CTO 150024 2014

# Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Transury Internal Revenue Service

Do not enter Social Security numbers on this form as it may be made public.

Open to Public Inspection

Inte	nei Rove	nue Service	► Information about F	orm 990 an	d Its instructions i	is at www	irs gov/form990		Inspection		
$\overline{A}$	For the	e 2013 cale	endar year, or tax year beginning	NOV 1,	2013 and	ending	OCT 31, 201	4			
В	Check if applicable		e of organization				D Employer iden	tificati	ion number		
Г	Addre	rei	S CINEFAMILY								
Ē	Name		34079								
	Indition return		ber and street (or P.O. box if mail is not d	E Telephone num		<u> </u>					
	Termis eteci		L N. FAIRFAX AVB.			<u>[</u>	(32	<u> (3)</u>	655-2510		
			or town, state or province, country, and	d ZIP or forei	eboo listeog ng		G Gross receipts \$		1,468,667.		
	Applic tion pendii	LOS	S ANGELES, CA 90030	5			H(a) Is this a group				
	para	F Nam	e and address of principal officer.HAI	DRIAN E	BEFOAR		for subordina		···· — —		
_	SAME AS C ABOVE  H(b) Are all autocolorates included? Yes No  Yes No										
1	Tax-exempt status: X 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) or 527 If "No," attach a list. (see instructions)  Website: ➤ WWW.CINEFAMILY.ORG										
				Association	Ottver	I Vos			tate of legal domicile: CA		
_	ert I	Summa		esociation	Outu	15.100	B GI WILLEBOIL 2007	I may Or	and or agai dornione. C42		
Ŀ			cribe the organization's mission or mos	at significant	activities TO P	ROMOT	E THE THEAT	RIC	AL		
ş	'	PERFOR	RMING ARTS AND EDUC	ATE THE	PUBLIC C	ONCER	NING CLASSI	CF	ILMS.		
Activities & Governance			box bif the organization discr								
Š	1		voting members of the governing both		=			<u>a   _</u>	18		
ð	_					٠اا		4	16		
20	5	Total numb	independent voting members of the g er of individuals employed in calendar	year 2013 (F	TROPHY SEE		. <b></b>	5	39		
暑	6	Total numb	er of volunteers (estimate if necessary	)	Coron		·····	6	16		
ş	7 a	Total unreb	ner of individuals employed in calendar ner of volunteers (estimate if necessary ated business revenue from Part VIII, o ned tursiness tayable income from Form	okumn (C), h	18 12	2015		7a	0.		
_	Ь	Net unrelat	DO DOSEROSS IEMAND ENCORED HOURS CO.	1 300-1, 1110	· · · · · · · · · · · · · · · · · · ·			<u>ть  </u>	0.		
	1				Kegistr) Charitable	, UI	Prior Year 607,591	+	Current Year 483,904.		
9			ins and grants (Part VIII, line 1h)		Chattable	Trust9_	827,487		819,431.		
Revenue		_	ervice revenue (Part VIII, line 2g)		Chaires				0.		
ě			I BICCHIES (LEGIT AIII' COMMISSI &À' SEIGS 2'	, and ruj			<u>_</u>	<del>    -</del>	102,162.		
			nue (Part VIII, column (A), lines 5, 6d, 8 ue - edd lines 8 <u>through 11 (must equ</u> e				1,435,078	,	1,405,497.		
_			similar amounts paid (Part IX, column					1.	0.		
			aid to or for members (Part IX, column		7 ,			7.1	0.		
	1		ther compansation, employee benefits		umn (A), lines 5-10)		453,948	7.	737,950.		
Expenses	16a		al fundraising fees (Part IX, column (A),				· C	7.	0.		
å	Ь		aising expenses (Part IX, column (D), li		80,2	85.		$\perp$			
Ш	17	Other expe	nses (Part IX, column (A), lines 11a-11d	d, 11f-24e)			902,961		709,231.		
	18	Total expe	nses. Add fines 13-17 (must equal Part	DX, column (	A), line 25)		1,356,909		1,447,181.		
		Revenue le	ss expenses. Subtract line 18 from line	e 12	<u></u>		78,169	_	-41,684.		
200						μ	Beginning of Current Ye 121,244		End of Year 128,148.		
986	20		s (Part X, line 16)		,,	····	4,085		34,168.		
Net Assets	21		ties (Part X, line 26)			····  -	117,159		93,980.		
습	22 art II		or fund balances. Subtract line 21 from ure Block	m lime 20			117,133		33,3001		
			ry, I declare that I have examined this return	n. including ac	companying scheduk	as and state	ements, and to the best of	i my kr	powledge and belief, it is		
			lete. Declaration of preparer (other than offi					,			
	,	<u> </u>	, , , , , , , , , , , , , , , , , , , ,				<del>- 1 - 1</del>				
Sig	n	Signa	dure of officer				Date				
Here HADRIAN BELOVE, EXECUTIVE DIRECTOR											
Type or print name and title											
Print   Prin								PTIN			
								P00666808			
1411, 51414							5-2302617				
Use Only Firm's address 10960 WILSHIRE BLVD. STE 700							\\ <i>A77</i> . 2024				
_	LOS ANGELES, CA 90024-3783   Phone no. (310) 477-3924										
			this return with the preparer shown at						X Yes No Form 990 (2013)		
332	001 10-2	29-13 LJH/	For Paperwork Reduction Act Not	JCC, 500 U18	separate assiruci	paty.			FORTH DOD (2013)		

Form	990 (2013) THE CINEFAMILY	26-1734	07 <u>9 P</u>	<u>age 2</u>
Pa	t III   Statement of Program Service Accomplishments	<u> </u>		
	Check if Schedule O contains a response or note to any line in this Part III			
<u> </u>	Briefly describe the organization's mission:			
•	THE ORGANIZATION PROMOTES THE THEATRICAL PERFORMING A	RTS AND ED	UCATES	,
	THE PUBLIC CONCERNING CLASSIC FILMS AND FILMS WHICH H	AVE ARTIST	IC	
	VALUE BUT WHICH HAVE HAD INSIGNIFICANT RECENT PUBLIC	EXPOSURE.		
	VALUE DOT WHICH INVE MAD INDIGNITIONAL INDUSTRI TODATO			
	The second secon			
2	Did the organization undertake any significant program services during the year which were not listed on	Г	□Yes 🛣	٦
	the prior Form 990 or 990-EZ?	L	Tes LAL	_ <b>N€O</b>
	If "Yes," describe these new services on Schedule O.		J <sub>Yes</sub> 🗓	٦
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service	es? L	JYes LAA	J No
	if "Yes," describe these changes on Schedule O.			
4	Describe the organization's program service accomplishments for each of its three largest program services	s, as measured by ex	penses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to	others, the total exp	enses, and	
	revenue, if any, for each program service reported.			_
4a	(Code: ) (Expenses \$ 1,188,878 · including grants of \$ ) (F	loverus \$	921,59	<u>3.</u> )
	THE SCREENING OF CLASSIC FILMS AND FILMS WHICH HAVE A	RTISTIC VAL	LUE AN	D
	EDUCATING THE PUBLIC ON CLASSIC FILMS.			
				-
		<del></del>		
4b	(Code:) (Experises \$) (F	tevanue \$		)
	<del></del>			
			-	
			-	
			_	
			_	
		<del></del> -	-	
4c	(Code:) (Expenses \$ including grants of \$) (F			<b>—</b> '
			_	
		<del></del>	<del></del>	
		<u> </u>		
4 <b>d</b>	Other program services (Describe in Schedule O.)			
	(Expenses \$ including grants of \$ ) (Revenue \$	)		
<u>4e</u>	Total program service expenses ► 1,188,878.	<u>.</u>	<u> </u>	
			Form <b>990</b> (	(2013)
33200 10-29				

Pa	rt 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)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
-	public office? If "Yes," complete Schedule C, Part I	3		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? If "Yes," complete Schedule C, Part II	4		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? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
٠	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	в	ŀ	x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	۰		<u> </u>
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	l	X
_	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	┝∸		<del></del> -
8	· ·	в		x
_	Schedule D, Part III  Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for	۳		<del></del>
9				
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?	ا ا		x
	If "Yes," complete Schedule D, Part IV	9		┣ <u>╇</u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent		ĺ	x
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	$\vdash$	
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			1
	as applicable.	٠.		1
8	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			1
	Part VI	11a	X	<b>-</b>
ь	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			l ₩
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
¢	Did the organization report an amount for investments · program related in Part X, line 13 that is 5% or more of its total			۱
	assets reported in Part X, line 167 // "Yes," complete Schedule D, Part VIII	11c		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			ا ــ
	Part X, line 167 /f "Yes," complete Schedule D, Part IX	11d		X
0	Did the organization report an amount for other liabilities in Part X, line 257 // "Yes," complete Schedule D, Part X	110	X	L
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			l
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	117		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		ł	_
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and If the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X_
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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	i		
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	The state of the s			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
••	column (A), fines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
40	Oid the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
18	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
40	Did the organization report more than \$15,000 of gross income from garning activities on Part VIII, line 9a? If "Yes,"			Ť
19		19		x
	complete Schedule G, Part III  Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	<del>                                     </del>	X
200	Did the organization operate one or more nospital labelles (iii res, complete solicitude in		<b>—</b>	

Form **990** (2013)

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Form 990 (2013) THE CINEFAMILY

[Part IV | Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX,			x
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		┢╇
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? If "Yes," complete		ļ	x
	Schedule J	23		
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			Ī
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			x
_	Schedule K. If "No", go to line 25a	24a		_
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		$\vdash$
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24-		
_	any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
		240		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	25a		x
_	disqualified person during the year? If "Yes," complete Schedule I., Part I	2361		<del></del> -
Þ	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? # "Yes," complete	-		x
	Schedule L, Part I	250		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,	26		x
	complete Schedule I., Part II  Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	<u> </u>		_
27	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
		27		x
~~	of any of these persons? If "Yes," complete Schedule L, Part III  Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	-		
28	instructions for applicable filling thresholds, conditions, and exceptions):			•
_	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	i	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	X	
_	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? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	H		
30	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	<u> </u>		
٠.	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes, " complete			
_	Schedule N, Part II	32		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? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
-	Pert V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
-	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, tine 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		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? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	<u> </u>
		Form	990	(2013)

Par	tt V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V						
				Yes	No		
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	19					
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	-				
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	ele gaming					
	(gambling) winnings to prize winners?		1c	X			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,						
	filed for the calendar year ending with or within the year covered by this return 2a	39					
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)						
Зэ	Did the organization have unrelated business gross income of \$1,000 or more during the year?	.,,,	3a		X		
Ь	b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O						
48	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	ty over, a					
	financial account in a foreign country (such as a bank account, securities account, or other financial account	t)?	4a		X		
Ь	If "Yes," enter the name of the foreign country: ▶						
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Account	ts.					
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X		
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T7		5c				
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization	nization solicit		1			
	any contributions that were not tax deductible as charitable contributions?		6a		X		
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or	gifts					
	were not tax deductible?		6b				
	Organizations that may receive deductible contributions under section 170(c).						
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services pr	ovided to the payor?	7a	X			
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	X			
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was requ	ired			_		
	to file Form 8282?		7c		X		
	If "Yes," indicate the number of Forms 8282 filed during the year		- 1				
•	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract	?	7 <del>e</del>		X		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		X		
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 889	99 as required?	79				
h	If the organization received a contribution of cars, boats, similares, or other vehicles, did the organization file		7h				
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the su			-			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time	during the year?	8				
	Sponsoring organizations maintaining donor advised funds.			1			
	Did the organization make any taxable distributions under section 4966?		9a				
	Did the organization make a distribution to a donor, donor advisor, or related person?		9b				
	Section 501(c)(7) organizations. Enter:						
	Initiation fees and capital contributions included on Part VIII, line 12						
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		ı				
	Section 501(c)(12) organizations. Enter:						
	Gross income from members or shareholders 11a		l				
Ь	Gross income from other sources (Do not net emounts due or paid to other sources against		1				
	amounts due or received from them.)						
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a				
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		;	1			
	Section 501(c)(29) qualified nonprofit health insurance issuers.		40		Ь		
a	Is the organization licensed to issue qualified health plans in more than one state?		13a		ļ		
٠	Note. See the instructions for additional information the organization must report on Schedule O.						
b	Enter the amount of reserves the organization is required to maintain by the states in which the						
	organization is licensed to issue qualified health plans 13b		ł	, 1			
C	Enter the amount of reserves on hand		-		X		
	Did the organization receive any payments for indoor tarning services during the tax year?		148		<u> </u>		
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		14b		(2012)		

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[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.

	(O line Od, OL), OF 100 Decorpt the Calculation (in Consistent, or Charges in Concoder C. Coo instruction			
	Check if Schedule O contains a response or note to any line in this Part VI	,		X
Sec	tion A. Governing Body and Management			
_			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
711	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
_	That did the library of total and the control of th			i
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			x
	officer, director, trustee, or key employee?	2		<u> </u>
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?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	X	
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?	7a		X
_	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	<del>- ' -</del> -		
D		_		x
	persons other than the governing body?	7b		-
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			ŀ
8	The governing body?	89	X	
b	Each committee with authority to act on behalf of the governing body?	8b		X
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	9		X
Sac	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
40_	Pid the appropriation have based shooten because or efficiency?	10a		X
	Did the organization have local chapters, branches, or affiliates?	100		<del></del> -
Ь	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?	10b	X	
110	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		
ь	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	12a		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
_	in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
	Did the organization have a written document retention and destruction policy?	14	_	X
14	• • • • • • • • • • • • • • • • • • • •			┢═╌
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?		,	x
8	The organization's CEO, Executive Director, or top management official	15a_		-
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	:		ļ
	taxable entity during the year?	16a		X
ь	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 lew, and take steps to safeguard the organization's			
	and the second s	16b		Ì
<u> </u>		100	_	
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►CA			
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) of	vailab	10	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request X Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finar	cial	
	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 organiza	tion: P	<b>-</b>	
	HADRIAN BELOVE - (323) 655-2510		_	_
	611 N. FAIRFAX AVE., LOS ANGELES, CA 90036		_	_
	UII N. PALKENA NAD., ING MIGHERS, CH 30030	En	000	(2013)
***	2 (0.90 ()	TUNIE		12010

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

Check if Schedule O contains a response or note to any line 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.

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

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

(A) Name and Title	(B) Average			(( Pos	ition			(D) Reportable	(E) Reportable	(F) Estimated
Hallis Dig Tus	hours per	DOM,	(do not check more than one box, unless person is both an officer and a director/trustee)		h en	compensation	compensation from related	amount of other		
	week (list any hours for related organizations below line)	Individual trustes or director	included instea	Officer	Kay employes	Highest componsated employer	Former	the organization (W·2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) MICHAEL BACALL	2.00	_								
BOARD MEMBER		X			<u> </u>	_	L	0.	0.	0.
(2) LOUIS BLACK	2.00	x	1		l		1	0.	0.	0.
BOARD MEMBER	2.00	₽	Н		├	⊢	┝	ļ	0.	
(3) LIESL COPLAND BOARD MEMBER	2.00	x			l	ļ	1	0.	0.	0.
(4) SHADIE KLMASHAI	2.00	A	Н		⊢	├	⊢	<del>                                     </del>		
BOARD MEMBER AND TREASURER	100	x	i	X		ĺ		1 0.	0.	0.
(5) JAMES PINO	2.00		Н		Т	T	Т			· -
BOARD MEMBER	<u> </u>	X						0.	0.	0.
(6) ROB HACKETT	2.00				┢	T			_	
BOARD MEMBER		X			1	]	l	0.	0.	0.
(7) KATHERINE O'BRIEN	2.00	П								
BOARD MEMBER		X						0.	0.	0.
(8) PHIL HOELTING	2.00									_
BOARD NEMBER		X				L		0.	0.	0.
(9) TED HOPE	2.00							_	_	_
BOARD MEMBER		X			匚			0.	0.	0.
(10) PHIL LORD	2.00				l		1	1 _	_	_
BOARD MEMBER		X	Ш		_	<u> </u>	$ldsymbol{ldsymbol{\sqcup}}$	0.	0.	. 0.
(11) SIMON ORE	5.00	_		_		l		١ .	ا م	
BOARD MEMBER AND PRESIDENT	<del></del>	X		X	_		ļ	0.	0.	0.
(12) DANIEL HARKHAM	2.00	x	H	x	ŀ	l		0.	0.	0.
BOARD MEMBER AND TREASURER	40.00	^	Н	_	├	⊢	$\vdash$	·		
(13) HADRIAN BELOVE EXECUTIVE DIRECTOR	40.00	x		X				47,167.	0.	5,400.
(14) AMY PONCHER	2.00	-	$\vdash$		┝	⊢	┢	1,,10,,1		- 5,500
BOARD MEMBER	<u> </u>	x	1		l			0.	0.	0.
(15) BRAD SIMPSON	2.00	┪	Н	_	Н	┢	$\vdash$			
BOARD MEMBER		x						0.	0.	0.
(16) BEC SHITH	2.00		П			Г	T			
BOARD MEMBER		x			1	1		0.	0.	0.
(17) MELISSA VOLPERT	2.00	Π						<u> </u>		
BOARD MEMBER		X		L	L	L	<u> </u>	0.	0.	0.
332007 10-29-13										Form 990 (2013)

332007 10-29-13

THE CINEFAMILY 26-1734079 Page 8 Form 990 (2013) Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (B) (A) (C) (D) Æ **Position** Name and title Average Reportable Reportable Estimated (do not check more than one box, unless person is both an officer and a director/trustee) hours per compensation compensation amount of week from related other from (list eny organizations compensation the hours for (W-2/1099-MISC) organization from the related (W-2/1099-MISC) organization neftutional trustea organizations (ey employee and related helow organizations line) 2.00(18) JOHN WYATT 0 0 0. X BOARD MEMBER 47,167. 5,400. 0. O. c Total from continuation sheets to Part VII, Section A \_\_\_\_\_ 5.400. 47.167. 0. d Total (add lines 1b and 1c). Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable 0 compensation from the organization 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 3 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization 4 and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 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 Section B. Independent Contractors 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. (C) Description of services Compensation Name and business address NONE

332008 10-29-13

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

Part VIII Statement of Revenue Check if Schedule Q contains a response or note to any line in this Part VIII Revenue excluded from tax under (C) Unrelated (B) Related or Total revenue exempt function business revenue revenue 1 a Federated campaigns 18 359,103. b Membership dues ..... 1Ь c Fundraising events 1c d Related organizations ..... td Government grants (contributions) 1e All other contributions, gifts, grants, and 124,801. similar amounts not included above g Nonceeh contributions included in lines 1a-1f: 6 483,904 h Total\_Add lines 1a-1f Business Code 819,431. 711110 819,431 2 a THRATER ADM, RENT & CO Program Service Revenue f All other program service revenue 819,431. g Total, Add lines 2e-2f . Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties ..... (i) Real (ii) Personal 6 a Gross rents ..... b Less: rental expenses ....... c Rental income or (loss) ..... d Net rental income or (loss) . 7 a Gross amount from sales of (i) Securities (a) Other assets other than inventory b Less: cost or other basis and sales expenses ....... c Gain or (loss) ..... d Net gain or (loss) ..... 8 a Gross income from fundraising events (not Rovenus including \$ contributions reported on line 1c). See Part IV, line 18 \_\_\_\_\_a b Less: direct expenses \_\_\_\_\_\_b Net income or (loss) from fundraising events. 9 a Gross income from garning activities. See Part IV, line 19 \_\_\_\_\_a b Less: direct expenses \_\_\_\_\_\_b Net income or (loss) from gaming activities . 10 a Gross sales of inventory, less returns a160,157. and allowances b Less: cost of goods sold 96,987. 96,987. c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Cod 5,175. 711110 5,175. 11 a MISC INCOME 5,175 e Total Add lines 11a-11d 921,593. O. 405,497. Total revenue. See instructions. Form **990** (2013)

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). Check if Schedule O contains a response or note to any line in this Part IX (B) Program service (D) Fundraising (A) Total expenses Do not include amounts reported on lines 6b. Management and general expenses 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to governments and organizations in the United States, See Part IV, line 21 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 4 Benefits paid to or for members \_\_\_\_\_\_ 5 Compensation of current officers, directors, 11,250. 4,922. trustees, and key employees ..... 70,314. 54,142. 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(8) 435,146. 90.420. 39,559. 565,125. Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 37,708. 29,035. <u>6,033.</u> 2,640. Other employee benefits 49,898. 10,368. 4,537. 64,803. Payroli taxes Fees for services (non-employees): a Management 2,204. 965. 13,777. 10,608. c Accounting Professional fundraising services. See Part IV, line 17 Investment management fees Other, (If line 11g amount exceeds 10% of line 25, 14,518. 6,352. 90,737. 69,867. column (A) amount, list fine 11g expenses on Sch O.) 26,805. 26,805. Advertising and promotion 12 5,679. 1,180. <u>516.</u> 7,375. Office expenses 13 7,224. 7,224. Information technology 14 15 Royalties 9,753. 22,292. 139.325. 107,280. 16 Occupancy \_\_\_\_\_ 3.258. 46,542. 35,837. 7.447. 17 Payments of travel or entertainment expenses for any federal, state, or local public officials 3,393. 1.484. 21,204. 16,327. Conferences, conventions, and meetings 19 20 Interest Payments to affiliates 21 9,443. 9.443. Depreciation, depletion, and amortization 22 14,619. 11,257. 2,387. 975. Insurance 23 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 ().) 259,835. 259,835. FILM EXPENSE BANK AND CREDIT CARD FE 17,757. <del>17,</del>757. 15,544. 10,881. 2,487. 2,176. c SUPPLIES 2,244. 982. 14,026. 10,800. d MISCELLANEOUS 1.795. <u>2.166.</u> 21,057. 25,018. e All other expenses 80,285. 178,018. 1,447,181. 1,188,878. Total functional expenses. Add lines 1 through 24e 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 T if following SOP 98-2 (ASC 958-720)

12112\_1

Part )	X	Balance Sheet					
		Check if Schedule O contains a response or no	te to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
-	1	Cash - non-interest-bearing			19,025.	1	17,419.
	2	Savings and temporary cash investments			2		
- 1		Pledges and grants receivable, net				3	
		Accounts receivable, net			22,055.	4	27,141.
		Loans and other receivables from current and for					
"		trustees, key employees, and highest compens					ł
ı		Part II of Schedule L			'	5	
e	6	Loans and other receivables from other disqual	fied pe	sons (as defined under			
"		section 4958(f)(1)), persons described in section					
		employers and sponsoring organizations of sec					i
•		employees' beneficiary organizations (see instr)			;	6	
7		Notes and loans receivable, net				7	
2   6		inventories for sale or use				8	
1 7		Prepaid expenses and deferred charges			972.	9	
		Land, buildings, and equipment: cost or other	i I			Ť	
"	00	basis. Complete Part VI of Schedule D	1000	100,943.			
		Less: accumulated depreciation	10h	18,690.	16,582.	10e	82,253.
11	•	Investments - publicly traded securities	[ 140 ]			11	
12		Investments - other securities. See Part IV, line				12	
13		Investments - program-related. See Part IV, line				13	
14					14		
15		Other assets. See Part IV, line 11		62,610.	15	1,335.	
16		Total assets. Add lines 1 through 15 (must equ		121,244.	16	128,148.	
17		Accounts payable and accrued expenses	291.	17	24,555.		
18					18		
19		Grants payable		19			
20		Tax-exempt bond liabilities				20	
21		Escrow or custodial account liability. Complete			21		
- I .		Loans and other payables to current and former		46			
"		key employees, highest compensated employee					}
22		Complete Part II of Schedule L			•	22	1
i   2		Secured mortgages and notes payable to unrel				23	
24		Unsecured notes and loans payable to unrelate				24	
25		Other liabilities (including federal income tax, pa					
~	_	parties, and other liabilities not included on lines	-			1	
		Schoolule D	•		3,794.	25	9,613.
26	R	Total liabilities. Add lines 17 through 25			4,085.	26	34,168.
<del> </del>		Organizations that follow SFAS 117 (ASC 956			<u> </u>		
.		complete lines 27 through 29, and lines 33 ar				:	}
Ē 27	7	Unrestricted net assets				27	Ì
27 25 25 25 25 25 25 25 25 25 25 25 25 25	_	Temporarily restricted net assets				28	<del></del>
2						29	
§   ~	•	Organizations that do not follow SFAS 117 (A	SC 966	k check here ▶ X			
		and complete lines 30 through 34.		,,			
3 30	n.	Capital stock or trust principal, or current funds			0.	30	j o.
31		Paid-in or capital surplus, or land, building, or ed				31	0.
32		Retained earnings, endowment, accumulated in			117,159.	32	93,980.
2 3		Total net assets or fund balances			117,159.	33	93,980.
34		Total liabilities and net assets/fund balances			121,244.	34	128,148.
	*	TOTAL ROUNGES CHIC HOL GSSGLS/TURIC GOLD ICES					Form <b>990</b> (2013)

Form	1990 (2013) THE CINEFAMILY	<u> 26-17:</u>	34079	Pag	<sub>12</sub> 12		
Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI				<u>ப</u>		
			1 405	- 4	^		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,405				
2	Total expenses (must equal Part IX, column (A), line 25)	3	1,44				
3	Revenue less expenses. Subtract line 2 from line 1		, 60 7, 1!				
4							
5	Net unrealized gains (losses) on investments	5 _		Α.	~~		
6	Donated services and use of facilities	6	T 7	.,00	<u> </u>		
7	Investment expenses 7						
8	Prior period adjustments	8		7,50			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			<u>0.</u>		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,	1 . 1	0.5		٥.		
_	column (B))	10	93	3,98	<del>30.</del>		
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII			Yes	No.		
			<del></del>	163	<del></del>		
1	Accounting method used to prepare the Form 990: Cash X Accrual Cther		1 1				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.						
<b>2</b> a	Were the organization's financial statements compiled or reviewed by an independent accountant?		_   <del>2a</del>		<u> </u>		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewer	o on a					
	separate basis, consolidated basis, or both:		1 1	ŀ			
_	Separate basis Consolidated basis Both consolidated and separate basis		25	ł	x		
Ь	Were the organization's financial statements audited by an independent accountant?		··   <del>-23</del>				
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e uasis,					
	consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis		1 1	1			
		o outla					
¢	c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,						
	· · · · · · · · · · · · · · · · · · ·		.   <u>2c</u>	- 1			
•	If the organization changed either its oversight process or selection process during the tax year, explain in Sch As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si			1			
<b>J</b>		.केट <b>प्रा</b> ता	3a	1	x		
	Act and OMB Circular A-133?  If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?	irad audit	┈├ <del>┈</del> ┼	-+	<del></del>		
D	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		.   ab	ł			
	OF STORIES AND SELECTION OF SHIP CONTINUES OF STORIES O		Form	990 c	2013)		

### SCHEDULE A (Form 990 or 990-EZ)

Department of the Tressury Internel 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. Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Name of the organization

THE CINEFAMILY 26-1734079 Part T 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.) 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.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a coflege or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) X 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). I 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. d \_\_\_ Type III - Non-functionally integrated c \_\_\_\_ Type III - Functionally integrated a Type I b Type □ 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). 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 Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, No Yes 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) Provide the following information about the supported organization(s). (iii) Type of organization. (iv) is the organization (v) Did you notify the (vi) Is the organization in col. (i) Name of supported (vii) Amount of monetary (U) EIN n col. (i) listed in your governing document? organization in col. (described on tines 1-9) organization (I) organized in the U.S.? support (I) of your support? above or IRC section. (see instructions)) Yes Mo Yes Yes Mo Total LHA For Paperwork Reduction Act Notice, see the Instructions for Schedule A (Form 990 or 990-EZ) 2013

332021 09-25-13

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2013 THE CINEFAMILY 26-17340

[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.)

Sec	tion A. Public Support						<del></del> _
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not				1		]
	include any "unusual grants.")		•	<u></u>	<u> </u>		
2	Tax revenues levied for the organ-					}	į
	ization's benefit and either paid to	l		ſ			•
	or expended on its behalf				<u> </u>		
3	The value of services or facilities	l .	İ				ļ
	furnished by a governmental unit to	i		ł			}
	the organization without charge				<u> </u>	<u></u>	
4	Total. Add tines 1 through 3			ļ <del></del>	<u> </u>	ļ	<u> </u>
5	The portion of total contributions	ĺ		<u> </u>			
	by each person (other than a		ļ				
	governmental unit or publicly	l ·					
	supported organization) included	·	,	1	ŀ	İ	
	on line 1 that exceeds 2% of the	1	t				1
	amount shown on line 11,	•		•			f
	column (f)	<u> </u>		ļ			ļ
	Public support. Subtract line 5 from line 4.	<u> </u>		<u> </u>	<u> </u>	<u> </u>	
	tion B. Total Support				1	4 1 2242	1
	ndar year (or fiscal year beginning in)	(a) 2009	<u>(ъ) 2010</u>	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from tine 4		····-·-	-			ļ -
8	Gross income from interest,	ĺ					ľ
	dividends, payments received on				ł		
	securities loans, rents, royalties		ľ				
	and income from similar sources				<del> </del>		<del> </del>
9	Net income from unrelated business						
	activities, whether or not the			1			
	business is regularly carried on				<del>                                     </del>	<del>                                      </del>	<del> </del>
10	Other income. Do not include gain	i	i				
	or loss from the sale of capital	ĺ					
	assets (Explain in Part IV.)				<del>                                     </del>	<del>                                     </del>	<del> </del>
	Total support. Add lines 7 through 10		L		<u> </u>	401	1
	Gross receipts from related activities.					12	
13	First five years. If the Form 990 is for						- □
Sec	organization, check this box and stor tion C. Computation of Publ	ic Support Pe	rcentage				
_	Public support percentage for 2013 (			column (f))		14	%
	Public support percentage from 2012			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		15	96
	33 1/3% support test - 2013. If the					more, check this b	ox and
	stop here. The organization qualifies				************		▶□
ь	33 1/3% support test - 2012. If the	organization did no	at check a box on	Ine 13 or 16a, an	d line 15 is 33 1/39	6 or more, check t	his box
	and stop here. The organization qual						- I
17a	10% -facts-and-circumstances tes	t - 2013. If the orç	anization did not	check a box on lin	e 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						<u> </u>
ь	10% -facts-and-circumstances tes	t - 2012. If the org	panization did not	check a box on lin	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets ti						
	organization meets the "facts-end-cir-						▶∐
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17			
					Sch	edule A (Form 990	or 990-EZ) 2013

# Schedule A (Form 990 or 990-EZ) 2013 THE CINEFAMILY 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

_	demal and an agent moreon c	ACCUSE, PROCESS CO. 17.	D.D.C. V. E.I. V. V.							
Sec	ction A. Public Support					··-·	_			
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total			
1	Gifts, grants, contributions, and		ì		1					
	membership fees received. (Do not				1 .					
	include any "unusual grants.")	7,664.	114,736.	341,034.	607,591.	483,904.	1,554,929.			
2	Gross receipts from admissions,			_						
	merchandise sold or services per-	1	1		Ī		ľ			
	formed, or facilities furnished in any activity that is related to the	<b>j</b>								
	organization's tax-exempt purpose	508,126.	610,428.	786,900.	827,487	979,588.	3,712,529.			
3	Gross receipts from activities that									
_	are not an unrelated trade or bus-	[ ;								
	iness under section 513	ŀ					ŀ			
А	Tax revenues levied for the organ-									
~	ization's benefit and either paid to									
	or expended on its behalf									
_	•	·					<del> </del>			
9	The value of services or facilities				[	1				
	furnished by a governmental unit to									
_	the organization without charge	515,790.	725,164.	1 127 024	1 475 070	1,463,492,	5 267 459			
	Total. Add lines 1 through 5	313,790.	725,104.	1,127,934.	1,435,078.	1,403,452.	5,267,458.			
78	Amounts included on lines 1, 2, and					30 500	30 500			
	3 received from disqualified persons					32,500.	32,500.			
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						_ ا			
	emount on line 13 for the year						0.			
•	Add lines 7a and 7b					32,500.	32,500.			
8	Public support (Submotion 7c from Fre 6.)						5,234,958.			
Sec	ction B. Total Support			•		-				
Cale	ndar year (or fiscel year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total			
9	Amounts from line 6	515,790.	(b) 2010 725,164.	1,127,934.	1,435,078.	1,463,492.	5,267,458.			
	Gross income from interest,					_				
	dividends, payments received on						1			
	securities loans, rents, royalties and income from similar sources									
	Unrelated business taxable income	· -								
	(less section 511 taxes) from businesses									
	acquired after June 30, 1975									
		<u> </u>	<del></del>							
	Add fines 10a and 10b						<u> </u>			
11	Net income from unrelated business activities not included in line 10b.					ļ				
	whether or not the business is									
	regularly carried on									
12	Other income. Do not include gain						l			
	or loss from the sale of capital assets (Explain in Part IV.)				:	5,175.	5,175.			
13	Total support (Add lines 9, 10c, 11, and 12.)	515,790.	725,164.	1,127,934.	1,435,078.	1,468,667.	5,272,633.			
14	First five years. If the Form 990 is for	r the organization's	s first, second, thin	d, fourth, or fifth to	ex year as a sectio	n 501(c)(3) organi	zation,			
	check this box and stop here				-		<b>&gt;</b> □			
Sec	tion C. Computation of Publ	ic Support Pe	rcentage							
_	Public support percentage for 2013 (			cokumin (fi)		15	99.29 %			
	Public support percentage from 2012					16	%			
_	tion D. Computation of Inve			-1						
	17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f) 17 .00 %									
40	•	-	_ **			18	%			
10	t8 Investment income percentage from 2012 Schedule A, Part III, line 17									
195	. I <del></del> - 1									
-										
t	b 33 1/3% support tests - 2012. 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									
							' <b>?</b>			
<u>20</u>	Private foundation. If the organization	ın chid not check a	Dox on tine 14, 19	a, or 1910, check th						
3320	23 09-25-13				Sch	eculo A (Form 99	10 or 990-EZ) 2013			

### **SCHEDULE D**

(Form 990)

**Supplemental Financial Statements** 

Complete if the organization enswered "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.

Information about Schedule D (Form 980) and its instructions is at www.irs.gov/ipm990.

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

MUD CIMPUMMILY

**Employer identification number** 26-1734079

	IND CIMBERMINI		20 1/340/3
Pa			r Accounts.Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6. (a) Donor advised funds	(b) Funds and other accounts
	Total asymbos at and attended	Tay box as as well as the	(2). 425 416 646 456
1	Total number at end of year		<del>_</del>
2	Aggregate contributions to (during year)		<del></del>
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		£
5	Did the organization inform all donors and donor advisors in		
	are the organization's property, subject to the organization's		
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of		1 1.4 1 1.4
		- 1 BV-23 to Fa 2000 Flori	
Pa			IV, ene 7.
1	Purpose(s) of conservation easements held by the organization		To the Common department of the Common of th
	Preservation of land for public use (e.g., recreation or e		ically important land area
	Protection of natural habitet	Preservation of a certified	d historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form of a	a conservation easement on the last
	day of the tax year.		10.14.00 5.44 T. W.
			Held at the End of the Tax Year
8	Total number of conservation easements		
ь	•		
¢	Number of conservation easements on a certified historic str		
đ	Number of conservation easements included in (c) acquired		
	listed in the National Register		[24]
3	Number of conservation easements modified, transferred, re-	leased, extinguished, or terminated by the or	ganization during the tax
	year ▶		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above		
	and section 170(h)(4)(B)(a)?		Yes LNo
9	In Part XIII, describe how the organization reports conservati		
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes the	organization's accounting for
	conservation easements.		
Pa	t III Organizations Maintaining Collections o		er Simuar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, fine 8.	
1a	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public ed	hibition, education, or research in furtherance	e of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri		
ь	tf the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, e	ducation, 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		
	(iii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tre	esures, or other similar assets for financial gr	ain, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	
	Revenues included in Form 990, Part VIII, line 1		
	Assets included in Form 990, Part X		

Schedule D (Form 990) 2013

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

Schedule D (Form 990) 2013

Complete if the organization enswered "Yes" !	to Form 990, Part IV, line		
(a) Description of security or category (moluting name of security)	(b) Book value		luation: Cost or end-of-year market value
1) Financial derivatives			
Closely-held equity interests			
3) Other			
(A)			
(B)			<u> </u>
(C)			
(D)			
(E)	<del></del>	<del></del>	
(F)			
(G)	<del> </del>	<del></del>	
(1-0)		-	
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶			
Part VIII Investments - Program Related.		1	
Complete if the organization answered "Yes" t	n Form 900 Part IV line	11c See Form 990 D	ort Y line 13
(a) Description of investment	(b) Book value		huation: Cost or end-of-year market value
	4-1	1-4	
(1)			
(2)			<del></del>
(3)		<del>                                     </del>	<del></del>
(4)		· <u> </u>	
(5)			<del></del>
			<u> </u>
		<del></del>	
(8)	<del></del>		
(9)  Total: (Col. (b) must equal Form 990, Part X, col. (8) line 13.) ▶		<del></del>	
Part IX Other Assets.  Complete if the organization answered "Yes" to (a) [	o Form 990, Part IV, line Description	11d. See Form 990, P	ert X, fine 15. (b) Book vatue
(1)			
(2)			
(3)			
(4)	<u>·</u>		
(5)			
(6)			
(7)		<u> </u>	
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X   Other Liabilities.	15.)		
Complete if the organization answered "Yes" t	to Form 990, Part IV, line	11e or 11f. See Form	990, Part X, line 25
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2) PAYROLL TAXES PAYABLE	<del></del>	563.	
(3) SALES TAX PAYABLE		4,695.	
(4) OTHER LIABILITIES		4,355.	
	<del></del>		
(5)	<del> </del>		
	<del>- ·  </del>		. •
<u></u>	<del></del>		
<u>(8)</u>	<del></del>		•
(9)	25)	9,613.	
Fotal. (Column (b) must equal Form 990, Part X, col. (B) line 2. Liability for uncertain tax positions. In Part XIII, provide			pageint etataments that asserts the
e i minumi me imesmon tov noemone in Loit IIII. Afficia			

Schedule D (Form 990) 2013

12112 1

#### SCHEDULE L

## **Transactions With Interested Persons**

(Form 990 or 990-EZ) ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

QMB No. 1545-0047

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Information about Schedule L (Form 990 or 990-EZ) and its instructions is at warm its con-

Open To Public

Name of the organization	1
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Internes Hoverus Servi	~   •						,		www.irs.govi				spec		,	
Name of the orga	anization													iou ur	ımber	
THE CINEFAMILY										26-1734079						
Part   Ex	cess Bene	fit Trans	acti	ORS (section 5	01(c)(3	i) and s	section 501(c)(4) org	janiza:	tions only).					•		
Cor	molete if the o	proanization	ansv	wered "Yes" on	Form 9	990, Pa	ert IV, line 25a o <u>r 25</u> i	b, or F	form 990-EZ, F	Part V,	line 40	0ъ.				
1				(b) Relationship between disqualified									(d)	Corre	cted?	
(a) Name of disqualified person			person and organization				··· (	c) Des	cription of trar	rsactio	XII			Yes N		
							<del></del>	<del></del>					1	Ť		
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		=		=			qualified persons du									
section 495	·8		••••					<b></b> -			► S	$\overline{}$				
3 Enter the ar	mount of tax,	if any, on fin	ю 2, (	above, reimburs	ed by	the on	ganization				<b>&gt;</b> 3					
	1	77 P		erested Per			_		_							
L J																
	-	_					, Part V, line 38a or i	Form !	990, Part IV, 🗈	10 26;	Or if th	ne orga	mizati	on		
repr	orted an amo			, Part X, line 5, (				,		т		ELI AK	hravar	H		
(a) Nam		(b) Relation				ento or atha	(e) Original	(0)	(f) Balance due		in 	by board or			aft centern	
interested person with o		with organiz	200N	of loan	organi	zation?	principal amount	ļ		default?		committee?		ayree		
					To	From				Yes	No	Yes	No	Yes	No	
	- <del></del>									<u> </u>	<u> </u>	<u> </u>			<u> </u>	
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Total  Part III   Gr	ante or Ae	eielance	Flor	refiting Inter	reste	d Pe	ROOS.		<del>-</del>	<u> </u>		1				
				_												
				vered "Yes" on				_	(-0.T		- 1		\ D.:-		4	
(a) Name of interested person		(b) Relationship between interested person and the organization			(c) Amount of assistance		(d) Type of assistance			(e) Purpose of assistance						
					33233		22312101100									
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2013

### **SCHEDULE 0** (Form 990 or 990-EZ)

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.

QMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public

**Employer identification number** Name of the organization 26-1734079 THE CINEFAMILY FORM 990, PART VI, SECTION A, LINE 6:

EXPLANATION: THIS ORGANIZATION HAS ONE VOTING MEMBER WITH SUCH RIGHTS AND PRIVILEGES AS ARE CONTAINED IN THE ARTICLES OF INCORPORATION AND BYLAWS OF THE CORPORATION AND CONFERRED UPON MEMBERS BY THE CALIFORNIA NONPROFIT CORPORATION LAW. FORM 990, PART VI, SECTION A, LINE 8B: EXPLANATION: THE ORGANIZATION DID NOT MAINTAIN A COMMITTER WITH AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY. FORM 990, PART VI, SECTION B, LINE 11: EXPLANATION: THE ORGANIZATION'S FORM 990 IS PREPARED BY AN OUTSIDE ACCOUNTING FIRM AND WHO PROVIDE A COPY OF THE FORM 990 TO THE PRESIDENT AND SECRETARY/TREASURER FOR REVIEW. ONCE REVIEWED AND APPROVED BY THEM, FORM 990 IS THEN BLECTRONICALLY FILED. FORM 990, PART VI, SECTION C, LINE 18:

EXPLANATION: THE ORGANIZATION'S FORM 990 IS AVAILABLE ONLINE AT www.guidestar.org.

EXPLANATION: COPIES OF THE GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE AVAILABLE BY WRITTEN OR ORAL REQUEST TO ANY MEMBER OF THE BOARD OF DIRECTORS, THE PRESIDENT OF THE ORGANIZATION, OR EXECUTIVE DIRECTOR.

UHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 332211 09-04-13

FORM 990, PART VI, SECTION C, LINE 19:

Schedule O (Form 990 or 990-EZ) (2013)