

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

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

OMB No. 1545-0047

2008

Open to Public
Inspection

A For the **2008** calendar year, or tax year beginning **JUL 1, 2008** and ending **JUN 30, 2009**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization HEART OF LOS ANGELES YOUTH, INC. Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite 2701 WILSHIRE BOULEVARD City or town, state or country, and ZIP + 4 LOS ANGELES, CA 90057	D Employer identification number 95-4397418
		E Telephone number (213) 389-1148
		G Gross receipts \$ 2,431,608.
		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ►
F Name and address of principal officer: ANTHONY M. BROWN SAME AS C ABOVE		
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c) (3) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ► WWW.HEARTOFLA.ORG		
K Type of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ►		L Year of formation: 1992 M State of legal domicile: CA

Part I Summary			
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: CONDUCT PROGRAMS TO BENEFIT THE YOUTH OF CENTRAL LOS ANGELES.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	23
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	22
Revenue	5 Total number of employees (Part V, line 2a)	5	61
	6 Total number of volunteers (estimate if necessary)	6	357
	7a Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0.
	b Net unrelated business taxable income from Form 990-T, line 34	7b	0.
Expenses	8 Contributions and grants (Part VIII, line 1h)	Prior Year 3,834,066.	Current Year 2,213,613.
	9 Program service revenue (Part VIII, line 2g)		
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	24,783.	17,892.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,858,849.	2,231,505.
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	47,254.	78,400.
	14 Benefits paid to or for members (Part IX, column (A), line 4)		
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,045,168.	1,198,515.
	16a Professional fundraising fees (Part IX, column (A), line 11e)		
	b Total fundraising expenses (Part IX, column (D), line 25) ► 200,746.		
Net Assets or Fund Balances	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	710,146.	598,303.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,802,568.	1,875,218.
	19 Revenue less expenses. Subtract line 18 from line 12	2,056,281.	356,287.
	20 Total assets (Part X, line 16)	Beginning of Year 3,588,838.	End of Year 3,726,794.
	21 Total liabilities (Part X, line 26)	659,679.	435,433.
	22 Net assets or fund balances. Subtract line 21 from line 20	2,929,159.	3,291,361.

Part II Signature Block			
Sign Here	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.		
	Signature of officer _____ Date _____ Type or print name and title _____		
Paid Preparer's Use Only	Preparer's signature ►	Date	Check if self-employed <input type="checkbox"/>
	Firm's name (or yours if self-employed), address, and ZIP + 4 ► QUIGLEY & MIRON, CPA'S 3550 WILSHIRE BOULEVARD--SUITE 1660 LOS ANGELES, CA 90010-2481	EIN ►	Preparer's identifying number (see instructions) Phone no. ► (213) 639-3550

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

Part III Statement of Program Service Accomplishments (see instructions)**1** Briefly describe the organization's mission:

TO PROVIDE UNDERSERVED YOUTH WITH EXCEPTIONAL PROGRAMS IN ACADEMICS, ARTS AND ATHLETICS WITHIN A NURTURING ENVIRONMENT, EMPOWERING THEM TO DEVELOP THEIR POTENTIAL, PURSUE THEIR EDUCATION AND STRENGTHEN THEIR COMMUNITIES.

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 ☒ No

If "Yes", describe these new services on Schedule O.

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

If "Yes", describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

SEE SCHEDULE O FOR CONTINUATION(S)**4a** (Code:) (Expenses \$ 256,814. including grants of \$ 16,667.) (Revenue \$)

ATHLETICS: HOLA'S ATHLETICS AND OUTDOOR ACTIVITIES PROGRAM PROMOTES PERSONAL DEVELOPMENT, HEALTH AND FITNESS, HEALTHY EATING AND EXERCISE HABITS AND A COMMITMENT TO ATHLETIC EXCELLENCE AND EXEMPLARY SPORTSMANSHIP. THROUGH THIS PROGRAM, WE STRIVE TO INTRODUCE OUR YOUTH TO A NEW AND DIVERSE SET OF TEAM AND INDIVIDUAL SPORTS. THE PROGRAM TEACHES THE KEY FUNDAMENTALS OF EACH SPORT WHILE GIVING OUR YOUTH THE OPPORTUNITY TO ENJOY AND EXPLORE THEIR ENVIRONMENT WHILE STAYING HEALTHY AND FIT. HOLA'S ATHLETIC DEPARTMENT UTILIZES SPORTS AS A VEHICLE TO ENCOURAGE UNDERSERVED YOUTH TO BE LIFE LONG PRACTITIONERS OF MAINTAINING A HEALTHY MIND, BODY AND LIFESTYLE AND TO RECEIVE ENCOURAGEMENT TO PURSUE POST SECONDARY EDUCATION. EACH YEAR OVER 690 STUDENTS PARTICIPATE IN A WIDE VARIETY OF ACTIVITIES SUCH AS, SOCCER,

4b (Code:) (Expenses \$ 364,291. including grants of \$ 16,717.) (Revenue \$)

FINE ARTS: HOLA'S MUSIC, ARTS AND CULTURE PROGRAM ENCOURAGES YOUTH TO CHANNEL THEIR ENERGY AND EMOTION INTO CREATIVE ENDEAVORS IN VISUAL AND PERFORMING ARTS AND MUSIC, DEVELOPING THEIR POWERS OF SELF-EXPRESSION, INSTILLING SELF-CONFIDENCE, AND FUELING THEIR INTEREST IN LEARNING. HOLA PROVIDES QUALITY INSTRUCTION AND EDUCATION IN VISUAL ARTS, PERFORMING ARTS AND MUSIC TO UNDERSERVED, INNER-CITY YOUTH WHO OTHERWISE HAVE LITTLE OR NO ACCESS TO ARTS PROGRAMMING. HOLA'S VISUAL AND PERFORMING ARTS CURRICULUM IS DESIGNED AND DELIVERED BY CREDENTIALLED TEACHERS, PROFESSIONAL INSTRUCTORS AND PASSIONATE VOLUNTEER ARTISTS AND MEETS THE REQUIREMENTS INDICATED IN THE VISUAL AND PERFORMING ARTS FRAMEWORK PUBLISHED BY THE CALIFORNIA DEPARTMENT OF EDUCATION. THE PROGRAM OPERATES SIX DAYS PER WEEK, YEAR ROUND,

4c (Code:) (Expenses \$ 950,982. including grants of \$ 45,016.) (Revenue \$)

EDUCATION: OUR ACADEMIC PROGRAMS ARE DESIGNED TO PROVIDE QUALITY SUPPLEMENTAL ACADEMIC SUPPORT FOR UNDERSERVED YOUTH IN OUR COMMUNITY AND TO PROVIDE THEM WITH THE TOOLS THEY NEED TO ACHIEVE A POST-SECONDARY EDUCATION. HOLA'S PROGRAMS ARE LED BY THE HIGHEST CALIBER OF INSTRUCTION AND MANAGEMENT WITH STAFF AND VOLUNTEERS HOLDING OVER 20 DOCTORATES, 37 MASTERS AND 137 BACHELORS DEGREES. OUR TEACHERS LEAD DAILY ACADEMIC TUTORING AND INDIVIDUAL ASSISTANCE TO ALL STUDENTS, AS WELL AS EVALUATION TO THOSE STUDENTS NEEDING ADDITIONAL SUPPORT. HOLA TEACHERS ALSO ATTEND PARENT CONFERENCES AND INDIVIDUALIZED EDUCATION PROGRAM (EIP) MEETINGS FOR HOLA STUDENTS THAT ARE STRUGGLING ACADEMICALLY. HOLA'S INCREDIBLE STAFF PROVIDES SPECIFIC INDIVIDUALIZED SUPPORT FOR EACH ONE OF THEIR PUPILS. ACADEMIC PROGRAMS TAKE PLACE

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

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ► \$ 1,572,087. (Must equal Part IX, Line 25, column (B).)

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1 X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>	4	X
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>	5	
6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8	X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	X
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	11 X	
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	12 X	
13 Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the U.S.?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? <i>If "Yes," complete Schedule F, Part I</i>	14b	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>	15	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>	16	X
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i>	17	X
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18 X	
19 Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20 Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>	20	X
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21 X	
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22 X	
23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J</i>	23	X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25</i>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	X
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I</i>	25b	X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26	X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27	X

Form 990 (2008)

Part IV Checklist of Required Schedules (continued)

	Yes	No
28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35	X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	X

Form 990 (2008)

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	19	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	61	
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
4b	If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a	Did the organization solicit any contributions that were not tax deductible?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	X	
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		X
7h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter: N/A		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter: N/A		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A		

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)**Section A. Governing Body and Management**

For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Yes	No
1a Enter the number of voting members of the governing body	23	
b Enter the number of voting members that are independent	22	
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?		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a material diversion of the organization's assets?		X
6 Does the organization have members or stockholders?		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9a Does the organization have local chapters, branches, or affiliates?		X
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	X	
11 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies

	Yes	No
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13 Does the organization have a written whistleblower policy?	X	
14 Does the organization have a written document retention and destruction policy?	X	
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:		
a The organization's CEO, Executive Director, or top management official?	X	
b Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions)	X	
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?		X
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken 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 **►CA**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
☐ Own website ☐ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **►**
THE ORGANIZATION - (213) 389-1148
2701 WILSHIRE BOULEVARD, LOS ANGELES, CA 90057

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

☐ Check this box if the organization did not compensate any officer, director, trustee, or key employee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
STUART KOENIG PRESIDENT	1.00	X		X				0.	0.	0.
JEFF LESAGE VICE PRESIDENT	1.00	X		X				0.	0.	0.
EDUARDO NOCHEZ SECRETARY	1.00	X		X				0.	0.	0.
HOWARD GROBSTEN TREASURER	1.00	X		X				0.	0.	0.
ALAN ADELMAN DIRECTOR	1.00	X						0.	0.	0.
ANDREW BERNSTEIN DIRECTOR	1.00	X						0.	0.	0.
J. BEN BOURGEOIS DIRECTOR	1.00	X						0.	0.	0.
ROD CARTER DIRECTOR	1.00	X						0.	0.	0.
DAVID DALTON DIRECTOR	1.00	X						0.	0.	0.
RAUL DE QUESADA DIRECTOR	1.00	X						0.	0.	0.
STEPHEN ESPINOSA DIRECTOR	1.00	X						0.	0.	0.
MICHAEL GALLAGHER DIRECTOR	1.00	X						0.	0.	0.
DEBRA GENTZ DIRECTOR	1.00	X						0.	0.	0.
GLENN GRITZNER DIRECTOR	1.00	X						0.	0.	0.
STEVEN HAUSER DIRECTOR	1.00	X						0.	0.	0.
KURT HOCKER DIRECTOR	1.00	X						0.	0.	0.
LIDIA S. MARTINEZ DIRECTOR	1.00	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	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
LAWRENCE MOORE DIRECTOR	1.00	X						0.	0.	0.
MITCHEL D. MOORE DIRECTOR	1.00	X						0.	0.	0.
J. WARREN RISSIER DIRECTOR	1.00	X						0.	0.	0.
CHRIS ROBICHAUD DIRECTOR	1.00	X						0.	0.	0.
PETER SCHUBE DIRECTOR	1.00	X						0.	0.	0.
ANTHONY M. BROWN EXECUTIVE DIRECTOR	40.00			X	X			104,657.	0.	6,204.
1b Total								104,657.	0.	6,204.

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization 1

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. **NONE**

(A) Name and business address	(B) Description of services	(C) Compensation
2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization	0	

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c	217,661.			
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	27,925.			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	1,968,027.			
	g	Noncash contributions included in lines 1a-1f: \$		146,321.			
	h	Total. Add lines 1a-1f		2213613.			
	Program Service Revenue	Business Code					
		2 a					
b							
c							
d							
e							
f		All other program service revenue					
g		Total. Add lines 2a-2f					
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		17,892.			17,892.
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a		(i) Real	(ii) Personal			
		Gross Rents					
		b	Less: rental expenses				
		c	Rental income or (loss)				
	d	Net rental income or (loss)					
	7 a		(i) Securities	(ii) Other			
		Gross amount from sales of assets other than inventory	102731.				
		b	Less: cost or other basis and sales expenses	102731.			
		c	Gain or (loss)				
	d	Net gain or (loss)					
	8 a	Gross income from fundraising events (not including \$ 217,661. of contributions reported on line 1c). See Part IV, line 18	a	97,372.			
		b	Less: direct expenses	b	97,372.		
	c	Net income or (loss) from fundraising events					
	9 a	Gross income from gaming activities. See Part IV, line 19	a				
		b	Less: direct expenses	b			
		c	Net income or (loss) from gaming activities				
	10 a	Gross sales of inventory, less returns and allowances	a				
b		Less: cost of goods sold	b				
c		Net income or (loss) from sales of inventory					
Miscellaneous Revenue		Business Code					
11 a							
	b						
	c						
	d	All other revenue					
	e	Total. Add lines 11a-11d					
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e		2231505.	0.	0.	17,892.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	50,000.	50,000.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	28,400.	28,400.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	103,434.	89,456.	6,429.	7,549.
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	947,572.	819,519.	58,901.	69,152.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	67,329.	59,980.	3,520.	3,829.
10 Payroll taxes	80,180.	69,518.	4,583.	6,079.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	9,500.	8,620.	440.	440.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	111,216.	53,340.	2,049.	55,827.
12 Advertising and promotion				
13 Office expenses	159,623.	91,834.	15,641.	52,148.
14 Information technology	3,039.	1,380.	1,458.	201.
15 Royalties				
16 Occupancy	153,722.	148,870.	4,627.	225.
17 Travel	67,424.	66,635.	24.	765.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	450.	176.	228.	46.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	61,999.	55,799.	3,100.	3,100.
23 Insurance	31,330.	28,560.	1,385.	1,385.
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a				
b				
c				
d				
e				
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	1,875,218.	1,572,087.	102,385.	200,746.
26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation ...				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	80,153.	1	28,440.
	2 Savings and temporary cash investments	945,097.	2	1,370,020.
	3 Pledges and grants receivable, net	1,393,537.	3	1,168,950.
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	42,491.	9	70,288.
	10a Land, buildings, and equipment: cost basis ... 10a 648,316.			
	b Less: accumulated depreciation. Complete Part VI of Schedule D ... 10b 383,029.	310,519.	10c	265,287.
	11 Investments - publicly traded securities	94,971.	11	101,739.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	722,070.	15	722,070.
16 Total assets. Add lines 1 through 15 (must equal line 34)	3,588,838.	16	3,726,794.	
Liabilities	17 Accounts payable and accrued expenses	57,609.	17	73,363.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable		24	
	25 Other liabilities. Complete Part X of Schedule D	602,070.	25	362,070.
	26 Total liabilities. Add lines 17 through 25	659,679.	26	435,433.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	1,342,667.	27	1,346,955.
	28 Temporarily restricted net assets	1,586,492.	28	1,944,406.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	2,929,159.	33	3,291,361.
	34 Total liabilities and net assets/fund balances	3,588,838.	34	3,726,794.

Part XI Financial Statements and Reporting

1 Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

b Were the organization's financial statements audited by an independent accountant?

c If "Yes" to lines 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?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits?

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

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)
nonexempt charitable trusts.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization

HEART OF LOS ANGELES YOUTH, INC.

Employer identification number

95-4397418

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: (Please check only **one** organization.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**. (Attach Schedule H.)
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☒ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete the Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**. (see instructions)
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
- a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Other
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? ☐
- (ii) A family member of a person described in (i) above? ☐
- (iii) A 35% controlled entity of a person described in (i) or (ii) above? ☐
- h Provide the following information about the organizations the organization supports.

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

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

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

Schedule A (Form 990 or 990-EZ) 2008

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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 - 3						
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)						
6 Public Support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...						
9 Net income from unrelated business activities, whether or not the business is regularly carried on ...						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	%
16a 33 1/3% support test - 2008. 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		
b 33 1/3% support test - 2007. 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		
17a 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		
b 10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		
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		

Schedule A (Form 990 or 990-EZ) 2008

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)**Section A. Public Support**

Calendar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	816,588.	1,232,421.	1,041,463.	3,539,477.	1,933,526.	8,563,475.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	367,828.	325,574.	387,695.	415,623.	315,033.	1,811,753.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 - 5	1,184,416.	1,557,995.	1,429,158.	3,955,100.	2,248,559.	10,375,228.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						10,375,228.

Section B. Total Support

Calendar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6	1,184,416.	1,557,995.	1,429,158.	3,955,100.	2,248,559.	10,375,228.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	9,508.	15,937.	18,808.	24,783.	17,892.	86,928.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	9,508.	15,937.	18,808.	24,783.	17,892.	86,928.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12.)						10,462,156.
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	99.17 %
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	99.12 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	.83 %
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	.88 %

19a 33 1/3% support tests - 2008. 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 - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

☐

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

☐

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2008

Name of the organization

Employer identification number

HEART OF LOS ANGELES YOUTH, INC.

95-4397418

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

Special Rules

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

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

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

Caution. Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions
for Form 990. These instructions will be issued separately.

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

Name of organization	Employer identification number
HEART OF LOS ANGELES YOUTH, INC.	95-4397418

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	CALIFORNIA COMMUNITY FOUNDATION 445 S. FIGUEROA ST, STE 3400 LOS ANGELES, CA 90071	\$ 75,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	CHARTWELL CHARITABLE FOUNDATION 1999 AVENUE OF THE STARS, STE 3050 LOS ANGELES, CA 90067	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	CHILDREN'S INSTITUTE, INC. 711 S. NEW HAMPSHIRE AVE LOS ANGELES, CA 90005	\$ 16,925.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	CITI FOUNDATION 850 THIRD AVE, 13TH FL NEW YORK, NY 10022	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5	COLLEGE ACCESS FOUNDATION OF CALIFORNIA 1 FRONT ST, STE 1325 SAN FRANCISCO, CA 94111	\$ 78,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6	DAVID BOHNETT FOUNDATION 245 S. BEVERLY DR BEVERLY HILLS, CA 90212	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization	Employer identification number
HEART OF LOS ANGELES YOUTH, INC.	95-4397418

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	DWIGHT STUART YOUTH FOUNDATION 9595 WILSHIRE BLVD, STE 212 BEVERLY HILLS, CA 90212	\$ 55,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
8	FLORA FAMILY FOUNDATION 2121 SAND HILL RD MENLO PARK, CA 94025	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
9	FOX SPORTS EN ESPANOL 4117 N.W. 124TH AVE CORAL SPRINGS, FL 33065	\$ 14,700.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
10	FRANK MCHUGH-O'DONOVAN FOUNDATION, INC. 501 SILVERSIDE RD, STE 123 WILMINGTON, DE 19809	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
11	FREDERICK R. WEISMAN PHILANTHROPIC FOUNDATION 265 N. CAROLWOOD DR LOS ANGELES, CA 90077	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
12	JOHN B. AND NELLY LLANOS KILROY 12200 W. OLYMPIC BLVD, STE 200 LOS ANGELES, CA 90064	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization	Employer identification number
HEART OF LOS ANGELES YOUTH, INC.	95-4397418

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
13	K.T. & E.L. NORRIS FOUNDATION 11 GOLDEN SHORE, STE 450 LONG BEACH, CA 90802	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
14	KAISER FOUNDATION HOSPITAL, INC. 4841 HOLLYWOOD BLVD LOS ANGELES, CA 90027	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
15	LIZ CLAIBORNE FOUNDATION 1441 BROADWAY NEW YORK, NY 10018	\$ 40,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
16	MCCORMICK FOUNDATION 202 W. FIRST ST LOS ANGELES, CA 90012	\$ 16,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
17	PETER NORTON FAMILY FOUNDATION 225 ARIZONA AVE, STE 350 SANTA MONICA, CA 90401	\$ 7,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
18	PIERCEALL SETTLEMENT CLAIMS ADMINISTRATOR PO BOX 1764 FARIBAULT, MN 55021	\$ 101,757.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization	Employer identification number
HEART OF LOS ANGELES YOUTH, INC.	95-4397418

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
19	SILICON VALLEY COMMUNITY FOUNDATION 2440 W. EL CAMINO REAL, STE 300 MOUNTAIN VIEW, CA 94040	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
20	STERLING FOUNDATION 1112 MONTANA AVE, STE 246 SANTA MONICA, CA 90403	\$ 31,593.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
21	SUMMA GROUP CHILDRENS FOUNDATION 28720 ROADSIDE DR, STE 345 AGOURA HILLS, CA 91301	\$ 65,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
22	THE AUDREY IRMAS FOUNDATION FOR SOCIAL JUSTICE 5045 RUBIO AVE ENCINO, CA 91436	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
23	THE EVERYCHILD FOUNDATION PO BOX 1808 PACIFIC PALISADES, CA 90272	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
24	THE FANNY AND SVANTE KNISTROM FOUNDATION 229 MAIN ST CHATHAM, NJ 07928	\$ 7,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization	Employer identification number
HEART OF LOS ANGELES YOUTH, INC.	95-4397418

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
25	THE GREEN FOUNDATION 3070 LOMBARDY RD PASADENA, CA 91107	\$ 35,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
26	THE JAMIE & STEVE TISCH FOUNDATION 655 MADISON AVE NEW YORK, NY 10021	\$ 200,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
27	THE JAMES M. STAFFORD FOUNDATION 13191 CROSSROADS PARKWAY N., SIXTH FL CITY OF INDUSTRY, CA 91746	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
28	THE LINCY FOUNDATION 150 S. RODEO DR, STE 250 BEVERLY HILLS, CA 90212	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
29	THE LOUIS L. BORICK FOUNDATION 7800 WOODLEY AVE VAN NUYS, CA 91406	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
30	THE MARK HUGHES FOUNDATION 10100 SANTA MONICA BLVD, STE 800 LOS ANGELES, CA 90067	\$ 75,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization	Employer identification number
HEART OF LOS ANGELES YOUTH, INC.	95-4397418

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
31	THE ROSE HILLS FOUNDATION 444 S. FLOWER ST, STE 1450 LOS ANGELES, CA 90071	\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
32	THE SKIRBALL FOUNDATION 767 FIFTH AVE, STE 5001 NEW YORK, NY 10153	\$ 200,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
33	THE WARLEY AVENUE TRUST PO BOX 48 STANDISH, CA 96128	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
34	UNITED WAY 523 W. SIXTH ST LOS ANGELES, CA 90014	\$ 65,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
35	UNIVERSAL STUDIOS FOUNDATION, LTD. 100 UNIVERSAL CITY PLAZA, 1280-3 UNIVERSAL CITY, CA 91608	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
36	WELLS FARGO FOUNDATION 90 S. 7TH ST MINNEAPOLIS, MN 55479	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization	Employer identification number
HEART OF LOS ANGELES YOUTH, INC.	95-4397418

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
37	WHITECAP FOUNDATION 800 WILSHIRE BLVD, STE 1010 LOS ANGELES, CA 90017	\$ 26,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
38	WOMEN HELPING YOUTH 15332 ANTIOCH ST, STE 36 PACIFIC PALISADES, CA 90272	\$ 7,400.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
39	MANI & PAUL BAKER 145 S. BELOIT AVE LOS ANGELES, CA 90049	\$ 5,410.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
40	BEL AIR PRESBYTERIAN CHURCH 16221 MULHOLLAND DR LOS ANGELES, CA 90049	\$ 5,915.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
41	BINGHAM MCCUTCHEON LLP 355 S. GRAND AVE LOS ANGELES, CA 90071	\$ 23,300.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
42	BOLOUR TRUST NUMBER THREE 1710 N. MCCADDEN PLACE HOLLYWOOD, CA 90028	\$ 56,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization	Employer identification number
HEART OF LOS ANGELES YOUTH, INC.	95-4397418

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
43	LARRY BRIDGES 3 PREMIERE POINT NEWPORT BEACH, CA 92657	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
44	CHARLES PANKOW BUILDERS, LTD 2923 BRADLEY ST, STE 110 PASADENA, CA 91107	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
45	CHARLES PANKOW FOUNDATION 501 SILVERSIDE RD, STE 123 WILMINGTON, DE 19809	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
46	CHRISTOPHER V. MICHAEL CRONIN 1020 GRANVILLE AVE, STE 301 BRENTWOOD, CA 90049	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
47	DODGERS DREAM FOUNDATION 1000 ELYSIAN PARK AVE LOS ANGELES, CA 90012	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
48	DR. PEPPER/SEVEN UP, INC. 5301 LEGACY DR PLANO, TX 75024	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization	Employer identification number
HEART OF LOS ANGELES YOUTH, INC.	95-4397418

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
49	EICHENBAUM FOUNDATION 190 N. CANON DR, STE 404 BEVERLY HILLS, CA 90210	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
50	ENID F. KOFFLER 828 TOULON DR PACIFIC PALISADES, CA 90272	\$ 5,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
51	EUGENE & ASSOCIATES 100 CORPORATE POINTE, STE 265 CULVER CITY, CA 90230	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
52	KTTV, FOX 11 1999 S. BUNDY DR LOS ANGELES, CA 90025	\$ 31,200.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
53	GIBSON DUNN & CRUTCHER LLP 333 S. GRAND AVE, 49TH FL LOS ANGELES, CA 90071	\$ 7,675.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
54	DEAN & KELLI HALLETT 711 W. OAKCREST AVE BREA, CA 92821	\$ 10,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization	Employer identification number
HEART OF LOS ANGELES YOUTH, INC.	95-4397418

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
55	F.D. HEARN 860 MORNINGSIDE DR FULLERTON, CA 92835	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
56	J.C. PENNEY FOUNDATION 523 W. SIXTH ST LOS ANGELES, CA 90014	\$ 13,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
57	JEWISH COMMUNITY FOUNDATION 4950 MURPHY CANYON RD SAN DIEGO, CA 92123	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
58	JUSTICE FOR ATHLETES 333 S. HOPE ST, 48TH FL LOS ANGELES, CA 90071	\$ 7,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
59	ERIC KURTZMAN 2335 ALASKA AVE LOS ANGELES, CA 90245	\$ 7,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
60	L.A. ARENA COMPANY LLC 1111 S. FIGUEROA ST, STE 3100 LOS ANGELES, CA 90015	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization	Employer identification number
HEART OF LOS ANGELES YOUTH, INC.	95-4397418

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
61	LOS ANGELES LAKERS, INC. 555 N. NASH ST EL SEGUNDO, CA 90245	\$ 20,800.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
62	MAJESTIC REALTY FOUNDATION 13191 CROSSROADS PARKWAY N., SIXTH FL CITY OF INDUSTRY, CA 91746	\$ 6,060.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
63	LORI MOORE 147 1/2 N. SYCAMORE AVE LOS ANGELES, CA 90036	\$ 5,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
64	MORTIMER LEVITT FOUNDATION 100 QUARRY RD, STE 2 HAMBURG, NJ 07419	\$ 6,100.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
65	JUDY YOUNG PALEY 16110 SANDY LN ENCINO, CA 91436	\$ 7,100.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
66	PHOEBE SNOW FOUNDATION 591 REDWOOD HWY, STE 3215 MILL VALLEY, CA 94941	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization	Employer identification number
HEART OF LOS ANGELES YOUTH, INC.	95-4397418

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
67	RALPH M. PARSONS FOUNDATION 888 W. SIXTH ST, 7TH FL LOS ANGELES, CA 90017	\$ 7,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
68	MICHAEL SEGAL 500 BROADWAY SANTA MONICA, CA 90401	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
69	SEINFELD FAMILY FOUNDATION 2971 BELLMORE AVE BELLMORE, NY 11710	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
70	GEORGE SHAPIRO 141 EL CAMINO DR, STE 205 BEVERLY HILLS, CA 90212	\$ 5,050.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
71	SMITH BARNEY 9655 WILSHIRE BLVD, STE 600 BEVERLY HILLS, CA 90212	\$ 9,567.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
72	UNION BANK 445 S. FIGUEROA ST, STE 3400 LOS ANGELES, CA 90071	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization	Employer identification number
HEART OF LOS ANGELES YOUTH, INC.	95-4397418

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
73	JOE & GAIL WENAWESER 4519 FOREST AVE S.E. MERCER ISLAND, WA 98040	\$ 5,300.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
74	LISTON & CAROL WITHERILL 30 LATIMER RD SANTA MONICA, CA 90402	\$ 6,910.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
75	MICHAEL & DIANE ZIERING 516 CHAPALA DR PACIFIC PALISADES, CA 90272	\$ 10,450.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
76	ZIFFREN BRITTENHAM BRANCA FISHER FOUNDATION 1801 CENTURY PARK WEST LOS ANGELES, CA 90067	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Schedule D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.**

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization

HEART OF LOS ANGELES YOUTH, INC.

Employer identification number

95-4397418

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

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

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

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a-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 Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable 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, violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

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

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

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

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

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

(ii) Assets included in Form 990, Part X ▶ \$

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

a Revenues included in Form 990, Part VIII, line 1 ▶ \$

b Assets included in Form 990, Part X ▶ \$

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

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply):

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

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

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

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

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

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

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

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Investment earnings or 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 year end balance held as:

- a** Board designated or quasi-endowment ☐ %
b Permanent endowment ☐ %
c Term endowment ☐ %

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

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other		648,316.	383,029.	265,287.
Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				265,287.

Schedule D (Form 990) 2008

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other		
Total. (Col (b) should equal Form 990, Part X, col (B) line 12.) ►		

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Total. (Col (b) should equal Form 990, Part X, col (B) line 13.) ►		

(a) Description	(b) Book value
LEASEHOLDER'S PREPAID RIGHT TO FACILITIES	722,070.
Total. (Column (b) should equal Form 990, Part X, col (B) line 15.)	722,070.

(a) Description of liability	(b) Amount
Federal income taxes	
CITY OF LOS ANGELES GIFT PAYABLE	362,070.
Total. (Column (b) should equal Form 990, Part X, col (B) line 25.)	362,070.

832053
12-23-08
Schedule D (Form 990) 2008

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	2,231,505.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,875,218.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	356,287.
4	Net unrealized gains (losses) on investments	4	5,915.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net). Add lines 4-8	9	5,915.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	362,202.

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

1	Total revenue, gains, and other support per audited financial statements	1	2,290,420.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	5,915.
b	Donated services and use of facilities	2b	53,000.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	58,915.
3	Subtract line 2e from line 1	3	2,231,505.
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	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5	2,231,505.

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

1	Total expenses and losses per audited financial statements	1	1,928,218.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	53,000.
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	53,000.
3	Subtract line 2e from line 1	3	1,875,218.
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	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	1,875,218.

Part XIV Supplemental Information

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

PART X: IN JULY 2006, FINANCIAL ACCOUNTING STANDARDS BOARD

(FASB) INTERPRETATION (FIN) NO. 48, ACCOUNTING FOR UNCERTAINTY IN INCOME

TAXES (FIN 48) WAS ISSUED. UNDER FIN 48, AN ORGANIZATION MUST EVALUATE

ITS TAX POSITIONS AND PROVIDE FOR A LIABILITY FOR ANY POSITIONS THAT WOULD

NOT BE CONSIDERED "MORE LIKELY THAN NOT" TO BE UPHELD UNDER A TAX

AUTHORITY EXAMINATION. THE FASB HAS GRANTED NONPUBLIC COMPANIES AND

NONPROFIT ORGANIZATIONS THE ELECTION TO DEFER THE EFFECTIVE DATE FOR

IMPLEMENTATION OF FIN 48 TO YEARS BEGINNING AFTER DECEMBER 15, 2008.

Part XIV Supplemental Information *(continued)*

MANAGEMENT HAS ELECTED TO DEFER THE APPLICATION OF FIN 48 AND WILL
CONTINUE TO EVALUATE ITS TAX POSITIONS USING THE GUIDANCE OF FASB
STATEMENT NO. 5, ACCOUNTING FOR CONTINGENCIES.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. 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))
		HOLIDAY OF THE HEART DIGOLF TOURNAM (event type)	HOLA IN ONE GOLF TOURNAM (event type)	1 (total number)	
Revenue	1 Gross receipts	213,158.	58,859.	43,016.	315,033.
	2 Less: Charitable contributions	149,854.	36,524.	31,283.	217,661.
	3 Gross revenue (line 1 minus line 2)	63,304.	22,335.	11,733.	97,372.
Direct Expenses	4 Cash prizes				
	5 Non-cash prizes				
	6 Rent/facility costs				
	7 Other direct expenses	63,304.	22,335.	11,733.	97,372.
	8 Direct expense summary. Add lines 4 through 7 in column (d)				(97,372.)
	9 Net income summary. Combine lines 3 and 8 in column (d)				0.

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

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

9 Enter the state(s) in which the organization operates gaming activities: _____

a Is the organization licensed to operate gaming activities in each of these states?

b If "No," Explain:

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

b If "Yes," Explain:

11 Does the organization operate gaming activities with nonmembers?

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
9a		
10a		
11		
12		

13 Indicate the percentage of gaming activity operated in:

- | | | |
|--|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |

14 Provide 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?

- 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:

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?

- b**
- Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the U.S.**

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

OMB No. 1545-0047

2008

**Open to Public
Inspection**

Name of the organization

HEART OF LOS ANGELES YOUTH, INC.

Employer identification number
95-4397418

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ **Yes** ☐ **No**

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ... ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRIENDSHIP SHELTER, INC. 1335 S. COAST HIGHWAY LAGUNA BEACH, CA 92651	33-0219404	501(C)(3)	50,000.	0.			AS PART OF THE RECEIPT OF \$101,756 GIFT FROM AMERIQUEST (PIERCEALL LITIGATION) IN JANUARY

2 Enter total number of section 501(c)(3) and government organizations **1.**

3 Enter total number of other organizations **1.**

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

Schedule I (Form 990) 2008

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
SCHOLARSHIP AWARDS	23	28,400.	0.		

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

SCHEDULE I, PART I, LINE 2: HOLA REQUESTED A YEAR END FINAL REPORT FROM FRIENDSHIP SHELTER, INC. HIGHLIGHTING ACCOMPLISHMENTS MADE IN PART FROM THE \$50,000 THAT WAS DISTRIBUTED TO THEM. A FINAL REPORT WAS RECEIVED AND, UPON REVIEW, HOLA IS SATISFIED THAT THE GRANT GOALS FOR 2009 WERE MET.

SELECTION CRITERIA FOR SCHOLARSHIP RECIPIENTS INCLUDES DEMONSTRATED ACADEMIC EXCELLENCE, CIVIC PARTICIPATION, AND FINANCIAL NEED. THE SELECTIONS ARE MADE BY HEART OF LOS ANGELES YOUTH (HOLA) STAFF AND ARE APPROVED BY THE PRESIDENT OF THE HOLA BOARD OF DIRECTORS.

Part IV Supplemental Information

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: FRIENDSHIP SHELTER, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: AS PART OF THE RECEIPT OF \$101,756

GIFT FROM AMERIQUEST (PIERCEALL LITIGATION) IN JANUARY 2009, HOLA

COMMITTED TO AMERIQUEST TO DIRECT \$50,000 OF THE AMERIQUEST GIFT TO THE

FRIENDSHIP SHELTER, A 501(C)(3) THAT ASSISTS HOMELESS TO REGAIN

SELF-SUFFICIENCY AND BECOME MORE PRODUCTIVE MEMBERS OF THE COMMUNITY.

THIS TIES INTO HOLA'S PURPOSE AS STATED IN THE CORPORATE BYLAWS, "THE

SPECIFIC PURPOSE OF THIS CORPORATION IS TO ESTABLISH, ADMINISTER, AND

RAISE FUNDS FOR THE OPERATION OF PROGRAMS DESIGNED TO BENEFIT THE

RESIDENTS, INCLUDING YOUTHS AND THE HOMELESS, OF LOS ANGELES

NEIGHBORHOODS AS WELL AS THOSE OF SOUTHERN CALIFORNIA, GENERALLY."

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

NonCash Contributions

► To be completed by organizations that answered
"Yes" on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization

HEART OF LOS ANGELES YOUTH, INC.

Employer identification number

95-4397418

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	3	103,270.	FAIR MARKET VALUE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution (historic structures)				
14 Qualified conservation contribution (other) ...				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (<u>PROGRAM ACTIV</u>)	X	44	43,051.	FAIR MARKET VALUE
26 Other ► (_____)				
27 Other ► (_____)				
28 Other ► (_____)				

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

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for
at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for
the entire holding period?

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash
contributions?

b If "Yes," describe in Part II.

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked,
describe in Part II.

	Yes	No
30a		X
31		X
32a		X
33		

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

Schedule M (Form 990) 2008

Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33.
Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B): HOLA IS REPORTING THE NUMBER OF
INDIVIDUALS/BUSINESSES/NONPROFITS WHO CONTRIBUTED IN-KIND GIFTS.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization

HEART OF LOS ANGELES YOUTH, INC.

Employer identification number
95-4397418

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS

BASKETBALL, SWIMMING, WEIGHT TRAINING, TENNIS, FLAG FOOTBALL, YOGA, HEALTHY COOKING/NUTRITION CLASSES AND MORE. THESE STUDENTS NOT ONLY ARE GIVEN THE UNIQUE OPPORTUNITY TO PARTICIPATE, BUT ARE ALSO GIVE THE CHANCE TO BE COACHED BY QUALITY INSTRUCTORS AND TEACHERS. MONDAY THROUGH FRIDAY, THE ATHLETIC DEPARTMENT OFFERS DAYTIME AND AFTERSCHOOL OUTDOOR ACTIVITIES FOR ALL ELEMENTARY, MIDDLE SCHOOL AND HIGH SCHOOL STUDENTS. IN ADDITION, SOCCER, BASKETBALL AND FLAG FOOTBALL GAMES AND CLINICS ARE HELD THROUGHOUT THE WEEK AS WELL AS ON SATURDAYS. PROGRAM GOALS ASSIST IN THE PHYSICAL, SOCIAL AND EMOTIONAL DEVELOPMENT OF OUR YOUTH; TEACH STUDENTS THE DISCIPLINE THEY NEED TO SUCCEED BY WORKING TO ACQUIRE ATHLETIC SKILLS AND PRACTICING GOOD SPORTSMANSHIP; PROMOTE HEALTHY HABITS AND FITNESS WITH PHYSICAL ACTIVITIES.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS

OFFERING INNOVATIVE AND UNIQUE OPPORTUNITIES TO EXPERIENCE ART IN THE GREATER COMMUNITY. IN ONE YEAR, OVER 300 ELEMENTARY, MIDDLE AND HIGH SCHOOL STUDENTS HAVE ACCESS TO OVER 540 HOURS OF ART AND MUSIC INSTRUCTION. PROGRAM GOALS: FOSTER COMMITMENT TO PROJECT/GOAL COMPLETION; ACCELERATE AND SUSTAIN PROFICIENCY IN THE VISUAL AND PERFORMING ARTS; ENCOURAGE SELF-EXPRESSION AND IMPROVE SELF-CONFIDENCE AMONG DISADVANTAGED YOUTH; AND PROMOTE ACADEMIC ACHIEVEMENT AND POST SECONDARY EDUCATION.

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

MONDAY THROUGH FRIDAY BOTH DURING THE DAY FOR MIDDLE SCHOOL STUDENTS

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

Schedule O (Form 990) 2008

832211
12-18-08

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization

HEART OF LOS ANGELES YOUTH, INC.

Employer identification number

95-4397418

ENROLLED A YEAR-AROUND ACADEMIC CALENDAR AND DURING THE AFTERNOON AND EVENING HOURS FOR ELEMENTARY, MIDDLE SCHOOL AND HIGH SCHOOL STUDENTS ON A TRADITIONAL ACADEMIC CALENDAR. PROGRAM GOALS: IMPROVED ACADEMIC PERFORMANCE; PREPARE STUDENTS FOR POST-SECONDARY EDUCATION; INCREASE ADMITTANCE TO POST-SECONDARY EDUCATION; INCREASE CONFIDENCE IN SELF EXPRESSION, LEADERSHIP AND TEAMWORK; AND INCREASE SENSE OF COMMITMENT AND RESPONSIBILITY.

FORM 990, PART VI, SECTION A, LINE 10: THE FORM 990 WIL BE REVIEWED BY MANAGEMENT AND THE AUDIT COMMITTEE, THEN PROVIDED TO THE FULL BOARD PRIOR TO THE FILING.

FORM 990, PART VI, SECTION B, LINE 12C: THE CONFLICT OF INTERERST POLICY AND A DISCLOSURE FORM IS DISTRIBUTED ANNUALLY TO THE BOARD OF DIRECTORS AND MANAGEMENT. IF A CONFLICT OF INTEREST WERE TO BE DISCLOSED BY ANY REQUIRED SIGNATORY, THE EXECUTIVE COMMITTEE WOULD REVIEW THE DISCLOSED CONFLICT OR POTENTIAL CONFLICT AND DETERMINE IF AND HOW IT COULD BE MANAGED. NO CONFLICT OF INTEREST WAS DISCLOSED DURING THE YEAR ENDED JUNE 30, 2009.

FORM 990, PART VI, SECTION B, LINE 15: THE ANNUAL EVALUATION FOR THE EXECUTIVE DIRECTOR, (DEVELOPED BY THE NATIONAL CENTER FOR NON-PROFIT BOARDS) IS FILLED OUT BY HOLA'S BOARD PRESIDENT AND MEMBERS OF BOARD'S EXECUTIVE COMMITTEE. WHEN THE EVALUATIONS ARE COMPLETE THE BOARD PRESIDENT COMPILES THE DATA AND REFERS TO THE CENTER FOR NON PROFITS COMPENSATION SURVEY TO DETERMINE POTENTIAL INCREASES AND/OR BONUSES. MEMBERS OF THE BOARD THEN MEET WITH THE EXECUTIVE DIRECTOR TO REVIEW AND DISCUSS THE DATA

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

Schedule O (Form 990) 2008

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization

HEART OF LOS ANGELES YOUTH, INC.

Employer identification number

95-4397418

AND TO DETERMINE COMPENSATION AND BENEFITS FOR THE COMING FISCAL YEAR.

FORM 990, PART VI, SECTION C, LINE 19: HOLA'S GOVERNING DOCUMENTS,

CONFLICT OF INTEREST POLICY AND AUDITED FINANCIAL STATEMENTS ARE AVAILABLE

TO THE PUBLIC UPON REQUEST.

828102
04-25-08

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2008

California Exempt Organization Annual Information Return

199

Calendar Year 2008 or fiscal year beginning month **JULY** day **1** year **2008**, and ending month **JUNE** day **30** year **2009**.

A First Return Filed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	B Type of organization Exempt under Section 23701 d (insert letter) IRC Section 4947(a)(1) trust <input type="checkbox"/>	CORP # 1708807
Corporation/Organization Name HEART OF LOS ANGELES YOUTH, INC.		FEIN 95-4397418

Address 2701 WILSHIRE BOULEVARD		State CA	ZIP Code 90057
City LOS ANGELES			

C Amended Return? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	H Accounting method used (1) <input type="checkbox"/> Cash (2) <input checked="" type="checkbox"/> Accrual (3) <input type="checkbox"/> Other
D Are you a subordinate/affiliate in a group exemption? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	I If exempt under R&TC Section 23701d, has the organization during the year: (1) participated in any political campaign or (2) attempted to influence legislation or any ballot measure, or (3) made an election under R&TC Section 23704.5 (relating to lobbying by public charities)? If "Yes," complete and attach form FTB 3509, Political or Legislative Activities by Section 23701d Organizations <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
(a) Is this a group filing for affiliates? See General Instruction L <input type="checkbox"/> Yes <input type="checkbox"/> No	J Did the organization have any changes in its activities, governing instrument, articles of incorporation, or bylaws that have not been reported to the Franchise Tax Board? If "Yes," complete an explanation and attach copies of revised documents <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
(b) If "Yes," enter the number of affiliates <input type="checkbox"/> Yes <input type="checkbox"/> No	K Is the organization exempt under R&TC Section 23701g? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
(c) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	If "Yes," enter amount of gross receipts from nonmember sources \$ <input type="checkbox"/>
(d) Is this a separate return filed by an organization covered by a group ruling? <input type="checkbox"/> Yes <input type="checkbox"/> No	L Is the organization under audit by the IRS or has the IRS audited in a prior year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
(e) Federal Group Exemption Number <input type="checkbox"/>	M Is the organization a Limited Liability Corporation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
(f) Is a roster of subordinates attached? <input type="checkbox"/> Yes <input type="checkbox"/> No	N Did the organization file Form 100 or Form 109 to report taxable income? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
E Final return? <input type="checkbox"/> Dissolved <input type="checkbox"/> Surrendered (Withdrawn) <input type="checkbox"/> Merged/Reorganized (attach explanation)	
If a box is checked, enter date <input type="checkbox"/>	
F Check the box if the organization filed: (1) <input type="checkbox"/> 990T (2) <input type="checkbox"/> 990PF (3) <input type="checkbox"/> 990H	
G If organization is exempt under R&TC Section 23701d and is exclusively religious, educational, or charitable, and is supported primarily (50% or more) by public contributions, check box. See General Instruction F. No filing fee is required. <input type="checkbox"/>	

Part I Complete Part I unless not required to file this form. See General Instructions B and C.

Receipts and Revenues	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8	1	217,995.00
	2	Gross dues and assessments from members and affiliates	2	00
	3	Gross contributions, gifts, grants, and similar amounts received STMT 1	3	2,213,613.00
	4	Total gross receipts for filing requirement test. Add line 1 through line 3. This line must be completed. If the result is less than \$25,000, see General Instruction C	4	2,431,608.00
	5	Cost of goods sold	5	00
	6	Cost or other basis, and sales expenses of assets sold	6	102,731.00
	7	Total costs. Add line 5 and line 6	7	102,731.00
	8	Total gross income. Subtract line 7 from line 4	8	2,328,877.00
Expenses	9	Total expenses and disbursements. From Side 2, Part II, line 18	9	1,972,590.00
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8	10	356,287.00
Filing Fee	11	Filing fee \$10 or \$25. See General Instruction F	11	10.00
	12	Total payments	12	00
	13	Penalties and Interest. See General Instruction J	13	00
	14	Use tax. See General Instruction K	14	00
	15	Balance due. Add line 11, line 13, and line 14. Then subtract line 12 from the result	15	10.00
Sign Here	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 taxpayer) is based on all information of which preparer has any knowledge.			
	Signature of officer	Title	Date	Telephone
Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN/PTIN
	Firm's name (or yours, if self-employed) and address			FEIN
	QUIGLEY & MIRON, CPA'S 3550 WILSHIRE BOULEVARD--SUITE 1660 LOS ANGELES, CA 90010-2481			Telephone
				(213) 639-3550
May the FTB discuss this return with the preparer shown above? See instructions <input type="checkbox"/> Yes <input type="checkbox"/> No				

Part II Organizations with gross receipts of more than \$25,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information. See Specific Line Instructions.

828951 12-05-08

Receipts from Other Sources	1	Gross sales or receipts from all business activities. See instructions	• 1	97,372.00
	2	Interest	• 2	17,503.00
	3	Dividends	• 3	389.00
	4	Gross rents	• 4	00
	5	Gross royalties	• 5	00
	6	Gross amount received from sale of assets (See instructions) SEE STATEMENT 2	• 6	102,731.00
	7	Other income	• 7	00
Expenses and Disbursements	8	Total gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1	8	217,995.00
	9	Contributions, gifts, grants, and similar amounts paid STATEMENT 3	• 9	78,400.00
	10	Disbursements to or for members	• 10	00
	11	Compensation of officers, directors, and trustees SEE STATEMENT 4	• 11	103,434.00
	12	Other salaries and wages	• 12	947,572.00
	13	Interest	• 13	00
	14	Taxes	• 14	80,180.00
	15	Rents	• 15	153,722.00
	16	Depreciation and depletion (See instructions)	• 16	61,999.00
	17	Other SEE STATEMENT 5	• 17	547,283.00
	18	Total expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9	18	1,972,590.00

Schedule L Balance Sheets

Beginning of taxable year

End of taxable year

Assets	(a)	(b)	(c)	(d)
1 Cash		1,025,250.		• 1,398,460.
2 Net accounts receivable				•
3 Net notes receivable				•
4 Inventories				•
5 Federal and state government obligations				•
6 Investments in other bonds				•
7 Investments in stock STMT 6		94,971.		• 101,739.
8 Mortgage loans (number of loans)				•
9 Other investments				•
10 a Depreciable assets	631,549.		648,316.	
b Less accumulated depreciation	(321,030.)	310,519.	(383,029.)	265,287.
11 Land				•
12 Other assets STMT 7		2,158,098.		• 1,961,308.
13 Total assets		3,588,838.		3,726,794.
Liabilities and net worth				
14 Accounts payable		57,609.		• 73,363.
15 Contributions, gifts, or grants payable				•
16 Bonds and notes payable				•
17 Mortgages payable				•
18 Other liabilities STMT 8		602,070.		362,070.
19 Capital stock or principle fund				•
20 Paid-in or capital surplus. Attach reconciliation ...				•
21 Retained earnings or income fund		2,929,159.		• 3,291,361.
22 Total liabilities and net worth		3,588,838.		3,726,794.

Schedule M-1 Reconciliation of income per books with income per return

Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$25,000

1 Net income per books	• 362,202.	7 Income recorded on books this year not included in this return STMT 10	• 58,915.
2 Federal income tax	•	8 Deductions in this return not charged against book income this year	•
3 Excess of capital losses over capital gains	•	9 Total. Add line 7 and line 8	58,915.
4 Income not recorded on books this year	•	10 Net income per return. Subtract line 9 from line 6	356,287.
5 Expenses recorded on books this year not deducted in this return STMT 9	• 53,000.		
6 Total. Add line 1 through line 5	415,202.		

FORM 199	CASH CONTRIBUTIONS OF \$5000 OR MORE INCLUDED ON PART I, LINE 3	STATEMENT	1
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CONTRIBUTOR'S NAME	CONTRIBUTOR'S ADDRESS	DATE OF GIFT	AMOUNT
CALIFORNIA COMMUNITY FOUNDATION	445 S. FIGUEROA ST, STE 3400 LOS ANGELES, CA 90071		75,000.
CHARTWELL CHARITABLE FOUNDATION	1999 AVENUE OF THE STARS, STE 3050 LOS ANGELES, CA 90067		10,000.
CHILDREN'S INSTITUTE, INC.	711 S. NEW HAMPSHIRE AVE LOS ANGELES, CA 90005		16,925.
CITI FOUNDATION	850 THIRD AVE, 13TH FL NEW YORK, NY 10022		10,000.
COLLEGE ACCESS FOUNDATION OF CALIFORNIA	1 FRONT ST, STE 1325 SAN FRANCISCO, CA 94111		78,000.
DAVID BOHNETT FOUNDATION	245 S. BEVERLY DR BEVERLY HILLS, CA 90212		5,000.
DWIGHT STUART YOUTH FOUNDATION	9595 WILSHIRE BLVD, STE 212 BEVERLY HILLS, CA 90212		55,000.
FLORA FAMILY FOUNDATION	2121 SAND HILL RD MENLO PARK, CA 94025		5,000.
FOX SPORTS EN ESPANOL	4117 N.W. 124TH AVE CORAL SPRINGS, FL 33065		14,700.
FRANK MCHUGH-O'DONOVAN FOUNDATION, INC.	501 SILVERSIDE RD, STE 123 WILMINGTON, DE 19809		25,000.
FREDERICK R. WEISMAN PHILANTHROPIC FOUNDATION	265 N. CAROLWOOD DR LOS ANGELES, CA 90077		5,000.
JOHN B. AND NELLY LLANOS KILROY	12200 W. OLYMPIC BLVD, STE 200 LOS ANGELES, CA 90064		10,000.
K.T. & E.L. NORRIS FOUNDATION	11 GOLDEN SHORE, STE 450 LONG BEACH, CA 90802		5,000.
KAISER FOUNDATION HOSPITAL, INC.	4841 HOLLYWOOD BLVD LOS ANGELES, CA 90027		5,000.
LIZ CLAIBORNE FOUNDATION	1441 BROADWAY NEW YORK, NY 10018		40,000.
MCCORMICK FOUNDATION	202 W. FIRST ST LOS ANGELES, CA 90012		16,000.

PETER NORTON FAMILY FOUNDATION	225 ARIZONA AVE, STE 350 SANTA MONICA, CA 90401	7,500.
PIERCEALL SETTLEMENT CLAIMS ADMINISTRATOR	PO BOX 1764 FARIBAULT, MN 55021	101,757.
SILICON VALLEY COMMUNITY FOUNDATION	2440 W. EL CAMINO REAL, STE 300 MOUNTAIN VIEW, CA 94040	15,000.
STERLING FOUNDATION	1112 MONTANA AVE, STE 246 SANTA MONICA, CA 90403	31,593.
SUMMA GROUP CHILDRENS FOUNDATION	28720 ROADSIDE DR, STE 345 AGOURA HILLS, CA 91301	65,000.
THE AUDREY IRMAS FOUNDATION FOR SOCIAL JUSTICE	5045 RUBIO AVE ENCINO, CA 91436	50,000.
THE EVERYCHILD FOUNDATION	PO BOX 1808 PACIFIC PALISADES, CA 90272	25,000.
THE FANNY AND SVANTE KNISTROM FOUNDATION	229 MAIN ST CHATHAM, NJ 07928	7,500.
THE GREEN FOUNDATION	3070 LOMBARDY RD PASADENA, CA 91107	35,000.
THE JAMIE & STEVE TISCH FOUNDATION	655 MADISON AVE NEW YORK, NY 10021	200,000.
THE JAMES M. STAFFORD FOUNDATION	13191 CROSSROADS PARKWAY N., SIXTH FL CITY OF INDUSTRY, CA 91746	5,000.
THE LINCY FOUNDATION	150 S. RODEO DR, STE 250 BEVERLY HILLS, CA 90212	25,000.
THE LOUIS L. BORICK FOUNDATION	7800 WOODLEY AVE VAN NUYS, CA 91406	5,000.
THE MARK HUGHES FOUNDATION	10100 SANTA MONICA BLVD, STE 800 LOS ANGELES, CA 90067	75,000.
THE ROSE HILLS FOUNDATION	444 S. FLOWER ST, STE 1450 LOS ANGELES, CA 90071	250,000.
THE SKIRBALL FOUNDATION	767 FIFTH AVE, STE 5001 NEW YORK, NY 10153	200,000.
THE WARLEY AVENUE TRUST	PO BOX 48 STANDISH, CA 96128	10,000.
UNITED WAY	523 W. SIXTH ST LOS ANGELES, CA 90014	65,000.

UNIVERSAL STUDIOS FOUNDATION, LTD.	100 UNIVERSAL CITY PLAZA, 1280-3 UNIVERSAL CITY, CA 91608	50,000.
WELLS FARGO FOUNDATION	90 S. 7TH ST MINNEAPOLIS, MN 55479	5,000.
WHITECAP FOUNDATION	800 WILSHIRE BLVD, STE 1010 LOS ANGELES, CA 90017	26,000.
WOMEN HELPING YOUTH	15332 ANTIOCH ST, STE 36 PACIFIC PALISADES, CA 90272	7,400.
MANI & PAUL BAKER	145 S. BELOIT AVE LOS ANGELES, CA 90049	5,410.
BEL AIR PRESBYTERIAN CHURCH	16221 MULHOLLAND DR LOS ANGELES, CA 90049	5,915.
BINGHAM MCCUTCHEON LLP	355 S. GRAND AVE LOS ANGELES, CA 90071	23,300.
BOLOUR TRUST NUMBER THREE	1710 N. MCCADDEN PLACE HOLLYWOOD, CA 90028	56,000.
LARRY BRIDGES	3 PREMIERE POINT NEWPORT BEACH, CA 92657	5,000.
CHARLES PANKOW BUILDERS, LTD	2923 BRADLEY ST, STE 110 PASADENA, CA 91107	5,000.
CHARLES PANKOW FOUNDATION	501 SILVERSIDE RD, STE 123 WILMINGTON, DE 19809	5,000.
CHRISTOPHER V. MICHAEL CRONIN	1020 GRANVILLE AVE, STE 301 BRENTWOOD, CA 90049	5,000.
DODGERS DREAM FOUNDATION	1000 ELYSIAN PARK AVE LOS ANGELES, CA 90012	5,000.
DR. PEPPER/SEVEN UP, INC.	5301 LEGACY DR PLANO, TX 75024	10,000.
EICHENBAUM FOUNDATION	190 N. CANON DR, STE 404 BEVERLY HILLS, CA 90210	5,000.
ENID F. KOFFLER	828 TOULON DR PACIFIC PALISADES, CA 90272	5,500.
EUGENE & ASSOCIATES	100 CORPORATE POINTE, STE 265 CULVER CITY, CA 90230	5,000.
KTTV, FOX 11	1999 S. BUNDY DR LOS ANGELES, CA 90025	31,200.

GIBSON DUNN & CRUTCHER LLP	333 S. GRAND AVE, 49TH FL LOS ANGELES, CA 90071	7,675.
DEAN & KELLI HALLETT	711 W. OAKCREST AVE BREA, CA 92821	10,500.
F.D. HEARN	860 MORNINGSIDE DR FULLERTON, CA 92835	10,000.
J.C. PENNEY FOUNDATION	523 W. SIXTH ST LOS ANGELES, CA 90014	13,500.
JEWISH COMMUNITY FOUNDATION	4950 MURPHY CANYON RD SAN DIEGO, CA 92123	10,000.
JUSTICE FOR ATHLETES	333 S. HOPE ST, 48TH FL LOS ANGELES, CA 90071	7,500.
ERIC KURTZMAN	2335 ALASKA AVE LOS ANGELES, CA 90245	7,000.
L.A. ARENA COMPANY LLC	1111 S. FIGUEROA ST, STE 3100 LOS ANGELES, CA 90015	5,000.
LOS ANGELES LAKERS, INC.	555 N. NASH ST EL SEGUNDO, CA 90245	20,800.
MAJESTIC REALTY FOUNDATION	13191 CROSSROADS PARKWAY N., SIXTH FL CITY OF INDUSTRY, CA 91746	6,060.
LORI MOORE	147 1/2 N. SYCAMORE AVE LOS ANGELES, CA 90036	5,500.
MORTIMER LEVITT FOUNDATION	100 QUARRY RD, STE 2 HAMBURG, NJ 07419	6,100.
JUDY YOUNG PALEY	16110 SANDY LN ENCINO, CA 91436	7,100.
PHOEBE SNOW FOUNDATION	591 REDWOOD HWY, STE 3215 MILL VALLEY, CA 94941	5,000.
RALPH M. PARSONS FOUNDATION	888 W. SIXTH ST, 7TH FL LOS ANGELES, CA 90017	7,000.
MICHAEL SEGAL	500 BROADWAY SANTA MONICA, CA 90401	10,000.
SEINFELD FAMILY FOUNDATION	2971 BELLMORE AVE BELLMORE, NY 11710	5,000.
GEORGE SHAPIRO	141 EL CAMINO DR, STE 205 BEVERLY HILLS, CA 90212	5,050.

SMITH BARNEY	9655 WILSHIRE BLVD, STE 600 BEVERLY HILLS, CA 90212	9,567.
UNION BANK	445 S. FIGUEROA ST, STE 3400 LOS ANGELES, CA 90071	10,000.
JOE & GAIL WENAWESER	4519 FOREST AVE S.E. MERCER ISLAND, WA 98040	5,300.
LISTON & CAROL WITHERILL	30 LATIMER RD SANTA MONICA, CA 90402	6,910.
MICHAEL & DIANE ZIERING	516 CHAPALA DR PACIFIC PALISADES, CA 90272	10,450.
ZIFFREN BRITTENHAM BRANCA FISHER FOUNDATION	1801 CENTURY PARK WEST LOS ANGELES, CA 90067	5,000.
TOTAL INCLUDED ON LINE 3		<u>2,005,712.</u>

FORM 199	GROSS AMOUNT FROM SALE OF ASSETS	STATEMENT	2
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DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED	
DONATED STOCK	VARIOUS	VARIOUS	DONATED	
NAME OF BUYER	COST OR OTHER BASIS	DEPREC.	EXPENSE OF SALE	GROSS SALES PRICE
VARIOUS	102,731.	0.	0.	102,731.
TOTAL TO FORM 199, PAGE 2, LN 6	102,731.	0.	0.	102,731.

FORM 199	NONCASH CONTRIBUTIONS, GIFTS, GRANTS AND SIMILAR AMOUNTS PAID	STATEMENT	3
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ACTIVITY CLASSIFICATION: SCHOLARSHIP AWARDS

NAME OF DONEE	ADDRESS OF DONEE	RELATIONSHIP	AMOUNT
JASMIN BENITEZ	2701 WILSHIRE BLVD, STE 100, LOS ANGELES, CA 90057	NONE	14,250.

DATE OF GIFT	BOOK VALUE OF GIFT	PROPERTY DESCRIPTION	METHOD USED TO DETERMINE BOOK VALUE
VARIOUS	14,250.	CASH	FAIR MARKET VALUE

NAME OF DONEE	ADDRESS OF DONEE	RELATIONSHIP	AMOUNT
ALFONSO YAHEEMA	2701 WILSHIRE BLVD, STE 100, LOS ANGELES, CA 90057	NONE	200.

DATE OF GIFT	BOOK VALUE OF GIFT	PROPERTY DESCRIPTION	METHOD USED TO DETERMINE BOOK VALUE
08/14/08	200.	CASH	FAIR MARKET VALUE

NAME OF DONEE	ADDRESS OF DONEE	RELATIONSHIP	AMOUNT
CARLOS CORTEZ	2701 WILSHIRE BLVD, STE 100, LOS ANGELES, CA 90057	NONE	200.

DATE OF GIFT	BOOK VALUE OF GIFT	PROPERTY DESCRIPTION	METHOD USED TO DETERMINE BOOK VALUE
08/14/08	200.	CASH	FAIR MARKET VALUE

NAME OF DONEE	ADDRESS OF DONEE	RELATIONSHIP	AMOUNT
ERIC FERNANDEZ	2701 WILSHIRE BLVD, STE 100, LOS ANGELES, CA 90057	NONE	1,200.

DATE OF GIFT	BOOK VALUE OF GIFT	PROPERTY DESCRIPTION	METHOD USED TO DETERMINE BOOK VALUE
VARIOUS	1,200.	CASH	FAIR MARKET VALUE

NAME OF DONEE	ADDRESS OF DONEE	RELATIONSHIP	AMOUNT
KENICE GALVEZ	2701 WILSHIRE BLVD, STE 100, LOS ANGELES, CA 90057	NONE	200.

DATE OF GIFT	BOOK VALUE OF GIFT	PROPERTY DESCRIPTION	METHOD USED TO DETERMINE BOOK VALUE
08/14/08	200.	CASH	FAIR MARKET VALUE

NAME OF DONEE	ADDRESS OF DONEE	RELATIONSHIP	AMOUNT
NATHALIE GONZALEZ	2701 WILSHIRE BLVD, STE 100, LOS ANGELES, CA 90057	NONE	1,200.

DATE OF GIFT	BOOK VALUE OF GIFT	PROPERTY DESCRIPTION	METHOD USED TO DETERMINE BOOK VALUE
VARIOUS	1,200.	CASH	FAIR MARKET VALUE

NAME OF DONEE	ADDRESS OF DONEE	RELATIONSHIP	AMOUNT
INDONICA HAMDANI	2701 WILSHIRE BLVD, STE 100, LOS ANGELES, CA 90057	NONE	1,200.

DATE OF GIFT	BOOK VALUE OF GIFT	PROPERTY DESCRIPTION	METHOD USED TO DETERMINE BOOK VALUE
VARIOUS	1,200.	CASH	FAIR MARKET VALUE

NAME OF DONEE	ADDRESS OF DONEE	RELATIONSHIP	AMOUNT
JEFFREY LOPEZ	2701 WILSHIRE BLVD, STE 100, LOS ANGELES, CA 90057	NONE	200.

DATE OF GIFT	BOOK VALUE OF GIFT	PROPERTY DESCRIPTION	METHOD USED TO DETERMINE BOOK VALUE
08/14/08	200.	CASH	FAIR MARKET VALUE

NAME OF DONEE	ADDRESS OF DONEE	RELATIONSHIP	AMOUNT
RONILO MULAWIN	2701 WILSHIRE BLVD, STE 100, LOS ANGELES, CA 90057	NONE	1,200.

DATE OF GIFT	BOOK VALUE OF GIFT	PROPERTY DESCRIPTION	METHOD USED TO DETERMINE BOOK VALUE
VARIOUS	1,200.	CASH	FAIR MARKET VALUE

NAME OF DONEE		ADDRESS OF DONEE	RELATIONSHIP	AMOUNT
JORGE NAVARRO		2701 WILSHIRE BLVD, STE 100, LOS ANGELES, CA 90057	NONE	1,200.

DATE OF GIFT	BOOK VALUE OF GIFT	PROPERTY DESCRIPTION	METHOD USED TO DETERMINE BOOK VALUE
VARIOUS	1,200.	CASH	FAIR MARKET VALUE

NAME OF DONEE		ADDRESS OF DONEE	RELATIONSHIP	AMOUNT
CHARBEL RIZK		2701 WILSHIRE BLVD, STE 100, LOS ANGELES, CA 90057	NONE	200.

DATE OF GIFT	BOOK VALUE OF GIFT	PROPERTY DESCRIPTION	METHOD USED TO DETERMINE BOOK VALUE
08/14/08	200.	CASH	FAIR MARKET VALUE

NAME OF DONEE		ADDRESS OF DONEE	RELATIONSHIP	AMOUNT
IRIS TOSCANO		2701 WILSHIRE BLVD, STE 100, LOS ANGELES, CA 90057	NONE	200.

DATE OF GIFT	BOOK VALUE OF GIFT	PROPERTY DESCRIPTION	METHOD USED TO DETERMINE BOOK VALUE
08/14/08	200.	CASH	FAIR MARKET VALUE

NAME OF DONEE		ADDRESS OF DONEE	RELATIONSHIP	AMOUNT
SELVIN VASQUEZ		2701 WILSHIRE BLVD, STE 100, LOS ANGELES, CA 90057	NONE	200.

DATE OF GIFT	BOOK VALUE OF GIFT	PROPERTY DESCRIPTION	METHOD USED TO DETERMINE BOOK VALUE
08/14/08	200.	CASH	FAIR MARKET VALUE

NAME OF DONEE		ADDRESS OF DONEE	RELATIONSHIP	AMOUNT
JESSICA HERNANDEZ		2701 WILSHIRE BLVD, STE 100, LOS ANGELES, CA 90057	NONE	2,700.

DATE OF GIFT	BOOK VALUE OF GIFT	PROPERTY DESCRIPTION	METHOD USED TO DETERMINE BOOK VALUE
VARIOUS	2,700.	CASH	FAIR MARKET VALUE

NAME OF DONEE		ADDRESS OF DONEE	RELATIONSHIP	AMOUNT
JUAN CORREA		2701 WILSHIRE BLVD, STE 100, LOS ANGELES, CA 90057	NONE	500.

DATE OF GIFT	BOOK VALUE OF GIFT	PROPERTY DESCRIPTION	METHOD USED TO DETERMINE BOOK VALUE
08/15/08	500.	CASH	FAIR MARKET VALUE

NAME OF DONEE	ADDRESS OF DONEE	RELATIONSHIP	AMOUNT
DENISE RODRIGUEZ	2701 WILSHIRE BLVD, STE 100, LOS ANGELES, CA 90057	NONE	1,050.

DATE OF GIFT	BOOK VALUE OF GIFT	PROPERTY DESCRIPTION	METHOD USED TO DETERMINE BOOK VALUE
02/18/09	1,050.	CASH	FAIR MARKET VALUE

NAME OF DONEE	ADDRESS OF DONEE	RELATIONSHIP	AMOUNT
YOANA RIVAS	2701 WILSHIRE BLVD, STE 100, LOS ANGELES, CA 90057	NONE	2,500.

DATE OF GIFT	BOOK VALUE OF GIFT	PROPERTY DESCRIPTION	METHOD USED TO DETERMINE BOOK VALUE
11/07/08	2,500.	CASH	FAIR MARKET VALUE

TOTAL FOR THIS ACTIVITY 28,400.

ACTIVITY CLASSIFICATION: HOMELESS ASSISTANCE GRANT

NAME OF DONEE	ADDRESS OF DONEE	RELATIONSHIP	AMOUNT
FRIENDSHIP SHELTER, INC.	1335 S. COAST HIGHWAY, LAGUNA BEACH, CA 92651	NONE	50,000.

DATE OF GIFT	BOOK VALUE OF GIFT	PROPERTY DESCRIPTION	METHOD USED TO DETERMINE BOOK VALUE
02/23/09	50,000.	CASH	FAIR MARKET VALUE

TOTAL FOR THIS ACTIVITY 50,000.

TOTAL INCLUDED ON FORM 199, PART II, LINE 9 78,400.

FORM 199	COMPENSATION OF OFFICERS, DIRECTORS AND TRUSTEES	STATEMENT	4
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NAME AND ADDRESS	TITLE AND AVERAGE HRS WORKED/WK	COMPENSATION
STUART KOENIG 2701 WILSHIRE BOULEVARD LOS ANGELES, CA 90057	PRESIDENT 1.00	0.
JEFF LESAGE 2701 WILSHIRE BOULEVARD LOS ANGELES, CA 90057	VICE PRESIDENT 1.00	0.
EDUARDO NOCHEZ 2701 WILSHIRE BOULEVARD LOS ANGELES, CA 90057	SECRETARY 1.00	0.
HOWARD GROBSTEIN 2701 WILSHIRE BOULEVARD LOS ANGELES, CA 90057	TREASURER 1.00	0.
ALAN ADELMAN 2701 WILSHIRE BOULEVARD LOS ANGELES, CA 90057	DIRECTOR 1.00	0.
ANDREW BERNSTEIN 2701 WILSHIRE BOULEVARD LOS ANGELES, CA 90057	DIRECTOR 1.00	0.
J. BEN BOURGEOIS 2701 WILSHIRE BOULEVARD LOS ANGELES, CA 90057	DIRECTOR 1.00	0.
ROD CARTER 2701 WILSHIRE BOULEVARD LOS ANGELES, CA 90057	DIRECTOR 1.00	0.
DAVID DALTON 2701 WILSHIRE BOULEVARD LOS ANGELES, CA 90057	DIRECTOR 1.00	0.
RAUL DE QUESADA 2701 WILSHIRE BOULEVARD LOS ANGELES, CA 90057	DIRECTOR 1.00	0.
STEPHEN ESPINOSA 2701 WILSHIRE BOULEVARD LOS ANGELES, CA 90057	DIRECTOR 1.00	0.

MICHAEL GALLAGHER 2701 WILSHIRE BOULEVARD LOS ANGELES, CA 90057	DIRECTOR 1.00	0.
DEBRA GENTZ 2701 WILSHIRE BOULEVARD LOS ANGELES, CA 90057	DIRECTOR 1.00	0.
GLENN GRITZNER 2701 WILSHIRE BOULEVARD LOS ANGELES, CA 90057	DIRECTOR 1.00	0.
STEVEN HAUSER 2701 WILSHIRE BOULEVARD LOS ANGELES, CA 90057	DIRECTOR 1.00	0.
KURT HOCKER 2701 WILSHIRE BOULEVARD LOS ANGELES, CA 90057	DIRECTOR 1.00	0.
LIDIA S. MARTINEZ 2701 WILSHIRE BOULEVARD LOS ANGELES, CA 90057	DIRECTOR 1.00	0.
LAWRENCE MOORE 2701 WILSHIRE BOULEVARD LOS ANGELES, CA 90057	DIRECTOR 1.00	0.
MITCHEL D. MOORE 2701 WILSHIRE BOULEVARD LOS ANGELES, CA 90057	DIRECTOR 1.00	0.
J. WARREN RISSIER 2701 WILSHIRE BOULEVARD LOS ANGELES, CA 90057	DIRECTOR 1.00	0.
CHRIS ROBICHAUD 2701 WILSHIRE BOULEVARD LOS ANGELES, CA 90057	DIRECTOR 1.00	0.
PETER SCHUBE 2701 WILSHIRE BOULEVARD LOS ANGELES, CA 90057	DIRECTOR 1.00	0.
ANTHONY M. BROWN 2701 WILSHIRE BOULEVARD LOS ANGELES, CA 90057	EXECUTIVE DIRECTOR 40.00	103,434.

TOTAL TO FORM 199, PART II, LINE 11

103,434.

FORM 199	OTHER EXPENSES	STATEMENT	5
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DESCRIPTION	AMOUNT
DIRECT EXPENSES OF FUNDRAISING EVENTS	97,372.
OTHER EMPLOYEE BENEFITS	67,329.
ACCOUNTING FEES	9,500.
OTHER PROFESSIONAL FEES	111,216.
OFFICE EXPENSES	159,623.
INFORMATION TECHNOLOGY	3,039.
TRAVEL	67,424.
CONFERENCES AND CONVENTIONS	450.
INSURANCE	31,330.
TOTAL TO FORM 199, PART II, LINE 17	547,283.

FORM 199	INVESTMENTS IN STOCK	STATEMENT	6
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DESCRIPTION	BEG. OF YEAR	END OF YEAR
PUBLICLY TRADED SECURITIES	94,971.	101,739.
TOTAL TO FORM 199, SCHEDULE L, LINE 7	94,971.	101,739.

FORM 199	OTHER ASSETS	STATEMENT	7
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DESCRIPTION	BEG. OF YEAR	END OF YEAR
PLEDGES AND GRANTS RECEIVABLE	1,393,537.	1,168,950.
PREPAID EXPENSES AND DEFERRED CHARGES	42,491.	70,288.
LEASEHOLDER'S PREPAID RIGHT TO FACILITIES	722,070.	722,070.
TOTAL TO FORM 199, SCHEDULE L, LINE 12	2,158,098.	1,961,308.

FORM 199	OTHER LIABILITIES	STATEMENT	8
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DESCRIPTION	BEG. OF YEAR	END OF YEAR
CITY OF LOS ANGELES GIFT PAYABLE	602,070.	362,070.
TOTAL TO FORM 199, SCHEDULE L, LINE 18	602,070.	362,070.

FORM 199	EXPENSES RECORDED ON BOOKS THIS YEAR NOT DEDUCTED IN THIS RETURN	STATEMENT	9
DESCRIPTION		AMOUNT	
IN-KIND RENT EXPENSE		53,000.	
TOTAL TO FORM 199, SCHEDULE M-1, LINE 5		53,000.	

FORM 199	INCOME RECORDED ON BOOKS THIS YEAR NOT INCLUDED IN THIS RETURN	STATEMENT	10
DESCRIPTION		AMOUNT	
IN-KIND RENT DONATION		53,000.	
UNREALIZED LOSS ON INVESTMENTS		5,915.	
TOTAL TO FORM 199, SCHEDULE M-1, LINE 7		58,915.	

FORM 199	FUND BALANCES	STATEMENT	11
DESCRIPTION	BEG. OF YEAR	END OF YEAR	
UNRESTRICTED ASSETS	1,342,667.	1,346,955.	
TEMPORARILY RESTRICTED ASSETS	1,586,492.	1,944,406.	
TOTAL TO FORM 199, SCHEDULE L, LINE 21	2,929,159.	3,291,361.	

TAXABLE YEAR
2008

Corporation Depreciation and Amortization

CALIFORNIA FORM
3885

Attach to Form 100 or Form 100W.

FORM 199

FEIN 95-4397418

Corporation name

California corporation number

HEART OF LOS ANGELES YOUTH, INC.

1708807

Part I Election To Expense Certain Property Under IRC Section 179

1 Maximum deduction under Section 179 for California	1	\$25,000
2 Total cost of Section 179 property placed in service	2	
3 Threshold cost of Section 179 property before reduction in limitation	3	\$200,000
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5 Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-	5	
(a) Description of property	(b) Cost (business use only)	(c) Elected cost
6		
7 Listed property (elected Section 179 cost)	7	
8 Total elected cost of Section 179 property. Add amounts in column (c), lines 6 and 7	8	
9 Tentative deduction. Enter the smaller of line 5 or line 8	9	
10 Carryover of disallowed deduction from prior taxable years	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13 Carryover of disallowed deduction to 2009. Add lines 9 and 10, less line 12	13	

Part II Depreciation and Election of Additional First Year Expense Deduction Under R&TC Section 24356

(a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Depreciation Method	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
14							
SEE STATEMENT	12	648,316.	321,030.				
15 Add the amounts in column (g) and column (h). The combined total of column (h) may not exceed \$2,000. See instructions for line 14, column (h)	15					61,999.	

Part III Summary

16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g); or Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h), or Depreciation (if no election is made), enter the amount from line 15, column (g)	16	61,999.
17 Total depreciation claimed for federal purposes from federal Form 4562, line 22	17	61,999.
18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.)	18	0.

Part IV Amortization

(a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section (see instructions)	(f) Period or percentage	(g) Amortization for this year
19						
20 Total. Add the amounts in column (g)	20					
21 Total amortization claimed for federal purposes from federal Form 4562, line 44	21					
22 Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 12	22					

CA 3885		DEPRECIATION				STATEMENT 12	
ASSET NO./ DESCRIPTION	DATE IN SERVICE	COST OR BASIS	PRIOR DEPR	METHOD	LIFE	DEPRE- CIATION	BONUS
1 OFFICE EQUIPMENT							
	VARIOUS	97,731.	87,889.	SL	5.00	2,058.	
2 COMPUTER EQUIPMENT							
	VARIOUS	123,172.	71,348.	SL	5.00	20,109.	
3 PROGRAM ACTIVITIES EQUIPMENT							
	VARIOUS	54,054.	18,943.	SL	5.00	9,347.	
4 VEHICLES							
	VARIOUS	32,407.	19,444.	SL	5.00	6,481.	
5 LEASEHOLD IMPROVEMENTS							
	VARIOUS	340,952.	123,406.	SL	15.00	24,004.	
TOTAL DEPR TO FORM 3885		648,316.	321,030.			61,999.	

MAIL TO:
Registry of Charitable Trusts
P.O. Box 903447
Sacramento, CA 94203-4470
Telephone: (916) 445-2021

WEB SITE ADDRESS:

<http://ag.ca.gov/charities/>

**ANNUAL
REGISTRATION RENEWAL FEE REPORT
TO ATTORNEY GENERAL OF CALIFORNIA**

Sections 12586 and 12587, California Government Code
11 Cal. Code Regs. sections 301-307, 311 and 312

Failure to submit this report annually no later than four months and fifteen days after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of \$800, plus interest, and/or fines or filing penalties as defined in Government Code section 12586.1. IRS extensions will be honored.

State Charity Registration Number: **CT 86468**

HEART OF LOS ANGELES YOUTH, INC.

Name of Organization

2701 WILSHIRE BOULEVARD

Address (Number and Street)

LOS ANGELES, CA 90057

City or Town, State and ZIP Code

Check if:

☐ Change of address

☐ Amended report

Corporate or Organization No. **1708807**

Federal Employer I.D. No. **95-4397418**

ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, 311 and 312)

Make Check Payable to Attorney General's Registry of Charitable Trusts

Gross Annual Revenue	Fee	Gross Annual Revenue	Fee	Gross Annual Revenue	Fee
Less than \$25,000	0	Between \$100,001 and \$250,000	\$50	Between \$1,000,001 and \$10 million	\$150
Between \$25,000 and \$100,000	\$25	Between \$250,001 and \$1 million	\$75	Between \$10,000,001 and \$50 million	\$225
				Greater than \$50 million	\$300

PART A - ACTIVITIES

For your most recent full accounting period (beginning **07/01/2008** ending **06/30/2009**) list:

Gross annual revenue \$ **2,231,505.** Total assets \$ **3,726,794.**

PART B - STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT

Note: If you answer "yes" to any of the questions below, you must attach a separate sheet providing an explanation and details for each "yes" response. Please review RRF-1 instructions for information required.

	Yes	No
1. During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof either directly or with an entity in which any such officer, director or trustee had any financial interest?		X
2. During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds?		X
3. During this reporting period, did non-program expenditures exceed 50% of gross revenues?		X
4. During this reporting period, were any organization funds used to pay any penalty, fine or judgment? If you filed a Form 4720 with the Internal Revenue Service, attach a copy.		X
5. During this reporting period, were the services of a commercial fundraiser or fundraising counsel for charitable purposes used? If "yes," provide an attachment listing the name, address, and telephone number of the service provider.		X
6. During this reporting period, did the organization receive any governmental funding? If so, provide an attachment listing the name of the agency, mailing address, contact person, and telephone number.	X	
7. During this reporting period, did the organization hold a raffle for charitable purposes? If "yes," provide an attachment indicating the number of raffles and the date(s) they occurred.		X
8. Does the organization conduct a vehicle donation program? If "yes," provide an attachment indicating whether the program is operated by the charity or whether the organization contracts with a commercial fundraiser for charitable purposes.		X
9. Did your organization have prepared an audited financial statement in accordance with generally accepted accounting principles for this reporting period?	X	

Organization's area code and telephone number **(213) 389-1148**

Organization's e-mail address **GENERAL@HEARTOFLA.ORG**

I declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, it is true, correct and complete.

Signature of authorized officer

Printed Name

Title

Date

FORM RRF-1

INFORMATION REGARDING GOVERNMENT FUNDING
PART B, LINE 6

STATEMENT 13

CHILDREN'S INTERNATIONAL INSTITUTE
711 S. NEW HAMPSHIRE AVENUE
LOS ANGELES, CA 90005
MARY M. EMMONS, PRESIDENT & CEO
(213) 385-5100

CITY OF LOS ANGELES
DEPARTMENT OF CULTURAL AFFAIRS
201 N. FIGUEROA STREET, SUITE 1400
LOS ANGELES, CALIFORNIA 90012
MARGIE REES, PROGRAM MANAGER
(213) 202-5500