### \*\* PUBLIC DISCLOSURE COPY \*\*

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

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

6 Inspection

Α	For the	e 2016 calendar year, or tax year beginning and end	ling		
В	Check if applicable	C Name of organization		D Employer identifie	cation number
	Addres	THE FILM FOUNDATION, INC.			
	Name change			95-4	244945
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	m/suite	E Telephone number	r
	Final return/	7920 SUNSET BLVD., SIXTH FLOOR		323-	436-5060
_	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	1,992,077.
L	Ameno	LOS ANGELES, CA 90040		H(a) Is this a group re	
	Applic tion pendir			for subordinates	
		SAME AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No
		empt status: $X = 501(c)(3) = 501(c)(0)$ (insert no.) 4947(a)(1) or	527	· ·	list. (see instructions)
		te: WWW.FILM-FOUNDATION.ORG		H(c) Group exemption	
			<b>L</b> Year o	of formation: 1990  N	State of legal domicile; CA
P		Summary	י ע כוזענו	TON TO DED	TCXMED $MO$
S	1	Briefly describe the organization's mission or most significant activities: THE FOUR PROTECTING AND PRESERVING MOTION PICTURE H	LCLU.	DA IION IS DED	ICATED TO
nan		Check this box if the organization discontinued its operations or disposed			
Activities & Governance	1			l I	15
ဗ္		Number of voting members of the governing body (Part VI, line 1a)  Number of independent voting members of the governing body (Part VI, line 1b)			15
ۆ ئ		Total number of individuals employed in calendar year 2016 (Part V, line 2a)			8
itie		Total number of volunteers (estimate if necessary)			40
ξį		Total unrelated business revenue from Part VIII, column (C), line 12			0.
⋖		Net unrelated business taxable income from Form 990-T, line 34			0.
		·		Prior Year	Current Year
Φ	8	Contributions and grants (Part VIII, line 1h)		1,969,165.	1,986,809.
nue		Program service revenue (Part VIII, line 2g)		0.	0.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		10,600.	5,268.
ш	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,979,765.	1,992,077.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		619,371.	43,682.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		582,306.	663,640.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Ä	_b	Total fundraising expenses (Part IX, column (D), line 25)   149,448	·	679,863.	1,059,788.
	1/	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,881,540.	1,767,110.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		98,225.	224,967.
J.	19	Revenue less expenses. Subtract line 18 from line 12		ginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		1,924,684.	2,839,482.
ASS	21	Total liabilities (Part X, line 26)		109,248.	788,145.
Net	22	Net assets or fund balances. Subtract line 21 from line 20		1,815,436.	2,051,337.
P	art II	Signature Block			· ·
Unc	ler pena	lties of perjury, I declare that I have examined this return, including accompanying schedules and	d stateme	ents, and to the best of my	y knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which p	preparer	has any knowledge.	
Sig	ın	Signature of officer		Date	
He	re	JENNIFER AHN, MANAGING DIRECTOR			
		Type or print name and title	חו	ata I	II DTIN
D - '		Print/Type preparer's name  Praparer Signature		tate Check Check Cif Self-employee	PTIN
Pai		BARED DILACAR	U		P00157338
	parer	Firm's name CLIFTONLARSONALLEN LLP Firm's address 301 N. LAKE AVE., SUITE 900		Firm's EIN	41-0746749
บริย	Only	PASADENA, CA 91101		Dhone no 62	6-793-3600
Ma	v tho IE	RS discuss this return with the preparer shown above? (see instructions)		Filotie IIO.O Z	X Yes No
ivid	y uite If	TO GISCUSS THIS TETALL WITH THE PREPARE SHOWN ADDVE! (SEE HISHUCHORS)			163 180

4d Other program services (Describe in Schedule O.)

(Expenses \$ 304,041. including grants of \$

**4e** Total program service expenses ▶

1,451,177.

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) (Revenue \$

#### 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)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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		Х
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		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? If "Yes," complete Schedule D, Part I	6		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? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
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? If "Yes," complete Schedule D, Part VII	11b		Х
С	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? If "Yes," complete Schedule D, Part VIII	11c		Х
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? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	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		X
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				
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		v	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any		v	
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	4.0		X
4-	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			X
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		X
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40		Х
	complete Schedule G, Part III	19		_ 22

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#### Part IV Checklist of Required Schedules (continued)

			Yes	No
<b>20</b> a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic 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 or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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? If "Yes," complete			
	Schedule J	23	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? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
·	any tax-exempt bonds?	24c		
А	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	274		
254	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h		ZJa		<del></del>
D	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? If "Yes," complete	054		x
00	Schedule L, Part I	25b		
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 "Yes,"			
	complete Schedule L, Part II	26		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			٠,,
	of any of these persons? If "Yes," complete Schedule L, Part III	27		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 current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	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		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
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		Х
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		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	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, line 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			<del></del> -
O1	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?	"		<del></del>
30		38	Х	
	Note. All Form 990 filers are required to complete Schedule O	J00	21	<u> </u>

# Form 990 (2016) THE FILM FOUNDATION, INC. Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O Contains a response of note to any line in this Part v			<u>ш</u>
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 18			
	Effect the fluthber of Forms w-2d included in line 1a. Effect -0-inflot applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	4-		
20	(gambling) winnings to prize winners?  Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1c		
Za				
h	filed for the calendar year ending with or within the year covered by this return 2a   5    If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		х
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5а	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		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			х
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b		
	Did the organization notify the donor of the value of the goods or services provided?  Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	76		
·	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
р 11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against			
_	amounts due or received from them.)			
12a	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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	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			
	Enter the amount of reserves on hand			X
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	-	
D	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b Forn	990	(2016)
		1 011	. 555	(2010)

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 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 1a 15			
	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.			
b	Enter the number of voting members included in line 1a, above, who are independent 15			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1		
	tale Enter the number of voting members of the governing body at the end of the tax year  If there are material differences in voting finish smong members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Sheedule 0.  In the state of the provided broad authority to an executive committee or similar committee, explain in Sheedule 0.  In the state of the provided broad authority to an executive committee or similar committee, explain in Sheedule 0.  In the provided broad authority to an executive committee or similar committee, explain in Sheedule 0.  In the provided broad authority of the provided broad authority of the committee of the provided broad authority of the committee of the provided broad authority of the committee of the provided broad authority of the committee of th			
3				
		3		Х
4		4		Х
5		5		Х
6		6	Х	
7a				
	more members of the governing body?	7a	Х	
b				
	persons other than the governing body?	7b	Х	
8				
а	The governing body?	8a	Х	
b		8b	Х	
9				
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	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		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	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	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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?			
а		15a		X
b		15b		Х
	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			
		16a		X
b	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			
		16b		
Sec				
17	·			
18		availab	le	
	·			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	CLIFTONLARSONALLEN - 626-793-3600			
	301 N. LAKE AVE, # 900, PASADENA, CA 91101			

Form **990** (2016)

# Part VII 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.

oxdet 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 hours per	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					h an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer 0		Highest compensated employee	Ĺ	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) MARTIN SCORSESE	15.00									0
CHAIR	1 00	Х		Х				0.	0.	0.
(2) PARIS BARCLAY	1.00									
PRESIDENT	1 00	Х		Х				0.	0.	0.
(3) MICHAEL APTED	1.00	١								
SECRETARY/TREASURER	1 00	Х		Х				0.	0.	0.
(4) WOODY ALLEN	1.00									_
DIRECTORS	1 00	Х						0.	0.	0.
(5) PAUL THOMAS ANDERSON	1.00	,,								_
DIRECTORS	1 00	Х						0.	0.	0.
(6) WES ANDERSON	1.00	٠,,							_	_
DIRECTORS	1 00	Х						0.	0.	0.
(7) FRANCIS FORD COPPOLA	1.00	٠,,							_	_
DIRECTORS	1 00	Х						0.	0.	0.
(8) CLINT EASTWOOD	1.00	٠,,							_	_
DIRECTORS	1 00	Х						0.	0.	0.
(9) CURTIS HANSON	1.00	Ψ.							_	_
DIRECTORS	1 00	Х						0.	0.	0.
(10) PETER JACKSON	1.00	Ψ.						0.	_	_
DIRECTORS	1.00	Х						0.	0.	0.
(11) ANG LEE	1.00	X						0.	0.	0.
DIRECTORS (12) CHOPGE LUGAG	1.00	^						0.	0.	<u> </u>
(12) GEORGE LUCAS DIRECTORS	1.00	X						0.	0.	0.
	1.00	Δ						0.	0.	<u> </u>
(13) CHRISTOPHER NOLAN	1.00	X						0.	0.	0.
01RECTORS (14) ALEXANDER PAYNE	1.00	^						0.	0.	<u> </u>
DIRECTORS	1.00	X						0.	0.	0.
(15) ROBERT REDFORD	1.00	^						0.	0.	<u> </u>
DIRECTORS	1.00	X						0.	0.	0.
(16) STEVEN SPIELBERG	1.00	^						0.	0.	<u></u>
DIRECTORS	1.00	X						0.	0.	0.
(17) ELLIOT SILVERSTEIN	8.00				$\vdash$		$\vdash$	0.	· ·	<u></u>
CHAIR, ARTISTS RIGHT COUN		1		х				24,000.	0.	0.
COORT 11 11 16	1			-11	<u> </u>			24,000	<u> </u>	Form <b>990</b> (2016)

632007 11-11-16 Form **990** (2016)

Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, and	d Hi	ighe	st (	Compensated Employe	es (continued)				
			Position (do not check more than one box, unless person is both an				one	(D) Reportable	(E) Reportable		l	(F)	
	week (list any hours for related organizations below line)	tee or director		officer			itee)	compensation from the organization (W-2/1099-MISC)	compensation from related organization (W-2/1099-MI	d ns	com fr org an	nount other opensation om the canizate anization	ation e ion ed
(18) MARGARET BODDE EXECUTIVE DIRECTOR	50.00			х				156,256.		0.	2	8,9	96.
(19) JENNIFER AHN	50.00												
MANAGING DIRECTOR				Х				137,308.		0.			0.
		-											
1b Sub-total							<b></b>	317,564.		0.	2	8,9	
c Total from continuation sheets to Part V	II, Section A							317,564.		0.	2	0 0	0.
d Total (add lines 1b and 1c)  2 Total number of individuals (including but r							<u></u> ho r	<u> </u>	000 of reportab		28,996.		
compensation from the organization	iot iii iii iiod to ti	1000		Ju u		o,		coowed more than prov	,,000 01 10portus	,,,,			2
												Yes	No
3 Did the organization list any <b>former</b> officer, line 1a? If "Yes," complete Schedule J for s								highest compensated e			3		Х
4 For any individual listed on line 1a, is the su													
and related organizations greater than \$15											4	Х	
5 Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com	•				•			•			5		Х
Section B. Independent Contractors	ipiete Scriedar	<del>C                                    </del>	01 30	ucn	pers	SOIT							
1 Complete this table for your five highest co										npens	ation	from	
the organization. Report compensation for (A)	the calendar y	ear (	enai	ng v	vith	or w	ıtnı	n the organization's tax (B)	year.		((	C)	
Name and business	address	N	INC	Ξ				Description of s	services	C	ompe		n
2 Total number of independent contractors ( \$100,000 of compensation from the organi	•	ot li	mite	d to		se li: 0	ste	d above) who received r	nore than				

Pa	rt VI	III	Statement of Rever	nue					
			Check if Schedule O cont	ains a response	or note to any lin	ne in this Part VIII			
				·	·	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
nts	1 a	a F	ederated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues						
s, ( Am			undraising events						
Gift	(	d R	Related organizations	1d					
JS, imi	•	e G	overnment grants (contribut	ions) <b>1e</b>					
tio er S	f	fΑ	II other contributions, gifts, gran						
ig H		si	imilar amounts not included abo	ve 1f 1,	986,809.				
ont od (			oncash contributions included in lines			1 006 000			
<u>a</u> <u>C</u>	ŀ	h T	otal. Add lines 1a-1f			1,986,809.			
					Business Code				
Program Service Revenue	2 6	_							
ser.		b _							
m S		c _							
gra Re		d _							
Pro		e _	Il other pregram comice reve						
			III other program service rever otal. Add lines 2a-2f						
_	3		nvestment income (including						
	Ü		ther similar amounts)			5,268.			5,268.
	4		ncome from investment of ta			, , , , , , , ,			, , , , , , , , , , , , , , , , , , , ,
	5		Royalties		_				
			,	(i) Real	(ii) Personal				
	6 a	a G	Gross rents	.,					
	ŀ	b L	ess: rental expenses						
	(		Rental income or (loss)						
	(	d N	let rental income or (loss)						
	7 a	a G	Gross amount from sales of	(i) Securities	(ii) Other				
		a	ssets other than inventory						
	ŀ	b L	ess: cost or other basis						
			nd sales expenses						
			Sain or (loss)						
			let gain or (loss)						
ne	8 8		Gross income from fundraisin	g events (not					
ven			ncluding \$						
Other Revenue			ontributions reported on line	=					
her			ess: direct expenses						
ğ			let income or (loss) from fund						
			Gross income from gaming ac						
	•		Part IV, line 19						
	ŀ		ess: direct expenses						
			let income or (loss) from gam						
			Gross sales of inventory, less						
			nd allowances						
	ŀ	b L	ess: cost of goods sold	b					
	(	c N	let income or (loss) from sale	s of inventory	<b>&gt;</b>				
			Miscellaneous Revenu	ie	Business Code				
	11 a	a _							
	ŀ	b _							
		c _							
			Il other revenue						
			otal. Add lines 11a-11d		<b>&gt;</b>	1.992.077.	0.	0.	5.268.
	12	- 1	otal revenue. See instructions			ユ・フラム・リ / / •	الملاا ا	l l l	. J.ZDO.

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 (D) (C) Do not include amounts reported on lines 6b. Program service expenses Management and general expenses Total expenses Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 ..... Grants and other assistance to foreign organizations, foreign governments, and foreign 43,682. 43,682. individuals. See Part IV, lines 15 and 16 Benefits paid to or for members ..... Compensation of current officers, directors, 346,560. 283,307. 33,838. 29,415. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 265,760. 157,525. 90,140. 18,095. 7 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 1,618. 1,986. 14,832. 11,228. Other employee benefits 9 36,488. 29,282. 3,393. 3,813. Payroll taxes 10 Fees for services (non-employees): a Management ..... 41,872. 41,872. Legal 10,100. 10,100. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other, (If line 11g amount exceeds 10% of line 25, 124,299. 120,331. 3,968 column (A) amount, list line 11g expenses on Sch O.) 2,113. 13,192. 15,440. 135. Advertising and promotion 12 79,874. 6,769. 71,570. 1,535. Office expenses 13 Information technology 14 Royalties 15 16 Occupancy 79,746. 64,586. 15,160. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Payments to affiliates \_\_\_\_\_ 21 7,874. 7,874. Depreciation, depletion, and amortization ..... 22 8,420. 8,420. 23 Other expenses. Itemize expenses not covered 24 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.) 686,535. 609,204. 0. 77,331. SPECIAL PROGRAMS 5,398. GRAPHIC DESIGN 5,398 TAXES & LICENSES 230. 230. С d

Form **990** (2016)

149,448.

е

25

All other expenses

Check here

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.

if following SOP 98-2 (ASC 958-720)

1,451,177.

166,485.

1,767,110

#### Check if Schedule O contains a response or note to any line in this Part X ... Beginning of year End of year 1,431,663. 2,169,183. Cash - non-interest-bearing 1 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 4 **5** Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other 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 instr). Complete Part II of Sch L Assets 6 Notes and loans receivable, net 7 8 Inventories for sale or use Prepaid expenses and deferred charges 9 **10a** Land, buildings, and equipment: cost or other 67,009. basis. Complete Part VI of Schedule D \_\_\_\_\_ 10a 43,382. 23,627. b Less: accumulated depreciation 10b 27,957. 10c 465,064. 646,672. Investments - publicly traded securities 11 11 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 1,924,684. 2,839,482. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 82,623. 17 135,212. 17 Accounts payable and accrued expenses 18 18 Grants payable 19 19 Deferred revenue Tax-exempt bond liabilities 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, \_iabilities key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of 26,625. 652,933. Schedule D 109,248. 788,145. Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here \( \bigvee \bigvee X \) and complete lines 27 through 29, and lines 33 and 34. **Net Assets or Fund Balances** 1,815,436. 2,051,337. 27 Unrestricted net assets 27 Temporarily restricted net assets 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 32 2,051,337. 1,815,436. Total net assets or fund balances 33 33 1,924,684. 2,839,482. Total liabilities and net assets/fund balances \_\_\_\_\_\_

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,99		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,76		
3	Revenue less expenses. Subtract line 2 from line 1	3	22	4,9	67.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,81		
5	Net unrealized gains (losses) on investments	5	1	0,9	34.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	2,05	1,3	37.
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
1	Accounting method used to prepare the Form 990: Cash X Accrual 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?		. 2a	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		. 2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		. 2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		. 3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		. 3b		
			Form	990	(2016)

#### **SCHEDULE A**

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

## **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

Name of the organization

THE FILM FOUNDATION, INC.

Employer identification number

95-4244945

Pa	ırt I	Reason for Public	Charity Status		omplete th	is part.) Se	ee instructions.	3 1211313
		ization is not a private found					oo mondonono.	
	organ	•	•		•	•	1V A V:\	
1	H	A church, convention of ch	•				I)(A)(I).	
2	$\vdash$	A school described in <b>sect</b>						
3	Н	A hospital or a cooperative						
4		A medical research organiz	ation operated in co	njunction with a hospital	l described	d in <b>sectio</b>	n 170(b)(1)(A)(iii). Enter	the hospital's name,
		city, and state:						
5		An organization operated for	or the benefit of a co	llege or university owned	d or opera	ted by a g	overnmental unit describ	oed in
		section 170(b)(1)(A)(iv). (C	Complete Part II.)					
6		A federal, state, or local go	vernment or governn	nental unit described in s	section 17	70(b)(1)(A)	(v).	
7	X	An organization that norma						public described in
		section 170(b)(1)(A)(vi). (C			3		J	
8		A community trust describe		(1)(Δ)(vi) (Complete Part	+ II )			
9	$\Box$	An agricultural research org				ad in coni	unction with a land-grant	college
9		-				-		*
		or university or a non-land-o	grant college of agric	ulture (see iristructions).	Enter the	marrie, city	, and state of the colleg	le or
40		university:						
10		An organization that norma	•	-	-		· · · · · · · · · · · · · · · · · · ·	-
		activities related to its exen		• •	` '		• •	· ·
		income and unrelated busing	ness taxable income	(less section 511 tax) from	om busine	sses acqu	ired by the organization	after June 30, 1975.
		See <b>section 509(a)(2).</b> (Co	mplete Part III.)					
11	Щ	An organization organized a	and operated exclus	ively to test for public sa	ifety. See s	section 50	)9(a)(4).	
12		An organization organized a	and operated exclus	ively for the benefit of, to	perform t	the functio	ons of, or to carry out the	e purposes of one or
		more publicly supported or	ganizations describe	ed in <b>section 509(a)(1)</b> o	r section :	509(a)(2).	See <b>section 509(a)(3).</b> 0	Check the box in
		lines 12a through 12d that	describes the type of	of supporting organizatio	n and com	nplete lines	s 12e, 12f, and 12g.	
а		Type I. A supporting orga	anization operated, s	supervised, or controlled	by its sup	ported org	ganization(s), typically by	giving
		the supported organization	on(s) the power to re	gularly appoint or elect a	a majority	of the dire	ctors or trustees of the s	supporting
		organization. You must o	complete Part IV, Se	ections A and B.				
b		Type II. A supporting org	-		tion with it	s support	ed organization(s), by ha	vina
		control or management of						
		organization(s). You mus					g	
c		☐ Type III functionally inte	- · · · · · · · · · · · · · · · · · · ·		in connec	tion with :	and functionally integrate	ed with
٠		its supported organizatio					• •	od with,
d		Type III non-functionally		•				ization(a)
							• • • • •	
		that is not functionally int	•	• .	•		•	iveriess
		requirement (see instruct	•	- ·				
е		☐ Check this box if the orga					ı Type I, Type II, Type III	
		functionally integrated, or	• •	nally integrated support	ing organiz	zation.		
f		er the number of supported o						
<u> </u>		vide the following information			(iv) Is the orga	nization listed	(-) (	( - : ) A
	(	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10	in your governi	ng document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
		organization		above (see instructions))	Yes	No	support (see instructions)	support (see instructions)
Tota	al							

### 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	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1,953,257.	1,988,794.	1,987,415.	1,969,165.	1,986,809.	9,885,440.
2	Tax revenues levied for the organ-						
	ization'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	1,953,257.	1,988,794.	1,987,415.	1,969,165.	1,986,809.	9,885,440.
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)						5,601,180.
6	Public support. Subtract line 5 from line 4.						4,284,260.
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 4	1,953,257.	1,988,794.	1,987,415.	1,969,165.	1,986,809.	9,885,440.
	Gross income from interest,	, ,	, ,	, ,	, ,	, ,	
Ū	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	14,445.	11,186.	11,409.	10,600.	5,268.	52,908.
9	Net income from unrelated business			,		7 - 7 - 7	
Ŭ	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						9,938,348.
12	Gross receipts from related activities,	etc (see instruction	ne)			12	2,200,010.
13	First five years. If the Form 990 is for			I fourth or fifth ta	l v vear as a section		
.0	organization, check this box and <b>stor</b>				•	1301(0)(0)	
Sec	ction C. Computation of Publ						
14	Public support percentage for 2016 (	line 6. column (f) di	vided by line 11. co	olumn (f))		14	43.11 %
15	Public support percentage from 2015					15	41.61 %
16a	33 1/3% support test - 2016. If the o				_	ore, check this box	and
	stop here. The organization qualifies	· ·		•		,	$\triangleright$ X
b	33 1/3% support test - 2015. If the						s box
	and <b>stop here.</b> The organization qual	-					
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac	ū					*
	meets the "facts-and-circumstances"				-	-	
h	10% -facts-and-circumstances tes						
~	more, and if the organization meets the	-					2,3 01
	organization meets the "facts-and-circ		•				
12	Private foundation. If the organization			·	,		
-10	i invate roundation. Il the organizatio	an ala not oncon a l	JOA OIT III IC TO, TOA	, 100, 17a, 01 17D	, oncor and box a	na see manuellons	<u> </u>

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

(Complete only if you checked the box on line 10 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.)

Se	ction A. Public Support		,				
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(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 per-						
	formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization'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						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	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						
(	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support					_	
Cale	endar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(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						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
(	Add lines 10a and 10b						
11							
	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 VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organization's	s first, second, thi	rd, fourth, or fifth t	ax year as a section	on 501(c)(3) organi	zation,
							<u></u> ▶∟⊥
	ction C. Computation of Publ					11	
	Public support percentage for 2016 (I					15	%
	Public support percentage from 2015					16	%
	ction D. Computation of Inves					T.=1	
	Investment income percentage for 20					17	%
	Investment income percentage from 2					18	%
198	33 1/3% support tests - 2016. If the						
	more than 33 1/3%, check this box a						
k	33 1/3% support tests - 2015. If the	•			•	•	
00	line 18 is not more than 33 1/3%, che						
70	Private tolingation if the organization	D DIO DOT CDACK 3	$DDV \Delta D IID \Delta T/I = 10$	n ar iun chackt	THE DAY SHA CAA IN	CITITOTIONS	

#### Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	2		
	3a		
	3b		
	35		
	3с		
	30		
	A -		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	30		
	6		
	7		
	8		
	9a		
	9b		
	9с		
	10a		
	iva		
	106		
	10b	\	0040
m 9	90 or 99	JU-EZ)	2016

Pa	rt IV   Supporting Organizations <sub>(continued)</sub>			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations			
	, , , , , , , , , , , , , , , , , , ,		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
000	tion of Type it oupporting organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		163	NO
•	or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
		1		
800	the supported organization(s). tion D. All Type III Supporting Organizations	<u>'</u> '		<u> </u>
<u> </u>	tion b. All Type in Supporting Organizations		Vaa	No
	Did the executation provide to each of its supported executations, by the last day of the fifth month of the		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
_	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Pa	rt V   Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orga	nizations			
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All					
	other Type III non-functionally integrated supporting organizations must co	mplete S	ections A through E.			
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)		
1	Net short-term capital gain	1				
2	Recoveries of prior-year distributions	2				
3	Other gross income (see instructions)	3				
4	Add lines 1 through 3	4				
5	Depreciation and depletion	5				
6	Portion of operating expenses paid or incurred for production or					
	collection of gross income or for management, conservation, or					
	maintenance of property held for production of income (see instructions)	6				
7	Other expenses (see instructions)	7				
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8				
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)		
1	Aggregate fair market value of all non-exempt-use assets (see					
	instructions for short tax year or assets held for part of year):					
а	Average monthly value of securities	1a				
b	Average monthly cash balances	1b				
С	Fair market value of other non-exempt-use assets	1c				
d	Total (add lines 1a, 1b, and 1c)	1d				
е	Discount claimed for blockage or other					
	factors (explain in detail in Part VI):					
2	Acquisition indebtedness applicable to non-exempt-use assets	2				
3	Subtract line 2 from line 1d	3				
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,					
	see instructions)	4				
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
6	Multiply line 5 by .035	6				
7	Recoveries of prior-year distributions	7				
8	Minimum Asset Amount (add line 7 to line 6)	8				
Sect	ion C - Distributable Amount			Current Year		
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1				
2	Enter 85% of line 1	2				
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3				
4	Enter greater of line 2 or line 3	4				
5	Income tax imposed in prior year	5				
6	Distributable Amount. Subtract line 5 from line 4, unless subject to					
	emergency temporary reduction (see instructions)	6				
7	Check here if the current year is the organization's first as a non-functional	ly integrat	ted Type III supporting org	anization (see		
	instructions).					

Schedule A (Form 990 or 990-EZ) 2016

Pai	LV	Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations <sub>(continued)</sub>	
Secti	on D -	Distributions		,	Current Year
1	Amou	nts paid to supported organizations to accomplish exe	mpt purposes		
2	Amou	nts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organi	zations, in excess of income from activity			
3	Admir	nistrative expenses paid to accomplish exempt purpose	es of supported organization	ns	
4	Amou	nts paid to acquire exempt-use assets			
5	Qualif	ied set-aside amounts (prior IRS approval required)			
6	Other	distributions (describe in Part VI). See instructions			
7	Total	annual distributions. Add lines 1 through 6			
8	Distrib	outions to attentive supported organizations to which the	ne organization is responsive	9	
	(provi	de details in <b>Part VI</b> ). See instructions			
9	Distrib	outable amount for 2016 from Section C, line 6			
10	Line 8	amount divided by Line 9 amount			
			(i)	(ii)	(iii)
	_	5	<b>Excess Distributions</b>	Underdistributions	Distributable
Secti	on E -	Distribution Allocations (see instructions)		Pre-2016	Amount for 2016
1	Distrib	outable amount for 2016 from Section C, line 6			
2	Under	distributions, if any, for years prior to 2016 (reason-			
	able c	ause required- explain in Part VI). See instructions			
3	Exces	s distributions carryover, if any, to 2016:			
а					
b					
С	From	2013			
d	From	2014			
е	From	2015			
f	Total	of lines 3a through e			
g	Applie	ed to underdistributions of prior years			
h	Applie	ed to 2016 distributable amount			
i	Carry	over from 2011 not applied (see instructions)			
j	Rema	inder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distrib	outions for 2016 from Section D,			
	line 7:	\$			
а	Applie	d to underdistributions of prior years			
b	Applie	d to 2016 distributable amount			
С	Rema	inder. Subtract lines 4a and 4b from 4			
5	Rema	ining underdistributions for years prior to 2016, if			
	any. S	Subtract lines 3g and 4a from line 2. For result greater			
	than z	ero, explain in Part VI. See instructions			
6	Rema	ining underdistributions for 2016. Subtract lines 3h			
	and 4	b from line 1. For result greater than zero, explain in			
	Part V	I. See instructions			
7	Exces	ss distributions carryover to 2017. Add lines 3j			
	and 4	c			
8	Break	down of line 7:			
а					
b	Exces	s from 2013			
С	Exces	s from 2014			
d	Exces	s from 2015			
	Tvoc-	o from 2016			

Schedule A (Form 990 or 990-EZ) 2016

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12;
1 0.11 11	Dat IV Section A lines 1 2 3h 3c 4h 4c 5a 6 0 9h 9c 11a 11h and 11c Part IV Section B lines 1 and 2 Part IV Section C
	Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V,
	Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
	(See instructions.)
	(See instructions.)

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

OMB No. 1545-0047 Open to Public

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Inspection

Name of the organization

THE FILM FOUNDATION, INC.

**Employer identification number** 95-4244945

Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts.Complete if the			
•	organization answered "Yes" on Form 990, Part IV, lir	ne 6.				
		(a) Donor advised funds	(b) Funds and other accounts			
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in		sed funds			
	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		•			
	impermissible private benefit?		Yes No			
Pai						
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).				
	Preservation of land for public use (e.g., recreation or	education) Preservation of a his	torically important land area			
	Protection of natural habitat		tified historic structure			
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a quali	fied 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			
а	Total number of conservation easements		2a			
	Total acreage restricted by conservation easements					
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c			
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic struct	ture			
	listed in the National Register					
3	Number of conservation easements modified, transferred, re					
	year▶					
4	Number of states where property subject to conservation ea	sement is located >				
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of				
	violations, and enforcement of the conservation easements	it holds?	Yes No			
6	Staff and volunteer hours devoted to monitoring, inspecting,	, handling of violations, and enforcing cor	servation easements during the year			
	<b>&gt;</b>					
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserva	ation easements during the year			
	<b>&gt;</b> \$					
8	Does each conservation easement reported on line 2(d) about	ve satisfy the requirements of section 170	D(h)(4)(B)(i)			
	and section 170(h)(4)(B)(ii)?		Yes No			
9	In Part XIII, describe how the organization reports conservat	ion easements in its revenue and expens	e statement, and balance sheet, and			
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes	the organization's accounting for			
	conservation easements.					
Pai	t III Organizations Maintaining Collections of		Other Similar Assets.			
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.				
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue state	ment 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 XIII,					
	the text of the footnote to its financial statements that descr	ibes these items.				
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statemer	t and balance sheet works of art, historical			
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pu	ublic service, provide the following amounts			
	relating to these items:					
	(i) Revenue included on Form 990, Part VIII, line 1					
	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$			
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financi	al gain, provide			
	the following amounts required to be reported under SFAS 1					
а	Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$			
h	Assets included in Form 990 Part Y		<b>C</b>			

632051 08-29-16

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

Schedule D (Form 990) 2016

	t III Organizations Maintaining C	ollections of A	rt, His	torical Tr	easures, d	or Oth	er Simila	ır Asse	<b>ts</b> (contin	ued)	<u>.g.                                    </u>
3	Using the organization's acquisition, accessi	on, and other record	ds, chec	k any of the	following tha	t are a s	significant u	se of its	collectio	n item	s
	(check all that apply):										
а	Public exhibition	c		Loan or excl	hange progra	ams					
b	Scholarly research	e		Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	in how th	ney further th	ne organizati	on's exe	mpt purpo	se in Par	t XIII.		
5	During the year, did the organization solicit o	r receive donations	of art, hi	storical trea	sures, or oth	er simila	r assets		_		_
	to be sold to raise funds rather than to be ma								Yes		No
Pai	t IV Escrow and Custodial Arran		ete if the	organizatio	n answered	"Yes" or	Form 990	, Part IV,	line 9, or		
	reported an amount on Form 990, Par										
1a	Is the organization an agent, trustee, custodi		-						٦.,		1
	on Form 990, Part X?								<b>⊻</b> Yes		J No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing	table:							
	B								Amount		
	Beginning balance										
	Additions during the year										
e	Distributions during the year										
f O-	Ending balance  Did the organization include an amount on Fo								V		Na
	· ·	* *	•						Yes		∐ No □
Pai	If "Yes," explain the arrangement in Part XIII. <b>t V</b> Endowment Funds. Complete in										
	2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	(a) Current year		rior year	(c) Two year		(d) Three ye	ears hack	(e) Four	vears	hack
10	Reginning of year halance	(a) Current year	(D)	noi yeai	(C) Two year	13 Dack	(u) Tillee ye	Jais Dack	(e) i oui	years	Dack
b	Beginning of year balance Contributions										
	Net investment earnings, gains, and losses										
c d	Grants or scholarships										
	Other expenditures for facilities										
·	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr	ent vear end balanc	re (line 1	a column (s	ı)) held as:				l		
– a	Board designated or quasi-endowment	one your one building	%	9, 00,0,1,1,1	,,, 11014 40.						
b	Permanent endowment	%	<b>—</b> /°								
	Temporarily restricted endowment										
_	The percentages on lines 2a, 2b, and 2c sho										
За	3a Are there endowment funds not in the possession of the organization that are held and administered for the organization										
	by:	· ·					Ü		ſ	Yes	No
	(i) unrelated organizations								3a(i)		
b	(ii) related organizations     3a(ii)       b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?     3b										
4	Describe in Part XIII the intended uses of the										
Pai	t VI Land, Buildings, and Equipm	ent.									
	Complete if the organization answered	d "Yes" on Form 99	0, Part I\	/, line 11a. S	See Form 990	), Part X	, line 10.				
	Description of property	(a) Cost or o	ther	(b) Cost	or other	(c) A	ccumulate	d	(d) Bool	k valu	е
		basis (investr	ment)	basis	(other)	de	preciation				
1a	Land										
b	Buildings										
С	Leasehold improvements										
d	Equipment			6	7,009.		43,38	32.	2:	3,6	27 <b>.</b>
	0.1	I		i				- 1			

Schedule D (Form 990) 2016

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

23,627.

Part VII Investments - Other Securities.		
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11b. 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)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		

#### Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

#### Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

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

#### Other Liabilities.

Complete if the organization answered "Yes" on 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)	DUE TO AGENCY RECIPIENTS	652,933.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	652,933.

Liability for uncertain tax positions. In Part XIII, 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). Check here if the text of the footnote has been provided in Part XIII X

Schedule D (Form 990) 2016

THE INTERNAL REVENUE CODE AND IS, THEREFORE, EXEMPT FROM FEDERAL INCOME TAXATION UNDER SECTION 501 (A)OF THE CODE. IN ADDITION, THE FOUNDATION IS A SECTION 509(A)(2) ORGANIZATION AS DEFINED IN THE CODE AND IS, THEREFORE, NOT A PRIVATE FOUNDATION AND QUALIFIES FOR THE MAXIMUM CHARITABLE CONTRIBUTION DEDUCTION FOR DONORS. THE FOUNDATION IS ALSO EXEMPT FROM STATE INCOME TAXATION UNDER 23701 (D) OF THE CALIFORNIA REVENUE AND TAXATION CODE.

Schedule D (Form 990) 2016

Schedule D (Form 200) 2016 THE FILM FOUNDATION, INC. 955-4244945 Page 5  Part XIII   Supplemental Information (continued)	Schedule D (Form 990) 2016	THE FILM FOUNDATION, INC.	95-4244945 Page 5
	Part XIII   Supplemental Ir	nformation (continued)	-
		, ,	

#### SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

2016
Open to Public Inspection

Name of the organization

Employer identification number

<b>v</b> aiii	e or the organization					Employer Identin					
гні	E FILM FOUNDA	TION, IN	C.			95-424494	5				
Pa				tside the United States. Comple	ete if the organ						
	——— Form 990, Part I\			22	<b></b>						
1	For grantmakers. Does	the organization	n maintain recor	ds to substantiate the amount of its gra	ants and other	assistance,					
	the grantees' eligibility for	or the grants or a	assistance, and	the selection criteria used to award the	grants or assi	istance?	Yes X No				
2	Prograntmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the										
	United States.	Jnited States.									
3	Activities per Region. (T	he following Parl	I, line 3 table c	an be duplicated if additional space is r	needed.)						
	(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in the region		vity listed in (d)	(f) Total				
		offices	employees, agents, and independent	(by type) (such as, fundraising, pro-		gram service,	expenditures for and				
		in the region	independent contractors	gram services, investments, grants to recipients located in the region)		specific type (s) in the region	investments				
			in the region	recipients located in the region)	Of Service		in the region				
					FILM	/					
						N/RESTORATION	42.600				
EURC	DPE			LOCATED IN REGION	PROJECT		43,682.				
3 -	Sub-total	0	0				43,682.				
	Total from continuation	<u>-</u>	<u> </u>				15,002.				
	sheets to Part I	0	0				0.				
c	Totals (add lines 3a						1				
•	and 3h)	0	0				43 682.				

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

Schedule F (Form 990) 2016

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any
recipient who 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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			FILM PRESERVATION/RESTORAT	42,602	WIDE EDWARD			
		EUROPE	PROJECTS	43,682.	WIRE TRANSFER	0.		
2 Enter total number of	recipient organizatio	ns listed above that are	recognized as charities by the	foreign country	, recognized as tax-e	xempt by	<u> </u>	
the IRS, or for which t	the grantee or couns	el has provided a sectio	n 501(c)(3) equivalency letter					
3 Enter total number of	ather argenizations	or optition				_		

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
3	Enter total number of other organizations or entities

Part III Grants and Other Assistand Part III can be duplicated if a			ates. Complete r	the organization answered "Yes"	on Form 990, Part	t IV, line 16.	
(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 noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Page 4

Part IV	Foreian	<b>Forms</b>

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	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately 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; do not file with Form 990)	Yes	X 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	X 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	X 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	X 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 separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Yes	X No

Schedule F (Form 990) 2016

### Part V Supplemental Information

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. See instructions.

#### PART I, LINE 2:

THE FILM FOUNDATION (TFF), TRUSTEES, AND EXECUTIVE COMMITTEE REQUIRE EACH GRANTEE OR ARCHIVE TO SUBMIT A DETAILED AND FORMAL PROPOSAL, INCLUDING BUT NOT LIMITED TO: PROJECT BUDGET(S) OR REMAINING EXPENSES FOR PRESERVATION AND/OR RESTORATION PROJECTS CURRENTLY UNDERWAY, AS WELL AS A NARRATIVE PROPOSAL DETAILING THE SYNOPSIS OF EACH FILM, A DESCRIPTION OF THE SPECIFIC PRESERVATION AND RESTORATION WORK THAT IS NECESSARY FOR THE FILM, INFORMATION OUTLINING THE HISTORICAL, CULTURAL AND ARTISTIC IMPORTANCE OF THE FILM AND FILMMAKER, ANY CURRENT UPHOLDING RIGHTS ISSUES THAT MIGHT BE INVOLVED, AVAILABILITY OF ALL ELEMENTS/MATERIALS, AND A TIMELINE OF WHEN THE WORK WILL BE COMPLETED. IN ADDITION, EACH GRANTEE/ARCHIVE MUST SIGN A GRANT COMPLIANCE AGREEMENT THAT CONFIRMS USE OF CONTRIBUTION, PROHIBITED USE OF GRANT FUNDS, NOTICE, FUTURE FUNDING GUIDELINES, AND UNDERSTANDING OF INFORMATION REQUIRED IN PROPOSAL AND BUDGET REQUIREMENTS.

ALL GRANTEES/ARCHIVES WHO ARE APPROVED FOR FUNDING MUST SUBMIT AN ACCOUNTABILITY REPORT AT THE END OF EACH GRANT CYCLE DETAILING THE WORK AND COSTS ON APPROVED PROJECTS. THE REPORTS INCLUDE: A SYNOPSIS OF EACH FILM, A DETAILED OUTLINE OF THE SPECIFIC PICTURE AND SOUND PRESERVATION/RESTORATION WORK COMPLETED FOR THE FILM, INFORMATION ABOUT THE HISTORICAL, CULTURAL AND ARTISTIC IMPORTANCE OF THE FILM AND FILMMAKERS, AND ANY RELEVANT ISSUES WITH THE RIGHTSHOLDER(S).

A DETAILED FINAL BUDGET OUTLINING THE EXPENSES TOTALING THE AMOUNT OF THE DONATION AS WELL AS THE INVOICES AND BACK UP DOCUMENTATION. THE GRANTEE/ARCHIVE MUST ALSO PROVIDE TFF WITH FILM STILLS AND IMAGES FROM

Provide the information  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. See instructions.
THE PRESERVATION/RESTORATION PROCESS, AND FINALLY, A LIST OF FILM
SCREENINGS AND LOANS OF PRESERVED/RESTORED FILMS FUNDED BY TFF. THE
ACCOUNTABILITY REPORT MUST STILL BE SUBMITTED BY THE DUE DATE, WITH
INFORMATION ABOUT THE WORK TO DATE AND A PROJECTED FINISH.

#### **SCHEDULE J** (Form 990)

## **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ► Attach to Form 990.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Part I Questions Regarding Compensation

Department of the Treasury

Internal Revenue Service

THE FILM FOUNDATION, INC. Employer identification number 95-4244945

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	X First-class or charter travel			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as, 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	X	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	Х	
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, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant  X Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	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
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	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), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:	_		v
a	The organization?	5a		X
b	Any related organization?	5b		Δ_
_	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:	0-		Х
a	The organization?	6a		X
D	Any related organization?	6b		
7	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	7		х
0	not described on lines 5 and 6? If "Yes," describe in Part III	7		21
8	Were any amounts reported on 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		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	0		-22
3	Regulations section 53.4958-6(c)?	9		
	กอรูนเลเบกอ จอบแบก ออ.4ฮอบ <sup>า</sup> บุเป <i>ร</i>	J		

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

Schedule J (Form 990) 2016

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 on 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 aren't 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.

<b>(A)</b> Name and Title		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denents	(15)(1)-(15)	reported as deferred on prior Form 990
(1) MARGARET BODDE	(i)	156,256.	0.	0.	12,711.	16,285.	185,252.	0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III   Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

#### 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.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

THE FILM FOUNDATION, INC.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. **Employer identification number** 95-4244945

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: ACROSS THE COUNTRY; TO DEFEND AGAINST HISTORICAL REVISIONISM; TO GAIN RECOGNITION FOR ARTISTS RIGHTS; AND THE PROTECTION OF ARTISTS WORKS AND THE ARTISTS WHO CREATED THEM.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: SECURE PICTURE AND SOUND ELEMENTS FROM PUBLIC, PRIVATE AND STUDIO ARCHIVES; NEGOTIATE PRESERVATION CONTRACTS INVOLVING THE STUDIOS, RIGHT HOLDERS, THE ARCHIVES, AND THE FOUNDATION AND ITS FUNDERS; INCREASE PUBLIC ACCESS TO RESTORED FILMS; ADVISE ON "BEST PRACTICES" FOR THE PRESERVATION OF CURRENT FILM PRODUCTION; FACILITATE CORPORATE PARTNERSHIPS IN SUPPORT OF THE WORK OF THE ARCHIVES; MAINTAIN A CONSERVATION COLLECTION OF PRESERVED AND RESTORED FILMS FUNDED BY THE FOUNDATION.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: SCHOOL AND HIGH SCHOOL TEACHERS. THE PROGRAM IS DISTRIBUTED FREE OF CHARGE, AND EACH UNIT INCLUDES A TEACHER'S GUIDE, STUDENT ACTIVITY BOOKLET, TWO DVDS, AND ACCESS TO THE STORY OF MOVIES WEBSITE. THE STORY OF MOVIES CONTINUES TO EXPAND ITS LESSON PLANS AND PROVIDE ONGOING DEVELOPMENT AND DISTRIBUTION OF ITS CURRICULUM UNITS AND LESSON PLAN LIBRARY, AS WELL AS PROVIDE PROFESSIONAL DEVELOPMENT TO EDUCATORS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: ARTISTS RIGHTS LEGAL DEFENSE ACTIVITIES - ANOTHER KEY OBJECTIVE OF THE FOUNDATION IS TO PROTECT THE WORK OF FILM ARTISTS FROM CENSORSHIP, LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2016)

632211 08-25-16

Name of the organization THE FILM FOUNDATION, INC.

Employer identification number 95-4244945

ALTERATION AND INTERNET THEFT. IT CREATED THE ARTISTS RIGHTS EDUCATION

AND LEGAL DEFENSE FUND COUNCIL TO ADVOCATE FOR THE PROTECTION OF

ARTIST'S RIGHTS.

EXPENSES \$ 304,041. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 2:

MARGARET BODDE PRODUCES DOCUMENTARY FILM PROJECTS FOR MARTIN SCORSESE - BUSINESS RELATIONSHIP.

FORM 990, PART VI, SECTION A, LINE 6:

THE DIRECTORS GUILD OF AMERICA (DGA) IS THE ONE AND ONLY CORPORATE MEMBER
OF THE FILM FOUNDATION.

FORM 990, PART VI, SECTION A, LINE 7A:

THE DGA APPOINTS ALL MEMBERS OF THE BOARD OF TRUSTEES.

FORM 990, PART VI, SECTION A, LINE 7B:

THE BOARD MAY NOT ALTER, AMEND, REPEAL, CHANGE OR INITIATE NEW BYLAWS OR

ARTICLES OF INCORPORATION, NOR MAY THE BOARD DISSOLVE, TRANSFER,

CONSOLIDATE OR ESSENTIALLY ALTER THE FOUNDATION, WITHOUT THE PRIOR,

SPECIFIC AND WRITTEN AUTHORIZATION TO DO SO FROM THE DGA.

FORM 990, PART VI, SECTION B, LINE 11B:

BEFORE THE 990 IS FILED, IT IS REVIEWED BY BOTH THE FILM FOUNDATION'S

EXECUTIVE AND MANAGING DIRECTORS. A DRAFT IS THEN SENT TO THE SOLE

CORPORATE MEMBER AND CHAIR BEFORE THE FORMS ARE EXECUTED.

FORM 990, PART VI, SECTION B, LINE 12C:

Name of the organization THE FILM FOUNDATION, INC.

Employer identification number 95-4244945

THE FOUNDATION REQUIRES BOARD MEMBERS TO SIGN ANNUALLY A CONFLICT OF

INTEREST POLICY. THE ENFORCEMENT AND MONITORING OF POTENTIAL CONFLICTS OF

INTERESTS THROUGHOUT THE YEAR IS ACCOMPLISHED BY INQUIRY. A BOARD MEMBER

WHO IS INVOLVED IN A POTENTIAL CONFLICT OF INTEREST IS NOT ALLOWED TO VOTE

ON ANY MATTERS RELATED WITH THE CONFLICT OF INTEREST.

FORM 990, PART VI, SECTION B, LINE 15:

COMPENSATION FOR ANY OFFICERS IS PROPOSED, REVIEWED AND APPROVED BY THE

CHAIR AND EXECUTIVE COMMITTEE. THIS INCLUDES, BUT IS NOT LIMITED TO, AN

IN-DEPTH EVALUATION AND ASSESSMENT OF THE PERFORMANCE, AS WELL AS A

COMPARISON OF OTHER COMPENSATION PACKAGES THAT ARE COMPARABLE TO THE TASKS

AND ACTIVITIES OF THE OFFICER. THE FOUNDATION DOES NOT HAVE EMPLOYMENT

CONTRACTS FOR THE MANAGING DIRECTOR OR FOR A TRUSTEE WHOM IS COMPENSATED.

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

DOCUMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART VI, SECTION A, LINE 1A

THE EXECUTIVE COMMITTEE CONSISTS OF THE BOARD CHAIR, PRESIDENT,

SECRETARY-TREASURER, AND THOSE APPOINTED. THE EXECUTIVE COMMITTEE,

BETWEEN MEETINGS OF THE BOARD, SHALL HAVE AND EXERCISE ALL OF THE

AUTHORITY OF THE BOARD IN THE MANAGEMENT OF THE FOUNDATION EXCEPT AS

LIMITED BY STATUTE, BY THE BYLAWS OR BY ANY RESOLUTION OF THE BOARD.

MEETINGS OF THE EXECUTIVE COMMITTEE MAY BE CALLED BY, OR AT THE

DIRECTION OF, THE CHAIR, OR THE PRESIDENT OF THE FOUNDATION. A

MAJORITY OF THE EXECUTIVE COMMITTEE SHALL CONSTITUTE A QUORUM FOR THE

TRANSACTION OF BUSINESS AT ANY MEETING OF THE EXECUTIVE COMMITTEE. IF

ACCEPTED BY THE BOARD, ANY MEMBER OF THE EXECUTIVE COMMITTEE MAY RESIGN

Name of the organization  THE FILM FOUNDATION, INC.	Employer identification number 95-4244945
FROM THE EXECUTIVE COMMITTEE AT ANY TIME BY GIVING WRITTE	N NOTICE TO
THE CHAIR OF THE BOARD. MEMBERS OF THE EXECUTIVE COMMITT	EE WHO SERVE
BY APPOINTMENT OF THE BOARD MAY BE REMOVED BY THE BOARD O	F THE
FOUNDATION.	

#### SCHEDULE R (Form 990)

Part I

**Related Organizations and Unrelated Partnerships** 

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

➤ Attach to Form 990.

(c)

Legal domicile (state or

foreign country)

(d)

Total income

(e)

End-of-year assets

Open to Public Inspection

OMB No. 1545-0047

2016

Department of the Treasury Internal Revenue Service

Name of the organization

(a)

Name, address, and EIN (if applicable)

of disregarded entity

THE FILM FOUNDATION, INC.

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(b)

Primary activity

Employer identification number 95-4244945

(f)

Direct controlling

entity

Part II Identification of Related Tax-Exempt Organ organizations during the tax year.		answered "Yes" on Form 99		Decause it had one	or more related tax-exe	mpt	
(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) 512(b)(13) rolled tity?
DIRECTORS GUILD OF AMERICA - 95-1202310 7920 SUNSET BLVD LOS ANGELES, CA 90046	TO PROTECT DIRECTORIAL TEAMS' LEGAL AND ARTISTIC RIGHTS.	CALIFORNIA	501 (C) (5)		N/A		х
JOD IMODELD, CA JUNEO		PIRIT OWNER	501 (6) (3)		57/44		_ A

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

organizations treated as a pa		. year.		·							
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	(related, unrelated, income end-of-year allocations? and			managin partner?	Percentage ownership			
		country)		sections 512-514)		4,000,10	Yes	No	K-1 (Form 1065)	Yes No	<u>                                     </u>
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Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Section 512(b)(13) controlled entity?	
		45							

Schedule R (Form 990) 2016

Page 3

Yes No

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

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

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?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity  b Gift, grant, or capital contribution to related organization(s)										
c Gift, grant, or capital contribution from related organization(s)	1c X									
d Loans or loan guarantees to or for related organization(s)										
e Loans or loan guarantees by related organization(s)										
f Dividends from related organization(s)	1f X									
g Sale of assets to related organization(s)										
h Purchase of assets from related organization(s)	1h X									
i Exchange of assets with related organization(s)	1i X									
j Lease of facilities, equipment, or other assets to related organization(s)	1j X									
k Lease of facilities, equipment, or other assets from related organization(s)	1k X									
I Performance of services or membership or fundraising solicitations for related organization(s)										
m Performance of services or membership or fundraising solicitations by related organization(s)										
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)										
o Sharing of paid employees with related organization(s)										
p Reimbursement paid to related organization(s) for expenses										
q Reimbursement paid by related organization(s) for expenses										
r Other transfer of cash or property to related organization(s)	1r X									
s Other transfer of cash or property from related organization(s)										
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 thres										
(a) (b) (c) (d)										
Name of related organization Transaction Amount involved Method of determinin										
type (a-s)										
(1) DIRECTORS GUILD OF AMERICA O 194,726. AMOUNT PAID										
(2)										
(3)										
(4)										
(5)										
(6) 332163 09-06-16 46										

Page 4

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a)	(b)	(c)	(d)	(e) Are a partners 501(c) orgs.	)	(f)	(g)	(	h)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related, unrelated, excluded from tax under sections 512-514)	partners	S Sec.	Share of	Share of	Disp	ropor- nate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Genera	or Percentage
of entity		(state or foreign	excluded from tax under	orgs.	)(3) .?	total	end-of-year	alloca	tions?	of Schedule K-1	partne	ownership
		country)	sections 512-514)	Yes I		income	assets	Yes	No	(Form 1065)	Yes N	О
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	1											
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	-											
	-											
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