

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form 990

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2023

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2023 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization ENTERTAINMENT INDUSTRY FOUNDATION		D Employer identification number 95-1644609
	Doing business as		E Telephone number 424-283-3600
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	10880 WILSHIRE, BLVD.		1400
	City or town, state or province, country, and ZIP or foreign postal code LOS ANGELES, CA 90024		G Gross receipts \$ 102,399,151.
F Name and address of principal officer: NICOLE SEXTON SAME AS C ABOVE		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	
J Website: WWW.EIFFOUNDATION.ORG		If "No," attach a list. See instructions	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation: 1942	M State of legal domicile: CA
H(c) Group exemption number			

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO COORDINATE THE PHILANTHROPY OF THE ENTERTAINMENT INDUSTRY.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	12
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	12
	5 Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	111
	6 Total number of volunteers (estimate if necessary)	6	200
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	56,004,400.	99,298,481.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	420,589.	822,609.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	381,491.	1,255,684.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	965,597.	1,022,377.
		57,772,077.	102,399,151.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	28,799,751.	70,518,180.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	12,786,009.	13,612,017.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	826,355.	1,819,995.
	b Total fundraising expenses (Part IX, column (D), line 25)	7,752,778.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,866,064.	19,424,892.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	59,278,179.	105,375,084.
19 Revenue less expenses. Subtract line 18 from line 12	-1,506,102.	-2,975,933.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	97,784,081.	93,300,465.
	22 Net assets or fund balances. Subtract line 21 from line 20	9,786,324.	6,962,083.
	87,997,757.	86,338,382.	

Part II Signature Block

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

Sign Here	Signature of officer <i>Shawn Burke</i>	Date 11/14/2024			
	SHAWN BURKE, CFO Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name ERIN COUTURE	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN P01390592
	Firm's name GRANT THORNTON ADVISORS LLC	Firm's EIN 99-1856619	Phone no. (617) 723-7900		
	Firm's address 53 STATE STREET, SUITE 1600 BOSTON, MA 02109				

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: SEE SCHEDULE O

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 54,210,257. including grants of \$ 44,681,612.) (Revenue \$ 0.) CHARITABLE SERVICE FUNDS: EIF SERVES AS THE TRUSTED RESOURCE OF THE ENTERTAINMENT COMMUNITY BY OFFERING FISCAL SPONSORSHIP SERVICES TO CELEBRITIES, ATHLETES, AND ENTERTAINMENT COMPANIES SEEKING TO EXPAND THEIR PHILANTHROPIC FOOTPRINT AND LEVERAGE THEIR PLATFORMS FOR SOCIAL GOOD. CHARITABLE SERVICE FUNDS THRIVE WITHIN EIF'S REPUTABLE 501(C)(3) PUBLIC CHARITY STATUS.

4b (Code:) (Expenses \$ 32,432,413. including grants of \$ 24,414,879.) (Revenue \$ 822,609.) STAND UP TO CANCER INITIATIVE (SU2C) IS DESIGNED TO RAISE FUNDS TO ACCELERATE GROUND-BREAKING CANCER RESEARCH AND BRING NEW THERAPIES TO PATIENTS SOONER TO SAVE LIVES. SU2C UTILIZES THE ENTERTAINMENT INDUSTRY TO BUILD BROAD PUBLIC SUPPORT AND TO ENHANCE AWARENESS OF THE DEVASTATING IMPACT CANCER HAS IN THIS COUNTRY. SU2C'S GOAL IS TO BRING TOGETHER THE BEST AND BRIGHTEST IN THE CANCER COMMUNITY ENCOURAGING COLLABORATION INSTEAD OF COMPETITION.

4c (Code:) (Expenses \$ 1,954,220. including grants of \$ 1,421,689.) (Revenue \$ 0.) WITH UNPARALLELED ACCESS TO ROADBLOCK TELEVISION, DONATED MEDIA, AND INDUSTRY-WIDE COLLABORATORS, EIF SUPPORTS GROUND-BREAKING PROGRAMS AND INITIATIVES THAT RAISE AWARENESS AND FUNDS FOR ISSUES AFFECTING MILLIONS OF PEOPLE AROUND THE WORLD.

4d Other program services (Describe on Schedule O.) (Expenses \$ 538,516. including grants of \$ 0.) (Revenue \$)

4e Total program service expenses 89,135,406.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows 22-38 covering various organizational requirements.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

Table with 3 columns: Question ID, Question Text, Yes, No. Rows 1a-1c regarding Form 1096 and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No columns. Includes questions 2a through 17 regarding employee counts, tax returns, gross income, foreign accounts, prohibited transactions, and charitable contributions.

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 on Schedule O. See instructions.

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

Section A. Governing Body and Management

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

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

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

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [] Another's website [X] Upon request [] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
SHAWN BURKE - 424-283-3663
10880 WILSHIRE BLVD, SUITE 1400, LOS ANGELES, CA 90024

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.
- See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) NICOLE SEXTON CEO	40.00 0.00			X				367,367.	0.	23,574.
(2) DANA LIPMAN SVP HR & LABOR REL.	20.00 20.00				X			260,803.	0.	25,792.
(3) SHAWN BURKE INTERIM CFO (TO 2/23); CFO	20.00 20.00			X				253,625.	0.	25,128.
(4) JORDAN M JACUZZI SVP OPS/COMMS/GOVERN. (AS OF 01/23)	40.00 0.00					X		180,966.	0.	22,970.
(5) BRIAN GOTT INNOVATION & INDUSTRY RELATIONS	40.00 0.00				X			172,957.	0.	22,928.
(6) ELIZABETH R MOSELY DIR. OPERATIONS AND PROGRAM MGMT	40.00 0.00					X		168,968.	0.	22,725.
(7) KAREN WILLIAMS VP OF PROGRAMMING, ROYBAL	40.00 0.00					X		137,785.	0.	22,665.
(8) AIDA MORROW EXECUTIVE DIRECTOR, SCFU	40.00 0.00					X		130,318.	0.	26,831.
(9) JEFFREY THACKER VICE PRESIDENT, DIGITAL KYRC	40.00 0.00					X		129,265.	0.	21,453.
(10) CHRIS SILBERMANN BOARD CHAIR	1.00 0.00	X		X				0.	0.	0.
(11) JEFF BADER BOARD VICE CHAIR	1.00 0.00	X		X				0.	0.	0.
(12) PETER SEYMOUR TREASURER	1.00 0.00	X		X				0.	0.	0.
(13) DAN HARRISON SECRETARY	1.00 0.00	X		X				0.	0.	0.
(14) LYNN HARRIS BOARD MEMBER	1.00 0.00	X						0.	0.	0.
(15) KATHY JOHNSON BOARD MEMBER	1.00 0.00	X						0.	0.	0.
(16) RENE JONES BOARD MEMBER (AS OF 10/2023)	1.00 0.00	X						0.	0.	0.
(17) ANDY KUBITZ BOARD MEMBER	1.00 0.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) SHERRY LANSING BOARD MEMBER	1.00 0.00	X						0.	0.	0.
(19) JACK SUSSMAN BOARD MEMBER	1.00 0.00	X						0.	0.	0.
(20) NATALIE TRAN BOARD MEMBER	1.00 0.00	X						0.	0.	0.
(21) DANICE WOODLEY BOARD MEMBER	1.00 0.00	X						0.	0.	0.
1b Subtotal								1,802,054.	0.	214,066.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								1,802,054.	0.	214,066.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 40

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ROBERTSON SCHWARTZ AGENCY, 1250 6TH STREET STE 201, SANTA MONICA, CA 90401	SEE SCHEDULE O	1,987,156.
APRICITY HEALTH LLC 3262 WESTHEIMER RD., HOUSTON, TX 77098	SCIENCE CONSULTING	1,000,000.
VENABLE LLP PO BOX 62727, BALTIMORE, MD 21264	LEGAL	540,742.
VELONEX TECHNOLOGIES, 23705 VANOWEN ST PMB161, WEST HILLS, CA 91307	IT SERVICES	251,632.
ALLISON PARTNERS, ONE WORLD TRADE CENTER FLOOR 69, NEW YORK, NY 10007	PUBLIC RELATIONS	215,000.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 17

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d	38,933,153.				
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above ...	1f	60,365,328.				
	g	Noncash contributions included in lines 1a-1f	1g	\$				
	h	Total. Add lines 1a-1f			99,298,481.			
Program Service Revenue	2 a	MEDIA DEVELOPMENT	Business Code	516210	822,609.	822,609.		
	b							
	c							
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f			822,609.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)			1,253,152.		1,253,152.	
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties			106,076.		106,076.	
	6 a	Gross rents	(i) Real	916,301.				
			(ii) Personal					
	b	Less: rental expenses ...	6b	0.				
	c	Rental income or (loss)	6c	916,301.				
	d	Net rental income or (loss)			916,301.		916,301.	
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	2,532.				
			(ii) Other					
	b	Less: cost or other basis and sales expenses	7b	0.				
	c	Gain or (loss)	7c	2,532.				
	d	Net gain or (loss)			2,532.		2,532.	
8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
b	Less: direct expenses	8b						
c	Net income or (loss) from fundraising events							
9 a	Gross income from gaming activities. See Part IV, line 19	9a						
b	Less: direct expenses	9b						
c	Net income or (loss) from gaming activities							
10 a	Gross sales of inventory, less returns and allowances	10a						
b	Less: cost of goods sold	10b						
c	Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a		Business Code					
	b							
	c							
	d	All other revenue						
	e	Total. Add lines 11a-11d						
12	Total revenue. See instructions			102,399,151.	822,609.	0.	2,278,061.	

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 X

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	27,575,620.	27,575,620.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	38,151,300.	38,151,300.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	4,791,260.	4,791,260.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	2,507,155.	984,282.	814,757.	708,116.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	8,542,024.	5,148,808.	2,293,342.	1,099,874.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	484,733.	304,984.	133,761.	45,988.
9 Other employee benefits	1,286,413.	800,950.	361,140.	124,323.
10 Payroll taxes	791,692.	472,806.	211,316.	107,570.
11 Fees for services (nonemployees):				
a Management				
b Legal	690,151.		690,151.	
c Accounting	120,114.		120,114.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	1,819,995.			1,819,995.
f Investment management fees	61,557.		61,557.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	10,375,861.	6,771,151.	599,495.	3,005,215.
12 Advertising and promotion	1,365.	1,365.		
13 Office expenses	829,105.	523,789.	279,175.	26,141.
14 Information technology				
15 Royalties				
16 Occupancy	1,935,724.	42,160.	1,893,564.	
17 Travel	1,243,624.	1,060,048.	106,470.	77,106.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	121,986.		121,986.	
23 Insurance	311,730.	3,724.	308,006.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a PR & PUBLICITY	1,274,414.	1,274,414.		
b SUBSCRIPTIONS & PERMITS	1,128,613.	585,574.	429,589.	113,450.
c MISCELLANEOUS	625,000.			625,000.
d ELECTRONIC MEDIA PROD	408,466.	408,466.		
e All other expenses	297,182.	234,705.	62,477.	
25 Total functional expenses. Add lines 1 through 24e	105,375,084.	89,135,406.	8,486,900.	7,752,778.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	32,646,497.	1	34,048,148.
	2 Savings and temporary cash investments	29,828,542.	2	10,805,059.
	3 Pledges and grants receivable, net	8,963,834.	3	7,617,222.
	4 Accounts receivable, net	139,612.	4	204,990.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	464,209.	9	447,510.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,754,882.		
	b Less: accumulated depreciation	10b 1,673,363.	207,634.	10c 81,519.
	11 Investments - publicly traded securities	23,407,447.	11	39,860,517.
	12 Investments - other securities. See Part IV, line 11	0.	12	0.
	13 Investments - program-related. See Part IV, line 11	0.	13	0.
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	2,126,306.	15	235,500.
16 Total assets. Add lines 1 through 15 (must equal line 33)	97,784,081.	16	93,300,465.	
Liabilities	17 Accounts payable and accrued expenses	2,970,135.	17	3,055,411.
	18 Grants payable	3,958,707.	18	3,093,343.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	2,857,482.	25	813,329.
	26 Total liabilities. Add lines 17 through 25	9,786,324.	26	6,962,083.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	-606,340.	27	642,316.
	28 Net assets with donor restrictions	88,604,097.	28	85,696,067.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	87,997,757.	32	86,338,382.
33 Total liabilities and net assets/fund balances	97,784,081.	33	93,300,465.	

Part 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	102,399,151.
2	Total expenses (must equal Part IX, column (A), line 25)	2	105,375,084.
3	Revenue less expenses. Subtract line 2 from line 1	3	-2,975,933.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	87,997,757.
5	Net unrealized gains (losses) on investments	5	1,657,063.
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 on Schedule O)	9	-340,505.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	86,338,382.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2023)

SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public Inspection

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

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2 A school described in section 170(b)(1)(A)(ii).
3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii).
5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv).
6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi).
8 A community trust described in section 170(b)(1)(A)(vi).
9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture.
10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions...
11 An organization organized and operated exclusively to test for public safety.
12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations...
a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s)...
b Type II. A supporting organization supervised or controlled in connection with its supported organization(s)...
c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s)...
d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated...
e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
f Enter the number of supported organizations
g Provide the following information about the supported organization(s).

Table with 6 columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization listed in your governing document?, (v) Amount of monetary support, (vi) Amount of other support.

Total

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	57,147,301.	97,679,039.	63,726,845.	56,004,400.	99,298,481.	373,856,066.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	57,147,301.	97,679,039.	63,726,845.	56,004,400.	99,298,481.	373,856,066.
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)						37,143,893.
6 Public support. Subtract line 5 from line 4.						336,712,173.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4	57,147,301.	97,679,039.	63,726,845.	56,004,400.	99,298,481.	373,856,066.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	2,143,580.	1,447,530.	1,094,370.	1,358,660.	2,275,529.	8,319,669.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)		1,050,679.				1,050,679.
11 Total support. Add lines 7 through 10						383,226,414.

12 Gross receipts from related activities, etc. (see instructions) **12**

13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))	14	87.86 %
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	81.33 %
16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support

Table with 7 columns: (a) 2019, (b) 2020, (c) 2021, (d) 2022, (e) 2023, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support. (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: (a) 2019, (b) 2020, (c) 2021, (d) 2022, (e) 2023, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included on 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 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Row 15: Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f)) 15 %; Row 16: Public support percentage from 2022 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

Table with 2 columns: Line number, Percentage. Row 17: Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f)) 17 %; Row 18: Investment income percentage from 2022 Schedule A, Part III, line 17 18 %

19a 33 1/3% support tests - 2023. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2022. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c 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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? Row 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?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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? Row 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? Row 3: By reason of the relationship described on line 2, above, 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?

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, b.

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

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 complete Sections A through E.

Section 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	

Section 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):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
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 0.015 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 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990) 2023

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2023 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1 Distributable amount for 2023 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2023 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2023			
a From 2018			
b From 2019			
c From 2020			
d From 2021			
e From 2022			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2023 distributable amount			
i Carryover from 2018 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2023 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2023 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2024. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2019			
b Excess from 2020			
c Excess from 2021			
d Excess from 2022			
e Excess from 2023			

Schedule A (Form 990) 2023

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; 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.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

XQ SUPER SCHOOL GRADUATE TOGETHER

2019 AMOUNT: \$ 0.

2020 AMOUNT: \$ 1,050,679.

2021 AMOUNT: \$ 0.

2022 AMOUNT: \$ 0.

2023 AMOUNT: \$ 0.

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Name of the organization

ENTERTAINMENT INDUSTRY FOUNDATION

Employer identification number

95-1644609

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

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

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ _____

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

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2023)

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

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ 38,933,153.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ 18,017,632.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ 6,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	<hr/> <hr/> <hr/>	\$ 5,365,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	<hr/> <hr/> <hr/>	\$ 2,500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	<hr/> <hr/> <hr/>	\$ 2,500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization ENTERTAINMENT INDUSTRY FOUNDATION	Employer identification number 95-1644609
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____

Name of organization ENTERTAINMENT INDUSTRY FOUNDATION	Employer identification number 95-1644609
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ _____
Use duplicate copies of Part III if additional space is needed.

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

SCHEDULE C
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2023

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527
Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

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

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

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

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

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

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

Name of organization ENTERTAINMENT INDUSTRY FOUNDATION	Employer identification number 95-1644609
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

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

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

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

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

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

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

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

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)		0.												
b Total lobbying expenditures to influence a legislative body (direct lobbying)		0.												
c Total lobbying expenditures (add lines 1a and 1b)		0.												
d Other exempt purpose expenditures	104,400,033.	0.												
e Total exempt purpose expenditures (add lines 1c and 1d)	104,400,033.	0.												
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000.	0.												
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>not over \$500,000,</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>over \$500,000 but not over \$1,000,000,</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>over \$1,000,000 but not over \$1,500,000,</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>over \$1,500,000 but not over \$17,000,000,</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>over \$17,000,000,</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	not over \$500,000,	20% of the amount on line 1e.	over \$500,000 but not over \$1,000,000,	\$100,000 plus 15% of the excess over \$500,000.	over \$1,000,000 but not over \$1,500,000,	\$175,000 plus 10% of the excess over \$1,000,000.	over \$1,500,000 but not over \$17,000,000,	\$225,000 plus 5% of the excess over \$1,500,000.	over \$17,000,000,	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
not over \$500,000,	20% of the amount on line 1e.													
over \$500,000 but not over \$1,000,000,	\$100,000 plus 15% of the excess over \$500,000.													
over \$1,000,000 but not over \$1,500,000,	\$175,000 plus 10% of the excess over \$1,000,000.													
over \$1,500,000 but not over \$17,000,000,	\$225,000 plus 5% of the excess over \$1,500,000.													
over \$17,000,000,	\$1,000,000.													
g Grassroots nontaxable amount (enter 25% of line 1f)	250,000.	0.												
h Subtract line 1g from line 1a. If zero or less, enter -0-	0.													
i Subtract line 1f from line 1c. If zero or less, enter -0-	0.													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
c Total lobbying expenditures					
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures					

Schedule C (Form 990) 2023

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

Table with 3 main columns: (a) Yes, (a) No, (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation...; 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?; 2b If "Yes," enter the amount of any tax incurred under section 4912; 2c If "Yes," enter the amount of any tax incurred by organization managers under section 4912; 2d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

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

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

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

Table with 2 main columns: Question, Amount. Rows include: 1 Dues, assessments and similar amounts from members; 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid); 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues; 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?; 5 Taxable amount of lobbying and political expenditures. See instructions

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Blank lines for providing supplemental information as required by the 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.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public
Inspection

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

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	40	
2 Aggregate value of contributions to (during year)	60,546,203.	
3 Aggregate value of grants from (during year)	54,210,257.	
4 Aggregate value at end of year	36,684,238.	
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included on line 2a	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d

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

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

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

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

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year _____

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

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

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

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

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

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

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

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

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

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

Schedule D (Form 990) 2023

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

- 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

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

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

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____%
 - b Permanent endowment _____%
 - c Term endowment _____%
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|--------|----|
| (i) Unrelated organizations? | 3a(i) | |
| (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 organization's endowment funds.

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		571,004.	563,987.	7,017.
d Equipment		639,600.	590,084.	49,516.
e Other		544,278.	519,292.	24,986.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				81,519.

Part VII Investments - Other Securities

Complete if the organization answered "Yes" 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, line 12, col. (B))		

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, line 13, col. (B))		

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, line 15, col. (B))	

Part X 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) LEASE LIABILITY	487,825.
(3) SECURITY DEPOSITS	294,456.
(4) DEFERRED RENT	31,048.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	813,329.

2. 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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ...

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	325,057,751.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a 1,657,063.		
b	Donated services and use of facilities	2b 221,063,094.		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	222,720,157.
3	Subtract line 2e from line 1		3	102,337,594.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a 61,557.		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	61,557.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	102,399,151.

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	326,376,621.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a 221,063,094.		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	221,063,094.
3	Subtract line 2e from line 1		3	105,313,527.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a 61,557.		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	61,557.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	105,375,084.

Part XIII Supplemental Information

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

PART X, LINE 2:

THE FOUNDATION FOLLOWS GUIDANCE THAT CLARIFIES THE ACCOUNTING FOR

UNCERTAINTY IN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX

RETURN, INCLUDING ISSUES RELATING TO FINANCIAL STATEMENT RECOGNITION AND

MEASUREMENT. THIS GUIDANCE PROVIDES THAT THE TAX EFFECTS FROM AN UNCERTAIN

TAX POSITION CAN ONLY BE RECOGNIZED IN THE FINANCIAL STATEMENTS IF THE

POSITION IS "MORE-LIKELY-THAN-NOT" TO BE SUSTAINED IF THE POSITION WERE TO

BE CHALLENGED BY A TAXING AUTHORITY. THE ASSESSMENT OF THE TAX POSITION IS

BASED SOLELY ON THE TECHNICAL MERITS OF THE POSITION, WITHOUT REGARD THE

LIKELIHOOD THAT THE TAX POSITION MAY BE CHALLENGED.

THE FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3)

Part XIII Supplemental Information (continued)

OF THE INTERNAL REVENUE CODE, THOUGH IT IS SUBJECT TO TAX ON INCOME
 UNRELATED TO ITS EXEMPT PURPOSE, UNLESS THAT INCOME IS OTHERWISE EXCLUDED
 BY THE CODE. THE FOUNDATION IS ALSO EXEMPT FROM CALIFORNIA FRANCHISE TAXES
 UNDER REVENUE AND TAXATION CODE SECTION 23701D ON ITS INCOME OTHER THAN
 UNRELATED BUSINESS INCOME. THE FOUNDATION HAS PROCESSES PRESENTLY IN PLACE
 TO ENSURE THE MAINTENANCE OF ITS TAX-EXEMPT STATUS; TO IDENTIFY AND REPORT
 UNRELATED INCOME; TO DETERMINE ITS FILING AND TAX OBLIGATIONS IN
 JURISDICTIONS FOR WHICH IT WAS NEXUS; AND TO IDENTIFY AND EVALUATE OTHER
 MATTERS THAT MAY BE CONSIDERED TAX POSITIONS. THE FOUNDATION HAS
 DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE
 RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS.

SCHEDULE D, PART XI AND XII:

EIF IS INCLUDED IN CONSOLIDATED FINANCIAL STATEMENTS WITH STAND UP TO
 CANCER MUSIC, LLC, A DISREGARDED ENTITY FOR FEDERAL TAX PURPOSES FOR WHICH
 IT IS THE SOLE OWNER. THE RECONCILIATION OF REVENUES AND EXPENSES PER THE
 AUDITED FINANCIAL STATEMENTS WITH THE FORM 990 REFLECT SIGNIFICANT
 CONTRIBUTIONS OF DONATED BROADCAST PUBLIC SERVICE ANNOUNCEMENTS, WHICH
 WERE INCLUDED IN CONTRIBUTED INCOME AND EXPENSES FOR FINANCIAL STATEMENT
 PURPOSES, BUT ARE CORRECTLY EXCLUDED FROM REVENUES AND EXPENSES ON FORM
 990, PART VIII AND FORM 990, PART IX.

**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.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization ENTERTAINMENT INDUSTRY FOUNDATION	Employer identification number 95-1644609
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Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

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

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	GRANTMAKING		2,152,923.
SUB-SAHARAN AFRICA	0	0	GRANTMAKING		1,315,600.
NORTH AMERICA	0	0	GRANTMAKING		972,737.
EAST ASIA AND THE PACIFIC	0	0	GRANTMAKING		350,000.
3 a Subtotal	0	0			4,791,260.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			4,791,260.

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)
		NORTH AMERICA	GENERAL PROGRAM	547,737.	WIRE	0.		
		NORTH AMERICA	GENERAL PROGRAM	375,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	255,075.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	GENERAL PROGRAM	250,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	172,500.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	155,075.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	125,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	125,000.	WIRE	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 71

3 Enter total number of other organizations or entities

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	125,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	100,000.	WIRE	0.		
		EAST ASIA AND THE PACIFIC	GENERAL PROGRAM	100,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	100,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	100,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	100,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	100,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	100,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	100,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	100,000.	WIRE	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	100,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	99,996.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	80,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	67,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	66,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	66,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	66,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	62,800.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	60,000.	WIRE	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	60,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	55,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	50,100.	WIRE	0.		
		NORTH AMERICA	GENERAL PROGRAM	50,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	50,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	50,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	50,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	50,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	50,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	50,000.	WIRE	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	45,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	42,500.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	40,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	40,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	35,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	32,500.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	30,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	30,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	29,000.	WIRE	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	29,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	26,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	25,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	25,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	25,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	22,500.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	20,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	16,700.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	12,882.	WIRE	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	12,500.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	11,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	10,400.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	10,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	10,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	10,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	10,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	10,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	10,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	10,000.	WIRE	0.		

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	10,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	10,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	10,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	10,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	10,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	10,000.	WIRE	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	GENERAL PROGRAM	9,470.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	8,000.	WIRE	0.		
		SUB-SAHARAN AFRICA	GENERAL PROGRAM	6,100.	WIRE	0.		

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

Part III can be duplicated if additional space is needed.

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

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)* Yes No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to 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 the Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see the Instructions for Form 5471)* Yes No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see the Instructions for Form 8621)* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see the Instructions for Form 8865)* Yes No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)* Yes No

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:

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

PART I, LINE 3:

THE ACCRUAL BASIS OF ACCOUNTING IS THE METHOD USED TO ACCOUNT FOR EXPENDITURES.

**SCHEDULE G
(Form 990)**

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

2023

Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization ENTERTAINMENT INDUSTRY FOUNDATION	Employer identification number 95-1644609
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Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a Mail solicitations
 - b Internet and email solicitations
 - c Phone solicitations
 - d In-person solicitations
 - e Solicitation of non-government grants
 - f Solicitation of government grants
 - g Special fundraising events
- 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
ROBERTSON SCHWARTZ AGENCY - 1250 6TH ST., STE 201, SANTA MONICA, CA 90404	SU2C		X	13,278,449.	663,922.	12,614,527.
FRED SIEGEL PARTNERS - 37 SEA COLONY DRIVE, SANTA MONICA, CA 90405	SU2C		X	1,875,000.	93,750.	1,781,250.
ITHAKA VENTURES INC - 2610 GARFIELD ST NW, WASHINGTON, DC 20007	SU2C		X	950,000.	47,500.	902,500.
MINDFUL MEDIA PARTNERS, LLC - 1054 1ST STREET, MANHATTAN, NY 10017	SU2C		X	883,334.	44,167.	839,167.
KEVIN MCCABE - 70-11 JUNO STREET, FOREST HILL, NY 11731	UKRAINE CHILDRENS ACTION PROGRAM		X	145,231.	48,440.	96,791.
WEINSTEIN CARNEGIE PHILANTHROPIC GROUP - 724 AVENUE, BALTIMORE, MD 21230	CHARLIZE THERON AFRICA OUTREACH PROGRAM		X	0.	10,000.	-10,000.
EDGE DIRECT - 3030 WATERVIEW AVENUE, BALTIMORE, MD 21230	SU2C		X	0.	906,501.	-906,501.
Total				17,132,014.	1,814,280.	15,317,734.

- 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO
MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OR, OK, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		SU2C TELECAST (event type)	(event type)	(total number)	
Revenue	1	Gross receipts			
	2	Less: Contributions			
	3	Gross income (line 1 minus line 2)			
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses			
	10	Direct expense summary. Add lines 4 through 9 in column (d)			
	11	Net income summary. Subtract line 10 from line 3, column (d)			

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

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

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

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

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

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

Name _____

Address _____

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

Name _____

Address _____

16 Gaming manager information:

Name _____

Gaming manager compensation \$ _____

Description of services provided _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

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

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

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

(I) NAME OF FUNDRAISER: ROBERTSON SCHWARTZ AGENCY

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

(I) NAME OF FUNDRAISER: FRED SIEGEL PARTNERS

(I) ADDRESS OF FUNDRAISER: 37 SEA COLONY DRIVE, SANTA MONICA, CA 90405

(I) NAME OF FUNDRAISER: ITHAKA VENTURES INC

Part IV Supplemental Information (continued)

(I) ADDRESS OF FUNDRAISER: 2610 GARFIELD ST NW, WASHINGTON, DC 20008

(I) NAME OF FUNDRAISER: MINDFUL MEDIA PARTNERS, LLC

(I) ADDRESS OF FUNDRAISER: 1054 1ST STREET, MANHATTAN BEACH, CA 90266

(I) NAME OF FUNDRAISER: KEVIN MCCABE

(I) ADDRESS OF FUNDRAISER: 70-11 JUNO STREET, FOREST HILL, NY 11375

(I) NAME OF FUNDRAISER: WEINSTEIN CARNEGIE PHILANTHROPIC GROUP

(I) ADDRESS OF FUNDRAISER: 724 ALTA AVENUE, SANTA MONICA, CA 90402

(I) NAME OF FUNDRAISER: EDGE DIRECT

(I) ADDRESS OF FUNDRAISER: 3030 WATERVIEW AVENUE, BALTIMORE, MD 21230

SCHEDULE G

THE FOUNDATION PAYS CERTAIN EXPENSES ON BEHALF OF ITS SUPPORTING

ORGANIZATION, STAND UP TO CANCER IN CONNECTION WITH FUNDRAISING

ACTIVITIES. THESE PAYMENTS ARE INCLUDED ON THE FOUNDATION'S FORM 990,

SCHEDULE G.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

**Open to Public
Inspection**

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

Part I General Information on Grants and Assistance

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
AMERICAN ASSOCIATION FOR CANCER RESEARCH (AACR) - 615 CHESTNUT STREET 17TH FLOOR - PHILADELPHIA, PA 19106	23-6251648	501(C)(3)	10,818,000.	0.			GENERAL PROGRAM
MASSACHUSETTS GENERAL HOSPITAL 55 FRUIT STREET BOSTON, MA 02114	04-1564655	501(C)(3)	1,772,957.	0.			GENERAL PROGRAM
ICAHN SCHOOL OF MEDICINE AT MOUNT SINAI - 1 GUSTAVE L LEVY PLACE BOX 1049 - NEW YORK, NY 10029	13-6171197	501(C)(3)	1,541,667.	0.			GENERAL PROGRAM
MEMORIAL SLOAN KETTERING CANCER CTR - OFFICE OF DEVELOPMENT 885 SECOND AVE 7TH FLOOR - NEW YORK, NY 10017	13-1924236	501(C)(3)	1,177,500.	0.			GENERAL PROGRAM
PROVIDENCE HEALTH SYSTEM - SOUTHERN CALIFORNIA AND ITS WHOLLY OWNED AFFILIATES - 2200 SANTA MONICA BLVD - SANTA MONICA, CA	95-4291515	501(C)(3)	1,070,000.	0.			GENERAL PROGRAM
NYU GROSSMAN SCHOOL OF MEDICINE ONE PARK AVENUE 6TH FLOOR NEW YORK, NY 10016	13-5562308	501(C)(3)	1,065,000.	0.			GENERAL PROGRAM

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 84.
- 3** Enter total number of other organizations listed in the line 1 table 0.

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

Schedule I (Form 990) 2023

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BROAD INSTITUTE 415 MAIN STREET CAMBRIDGE, MA 02142	26-3428781	501(C)(3)	880,000.	0.			GENERAL PROGRAM
TRUSTEES OF PRINCETON UNIVERSITY 87 PROSPECT AVENUE 2ND FLOOR PRINCETON, NJ 08544	21-0634501	501(C)(3)	600,000.	0.			GENERAL PROGRAM
LELAND STANFORD JUNIOR UNIVERSITY 450 JANE STANFORD WAY STANFORD, CA 94305	94-1156365	501(C)(3)	500,000.	0.			GENERAL PROGRAM
DANA FARBER CANCER INSTITUTE 44 BINNEY STREET BOSTON, MA 02115	04-2263040	501(C)(3)	495,977.	0.			GENERAL PROGRAM
THE ROCKEFELLER UNIVERSITY 1230 YORK AVE NEW YORK, NY 10065	13-1624158	501(C)(3)	450,000.	0.			GENERAL PROGRAM
ROYBAL FILM AND TELEVISION MAGNET 1200 COLTON STREET LOS ANGELES, CA 90026	95-6001908	501(C)(3)	430,000.	0.			GENERAL PROGRAM
JOHNS HOPKINS UNIVERSITY (GRANT) 733 N BROADWAY SUITE 117 BALTIMORE, MD 21205	52-0595110	501(C)(3)	416,319.	0.			GENERAL PROGRAM
THE UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER AT SAN ANTONIO - 7703 FLOYD CURL DRIVE MSC 7818 - SAN ANTONIO, TX 78229-3901	74-1586031	501(C)(3)	399,999.	0.			GENERAL PROGRAM
JUST KEEP LIVIN FOUNDATION 1107 GLENDON AVENUR LOS ANGELES, CA 90024	20-3921057	501(C)(3)	385,000.	0.			GENERAL PROGRAM

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF SOUTHERN CALIFORNIA (USC) - 1441 EASTLAKE AVENUE SUITE 3419 - LOS ANGELES, CA 90089	95-1642394	501(C)(3)	302,466.	0.			GENERAL PROGRAM
VIRGINIA COMMONWEALTH UNIVERSITY 800 EAST LEIGH STREET SUITE 3200 RICHMOND, VA 23298-0568	54-6001758	501(C)(3)	300,000.	0.			GENERAL PROGRAM
CHILDREN'S HOSPITAL OF PHILADELPHIA - 2716 SOUTH STREET - PHILADELPHIA, CA 19146-2305	23-1352166	501(C)(3)	300,000.	0.			GENERAL PROGRAM
THE TRUSTEES OF COLUMBIA UNIVERSITY IN THE CITY OF NEW YORK - 154 HAVEN AVENUE 2ND FLOOR - NEW YORK, NY 10032-3702	13-5598093	501(C)(3)	262,500.	0.			GENERAL PROGRAM
BILL, HILLARY & CHELSEA CLINTON FOUNDATION - 1271 AVENUE OF THE AMERICAS 42ND FLOOR - NEW YORK, NY 10020	31-1580204	501(C)(3)	250,000.	0.			GENERAL PROGRAM
UNIVERSITY OF CHICAGO 6054 S DREXEL AVENUE SUITE 300 CHICAGO, IL 60637	36-2177139	501(C)(3)	248,243.	0.			GENERAL PROGRAM
THE QUELL FOUNDATION 28 HIGHWOOD LANE EAST FLAMOUTH, MA 02536	47-5127883	501(C)(3)	200,000.	0.			GENERAL PROGRAM
LUCILE PACKARD FOUNDATION FOR CHILDREN'S HEALTH - 400 HAMITON AVE, SUITE 340 - PALO ALTO, CA 94301	77-0440090	501(C)(3)	200,000.	0.			GENERAL PROGRAM
NYU LANGONE HOSPITALS 550 FIRST AVENUE NEW YORK, NY 10016	13-3971298	501(C)(3)	194,300.	0.			GENERAL PROGRAM

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE INSTITUTE FOR CANCER RESEARCH DBA THE RESEARC INSTITUTE OF FOX CHASE CANCER - DBA THE RESEARC INSTITUTE OF FOX CHASE CANCER	23-6296135	501(C)(3)	178,243.	0.			GENERAL PROGRAM
UNIVERSITY OF TEXAS SOUTHWESTERN MEDICAL CENTER - 5230 MEDICAL CENTER DRIVE PHYS - DALLAS, TX 75390	75-2556007	501(C)(3)	178,243.	0.			GENERAL PROGRAM
LUNDQUIST INSTITUTE FOR BIOMEDICAL INNOVATION AT HARBOR-UCLA MEDICAL CENTER - 1124 W CARSON STREET - TORRANCE, CA 90502-2006	95-2138184	501(C)(3)	148,280.	0.			GENERAL PROGRAM
GLENN'S FERRY HEALTH CENTER, INC. DBA DESERT SAGE HEALTH CENTERS - 2280 AMERICAN LEGION BLVD - MOUNTAIN HOME, ID 83647	82-0372009	501(C)(3)	146,000.	0.			GENERAL PROGRAM
THE JOHNS HOPKINS HEALTH SYSTEM CORPORATION - 3910 KESWICK ROAD BUILDING 4300A - BALTIMORE, MD 21211	52-1465301	501(C)(3)	119,970.	0.			GENERAL PROGRAM
MASSACHUSETTS INSTITUTE OF TECHNOLOGY - 77 MASSACHUSETTS AVE - CAMBRIDGE, MA 02139	04-2103594	501(C)(3)	116,667.	0.			GENERAL PROGRAM
ASPEN CANCER CONFERENCE 419 MEADOW COURT BASALT, CO 81621	52-1746776	501(C)(3)	100,000.	0.			GENERAL PROGRAM
THE UCLA FOUNDATION 10889 WILSHIRE BOULEVARD SUITE 1100 LOS ANGELES, CA 90024	95-2250801	501(C)(3)	94,585.	0.			GENERAL PROGRAM
AMERICAN FEDERATION OF TEACHERS DISASTER RELIEF FUND - 555 NEW JERSEY AVENUE, NW - WASHINGTON, DC 20001	20-3664119	501(C)(3)	75,000.	0.			GENERAL PROGRAM

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOCIAL IMPACT FUND 750 W. 7TH STREET PO BOX 811026 LOS ANGELES, CA 90081	46-1820448	501(C)(3)	75,000.	0.			GENERAL PROGRAM
KURKA CHILDRENS HEALTH FUND 3051 W NORWOOD PLACE ALHAMBRA, CA 91803	95-4147257	501(C)(3)	75,000.	0.			GENERAL PROGRAM
AFRICAN PARKS FOUNDATION OF AMERICA (GRANT) - 21 WEST 46TH STREET - NEW YORK, NY 10036	30-0241094	501(C)(3)	74,000.	0.			GENERAL PROGRAM
CHOC FOUNDATION 1201 W LA VETA AVENUE ORANGE, CA 92868	95-6097416	501(C)(3)	70,000.	0.			GENERAL PROGRAM
AGAHOZO-SHALOM YOUTH VILLAGE PO BOX 7299 NEW YORK, NY 10036	27-3530769	501(C)(3)	68,000.	0.			GENERAL PROGRAM
MONTEFIORE MEDICAL CENTER 111 EAST 210TH STREET BRONX, NY 10467	13-1740114	501(C)(3)	67,000.	0.			GENERAL PROGRAM
ALASKA NATIVE TRIBAL HEALTH CONSORTIUM - 4000 AMBASSADOR DRIVE - ANCHORAGE, AK 99502-5909	92-0162721	501(C)(3)	60,101.	0.			GENERAL PROGRAM
CANCER FOR COLLEGE 1050 UNIVERSITY AVE SUITE E107 #705 SAN DIEGO, CA 92103	93-1144756	501(C)(3)	50,000.	0.			GENERAL PROGRAM
INTERNATIONAL MEDICAL CORPS 12400 WILSHIRE BLVD SUITE 1500 LOS ANGELES, CA 90025	95-3949646	501(C)(3)	50,000.	0.			GENERAL PROGRAM

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE JED FOUNDATION AKA JED PO BOX 412945 BOSTON, MA 02241	13-4131139	501(C)(3)	47,500.	0.			GENERAL PROGRAM
DONORSCHOOSE.ORG 134 WEST 37TH STREET, FLOOR 11 NEW YORK, NY 10018	13-4129457	501(C)(3)	40,000.	0.			GENERAL PROGRAM
PRAISE IS THE CURE 766 OLD YORK RD JENKINTOWN, PA 19046	47-2440768	501(C)(3)	38,500.	0.			GENERAL PROGRAM
BREATHING ROOM FOUNDATION 8310 BROOKSIDE ROAD ELKINS PARK, PA 19027	23-2916337	501(C)(3)	36,000.	0.			GENERAL PROGRAM
CANCER SUPPORT COMMUNITY NORTH TEXAS - PO BOX 12688 - DALLAS, TX 75225	75-2633654	501(C)(3)	36,000.	0.			GENERAL PROGRAM
FEONIX MOBILITY RISING 211 N 14TH STREET LINCOLN, NE 68508	82-4842980	501(C)(3)	36,000.	0.			GENERAL PROGRAM
EQUAL HOPE DBA METROPOLITAN CHICAGO BREAST CANCER TASK FORCE - 300 SOUTH ASHLAND AVENUE - CHICAGO, IL 60607	26-2264895	501(C)(3)	35,983.	0.			GENERAL PROGRAM
INGALLS DEVELOPMENT FOUNDATION ONE INGALLS DRIVE HARVEY, IL 60426	36-3189150	501(C)(3)	33,125.	0.			GENERAL PROGRAM
LIONS CLUBS INTERNATIONAL FOUNDATION - 300 WEST 22ND ST - OAK BROOK, IL 60523	23-7030455	501(C)(3)	30,000.	0.			GENERAL PROGRAM

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ISIBANI GCILIMA, KWAXOLO KWA-ZULU NATAL, CA 04275	25-7629000	501(C)(3)	30,000.	0.			GENERAL PROGRAM
BUMB'INGOMSO 60A FRERE RD VINCENT EAST LONDON, CA 05217	93-0008414	501(C)(3)	30,000.	0.			GENERAL PROGRAM
TRIAGE CANCER 6348 N. MILWAUKEE AVE #136 CHICAGO, IL 60646	45-5132661	501(C)(3)	28,000.	0.			GENERAL PROGRAM
CORPORATE ANGEL NETWORK 1 LOOP RD WEST HARRISON, NJ 10604	13-6143014	501(C)(3)	27,500.	0.			GENERAL PROGRAM
ST. BALDRICK'S FOUNDATION (GRANT) 1333 SOUTH MAYFLOWER AVENUE SUITE 4 MONROVIA, CA 91016	20-1173824	501(C)(3)	27,500.	0.			GENERAL PROGRAM
CANCER HOPE NETWORK 2 NORTH ROAD SUITE A CHESTER, NJ 07930	22-2647316	501(C)(3)	27,500.	0.			GENERAL PROGRAM
UBUNTU PATHWAYS AKA UBUNTU 32 BROADWAY SUITE 414 NEW YORK, NY 10004	31-1705917	501(C)(3)	25,000.	0.			GENERAL PROGRAM
NAMI CHICAGO 1801 W WARNER SUITE 202 CHICAGO, IL 60618	36-3075407	501(C)(3)	25,000.	0.			GENERAL PROGRAM
DREAMS FOR KIDS 9 WEST WASHINGTON STREET CHICAGO, IL 60602	45-2406296	501(C)(3)	25,000.	0.			GENERAL PROGRAM

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CRISIS TEXT LINE (GRANT) PO BOX 1144 NEW YORK, NY 10159	46-5039599	501(C)(3)	25,000.	0.			GENERAL PROGRAM
UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL FOUNDATION INC - UNC SCHOOL OF EDUCATION PEADODY HALL, CB# 3500 - CHAPEL HILL, NC	59-1711424	501(C)(3)	25,000.	0.			GENERAL PROGRAM
ETERNAL SEEDS INC 56 YELLOWSTONE DRIVE NEW ORLEANS, IL 70131	85-1699102	501(C)(3)	25,000.	0.			GENERAL PROGRAM
POSITIVE COACHING ALLIANCE 66 FRANKLIN STREET SUITE 300 OAKLAND, CA 94607	77-0485946	501(C)(3)	20,000.	0.			GENERAL PROGRAM
GET IN THE GAME PO BOX 11908 WINSTON SALEM, NC 27116	85-1934425	501(C)(3)	20,000.	0.			GENERAL PROGRAM
BRING CHANGE TO MIND 155 SANSOME STREET SUITE 530 SAN FRANCISCO, CA 94104	01-0974537	501(C)(3)	15,000.	0.			GENERAL PROGRAM
VISITING NURSE SERVICES OF NEW YORK DBA VNS HEALTH - PO BOX 6445 - NEW YORK, NY 10249	13-3189926	501(C)(3)	15,000.	0.			GENERAL PROGRAM
SOCIAL GOOD FUND 12651 SAN PABLO AVE #5473 RICHMOND, CA 94805	46-1323531	501(C)(3)	15,000.	0.			GENERAL PROGRAM
SOPHIE GERSON HEALTHY YOUTH 505 LAGUARDIA PL NEW YORK, NY 10012	46-2977659	501(C)(3)	15,000.	0.			GENERAL PROGRAM

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOLD FOUNDATION INC 1624 MARKET STREET SUITE 226, PMB 1 DENVER, CO 80202-1559	84-2719715	501(C)(3)	15,000.	0.			GENERAL PROGRAM
CENTER FOR SCHOLARS & STORYTELLERS 1014 BROADWAY STE 495 SANTA MONICA, CA 90401	92-1663411	501(C)(3)	14,000.	0.			GENERAL PROGRAM
KINDNESS.ORG INC 1350 AVENUE OF THE AMERICAS, FL 2 NEW YORK, NY 10019	81-1617915	501(C)(3)	13,900.	0.			GENERAL PROGRAM
FISCAL SPONSORSHIP ALLIES 9100 PURDUE RD STE 115 INDIANAPOLIS, IN 46268	85-0839183	501(C)(3)	12,500.	0.			GENERAL PROGRAM
DRAMA LEAGUE OF NEW YORK 32 AVENUE OF THE AMERICAS 1ST FLOOR NEW YORK, NY 10013	13-6160961	501(C)(3)	10,500.	0.			GENERAL PROGRAM
FRACTURED ATLAS P.O. BOX 55 HARTSDALE, NY 10530	11-3451703	501(C)(3)	10,012.	0.			GENERAL PROGRAM
NATIONAL SCHOOL CLIMATE CENTER AKA NSCC - 341 WEST 38TH STREET 9TH FLOOR - NEW YORK, NY 10018	13-3974819	501(C)(3)	10,000.	0.			GENERAL PROGRAM
LIVE4LALI INC 3275 N ARLINGTON HEIGHTS ROAD SUITE 403 - ARLINGTON HEIGHTS, IL 60004	26-4320802	501(C)(3)	10,000.	0.			GENERAL PROGRAM
YOUTH OUTREACH SERVICES 2411 W. CONGRESS PKWY CHICAGO, IL 60612	36-3297629	501(C)(3)	10,000.	0.			GENERAL PROGRAM

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GATEWAY CHARITABLE FOUNDATION 55 E JACKSON BLVD STE 1500 CHICAGO, IL 60604	36-4063660	501(C)(3)	10,000.	0.			GENERAL PROGRAM
ARRAY ALLIANCE 180 GLENDALE BLVD LOS ANGELES, CA 90026	82-5268574	501(C)(3)	10,000.	0.			GENERAL PROGRAM
A PLACE CALLED HOME 2830 S CENTRAL AVE LOS ANGELES, CA 90011	95-4427291	501(C)(3)	10,000.	0.			GENERAL PROGRAM
PHOTO PATCH FOUNDATION PO BOX 19957 WEST PALM BEACH, FL 33416	47-2795597	501(C)(3)	8,000.	0.			GENERAL PROGRAM
ANTI-DEFAMATION LEAGUE 605 THIRD AVENUE NEW YORK, NY 10158	13-1818723	501(C)(3)	6,500.	0.			GENERAL PROGRAM
PAGE TURNERS MAKE GREAT LEARNERS PO BOX 7723 ATLANTA, GA 30357	20-0364107	501(C)(3)	5,996.	0.			GENERAL PROGRAM

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
MAUI RELIEF	8200	38,151,300.	0.		

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

SCHEDULE I, PART I, LINE 2:

PROCESS FOR MONITORING USE OF GRANT FUNDS IN THE UNITED STATES: EIF'S

PROCEDURE FOR MONITORING THE USE OF GRANT FUNDS CONSISTS OF REPORTING

REQUIREMENTS THAT ARE WRITTEN INTO EACH GRANT AGREEMENT REQUIRING THE

GRANTEE TO PROVIDE PERIODIC REPORTS ON THE USE OF THE FUNDS. EIF'S

OPERATIONS DEPARTMENT MANAGES THE PROCESS OF FOLLOW-UP TO ENSURE

REPORTS ARE RECEIVED, REVIEWED, AND REPORTABLE.

Part IV Supplemental Information

SCHEDULE I, PART III

THE PEOPLE'S FUND OF MAUI PROVIDED DIRECT FINANCIAL ASSISTANCE TO THE PEOPLE OF LAHAINA AND KULA WHO EXPERIENCED DEVASTATING LOSSES FROM THE MAUI WILDFIRES. INDIVIDUALS COULD APPLY FOR MONTHLY DISBURSEMENTS OF \$1,200 THROUGH EITHER IN PERSON SUPPORT CENTER IN WEST MAUI OR A MAUI CALL CENTER THAT WAS AVAILABLE SEVEN DAYS A WEEK TO OFFER HELP FOR RESIDENTS.

SCHEDULE I

THE FOUNDATION RECEIVES FUNDS FROM ITS SUPPORTING ORGANIZATION, STAND UP TO CANCER. THESE FUNDS ARE DIRECTED TO ORGANIZATIONS THAT SUPPORT CANCER RESEARCH AND SUPPORT AND ARE INCLUDED AS GRANTS FROM THE FOUNDATION ON SCHEDULE I.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

ENTERTAINMENT INDUSTRY FOUNDATION

Employer identification number

95-1644609

Part I Questions Regarding Compensation

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.

- | | |
|--|---|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input checked="" type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> 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

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?

3 Indicate which, if any, of the following the 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.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> 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:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- 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:

- a** The organization?
- b** Any related organization?
- 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:

- a** The organization?
- b** Any related organization?
- 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 not described on lines 5 and 6? If "Yes," describe in Part III

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

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b	X	
2	X	
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7	X	
8		X
9		

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

Schedule J (Form 990) 2023

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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) NICOLE SEXTON CEO	(i)	356,077.	10,000.	1,290.	6,062.	17,512.	390,941.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) DANA LIPMAN SVP HR & LABOR REL.	(i)	225,920.	33,957.	926.	6,006.	19,786.	286,595.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) SHAWN BURKE INTERIM CFO (TO 2/23); CFO	(i)	228,174.	25,000.	451.	6,390.	18,738.	278,753.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) JORDAN M JACUZZI SVP OPS/COMMS/GOVERN. (AS OF 01/23)	(i)	168,813.	12,038.	115.	6,118.	16,852.	203,936.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) BRIAN GOTT INNOVATION & INDUSTRY RELATIONS	(i)	160,257.	12,500.	200.	6,271.	16,657.	195,885.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) ELIZABETH R MOSELY DIR. OPERATIONS AND PROGRAM MGMT	(i)	161,347.	7,500.	121.	6,341.	16,384.	191,693.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) KAREN WILLIAMS VP OF PROGRAMMING, ROYBAL	(i)	127,385.	10,000.	400.	6,334.	16,331.	160,450.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) AIDA MORROW EXECUTIVE DIRECTOR, SCFU	(i)	107,783.	22,500.	35.	6,877.	19,954.	157,149.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) JEFFREY THACKER VICE PRESIDENT, DIGITAL KYRC	(i)	129,231.	0.	34.	5,979.	15,474.	150,718.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(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.

PART I, LINE 1A:

THE ORGANIZATION PROVIDED A TAXABLE REIMBURSEMENT OF HEALTH OR SOCIAL

CLUB DUES OR INITIATION FEES FOR UP TO \$200 PER EMPLOYEE BASED ON A 50%

REIMBURSEMENT.

PART I, LINE 7:

DESCRIPTION OF NON-FIXED PAYMENTS

DISCRETIONARY BONUSES ARE AWARDED BASED UPON THE EMPLOYEE MEETING A

VARIETY OF PERFORMANCE METRICS. ALL BONUSES ARE REVIEWED BY THE CEO,

SU2C CEO AND CFO. THE ONLY EXCEPTION IS THE CEO'S BONUS, WHICH IS

DETERMINED BY THE BOARD OF DIRECTORS. ADDITIONALLY, THE PROPOSED

BONUSES FOR ANY KEY EMPLOYEES AND OFFICERS ARE SUBMITTED TO THE

EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS FOR THEIR REVIEW AND

APPROVAL.

SCHEDULE L
(Form 990)

Transactions With Interested Persons

OMB No. 1545-0047

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

2023

Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization ENTERTAINMENT INDUSTRY FOUNDATION	Employer identification number 95-1644609
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Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b; or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

- 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 \$ _____
- 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization \$ _____

Part II Loans to and/or From Interested Persons

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

	(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
				To	From			Yes	No	Yes	No	Yes	No
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
Total							\$						

Total \$

Part III Grants or Assistance Benefiting Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

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

Schedule L (Form 990) 2023

**SCHEDULE O
(Form 990)**

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 Form 990-EZ.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

ENTERTAINMENT INDUSTRY FOUNDATION

Employer identification number

95-1644609

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

FOUNDED IN 1942, THE ENTERTAINMENT INDUSTRY FOUNDATION ("EIF") IS A
MULTIFACETED ORGANIZATION THAT OCCUPIES A UNIQUE PLACE IN THE WORLD OF
PHILANTHROPY. BY MOBILIZING AND LEVERAGING THE POWERFUL VOICE AND
CREATIVE TALENTS OF THE ENTIRE ENTERTAINMENT COMMUNITY, AS WELL AS
CULTIVATING THE SUPPORT OF ORGANIZATIONS (PUBLIC AND PRIVATE) AND
PHILANTHROPISTS COMMITTED TO SOCIAL RESPONSIBILITY, EIF BUILDS
AWARENESS AND RAISES FUNDS, DEVELOPING AND ENHANCING PROGRAMS ON THE
LOCAL, NATIONAL AND GLOBAL LEVEL THAT FACILITATE POSITIVE SOCIAL
CHANGE. THE FOUNDATION ALSO SUPPORTS AND ENCOURAGES THE PHILANTHROPIC
EFFORTS OF ALL MEMBERS OF THE ENTERTAINMENT COMMUNITY.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

THE ENTERTAINMENT INDUSTRY FOUNDATION (EIF) CAREERS PROGRAM IS
INCREASING ACCESS TO ENTERTAINMENT CAREERS FOR HISTORICALLY EXCLUDED
COMMUNITIES BY LEVERAGING DEEPLY ROOTED RELATIONSHIPS IN THE
ENTERTAINMENT INDUSTRY AND AMONG COMMUNITY-BASED ORGANIZATIONS.

BUILDING ON EIF'S HISTORIC COMMITMENT TO FURTHERING THE PHILANTHROPIC
EFFORTS OF THE ENTERTAINMENT COMMUNITY, DEFY DISASTER ALLOWS FOR
IMMEDIATE RESPONSE IN THE WAKE OF HUMANITARIAN CRISES.

EXPENSES \$ 538,516. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

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

FORM 990 REVIEW PROCESS

THE EIF AUDIT/TAX FIRM AND THE EIF FINANCE TEAM WORK TOGETHER TO GATHER THE

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

Schedule O (Form 990) 2023

LHA 332211 11-14-23

Name of the organization ENTERTAINMENT INDUSTRY FOUNDATION	Employer identification number 95-1644609
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REQUIRED INFORMATION NECESSARY TO COMPLETE THE FORM 990. THE TAX FIRM

PREPARES AN INITIAL DRAFT FORM 990 AND REVIEWS THIS INITIAL DRAFT WITH THE

FINANCE TEAM; ALL LINE ITEMS ARE REVIEWED AND ANY ITEMS IN QUESTION ARE

DISCUSSED. THE FORM 990 IS REVIEWED BY THE AUDIT COMMITTEE OF THE BOARD OF

DIRECTORS. THE FORM 990 IS THEN DISTRIBUTED TO THE FULL BOARD OF DIRECTORS

FOR REVIEW PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE.

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

MONITORING AND ENFORCEMENT OF CONFLICT OF INTEREST POLICY

AN ANNUAL QUESTIONNAIRE IS DISTRIBUTED TO EACH BOARD MEMBER, OFFICER, KEY

EMPLOYEE, AND ANY OTHER PERSON WHO REGULARLY ATTENDS THE ORGANIZATION BOARD

AND COMMITTEE MEETINGS. INDIVIDUALS MUST COMPLETE AND FILE A CONFLICT OF

INTEREST DISCLOSURE STATEMENT BEFORE SERVING ON THE ORGANIZATION BOARD OR

ANY COMMITTEE. OUTSIDE COUNCIL MONITORS THE COMPLIANCE OF THE CONFLICT OF

INTEREST POLICY. BOARD MEMBERS WHO SERVE ON OTHER BOARDS MUST RECUSE

THEMSELVES IF A BOARD VOTE COMES UP TO APPROVE A GRANT ON BEHALF OF ANOTHER

BOARD OR AFFILIATION WHERE THEY SERVE. ADDITIONALLY, THE SU2C COUNCIL OF

FOUNDERS AND ADVISORS WHO SERVE IN COMPENSATED CAPACITIES MUST ALL HAVE AN

INDEPENDENT REVIEW OF THE REASONABLENESS OF THEIR COMPENSATION AND THOSE

REVIEWS ARE APPROVED BY THE CHAIR OF THE AUDIT COMMITTEE.

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

PROCESS FOR DETERMINING COMPENSATION OF OFFICERS & KEY EMPLOYEES

THE CHAIR OF THE EIF AUDIT COMMITTEE HIRES A PROFESSIONAL FIRM THAT

PERFORMS AN INDEPENDENT COMPENSATION ASSESSMENT ON BEHALF OF ALL EIF KEY

EMPLOYEES AND OFFICERS. THE RESULTS OF THAT REVIEW WERE PRESENTED TO THE

BOARD. AS A RESULT, THE ORGANIZATION ALSO RECEIVED AN OPINION LETTER AS TO

THE REASONABLENESS OF SUCH COMPENSATION, AS SET FORTH BY SECTION 4958 AND

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

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

AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, MO, MT, NV, NH, NJ, NM

NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

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

DOCUMENTS MADE AVAILABLE TO THE PUBLIC

THE FOUNDATION'S GOVERNING DOCUMENTS AND POLICIES ARE AVAILABLE TO THE PUBLIC UPON REQUEST. AUDITED FINANCIAL STATEMENTS AND THE PUBLIC DISCLOSURE COPY OF THE FORM 990 ARE POSTED ON THE FOUNDATION'S OFFICIAL WEBSITE (WWW.EIFFOUNDATION.ORG) OR AVAILABLE UPON REQUEST.

FORM 990, PART VII, SECTION B:

COMPENSATION OF THE FIVE HIGHEST PAID INDEPENDENT CONTRACTORS

THE FOLLOWING REFLECT THE FULL DESCRIPTION OF SERVICES PROVIDED BY THE RESPECTIVE INDEPENDENT SERVICE PROVIDERS REPORTED ON FORM 990, PART VII, SECTION B:

ROBERTSON SCHWARTZ AGENCY: MARKETING, FUNDRAISING, STRATEGY DEVELOPMENT AND EXECUTION, DONOR CULTIVATION AND ACQUISITION, MERCHANDISE DEVELOPMENT AND OVERSIGHT, LICENSING DEVELOPMENT AND OVERSIGHT, COMMERCIAL CO VENTURES DEVELOPMENT AND OVERSIGHT, CAUSE MARKETING CAMPAIGN DEVELOPMENT AND OVERSIGHT, CREATIVE OVERSIGHT. ALSO, BRAND DEVELOPMENT, DONOR MANAGEMENT, PSA MANAGEMENT, COLLATERAL DEVELOPMENT, COMMUNITY OUTREACH DEVELOPMENT AND OVERSIGHT.

FORM 990, PART IX, LINE 11G, OTHER FEES:

PROFESSIONAL CONSULTING:

Name of the organization ENTERTAINMENT INDUSTRY FOUNDATION	Employer identification number 95-1644609
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PROGRAM SERVICE EXPENSES 6,771,151.

MANAGEMENT AND GENERAL EXPENSES 596,194.

FUNDRAISING EXPENSES 2,572,316.

TOTAL EXPENSES 9,939,661.

BANK & MERCHANT FEES:

MANAGEMENT AND GENERAL EXPENSES 3,301.

FUNDRAISING EXPENSES 432,899.

TOTAL EXPENSES 436,200.

TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A 10,375,861.

PART XI, RECONCILIATION OF NET ASSETS:

\$340,505 OF NET ASSETS WERE TRANSFERRED OUT OF THE ORGANIZATION TO

ANOTHER 501(C)3 AS A RESULT OF THE TERMINATION OF ONE OF OUR CHARITABLE

SERVICE FUNDS.

FORM 990, SCHEDULE L, PART IV:

THE FOUNDATION DONATES CERTAIN EXPENSES AND SERVICES TO ITS SUPPORTING

ORGANIZATION, STAND UP TO CANCER. STAND UP TO CANCER WAS PREVIOUSLY A

DIVISION WITHIN THE FOUNDATION AND CERTAIN AUTHORITY AND RESPONSIBILITY

WAS GIVEN TO ITS CO-FOUNDERS. THESE CO-FOUNDERS DO NOT CONSTITUTE

MEMBERS OF THE GOVERNING BODY OF EITHER THE FOUNDATION OR STAND UP TO

CANCER AS PROVIDED IN THE FORM 990 INSTRUCTION NOR ARE THEY FOUNDATION

OFFICERS OR KEY EMPLOYEES.

IN THE INTEREST OF TRANSPARENCY, THE FOUNDATION IS DISCLOSING BUSINESS

TRANSACTIONS WITH THE CO-FOUNDERS AND THEIR COMPANIES EVEN THOUGH THE

CO-FOUNDERS DO NOT MEET THE "INTERESTED PERSONS" DEFINITION FOR

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

THE BELOW LISTED CO-FOUNDERS RECEIVED COMPENSATION FROM THE FOUNDATION
 FOR THEIR SERVICES RELATED TO STAND UP TO CANCER AS EITHER CONSULTANTS
 OR FROM COMPENSATION TO THEIR WHOLLY-OWNED COMPANIES. LISTED ARE THE
 APPLICABLE CO-FOUNDERS AND THE COMPENSATION PAID TO THEM IN 2023:

COMPENSATION REPORTED ON FORM 1099 - CALENDER YEAR 2023

SUE SCHWARTZ AND RUSTY ROBERTSON

EACH ARE 50% OWNERS OF THE ROBERTSON SCHWARTZ AGENCY

\$1,987,156

LISA PAULSEN

OWNER OF MINDFUL MEDIA PARTNERS, LLC

SU2C TALENT CONSULTANT

\$104,167

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization <p align="center">ENTERTAINMENT INDUSTRY FOUNDATION</p>	Employer identification number <p align="center">95-1644609</p>
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Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
STAND UP TO CANCER MUSIC, LLC - 26-3299754 10880 WILSHIRE BLVD, SUITE 1400 LOS ANGELES, CA 90024	MUSIC RIGHTS	CALIFORNIA	0.	0.	EIF

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
STAND UP TO CANCER - 88-4115555 10880 WILSHIRE BLVD, SUITE 1400 LOS ANGELES, CA 90024	SUPPORTING CANCER RESEARCHERS AND INSTITUTIONS	CALIFORNIA	501(C)(3)	LINE 12A, I	EIF		X

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

Schedule R (Form 990) 2023

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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

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) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

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

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

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

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

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

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

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) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners sec. 501(c)(3) orgs.?		(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropor- tionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

Multiple horizontal lines for supplemental information input.