NY 10019	13-1635251	501(C)3	50,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
BECKMAN RESEARCH INSTITUTE OF THE CITY OF HOPE - 1500 DUARTE RD., KCRB 2021 - DUARTE, CA 91010	95-3432210	501(C)3	50,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
BETH ISRAEL DECONESS MEDICAL CENTER - 330 BROOKLINE AVE. - BOSTON, MA 02115	04-2103881	501(C)3	50,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CINCINNATI CHILDREN'S HOSPITAL MEDICAL CENTER - 3333 BURNET AVE. - CINCINNATI, OH 05229	31-0833936	501(C)3	50,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
MOTION PICTURE & TELEVISION FUND 23388 MULHOLLAND DRIVE WOODLAND HILLS, CA 91364	95-1652916	501(C)3	50,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
OHIO STATE UNIVERSITY 1084 BIOMED RESIDENCE TOWER, 460 12 COLUMBUS, OH 43210	31-6025986	501(C)3	50,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
ORAL CANCER FOUNDATION 3419 VIA LIDO, #205 NEWPORT BEACH, CA 92663	33-0969026	501(C)3	50,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
SCHOLARSHIP MGT SERVICES/SCHOLARSHIP AMERICA - 1 SCHOLARSHIP WAY - SAINT PETER, MN 56082	04-2296967	501(C)3	50,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
SCRIPPS RESEARCH INSTITUTE 130 SCRIPPS WAY, STE. 2C1 JUPITER, FL 33458	33-0435954	501(C)3	50,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
STANFORD UNIVERSITY SCHOOL OF MEDICINE - 300 PASTEUR DR. - STANFORD, CA 94305	94-1156365	501(C)3	50,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
UNIVERSITY OF ALABAMA, BIRMINGHAM 1700 6TH AVE. SO. BIRMINGHAM, AL 35249	63-6005396	501(C)3	50,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
UNIVERSITY OF CALIFORNIA, SAN FRANCISCO - 600 16TH ST., MC 2280 - SAN FRANCISCO, CA 94158	94-6039493	501(C)3	50,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF PITTSBURGH 5150 CENTRE AVE., UPMC, STE. 100 PITTSBURGH, PA 15232	23-2919472	501(C)3	50,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
V-DAY 303 PARK AVENUE SOUTH, STE. 1184 NEW YORK, NY 10010	94-3389430	501(C)3	50,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
WASHINGTON UNIVERSITY 660 S. EUCLID AVE. ST. LOUIS, MO 63110	43-0653611	501(C)3	50,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
YALE UNIVERSITY 333 CEDAR ST., SHM1-142B NEW HAVEN, CT 06250	06-0646973	501(C)3	50,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
THE LOPEZ FOUNDATION 4000 WARNER BLVD., BLDG. 8, ROOM 9 BURBANK, CA 91522	27-1434363	501(C)3	45,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
AMERICA'S PROMISE-THE ALLIANCE OF YOUTH - 1110 VERMONT AVE. NW, STE. 900 - WASHINGTON, DC 20005	51-1848713	501(C)3	40,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
BE THE CHANGE, INC 2 CANAL PARK CAMBRIDGE, MA 02141	26-0402451	501(C)3	40,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
THE WILLIAM F. RYAN COMMUNITY HEALTH CENTER - 110 WEST 97TH STREET - NEW YORK, NY 10025	13-2884976	501(C)3	40,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
VOLUNTEERS OF THE BURBANK ANIMAL SHELTER - 1150 N. VICTORY PLACE - BURBANK, CA 91502	95-4469452	501(C)3	38,561.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITY OF HOPE 1055 WILSHIRE BLVD., 12TH FL LOS ANGELES, CA 90017	95-3435919	501(C)3	37,100.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
TEAM SURVIVOR LOS ANGELES 1223 WILSHIRE BLVD., STE. 570 SANTA MONICA, CA 90403	95-4742327	501(C)3	35,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
HABITAT FOR HUMANITY INTERNATIONAL 121 HABITAT STREET AMERICUS, GA 31709	91-1914868	501(C)3	34,039.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
DOCTORS WITHOUT BORDERS 333 7TH AVENUE, 2ND FLOOR NEW YORK, NY 10011	13-3433452	501(C)3	31,897.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
A PLACE CALLED HOME 2830 S. CENTRAL AVE. LOS ANGELES, CA 90011	95-4427291	501(C)3	31,445.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
INNER CITY ARTS 720 KOHLER STREET LOS ANGELES, CA 90021	95-4239478	501(C)3	30,260.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
TEACH FOR AMERICA 315 WEST 36TH ST., 7TH FL NEW YORK, NY 10018	13-3541913	501(C)3	30,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
NATIONAL COALITION FOR CANCER SURVIVORSHIP - 1010 WAYNE AVENUE, SUITE 770 - SILVER SPRINGS, MD 20910	85-0357897	501(C)3	28,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
UNITED FRIENDS OF THE CHILDREN 1055 WILSHIRE BLVD., STE. 1955 LOS ANGELES, CA 90017	95-3665186	501(C)3	27,280.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BURBANK TEMPORARY AID CENTER 1304 W. BURBANK BLVD. BURBANK, CA 91506	95-3309130	501(C)3	26,154.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
CEDARS-SINAI MEDICAL CENTER 8700 BEVERLY BLVD. LOS ANGELES, CA 90048	95-1644600	501(C)3	25,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
THE FORGOTTEN INTERNATIONAL P.O. BOX 192066 SAN FRANCISCO, CA 94119	26-1484826	501(C)3	25,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
FRIENDS OF CANCER RESEARCH 3299 K STREET NW, STE. 100 WASHINGTON, DC 20007	52-1983273	501(C)3	25,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
HAWAII DEPT OF EDUCATION F/B/O HANAIEI SCHOOL - P.O. BOX 46 - HANAIEI, HI 96714	26-1484826	501(C)3	25,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
MALIBU FOUNDATION FOR YOUTH & FAMILIES - P.O. BOX 6768 - MALIBU, CA 90264	95-4774844	501(C)3	25,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
WOMEN OF COLOR BREAST CANCER PROJECT - 336 HILLCREST BLVD., SUITE #609 - INGLEWOOD, CA 90301	95-4455930	501(C)3	25,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
THE YUM-O ORGANIZATION 900 BROADWAY, STE 1001 NEW YORK, NY 10003	20-8107545	501(C)3	25,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
WORLD WOLDLIFE FUND 1250 24TH ST. NW WASHINGTON, DC 20090	52-1693387	501(C)3	23,460.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHRYSLIS 1853 LINCOLN BLVD. SANTA MONICA, CA 90404	95-3972624	501(C)3	21,944.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
FRIENDS OF THE LA RIVER 570 WEST AVENUE 26, STE. 250 LOS ANGELES, CA 90065	95-4171497	501(C)3	20,519.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
CITRUS VALLEY MEDICAL CENTER 210 W. SAN BERNARDINO RD. COVINA, CA 91722	95-6006469	501(C)3	20,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
THE GRAMMY FOUNDATION 3402 W. PICO BLVD. SANTA MONICA, CA 90405	95-3199223	501(C)3	20,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
OAKLAND A'S COMMUNITY FUND 7000 COLISEUM WAY OAKLAND, CA 94621	94-2826655	501(C)3	20,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
USC/KENNETH NORRIS JR COMPREHENSIVE CANCER CTR & HOSPITAL - 1441 EASTLAKE AVENUE, #800 - LOS ANGELES, CA 90033	95-1642394	501(C)3	20,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
ANGELES CHAPTER FOUNDATION 3435 WILSHIRE BLVD., STE. 320 LOS ANGELES, CA 90010	95-4112557	501(C)3	16,217.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
LOS ANGELES CONSERVATION CORPS 650 WEST OLYMPIC BLVD., STE. 450 LOS ANGELES, CA 90015	95-4002138	501(C)3	13,994.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
ACADEMY OF TELEVISION ARTS & SCIENCE FOUNDATION - 5220 LANKERSHIM BLVD. - NORTH HOLLYWOOD, CA 91601	13-3130146	501(C)3	10,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CALIFORNIA COMMUNITY FOUNDATION 445 S. FIGUEROA ST., STE. 3400 LOS ANGELES, CA 90017	95-3510055	501(C)3	10,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
CALIFORNIA STATE SUMMER SCHOOL ARTS FOUNDATION - 1875 CENTURY PARK EAST, STE. 700 - LOS ANGELES, CA 90067	95-4111128	501(C)3	10,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
JANE GOOD ALL INSTITUTE FOR WILDLIFE RESEARCH, EDUCATION & CONSERVATION - 1840 ALCATRAZ AVE., STE. A2 - BERKELEY, CA 94703	94-2474731	501(C)3	10,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
A LONG WALK HOME 1568 N. MILWAUKEE AVE., STE. 104 CHICAGO, IL 60647	30-0053613	501(C)3	8,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
SOCIAL COMPASSION P.O. BOX 1125 LAGUNA BEACH, CA 92652	20-8067041	501(C)3	7,500.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
BOYS & GIRLS CLUB OF BURBANK 2244 N. BUENA VISTA ST. BURBANK, CA 91504	95-4485745	501(C)3	7,496.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
CONSERVATION INTERNATIONAL FOUNDATION - 2011 CRYSTAL DR., STE. 500 - ARLINGTON, VA 22202	52-1497470	501(C)3	6,783.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
INTERNATIONAL RESCUE COMMITTEE 3727 WEST 6TH ST., STE. 619 LOS ANGELES, CA 90020	13-5660870	501(C)3	6,783.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
COALITION FOR CLEAN AIR 811 WEST 7TH ST., STE. 1100 LOS ANGELES, CA 90017	23-7120567	501(C)3	6,222.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TREE PEOPLE 12601 MULHOLLAND DR. BEVERLY HILLS, CA 90210	23-7314838	501(C)3	6,222.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
WOMEN IN NEED 115 WEST 31ST STREET NEW YORK, NY 10001	13-3164477	501(C)3	6,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
MEET EACH NEED WITH DIGNITY 10641 N. SAN FERNANDO RD. PACOIMA, CA 91331	23-7306337	501(C)3	5,985.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
V FOUNDATION FOR CANCER RESEARCH 106 TOWERVIEW COURT CARY, NC 27513	13-3705951	501(C)3	5,500.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
GATEWAY FOR CANCER RESEARCH 1336 BASSWOOD RD. SCHAUMBURG, IL 60173	73-1386920	501(C)3	5,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
GERARD'S HOUSE P.O. BOX 28893 SANTA FE, NM 87592	74-2834283	501(C)3	5,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
HEART GALLERY NEW MEXICO FOUNDATION - 13170-B CENTER AVE., SE-190 - ALBUQUERQUE, MN 87123	20-4468893	501(C)3	5,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
JIMMY ROLLINS FAMILY FOUNDATION 1880 CENTURY PARK EAST, STE 914 LOS ANGELES, CA 90067	26-4166016	501(C)3	5,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
PROJECT MEDICARE FOR HAITI INC. 8260 NE 2ND AVENUE MIAMI, FL 33138	65-0965848	501(C)3	5,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RENET, INC. 3203 GRASSY LANE ANDERSON, IN 46012	35-2123169	501(C)3	5,000.	0.	BOOK	N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.
TIBETAN CHILDREN'S EDUCATIONAL WELFARE FUND (PARTIAL REFUND OF GRANT)			-160,936.	0.		N/A	GENERAL GRANT TO SUPPORT THE ORGANIZATION'S PROGRAMS.

COPY

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE I, PART I, LINE 2:

EIF'S PROCEDURE FOR MONITORING THE USE OF GRANT FUNDS CONSISTS OF REPORTING REQUIREMENTS THAT ARE WRITTEN INTO EACH GRANT AGREEMENT REQUIRING THE GRANTEE TO PROVIDE PERIODIC REPORTS ON THE USE OF FUNDS. THE FOUNDATION'S PROGRAM DEPARTMENT MANAGES THE PROCESS OF FOLLOW-UP TO ENSURE REPORTS ARE RECEIVED, REVIEWED AND SHARED WITH MANAGEMENT.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization

ENTERTAINMENT INDUSTRY FOUNDATION

Employer identification number

95-1644609

Part I Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director. Explain in Part III. <input checked="" type="checkbox"/> Compensation committee <input checked="" type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations <input checked="" type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a	Receive a severance payment or change-of-control payment?	4a	X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	X
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	X
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a	The organization?	5a	X
b	Any related organization?	5b	X
If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a	The organization?	6a	X
b	Any related organization?	6b	X
If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2011

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 LISA PAULSEN	(i)	358,255.	50,000.	6,600.	0.	31,024.	445,879.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2 SUSAN FRANK	(i)	259,904.	0.	6,000.	0.	14,524.	280,428.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
3 MERRILY NEWTON	(i)	194,192.	0.	6,000.	0.	14,524.	214,716.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
MICHAEL BALAOING 4 EMPLOYMNT ENDED 10/11	(i)	206,550.	0.	22,255.	0.	14,524.	243,329.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
5 KATHLEEN LOBB	(i)	191,734.	0.	6,000.	0.	14,524.	212,258.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
6 THOMAS CHIODO	(i)	160,846.	0.	6,000.	0.	14,524.	181,370.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
7 CATHY JAMES	(i)	156,788.	0.	6,000.	0.	14,524.	177,312.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
8 BRINLEY TURNER	(i)	147,115.	0.	6,000.	0.	14,524.	167,639.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
9 CAROL RAMSEY	(i)	138,823.	0.	6,000.	0.	14,524.	159,347.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2011

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
▶ **Attach to Form 990.**

Name of the organization **ENTERTAINMENT INDUSTRY FOUNDATION** Employer identification number **95-1644609**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	1	1,019,602.	FMV
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (_____)				
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) (2011)

Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B): NON CASH CONTRIBUTIONS ARE LISTED BY
TOTAL NUMBER OF CONTRIBUTIONS.

COPY

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2011

Open to Public
Inspection

Name of the organization

ENTERTAINMENT INDUSTRY FOUNDATION

Employer identification number

95-1644609

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

IMPACT IN OUR COMMUNITY AND THROUGHOUT THE NATION.

FORM 990, PART III, LINE 3, CHANGES IN PROGRAM SERVICES:

THE HOPE FOR HAITI NOW AND SOS HELP FOR HAITI CAMPAIGNS WERE NOT
REPEATED IN 2011. THIS WAS ONLY A ONE TIME PROGRAM IN RESPONSE TO THE
DEVASTATING EARTHQUAKE IN HAITI.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

SUPPORT OF THOSE WHO HAVE RISKED LIFE AND LIMB IN SERVICE TO THE
NATION. THE KICK-OFF EVENT TOOK PLACE ON NOVEMBER 11, 2011 WITH THE
BROADCAST OF A SPECIAL RISE AND HONOR EDITION OF EXTREME MAKEOVER: HOME
EDITION HIGHLIGHTING MILITARY STORIES.

FORM 990, PART VI, SECTION B, LINE 11: FORM 990 IS REVIEWED BY THE CFO AND
BOARD TREASURER. THE 990 IS THEN PRESENTED TO THE EXECUTIVE COMMITTEE OF
THE BOARD FOR APPROVAL. THE ENTIRE BOARD WILL ALSO BE PROVIDED A COPY OF
THE 990 TO REVIEW PRIOR TO BEING FILED WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C: AN ANNUAL QUESTIONNAIRE IS
DISTRIBUTED TO ALL THE BOARD MEMBERS TO SIGN. THE SVP OF PROGRAMS MONITORS
THE COMPLIANCE OF THE CONFLICT OF INTEREST POLICY.

FORM 990, PART VI, SECTION B, LINE 15: AN OUTSIDE FIRM IS HIRED TO CONDUCT
A SALARY REVIEW OF EXECUTIVE DIRECTOR'S, OFFICERS AND KEY EMPLOYEES'
COMPENSATION. THE REVIEW IS PRESENTED TO THE BOARD FOR APPROVAL.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2011)

132211
01-23-12

Name of the organization ENTERTAINMENT INDUSTRY FOUNDATION	Employer identification number 95-1644609
---	--

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, AK, AZ, AR, CA, CT, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND
OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

FORM 990, PART VI, SECTION C, LINE 19: THE FOUNDATION'S GOVERNING DOCUMENTS & POLICIES ARE AVAILABLE TO THE PUBLIC UPON REQUEST. AUDITED FINANCIALS AND THE PUBLIC DISCLOSURE COPY OF THE 990 ARE POSTED ON THE FOUNDATION'S OFFICIAL WEBSITE (WWW.EIFFOUNDATION.ORG) OR AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED LOSSES ON INVESTMENTS: -113,128.

FORM 990, PART XII, LINE 2C

FINANCIAL STATEMENTS AND REPORTING

NO CHANGES WERE MADE TO THE OVERSIGHT PROCESS OR SELECTION PROCESS DURING THE TAX YEAR, AS COMPARED TO THE PRIOR TAX YEAR.

AMENDED FORM 990:

FORM 990 IS AMENDED TO PROPERLY REFLECT PART IX, LINE 26, JOINT COSTS ALLOCATION. THE JOINT COSTS ALLOCATION THAT WAS REPORTED ON THE ORIGINAL FORM 990 WAS ASSOCIATED WITH DONATED IN KIND SERVICES OF PRINT ADVERTISING AND BROADCAST PUBLIC SERVICE ANNOUNCEMENTS. THE REVENUE FOR THESE CONTRIBUTIONS WAS, CORRECTLY, NOT RECOGNIZED FOR TAX PURPOSES IN ACCORDANCE WITH FORM 990 INSTRUCTIONS. THE EXPENSES ASSOCIATED WITH THESE DONATED ADVERTISEMENTS AND PUBLIC SERVICE ANNOUNCEMENTS WERE

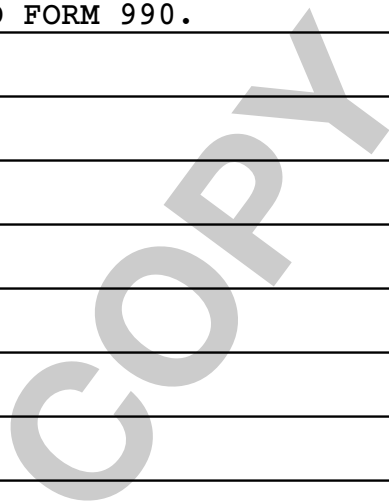
Name of the organization
ENTERTAINMENT INDUSTRY FOUNDATION

Employer identification number
95-1644609

INCURRED BY THE DONORS, NOT ENTERTAINMENT INDUSTRY FOUNDATION. THESE EXPENSES WERE INADVERTENTLY INCLUDED ON PART IX, LINE 26 OF THE ORIGINALLY FILED FORM 990.

THE AMENDED FORM 990, PROPERLY, DOES NOT INCLUDE JOINT COSTS ALLOCATION AS ENTERTAINMENT INDUSTRY FOUNDATION INCURRED NO JOINT COSTS.

ALTHOUGH THEY ARE NOT REQUIRED, SCHEDULE D, PARTS XI, XII, XIII HAVE BEEN COMPLETED ON THE AMENDED FORM 990.



Related Organizations and Unrelated Partnerships
▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization **ENTERTAINMENT INDUSTRY FOUNDATION** Employer identification number **95-1644609**

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
STAND UP TO CANCER MUSIC LLC, - 26-3299754 1201 WEST 5TH STREET, SUITE T-700 LOS ANGELES, CA 90017	MUSIC RIGHTS	CALIFORNIA	87,337.	0.	ENTERTAINMENT INDUSTRY FOUNDATION
EIF PRODUCTIONS LLC, 1201 WEST 5TH STREET, SUITE T-700 LOS ANGELES, CA 90017	INACTIVE	CALIFORNIA	0.	0.	ENTERTAINMENT INDUSTRY FOUNDATION

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	1a	
b Gift, grant, or capital contribution to related organization(s)	1b	
c Gift, grant, or capital contribution from related organization(s)	1c	
d Loans or loan guarantees to or for related organization(s)	1d	
e Loans or loan guarantees by related organization(s)	1e	
f Sale of assets to related organization(s)	1f	
g Purchase of assets from related organization(s)	1g	
h Exchange of assets with related organization(s)	1h	
i Lease of facilities, equipment, or other assets to related organization(s)	1i	
j Lease of facilities, equipment, or other assets from related organization(s)	1j	
k Performance of services or membership or fundraising solicitations for related organization(s)	1k	
l Performance of services or membership or fundraising solicitations by related organization(s)	1l	
m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1m	
n Sharing of paid employees with related organization(s)	1n	
o Reimbursement paid to related organization(s) for expenses	1o	
p Reimbursement paid by related organization(s) for expenses	1p	
q Other transfer of cash or property to related organization(s)	1q	
r Other transfer of cash or property from related organization(s)	1r	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

Multiple horizontal lines for supplemental information.

COPY