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

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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

OMB No. 1545-0047

<u>A</u>	For 1	the 2011 calendar year, or tax year beginning $UL_1, 2011$ and ending	g JUN 3	0, 2012	
В	Check app c	f C Name of organization			cation number
Ü	Add cha	dress 826LA			
		nge Doing Business As		38-3	<u>7</u> 22092
	Indi refu	Number and street (or P.O. box if mail is not delivered to street address)  Room/	suite E Tele	phone number	
	—Jate∙			•	<u>) 413</u> -3388
	iretu		G Gross	roceipts \$	1,074,136.
	App t on	LOS ANGELES, CA 90026	H(a) is	this a group re	
	pen	F Name and address of principal officer:JOEL ARQUILLOS		r affiliates?	Yes X No
		SAME AS C ABOVE	H(b) Are	e all affiliates inc	luded? Yes No
1	Tax-e	xempt status: X 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) or			list. (see instructions)
		site: WWW.826LA.ORG		oup exemption	
		of organization: X Corporation Trust Association Other L			State of legal domicile: CA
P	art I	Summary			
a)	1	Briefly describe the organization's mission or most significant activities: 826LA PI			JTORING,
Activities & Governance	1	WRITING, AND OTHER EDUCATIONAL PROGRAMS FOR	CHILDRI	EN.	
ž	2	Check this box 🕨 🔲 if the organization discontinued its operations or disposed of	more than 259	% of its net as	sets.
3	3	Number of voting members of the governing body (Part VI, line 1a)			11
<u>ن</u> 85	4	Number of independent voting members of the governing body (Part VI, line 1b)			1
es	5	Total number of individuals employed in calendar year 2011 (Part V, Ine 2a)		5	$\overline{22}$
差	6	Total number of volunteers (estimate if necessary)			3000
₹	7 8	Total unrelated business revenue from Part VIII, column (C), line 12		7a	32,180.
_	<u>                                     </u>	Net unrelated business taxable income from Form 990-T, ine 34	<u></u>	7b	-41,996.
				Year	Current Year
•	8	Contributions and grants (Part VIII, line 1h)	94	42,546.	954,452.
2	9	Program service revenue (Part VIII, line 2g)		<u>24,500.</u>	19,280.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		3,110.	2,375.
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		50,904.	32,180.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,03	31,060.	1,008,287.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	
9	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	42	<u> 29,052.</u>	490,073.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ğ	b	Total fundraising expenses (Part IX, column (D), line 25)  92,361.			
Ü	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	28	32,828.	356,116.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	71	<u>11.880.</u>	846,189.
	19	Revenue less expenses. Subtract line 18 from line 12	31	<u> 180.</u>	162,098.
: Assets or nd Balances			Beginning of	Current Year	End of Year
sets alar	20	Total assets (Part X, line 16)	1,33	30,895.	1,514,409.
: Se	21	Total liabilities (Part X, ine 26)		28,518	49,934.
월	22	Net assets or fund balances. Subtract line 21 from line 20	1,30	<u> 12,377.</u>	1,464,475.
	ırt II	Signature Block			<u> </u>
		alhes of perjury, I declare that I have examined this return, including accompanying schedules and st		-	knowledge and belief, it is
iru <del>e</del> ,	corre	ct, and complete. Destaration of preparer (other man officer) is based on all information of which prep	parer has any kr	nowledge.	<del></del>
		Cinnotural toffice	!	Date	113
Sigr		Signature of officer		Date .	
Her	e	JOEL ARQUILLOS, EXECUTIVE DIRECTOR Type or print name and title			
		(2)	Data	Phosis I	"I DTM
د: ۵۵		Print/Type preparer's name  JOHN BOVARD MIRON  Print/Type preparer's name  JOHN BOVARD MIRON	Date 4/30/13	Check	PTIN
Paid Dron					
-	arer	Firm's name QUIGLEY & MIRON, CPA/S Firm's address 3550 WILSHIRE BOULEVARD-SUITE 1660		Firm s EIN 🛌	<u>95-4656</u> 88 <u>1</u>
vae:	Only	LOS ANGELES, CA 90010-2481	١,	Dhonana / C	213) 620 2550
N.A	+b '			Phone na. (2	213 <u>) 639-3550</u>
viay	tne I	RS discuss this return with the proparer shown above? (see instructions)			Yes No

	le the exemination described in certion 501/eVQ) or 4047/eV(1) (other there a wind foundation)?		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?  If "Yes," complete Schedule A	_		
2	If "Yes," complete Schedule A	1	X	<del></del>
3	Did the organization required to complete schedule B, schedule or contributors.  Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_2	<u>X</u>	┼—
3	public office? If "Yes," complete Schedule C, Part I	3_	<u> </u>	L <sub>X</sub>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	   4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	Ε.		<del> </del>
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	İ	x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to		<u> </u>	+
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	1	X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			<b></b>
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	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	F. <b>-</b> -	<u>:</u>	<del>  ^</del>
-	credit counseling, debt management, credit repair, or debt negotiation services? # "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	Ī		
- •	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	i	x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
_	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	'	1	
-	Part VI	11a	x	ļ
h	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	1 ia		f -
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	1.10		41
·	assets reported in Part X, line 167 if "Yes," complete Schedule D, Part VIII	11c		x
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	·		
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	·	X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D. Part X	11f	x	[
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a i	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		х
13	is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule F.	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	l		
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	. [		
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	<del></del>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		.	
	complete Schedule G, Fart III	19		<u>X</u>
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	_	X
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		:

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

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

38

_	Fold the continuous state Book of Foundation 1000 Fig. 10 May 1000 Fig. 10	1.	ı -	•	Yes	N
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	7	4	-	İ
þ		1b	<u> </u>	4		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and (gambling) winnings to prize winners?	•	• •			
<b>9</b> 9	Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements,	]		1c	<del> </del>	$\vdash$
24	filed for the calendar year ending with or within the year covered by this return	2a	22	,		
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns			1	x	
v	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-tile</i> (see instruction			<u>2b</u>	<del>  ^</del> -	+
За	Sidelike annualization because and the besides a second of the OSO annual and the OSO	-		ا	x	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3a 3b	X	<u> </u>
	At any time during the calendar year, did the organization have an interest in, or a signature or other	author	ritu ovor o	30	┝╌	
ta	financial account in a foreign country (such as a bank account, securities account, or other financial					١,
L		accou	ing r	4a	<del> -</del>	2
D	If "Yes," enter the name of the foreign country:	·				l
	See instructions for filling requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial			l _	!	١.,
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			_ 5a_	-	<u> </u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction.			<u>5b</u>		X
_	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c	_	- إ
Sa	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	_		}	1	
	any contributions that were not tax deductible?			<u>6a</u>	<b>-</b>	X
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions are expressed as a second of the contribution of the contr	tions o	r gitts			
	were not tax deductible?			6b_		_
•	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se			7a	Х	_
	If "Yes," did the organization notify the donor of the value of the goods or services provided?			_7b	Х	
¢	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as req	uired			
	to file Form 8282?			7c		_ <u>X</u>
	If "Yes," indicate the number of Forms 8282 filed during the year	7d		ŀ		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of			7e_		<u> X</u>
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit confi			7f		X
_	If the organization received a contribution of qualified intellectual property, did the organization file Fig.			7 <u>g</u>		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		_
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D					
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any tim	e during the year?	8		
	Sponsoring organizations maintaining donor advised funds.					
	Did the organization make any taxable distributions under section 4966?		·	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
	Section 501(c)(7) organizations. Enter:				<u> </u>	
	Initiation fees and capital contributions included on Part VIII, line 12					
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
	Section 501(c)(12) organizations. Enter:					
	Gross income from members or shareholders	11a			1	
b	Gross income from other sources (Do not net amounts due or paid to other sources against		1			
		_11b			!	
а	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	10411	?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
	Section 501(c)(29) qualified nonprofit health insurance issuers.				<u>_</u> .	
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the		İ	.	ł	
	organization is licensed to issue qualified health plans	13b				
	Enter the amount of reserves on hand	13c		[		
а	Did the organization receive any payments for indoor tanning services during the tax year?			14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Scheduli	۰.		14b	T	

826LA Form 990 (2011) 38-3722092 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 11 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent 11 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? Х 2 Dig the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X Did the organization become aware during the year of a significant diversion of the organization's assets? Х 5 Did the organization have members or stockholders? X 6 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7а b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Х 7b Did the prganization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? X 8ь Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates. and branches to ensure their operations are consistent with the organization's exempt purposes? 10h 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a X b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 b Wore officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c. Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent 15 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a b Other officers or key employees of the organization 15b Х If "Yes" to fine 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation. in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Upon request Own website Another's website Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: 826LA - (213) 413-3388

714 W. SUNSET BLVD, LOS ANGELES.

90026

CA

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0 in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organia (A) Name and Title	(B) Average hours per week	(de bo) offi	not o	Pos Pos Feck ss pe	C) sition more erson		one han	(D) Reportable	(E) Reportable compensation from related	(F) Estimated amount of other
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key amployee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) SALLY WILLCOX				,				_		
PRESIDENT	1.00	Х		X		ļ. <u>.</u> .		0.		0.
(2) JODIE EVANS					ı				_	_
VICE PRESIDENT	1.00	Х	_	Х				0.	0.	0,
(3) BRAD SIMPSON SECRETARY	1.00	х		х				0.	0.	0.
(4) JOHN T. GILBERTSON TREASURER	2.00	X		х				0.	0.	0 <u>.</u>
(5) MAC BARNETT DIRECTOR	1.00	x						0.	0.	0.
(6) JOSHUAH BEARMAN DIRECTOR	1.00	х						0.	0.	0.
(7) GRANT DEVAUL DIRECTOR	1.00	x						0.	0.	0.
(8) DAVE EGGERS DIRECTOR	1.00	x						0.	0.	0.
(9) TERENA THYNE EISNER DIRECTOR	1.00	x		!		<u> </u>		0.	0.	0.
(10) KEITH KNIGHT DIRECTOR	1.00	x						0.	0.	<u>0.</u>
(11) KRYSTYN MADRIGAL DIRECTOR	1.00	x						0.	0.	
(12) JOEL ARQUILLOS EXECUTIVE DIRECTOR	40.00			x		:		90,937.	0.	4,430.

Part VII Section A. Officers, Directors, (A)  Name and title	Average hours per week (describe	(du pox, offic	(C) Position (do not check more to pox, unless person is officer and a director.			l than is but	one h an	(D) Reportable compensation from	(E) Reportable compensation from related		Estir amo ot	F) nated unt of her
	hours for related organizations in Schedule O)	Individual crustee or desector	Institutional trustee	Difficer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC	)	fron organ and r	nsation the ization elated zations
· · · · · · · · · · · · · · · · ·										_		
	' 	<u> </u>							<u> </u>			
				-								
							i	i	<del></del> .			
1b Sub-total						<b>▶</b>		90,937.		),	4,	430.
c Total from continuation sheets to Part d Total (add lines 1b and 1c)	VII, Section A	· · · · · · · · · · · · · · · · · · ·		·····	<u>.</u>		o re	90,937.	C	) .	4,	0. 430.
compensation from the organization	100 1111100 100 111							out to a more a man group	and of raportation		Ye	s No
3 Did the organization list any former office line 1a? If "Yes," complete Schedule J for	such individual						<b>.</b>	······································			3	x
<ul> <li>4 For any individual listed on line 1a, is the sand related organizations greater than \$1.</li> <li>5 Did any person listed on line 1a receive or</li> </ul>	50,000? // "Yes,"	con	nple	te S	che	dule	J fo	or such individual		-	4	x
rendered to the organization? If "Yes," co Section B. Independent Contractors					-			o organization or morni	20011073011003		5	х
Complete this table for your five highest of the organization. Report compensation for	•								•	nsat	ion fron	1
(A) Name and busines	s address	NO	NE	<u> </u>				(B) Description of se	ervices	Co	(C) mpensa	tion
							+					
<del></del>	<u></u>											
							1					
Total number of independent contractors	-	ot lim	ited	l to t	_		ted	above) who received me	ore than		<u></u>	
\$100,000 of compensation from the organ	nization 🕨				0	ı				Fo	orm <b>99</b> 0	) (2011)

			(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 b c d e f	Membership dues Fundraising events  10 232,120.	954,452.			
		CONTRACTED SERVICES  Business Code 611710	19,280.	19,280.		
Program Service Revenue	c d e f					
	g		19,280.			
	3 4 5	Investment income (including dividends, interest, and other similar amounts)  Income from investment of tax-exempt bond proceeds  Royalties	2,375.			2,37 <u>5</u> .
	6 a b c	(i) Real (ii) Personal  Gross rents  Less: rental expenses  Rental income or (loss)  Net rental income or (loss)  Gross amount from sales of  (i) Securities (ii) Other				
	c	assets other than inventory  Less: cost or other basis  and sales expenses  Gain or (loss)  Net gain or (loss)				
Other Revenue	b	Gross income from fundraising events (not including \$ 232,120. of contributions reported on line 1c). See Part iV, line 18 a 26,844. Less: direct expenses b 26,844.	_			
	9 a b	Net income or (loss) from fundraising events  Gross income from gaming activities. See  Part IV, line 19 a  Less: direct expenses b  Net income or (loss) from gaming activities	0.			
	10 a b	Net income or (loss) from gaming activities  Gross sales of inventory, less returns and allowances a Less: cost of goods sold b  Net income or (loss) from sales of inventory	32,180.		32,180.	
ļ	11 a b	Miscellaneous Revenue Business Code				
	e	All other revenue  Total. Add lines 11a-11d  Total revenue, See instructions.	1008287.	19,280.	32,180.	2,375.

#### Part IX Statement of Functional Expenses

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

Check if Schedule O contains a respons  Do not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C)	(D)
7b, 8b, 9b, and 10b of Part VIII.	rotal expenses ;	expenses	Management and general expenses	Fundraising expenses
Grants and other assistance to governments and				
organizations in the United States. See Part IV, line 21				
Grants and other assistance to individuals in				-
the United States, See Part IV, line 22				
3 Grants and other assistance to governments,				
organizations, and individuals outside the				
United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors,		_		
trustees, and key employees	99,610.	69,727.	19,922.	<u>9,96</u> 1
6 Compensation not included above, to disqualified				
persons (as defined under section 4958(f)(1)) and			İ	
persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	316,670.	262,599.	15,905.	38,166
B Pension plan accruals and contributions (include				<del></del>
section 401(k) and section 403(h) employer contributions)				<u> </u>
9 Other employee benefits	37,827.	30,732.	2,636.	4,459 4,165
10 Payroll taxes	35,966.	28,755.	3,046.	4,165
11 Fees for services (non-employees):				
a Management				<u>-</u>
b Legal				
c Accounting	26,899.	22,864.	1,345.	2,690
d Lobbying				
<ul> <li>Professional fundraising services. See Part IV, line 17</li> </ul>				
f Investment management fees				
g Other				
12 Advertising and promotion		:		
13 Office expenses	61,372.	52,167.	3,068.	6,137.
14 Information technology				
15 Royalties				
16 Occupancy	117,309.	99,713.	5,865.	11,731.
17 Travel	6,272.	5,331.	314.	627.
18 Payments of travel or entertainment expenses				
for any federal, state, or local public officials				_
19 Conferences, conventions, and meetings				
20 Interest				·
21 Payments to affiliates	44,456.	37,788.	2,223.	4,445.
22 Depreciation, depletion, and amortization	51,986.	44,188.	2,599.	5,199.
23 Insurance	9,235.	7,850.	462.	923.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
	20 272	17 216	1 010	0 000
a AMERICORP VISTA	20,372.	17,316.	1,019. 911.	<u>2,037</u> .
b MISCELLANEOUS	18,215.	15,483.	911.	1,821.
<b>c</b>			-	
d			•	<del></del>
e All other expenses	046 100	COA E13	<u> </u>	
25 Total functional expenses. Add lines 1 through 24e	846,189.	694,513.	59,315.	<u>9</u> 2,361.
Joint costs. Complete this line only if the organization	}			
reported in column (B) joint costs from a combined				
educational campaign and fundraising solicitation.				
Check here rf following SOP 98-2 (ASC 958-720)			<u> </u>	Form <b>990</b> (2011)

		<u></u>			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			215,335.	1	182,613.
	2	Savings and temporary cash investments			849,104.		1,084,196
	3	Pledges and grants receivable, net			50,000.		87,664
j	4	Accounts receivable, net			007000	4	
	5	Receivables from current and former officers, d			··	1	
		employees, and highest compensated employe				1	
		of Schedule L				_	
	6	Receivables from other disqualified persons (as		ſ		5	
i	ю	• • • • • • • • • • • • • • • • • • • •				·	
		4958(f)(1)), persons described in section 4958(d		-			
		employers and sponsoring organizations of sec					
92		employees' beneficiary organizations (see instru				6	
Assets	7	Notes and loans receivable, net			40 0 - 1	7	
₹	8	Inventories for sale or use			42,054.	8	<u>36</u> ,016.
	9	Prepaid expenses and deferred charges			1,988.	9	2 <u>,850</u> .
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	253,689. 153,552.		-	
1	b	Less: accumulated depreciation	10b	153,552.	152,123.	10c	<u> </u>
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line	11			12	
1	13	Investments - program-related, See Part IV, line	11			13	<del></del> -
	14	Intangible assets				14	·
	15	Other assets. See Part IV, line 11			20,291.	15	20,933.
	16	Total assets. Add lines 1 through 15 (must equ			1,330,895.	16	1,514,409.
	17	Accounts payable and accrued expenses			28,518.	17	49,934.
- 1	18	Grants payable				18	
	19	Deferred revenue			19	· · · · · · · · · · · · · · · · · · ·	
	20	Tax-exempt bond liabilities			20	<del></del>	
<u> </u>	21	Escrow or custodial account liability. Complete			21	<del></del>	
<b>a</b>	22	Payables to current and former officers, director					
≣  '		highest compensated employees, and disqualifi					
ا <u>ت</u>						22	
	00	of Schedule L Secured mortgages and notes payable to unrela				23	<del></del>
		Unsecured notes and loans payable to unrelate		F-	· <u></u>	24	<del></del>
	24 25	Other liabilities (including federal income tax, pa					
'	25	parties, and other liabilities not included on lines					
				i		0.5	
l.		Schedule D			28,518.	25	40 034
- + 2	<u> 26                                    </u>	Total liabilities. Add lines 17 through 25			20,310,	26	49,934.
		Organizations that follow SFAS 117, check he	ere 📂 L	All and complete			
8		lines 27 through 29, and lines 33 and 34.			1 176 701		1 244 555
ă l		Unrestricted net assets			1,176,781.		<u> 1,344,725.</u>
<u>교</u>   2		Temporarily restricted net assets			125,596.	28	<u>119,750.</u>
된   2						29	
교		Organizations that do not follow SFAS 117, c	heck here	▶ Li and			
ō		complete lines 30 through 34.					
∯  3		Capital stock or trust principal, or current funds				30	
<b>ĕ</b>  3		Paid-in or capital surplus, or land, building, or ed				31	
<b>≖</b> ।		Retained earnings, endowment, accumulated in			4 55	32	<del></del>
<b>~</b>  3		Total net assets or fund balances			1,302,377.	33	1,464,475.
[ 3	34	Total liabilities and net assets/fund balances			1,330,895.	34	<u>1,514,409.</u>

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

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Act and OMB Circular A-133?

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За

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

Department of the Treasury

nternal Revenue Service

**Public Charity Status and Public Support** 

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

2011 2011

Open to Public Inspection

Name of	the organiza	tion							Employer	identificat	tion n	umber
	826LA  art I Reason for Public Charity Status (All organizations must complete this part.) See instructions.									<u>8-372:</u>	2092	2
Part I	Reason	for Public Cha	arity Status (All organi	izations m	ust compl	ete this pa	rt.) See ins	structions				
The organ	nization is not	a private foundation	n because it is: (For lines	1 through	11, checi	only one	box.)					
1 🖳	A church, co	onvention of church	es, or association of chu	rches desc	cribed in s	ection 17	O(b)(1)(A)	i).				
2 🖳			<b>170(b)(1)(A)(ii)</b> . (Attach S									
з 🖳			pital service organization									
4 📖			n operated in conjunction	with a ho	spital des	cribed in s	ection 170	)(b)(1)(A)(	iii). Enter t	he hospita	i's nar	ne,
	city, and sta							<del></del>				
5	_	tion operated for the 0(b)(1)(A)(iv). (Comp	e benefit of a college or u blete Part II.)	iniversity o	wned or o	perated b	y a govern	imental ur	nit describe	ed in		
6 📖	A federal, st	ate, or local governi	ment or governmental un	it describe	d in secti	on 170(b)(	1)(A)(v).					
7 X	An organizat	tion that normally re	ceives a substantial part	of its supp	port from	a governm	ental unit	or from th	e general p	public desc	ribed	in
	section 170	(b)(1)(A)(vi), (Comp	lete Part II.)									
в 🗀	A communit	y trust described in	section 170(b)(1)(A)(vi).	(Complete	Part II.)							
9 🗀	An organizat	tion that normally re	ceives: (1) more than 33	1/3% of its	s support	from contr	ributio⊓s, r	nembersh	nip fees, am	nd gross re	ceipts	from
	activities rela	ated to its exempt fo	unctions - subject to cert	ain except	ions, and	(2) no mor	e than 33	1/3% of it	s support	from gross	invest	tment
	income and	unrelated business	taxable income (less sec	tion 511 ta	ax) from b	usinesses	acquired b	by t <b>he</b> org	anization a	after June (	30, 19	75.
		509(a)(2). (Complet										
10	-	•	operated exclusively to te					•				
11 📖	_	_	operated exclusively for t		-				-			Or
	•		zations described in sect				2). See se	ction 509	(a)(3). Che	ck the box	that	
			g organization and compl		_				. E · 1	l <b></b> .		
	a Type					ction <b>al</b> ly in	-			Type III 🕠		
e	• -	-	nat the organization is not						-			
		=	than one or more publication determination from						re(a)(1) or s	section 509	#(a)(2).	
f	_	rganization, check t	41-7-1									
_		•	organization accepted a							·· ············		. L _
9	-		directly controls, either a								Yes	No
		-	supported organization?						() 0010111	_	163	140
		~ -	on described in (i) above?								t	
			a person described in (i)									
h	•		n about the supported or			· · · · · · · · · · · · · · · · · · ·			***************************************	, , , , , , , , , , , , , , , , , ,		
••			·· —	•	1-7-							
	of supported	(ii) EIN	(III) Type of	(iv) Is the (	organizatio	ı (v) Did yo	u notify the	(yi)	s the	(vii) An	nount n	
	nization	(ii) Liii	organization (described on lines 1-9	in col. (i) li	sted in you	r organizat	tion in col.	organizat (i) organi	ion in cal.   zed in the		port	r
Ū			above or IRC section	governing	dacument	(i) of you	r support?	'' "U.	S.?	•		
		<u> </u>	(see instructions))	Yes	No	Yes	No	Yes	No		_	
									1 1			
									1 1			
			i								_	
						i						
											_	
			+	-		<del>                                     </del>			+			
otal									1			

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

Schedule A (Form 990 or 990-EZ) 2011

#### Schedule A (Form 990 or 990 EZ) 2011 826LA Part II Support Schedule for Organi Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Se	ctioл A. Public Support						
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not					]	
	include any "unusual grants.")	195.028.	517,727.	1,079,312,	936.946.	954,452.	3,683,465,
2	Tax revenues levied for the organ-	[	<u> </u>				<u> </u>
_	ization's benefit and either paid to	İ					
	or expended on its behalf						
2	The value of services or facilities						
٠	furnished by a governmental unit to						
	the organization without charge		i				
	Total. Add lines 1 through 3	195,028.	517,727.	1,079,312,	936,946.	954,452.	
		173,040.		1,079,314.	330,340.	334,432.	<u>3,683,465.</u>
5	· ·						
	by each person (other than a		i				
	governmental unit or publicly					·	
	supported organization) included on line 1 that exceeds 2% of the						
	*						
	amount shown on line 11.		i				
	column (f)	•					<u>623,171.</u>
	Public support. Subtract line 5 from line 4			•			3,0 <u>6</u> 0, <b>294</b> ,
	ction B. Total Support	T	· · · · · · · · · · · · · · · · · · ·			· ··· · <del></del>	
	ndar year (or fiscal year beginning in) 📂	(a) 2007	(b) 2008	(c) <u>2009</u>	(d) 2010	(e) 2011	(f) Total
	Amounts from line 4	195,028.	517,727.	1,079,312.	936,946.	<u>954,452.</u>	3,683,465
8	Gross income from interest,			i			
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	3,689.	2,547.	2,537.	3,110.	2,375.	14,258.
9	Net income from unrelated business				,		
	activities, whether or not the					ł	
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital		İ				
	assets (Explain in Part IV.)	4,750.	3,500.	8,562.	24,500.	19,280.	60,592.
11	Total support. Add lines 7 through 10						3,758,315,
	Gross receipts from related activities,	etc. (see instructio	ns)			12	
	First five years. If the Form 990 is for			, fourth, or fifth ta	x vear as a section	501(c)(3)	·
					-		▶□
Sec	organization, check this box and stop ition C. Computation of Publi	c Support Per	centage				
	Public support percentage for 2011 (li			olumn (fi)		14	81.43 %
	Public support percentage from 2010					15	85.79 %
	33 1/3% support test - 2011. If the o					···-	
100	stop here. The organization qualifies a	•					
ь	33 1/3% support test - 2010. If the o						
	and stop here. The organization qualit						
	10% -facts-and-circumstances test						
	and if the organization meets the "fact						
	meets the "facts and circumstances" t			•		-	
	10% -facts-and-circumstances test						
	more, and if the organization meets th	<del>-</del>					0,0 OI
	more, and it the organization meets in organization meets the *facts-and-circ						▶□
	_		-		-		············· <b>【</b>
18	Private foundation. If the organization	raid not check a D	од оплаета, год	, 100, 17a, 01 170		na see instructions dula A /Form 200	

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

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

Se	ction A. Public Support						
Cal	endar year (or fiscal year beginning in) 📂	(a) 2007	(ь) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and				Ì		
	membership fees received. (Do not						
	include any "unusual grants.")						<u></u>
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513					_	
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf		i			<u> </u>	
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
l	h Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						<del></del>
	Add lines 7a and 7b						·
	Public support (Subtract line 7c from Hag 6.) ction B. Total Support		I			·	<u> </u>
	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Amounts from line 6	(a) 2007	(8) 2000	10) 2003	(0)2010	(e) 20 1 i	h) iolai
	Gross income from interest,						
102	dividends, payments received on securities loans, rents, royalties and income from similar sources						
Ł	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b		<u>:</u>		<del>                                     </del>		<del></del>
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.)						
	Total support (Add lines 0, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organization'	s first, second, thin	d, fourth, or fifth t	tax year as a sectio	n 501(c)(3) organiz	zation,
	check this box and stop here						
	ction C. Computation of Publi						
	Public support percentage for 2011 (lin						<u>%</u>
	Public support percentage from 2010				*************************	16	%
	ction D. Computation of Inves						
	Investment income percentage for 20						
	Investment income percentage from 2						%
19a	33 1/3% support tests - 2011. If the						
	more than 33 1/3%, check this box an						
b	33 1/3% support tests - 2010. If the						
	line 18 is not more than 33 1/3%, chec						
20	Private foundation. If the organization	<u>i did not check a</u>	box on line 14, 19:	<u>a, or 19b, check t</u>	this box and see ins	structions	

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

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

Department of the Treasury Internal Revenue Service **Schedule of Contributors** 

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

OMB No. 1545-0047

2011

Name of the organizati	Employer identification number	
	826LA	38-3722092
Organization type(chec	ck one);	
Filers of:	Section:	
Form 990 or 990 EZ	X 501(c)( 3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> 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	
	on is covered by the <b>General Rule</b> or a <b>Special Rule.</b> 1(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special	Rule. See instructions.
-	(1-1/-) (1-1/-) (1-1/-) (1-1/-)	
General Rule		
-	ition filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in implete Parts I and II.	nmoney or property) from any one
Special Rules		
509(a)(1) and 1	01(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the 70(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the on (i) Form 990, Part Vill, line 1h, or (ii) Form 990-EZ, the 1. Complete Parts I and It.	<del>-</del>
total contribution	01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one colons of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or of cruelty to children or animals. Complete Parts I, II, and III.	
contributions fo If this box is che purpose. Do no	O1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one color use exclusively for religious, charitable, etc., purposes, but these contributions did not ecked, enter here the total contributions that were received during the year for an exclusit complete any of the parts unless the <b>General Rule</b> applies to this organization becausable, etc., contributions of \$5,000 or more during the year.	total to more than \$1,000.  sively religious, charitable, etc., se it received nonexclusively
but it must answer "No"	n that is not covered by the General Rule and/or the Special Rules does not file Schedu on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Pa eet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	

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

Name of organization Employer identification number 38-3722092

Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$20,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$119 <u>,750</u> .	Person X Payroll Concash Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$23,260.	Person X Payroll  Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		s 50,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$ <u>20,000</u> .	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)

Schedule	B (Form 990, 990-EZ, or 990-PF) (2011)		Page <b>2</b>
Name of or	ganization	Emplo	yer identification number
826 <u>LA</u>		3	8- <u>3</u> 722092
Part I	Contributors (see instructions). Use duplicate copies of Part Life		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$40,000.	Person X Payroll  Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
. 8		ssss	Person X Payroll  Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		sss	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

826LA

38-3722092

Part II	Noncash Property (see instructions), Use duplicate copies of P	art II if additional space is needed.	
(a) No. from Part i	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<u></u>	
(a) No. from Part i	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
			_
-		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_   -			
-		\$	
(a) No. from	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>:</u>  -			
-			
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-			<u> </u>
—   -			
3453 01-23-1		Schedule B (Form 9	90, 990-EZ, or 990-PF

lame of orga	niza1ion		Employer identification number
826LA Part III	Exclusively religious, charitable, etc., indi	vidual contributions to section 501(c)	38-3722092 (7), (8), or (10) organizations that total more than \$1,000 for the
	year, Complete columns (a) through (e) and the total of exclusively religious, charitable, et Use duplicate copies of Part III if addition	he following line entry. For organizatio c., contributions of \$1,000 or less for all space is needed.	(7), (8), or (10) organizations that total more than \$1,000 for the ns completing Part III, enter the year. (Enterth sinformation once)
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
-			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
_	Transferee's name, address, at	nd ZIP + 4	Relationship of transferor to transferee
(a) Na			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift Is held
<u>-</u>   -			
<u>:</u> 		(e) Transfer of gift	
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_			
		(e) Transfer of gift	
_	Transferee's name, address, an	Id ZIP + 4	Relationship of transferor to transferee

#### **SCHEDULE D**

(Form 990)

Department of the Freasury Internal Revenue Service

Supplemental Financial Statements
► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions.

OMB No. 1545 0047 Inspection

Name of the organization

Employer identification number

	826LA		38-3722092
Pa	rt I Organizations Maintaining Donor Advised F	unds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6.		
	Organization and the second se	(a) Donor advised funds	(b) Funds and other accounts
		(2)	(b) since 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	g that the assets held in donor advise	ed tunds
	are the organization's property, subject to the organization's exclu	usive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advise	ors in writing that grant funds can be i	used only
•	for charitable purposes and not for the benefit of the donor or do		•
Pa			
			artiv, iii igi -
1	Purpose(s) of conservation easements held by the organization (or		
	Preservation of land for public use (e.g., recreation or education and land for public use (e.g., recreation or education and land for public use (e.g., recreation or education and land for public use (e.g., recreation or education and land for public use (e.g., recreation or education and land for public use (e.g., recreation or education and land for public use (e.g., recreation or education and land for public use (e.g., recreation or education and land for public use (e.g., recreation or education and land for public use (e.g., recreation or education and land for public use (e.g., recreation or education and land for public use (e.g., recreation or education and land for public use (e.g., recreation or education and land for public use (e.g., recreation or education and land for public use (e.g., recreation or education and land for public use (e.g., recreation or education and land for public use (e.g., recreation or education and land for public use (e.g., recreation or education and land for education and land		torically important land area
	Protection of natural habitat	Preservation of a certif	fied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified of	onservation contribution in the form of	of a conservation easement on the last
	day of the tax year.		
	•		Held at the End of the Tax Year
а	Total number of conservation easements		
b	Total acreage restricted by conservation easements		
G	Number of conservation easements on a certified historic structure		
d	Number of conservation easements included in (c) acquired after		
u	listed in the National Register		2d
3	Number of conservation easements modified, transferred, release		
3	_	o, examplioner, or terminated by the	organization during the tax
_	year ▶Number of states where property subject to conservation easeme	nt in length of	
4			
5	Does the organization have a written policy regarding the periodic		
	violations, and enforcement of the conservation easements it hold		
6	Staff and volunteer hours devoted to monitoring, inspecting, and		
7	Amount of expenses incurred in monitoring, inspecting, and enfor	-	· ·
8	Does each conservation easement reported on line 2(d) above sale		
	and section 170(h)(4)(B)(ii)?		Yes Li No
9	In Part XIV, describe how the organization reports conservation ea	sements 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 t	he organization's accounting for
	conservation easements.		
Par	t III Organizations Maintaining Collections of An	i, Historical Treasures, or Ot	her Similar Assets.
	Complete if the organization answered "Yes" to Form 990,	Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC 95	8), not to report in its revenue statem	ent and balance sheet works of art,
	historical treasures, or other similar assets held for public exhibition	n, education, or research in furtheran	ice of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that describes t	hese items.	
ь	If the organization elected, as permitted under SFAS 116 (ASC 95	8), to report in its revenue statement	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, educat		
	relating to these items:	,	,
	(i) Revenues included in Form 990, Part VIII, line 1		<b>▶</b> \$
	(ii) Assets included in Form 990, Part X		
	If the organization received or held works of art, historical treasure		
	the following amounts required to be reported under SFAS 116 (A		Sent bioxida
			<b>L</b> \$
	Revenues included in Form 990, Part VIII, line 1		
þ	Assets included in Form 990, Part X		

Sche	edule D (Form 990) 2011 826LA						3722092	
	rt III Organizations Maintaining (	Collections of Ar	t, Historical Ti	reasures, or	r Other	Similar Ass	sets (continu	ued)
3	Using the organization's acquisition, access	ion, and other record	s, check any of the	e following that	are a sign	nificant use of i	ts callection i	items
	(check all that apply):							
а	Public exhibition	d	Loan or exc	change program	ทร			
b	Scholarly research	е	Other					
c	Preservation for future generations		-			-		
4	Provide a description of the organization's c	ollections and explain	n how they further	the organizatio	n's exemp	pt purpose in P	Part XIV.	
5	During the year, did the organization solicit of							
-	to be sold to raise funds rather than to be m						Yes	☐ No
Pai	rt IV Escrow and Custodial Arran							1,10
	reported an amount on Form 990, Pa	•					, ,,,,	
1a	Is the organization an agent, trustee, custod	lian or other intermed	iary for contribution	ns or other ass	ets not in	cluded		
10	on Form 990, Part X?						Yes	☐ No
h	If "Yes," explain the arrangement in Part XIV							
u	II Test explain the arrangement are						Amount	
_	Beginning balance					1c		-· · ·
	Additions during the year					I I		
	- • • • • •					1		
_	Distributions during the year							
f	Ending balance  Did the organization include an amount on F					<del></del>	Yes	No
	If "Yes," explain the arrangement in Part XIV		21:			L	res	NO
Par			swered "Yes" to Fo	orm 990 Part I)	/ line 10			
Га	Complete	(a) Current year	(b) Prior year			Three years bac	yk (a) kaur y	anre book
	Designing of year halongs		(D) ( Noi Year	Tel inc years	Dack Ita	d Timee Aears our	A (e) roan ye	Gal S Dack
	Beginning of year balance	-"				<u></u>	<del></del>	
b	Contributions			<del>                                     </del>	<del></del>			
	Net investment earnings, gains, and losses		<del></del>		-		<del></del>	
d	Grants or scholarships						<del></del>	
e	Other expenditures for facilities							
	and programs	l l	<del></del> ·			***	<del>-</del>	
	Administrative expenses						<del>                                     </del>	
	End of year balance		a /lina 1a paluma /	all hold no			E	
2	Provide the estimated percentage of the cur		e (iline 19, column (i	a)) nelo as:				
	Board designated or quasi-endowment							
	Permanent endowment							
G	Temporarily restricted endowment	<del></del>						
	The percentages in lines 2a, 2b, and 2c shot	·		سمقمامات المما	\$	:		
3a	Are there endowment funds not in the posses	ession of the organiza	ition that are neid a	and administer	ea for the	organization	[	<del></del>
	by:							es No
	(i) unrelated organizations						, ,	
	(ii) related organizations							
þ	If "Yes" to 3a(ii), are the related organizations							<u> </u>
4	Describe in Part XIV the intended uses of the						<u></u>	
Par						<del></del>		
	Description of property	(a) Cost or ot		t or other	• /	umulated	(d) Book v	/alue
		basis (investm	nent) basis	(other)	cepre	eciation		
	Land	· ·						
	Buildings		-				· · · · · · · · · · · · · · · · · · ·	
	Leasehold improvements						<del></del>	<del></del>
	Equipment		1	2 600	4 1	2 552	100	127
	Other		• • • • • • • • • • • • • • • • • • • •	53,689.	Т;	53,552.		137.
<u>Total.</u>	. Add lines 1 <u>a through 1e. (Column (d) must e</u>	<u>:gual Form 990, Part )</u>	x, columa (B), line	10(c).)			100	<u>.137.</u>

Schedule D (Form 990) 2011

EXAMINATION THREE YEARS FROM THE DATE OF FILING.

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

Department of the Treasury

Internal Revenue Service

# Supplemental Information Regarding Fundraising or Gaming Activities

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

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

2011

Open To Public Inspection

Schedule G (Form 990 or 990-EZ) 2011

Name of the organization 826LA					38~3722	entification number
Part I Fundraising Activities. Correquired to complete this part.	mplete if the organization ansv	vered "\	res" to	o Form 990, Part IV,	ine 17. Form 990-E	Z flers are not
<ul> <li>Indicate whether the organization raised for a Mail solicitations</li> <li>Internet and email solicitations</li> <li>Phone solicitations</li> <li>In person solicitations</li> <li>a Did the organization have a written or orackey employees listed in Form 990, Part V</li> <li>If "Yes," list the ten highest paid individual compensated at least \$5,000 by the organization have a written or orackey employees.</li> </ul>	Solicition     Solicition     Solicition     Special superiorists     Special agreement with any individual superiorists     Special superiorists     Solicition     S	ation of ation of al fundra al (includ profess	non-g gover aising ding o ional f	overnment grants nment grants events fficers, directors, tru fundraising services?	stees or	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	Pave ci or con	Did aiser ustody trol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No	:		
		· <del> </del> ·		· · · · · · · · · · · · · · · · · · ·		
						<u> </u>
					<del>-</del>	
						<u> </u>
	<del></del>	ļ —				<u>-</u> -
					· ···	
	<del>-</del>					-
	<del></del>					
otal			<b>•</b>			
<ol> <li>List all states in which the organization is a or licensing.</li> </ol>	registered or licensed to solicit	contrib	utions	or has been notified	l it is exempt from n	egistration
		•			· · · · · · · · · · · · · · · · ·	·
		,		•••		
	· — —					

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

	Τ	of fundraising event contributions and g	(a) Event #1	D-EZ, ines 1 and 6b. List (b) Event #2	events with gross rece (c) Other events	ipts greater than \$5,000.  (d) Total events
			JUDD & JON COMEDY & MUS		NONE	(add col. (a) through
Φ			(event type)	(event type)	(total number)	- col. (c))
Revenue	1	Gross receipts	258,964.	· 		258,964
	2	Less: Charitable contributions	232,120.			232,120.
	3	Gross income (line 1 minus line 2)	26,844.			26,844.
	4	Cash prizes		·		
es es	5	Noncash prizes			: 	
Expenses	6	Rent/facility costs				<u>.</u>
Direct	7	Food and beverages				
	8	Entertainment	26 944			
	9	Other direct expenses				26,844.
	10	Direct expense summary. Add lines 4 throug Net income summary. Combine line 3, colum				( 26,844)
Pa	art I		answered "Yes" to Form	990, Part IV, line 19, or	reported more than	
<u> </u>		\$15,000 on Form 990-EZ, ine 6a.				
_		***	/ 1 Di	(b) Pull tabs/instant		(d) Total gaming (add
u Ge			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Revenue						
Œ	1	Gross revenue				
	1					
en en	2	Cash prizes				
Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
			Yes%	Yes %	Yes %	
	6	Volunteer labor	☐ No	□ No	No	
	7	Direct expense summary. Add lines 2 throug	h 5 in column (d)		<b>&gt;</b>	
	8	Net gaming income summary. Combine line	1, column d, and line 7		<b>&gt;</b>	
9		er the state(s) in which the organization opera				
		he organization licensed to operate gaming ac				., L Yes No
D	11 1	No," explain:		<del></del> -	<del></del>	
10a	We	re any of the organization's gaming licenses re	evoked, suspended or ter	minated during the tax	year?	Yes . No
b	If "	Yes, explain:				
						<u> </u>
						·
13208	32 O1	-23-12			Schedule G (Fo	rm 990 or 990-EZ) 2011

Scl	hedule G (Form 990 or 990-EZ) 2011 826LA	38- <u>3</u>	722	092	Page 3
11	Does the organization operate gaming activities with nonmembers?				☐ No
	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?		,Ш	Yes	No
	Indicate the percentage of gaming activity operated in:				
	a The organization's facility				
	b An outside facility		13b	1	%
14	Enter the name and address of the person who prepares the organization's garning/special events books and record	<b>5</b> :			
	Name			<u>-</u>	
	Address				-
15	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?			Yes	☐ No
	b If "Yes." enter the amount of gaming revenue received by the organization ▶ \$ and the amou	nt			
	of garning revenue retained by the third party > \$				
	c if "Yes," enter name and address of the third party:				
	<del></del>				
	Name				
	Address >				
16	Gaming manager information:				
	Name				
	Gaming manager compensation  \$				
	Description of services provided				
	Director/officer Employee Independent contractor				
	The state of the s				
17	Mandatory distributions: a Is the organization required under state law to make charitable distributions from the gaming proceeds to				
1	retain the state gaming license?			Yes	☐ No
	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	the			
	organization's own exempt activities during the tax year ▶ \$				
P	Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, column	nns (iii)	and (v	), and	Part III,
	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional info	mation	(see	nstruc	tions),
_					
_					<del></del> .
_				·· · ·	
					-

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

### Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2011 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

826LA

Employer identification number 38-3722092

······································
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
THIS YEAR, 826LA PUBLISHED SIXTEEN CHAPBOOKS, INCLUDING OUR FIRST
MULTILINGUAL CHAPBOOK, SPEAK TO TACOS DE ASADA, FEATURING WRITING FROM
STUDENTS AND PARENTS IN ENGLISH, SPANISH, CAMBODIAN, KOREAN, AND
FRENCH.
SUMMER CAMP: DURING THE SUMMER, WE OFFER TWO SUMMER CAMPS: ENGLISH
LANGUAGE LEARNER (ELL) SUMMER CAMP AND WORDS, SPOKEN, A SPOKEN WORD
CAMP FOR HIGH SCHOOL STUDENTS. ELL CAMP IS AN INTENSIVE FIVE-WEEK LONG
COURSE WHERE MIDDLE SCHOOLERS WORK ONE-ON-ONE WITH VOLUNTEERS TO
DEVELOP THEIR READING, WRITING, AND COMMUNICATION SKILLS. IN AN EFFORT
TO ADDRESS THE LAUSD'S ELIMINATION OF SUMMER SCHOOL FOR ELEMENTARY AND
MIDDLE SCHOOL STUDENTS, THIS SUMMER WE HELD TWO SESSIONS OF ELL CAMP AT
EACH OF OUR SITES AND SERVED OVER 100 STUDENTS. WORDS, SPOKEN IS A
WEEKLONG PROGRAM FOR STUDENTS 13-18 WHICH PROVIDES A VENUE TO HONE
POETIC SKILLS AND CREATIVELY SPEAK ABOUT THEIR LIVES AND EXPERIENCES.
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:
326LA CREATED A THREE-MONTH LONG PROJECT AT KING MIDDLE SCHOOL, WHERE
SIXTH GRADERS WROTE ABOUT THEIR LIVES AND EXPERIENCES AND TRADING THEIR
(TRANSLATED) STORIES WITH STUDENTS OF A SIMILAR AGE IN HYDERABAD,
INDIA. THIS PROJECT WAS A COLLABORATION WITH SESO, WHO RECEIVED FUNDING
FROM RICE UNIVERSITY TO DEVELOP ISLATE TABLETS FOR EDUCATIONAL
PURPOSES. WE ARE CURRENTLY IN THE PROCESS OF PUBLISHING A BOOK
CONTAINING THE WRITING OF THE STUDENTS IN LOS ANGELES AND THOSE IN
INDIA.

YOUNG AUTHORS' BOOK PROJECT: EACH YEAR, 826LA PARTNERS WITH ONE LOS

ANGELES PUBLIC SCHOOL TO CREATE A BEAUTIFULLY WRITTEN, IMPECCABLY

DESIGNED ANTHOLOGY OF STUDENT WORK. OVER THE COURSE OF A SEMESTER,

826LA'S TUTORS WORK ONE-ON-ONE WITH HIGH SCHOOL STUDENTS IN THEIR

CLASSROOMS, POLISHING THEIR STORIES UNTIL THEY SPARKLE. STUDENTS FORM

AN EDITORIAL BOARD THAT GUIDES EVERY STEP OF THE PUBLICATION PROCESS,

FROM EDITING TO DESIGN. ULTIMATELY, THESE BOOKS ARE PRODUCED AND SOLD

ONLINE AND AT BOOKSTORES ALL OVER THE COUNTRY. OUR MOST RECENT YOUNG

AUTHORS' BOOK PROJECT PUBLICATION IS A RING OF SUNSHINE AROUND THE MOON

BY SEVENTY FOUR STUDENTS OF THE ACADEMIC LEADERSHIP COMMUNITY AT THE

MIGUEL CONTRERAS LEARNING COMPLEX. STUDENTS WERE INSPIRED BY J.D.

SALINGER'S CLASSIC THE CATCHER IN THE RYE AND WROTE THEIR OWN STORIES

ABOUT GROWING UP IN LOS ANGELES. PRODUCER, DIRECTOR, AND WRITER PAUL

FEIG WROTE A HEARTFELT INTRODUCTION TO THE BOOK.

COLLEGE PREP SUPPORT: TO RESPOND TO THE LOSS OF COLLEGE COUNSELORS IN

LOCAL SCHOOLS, 826LA OFFERS FREE INDIVIDUAL WRITING SUPPORT DURING THE

COLLEGE APPLICATION PROCESS IN CLASSROOMS AT ROOSEVELT HIGH SCHOOL,

MENDEZ LEARNING COMPLEX, LOS ANGELES SCHOOL OF GLOBAL STUDIES, MARSHALL

HIGH SCHOOL, WEST ADAMS PREPARATORY, BELMONT HIGH SCHOOL, VENICE HIGH

SCHOOL, ANIMO VENICE HIGH SCHOOL, AND MANUAL ARTS HIGH SCHOOL. 826LA

ALSO PARTNERED WITH L.A.'S PROMISE FOR THE 2012 GREAT L.A. PERSONAL

STATEMENT WEEKEND IN NOVEMBER, 826LA'S MASSIVE EFFORT TO HELP A LARGE

NUMBER OF HIGH SCHOOL SENIORS COMPLETE THE ALL-IMPORTANT COLLEGE

APPLICATION PERSONAL STATEMENT. THIS EVENT, WHICH TAKES PLACE AT WEST

ADAMS PREP, AIMS TO REMOVE A KEY OBSTACLE HINDERING STUDENTS FROM

REALIZING THEIR COLLEGE DREAMS: WRITING COMPELLINGLY ABOUT THEIR

STRUGGLES, ACHIEVEMENTS, AND ASPIRATIONS. 826LA PROVIDED ONE-ON-ONE

ESSAY ASSISTANCE TO 227 STUDENTS DURING THIS UNIQUE EVENT, WHICH OCCURS

AT A CRUCIAL TIME RIGHT BEFORE THE UNIVERSITY OF CALIFORNIA APPLICATION

DEADLINE. ALL VOLUNTEERS WERE TRAINED SPECIFICALLY ON HOW TO SUPPORT

STUDENTS REGARDLESS OF WHERE THEY ARE IN THE WRITING PROCESS. IN THE

WORDS OF ONE COLLEGE COUNSELOR, "WE TRULY DO NOT BELIEVE THAT AS MANY

OF OUR STUDENTS WOULD HAVE SUCCESSFULLY COMPLETED THEIR APPLICATIONS

WITHOUT THE ENCOURAGING SUPPORT OF THEIR 826LA PERSONAL STATEMENT DAY

TUTORS." OR AS ONE STUDENT SAID, "WORKING WITH MY TUTOR WAS THE BEST

EXPERIENCE I'VE HAD IN MY PREPARATION TO COLLEGE."

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

WE HAVE SEEN OUR FIELD TRIP PROGRAM GROW TREMENDOUSLY OVER THE PAST FEW

YEARS. LAST YEAR, WE HOSTED 230 FIELD TRIPS, A 17% INCREASE FROM THE

PREVIOUS YEAR!

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

WORKSHOPS: IN ORDER TO DEEPEN THE BENEFITS PROVIDED BY OUR WORKSHOPS,

826LA SHIFTED ITS FOCUS THIS YEAR TOWARDS LONGER WORKSHOPS OVER THE

COURSE OF SEVERAL WEEKS. WITH CURATOR VICTORIA LYALL, 826LA CREATED A

SERIES OF WORKSHOPS IN CONJUNCTION WITH THE LOS ANGELES COUNTY MUSEUM

OF ART EXHIBITION "CHILDREN OF THE PLUMED SERPENT." AT THE END OF THE

SERIES, STUDENT PARTICIPANTS AND THEIR FAMILIES RECEIVED A PRIVATE TOUR

OF THE EXHIBITION, WHICH FOLLOWS THE LEGACY OF QUETZALCOATL. STUDENTS

CONTINUED TO HOME THEIR WRITING, EDITING, AND PUBLISHING SKILLS DURING

OUR FIVE-WEEK LONG JOURNALISM WORKSHOPS, WHICH CULMINATE IN THE

PUBLICATION OF OUR STUDENT NEWSPAPERS THE VENICE WAVE AND 826LA GOOD

TIMES. LOCAL POET MIKE SONKSEN TAUGHT A SATURDAY SPOKEN WORD POETRY

Employer identification number 38-3722092

WORKSHOP, AND JOURNALIST CAT VASKO LENDS HER TALENTS TO OUR ONGOING

JOURNALISM WORKSHOPS. WE ALSO HOSTED WORKSHOPS IN TABLETOP MOVIEMAKING

ON IPADS, COMICS, AND WRITING ABOUT PETS (A LESSON IN APPEALING TO

ONEOS AUDIENCE, WHETHER THAT AUDIENCE IS CANINE, FELINE, OR HUMAN).

THIS SUMMER, 826LA HOSTED ANOTHER YEAR OF ENGLISH-LANGUAGE LEARNER

SUMMER CAMP, A FOUR-WEEK WORKSHOP DEDICATED TO INCREASING STUDENTS'

FLUENCY AND CONFIDENCE IN WRITTEN AND SPOKEN ENGLISH. 826LA'S WORKSHOPS

BENEFITED FROM THE TIME AND WORK OF 847 TRAINED VOLUNTEERS, MANY OF

WHOM ARE PROFESSIONAL WRITERS AND ARTISTS. PUBLIC AND PRIVATE COLLEGE

APPLICATIONS ARE DUE IN NOVEMBER AND DECEMBER, SO THIS FALL WE HOSTED

SEVERAL WORKSHOPS DEDICATED TO WRITING COLLEGE APPLICATION ESSAYS.

826LA ALSO OFFERS WORKSHOPS TO PREPARE STUDENTS TO TAKE THE SAT.

EXPENSES \$ 145,768. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS PREPARED BY AN

INDEPENDENT CERTIFIED PUBLIC ACCOUNTING FIRM UNDER THE DIRECTION OF 826LA'S

EXECUTIVE DIRECTOR AND BOARD TREASURER. THE FORM 990 IS ALSO REVIEWED BY

MEMBERS OF 826LA'S EXECUTIVE COMMITTEE AND DISTRIBUTED TO BOARD MEMBERS

PRIOR TO ITS FILING.

FORM 990, PART VI, SECTION B, LINE 12C: 826LA HAS ADOPTED A WRITTEN

CONFLICT OF INTEREST POLICY TO IDENTIFY ANY ACTUAL OR POTENTIAL CONFLICTS

OF INTEREST ARISING FROM TRANSACTIONS BY AND BETWEEN 826LA AND ANY BOARD

MEMBER, OFFICER, OR KEY EMPLOYEE. TO THE BEST OF ITS KNOWLEDGE, 826LA IS

NOT A PARTY TO ANY SUCH RELATED PARTY TRANSACTIONS.

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization 826LA	Employer identification number 38-3722092
REVIEW OF COMPENSATION SURVEYS OF COMPARABLE NONPROFIT OR	GANIZATIONS AND
THE EXPERIENCE OF MANAGEMENT AND THE BOARD OF DIRECTORS.	THE COMPENSATION
REVIEW DELIBERATION AND DECISION PROCESS IS SUBSTANTIATED	IN BOARD MEETING
MINUTES.	
FORM 990, PART VI, SECTION C, LINE 19: 826LA'S ORGANIZATI	ONAL DOCUMENTS
ARE AVAILABLE FOR REVIEW UPON REQUEST. THE DOCUMENTS INCL	UDE THE CORPORATE
BY-LAWS, THE ARTICLES OF INCORPORATON, THE IRS FORM 990 A	ND THE IRS FORM
1023 (APPLICATION FOR RECOGNITION OF EXEMPTION).	
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2011 DEPRECIATION AND AMORTIZATION REPORT
FORM 990 PAGE 10

990

MANAGEMENT AND   Method   Lib   Live   Cort Officials   Disp.   Disp		76.	36.
PAGE   Direct   Page	Current Yea Deduction	37,57	14,41 51,98 51,98
Description   Description	Current Sec 179		• 0
Description   Date   Method   Life   Life   Cast Of Basis   Excl   Basis For	Accumulated Depreciation	156	14,410. 101,566. 101,566.
Description   Description	Basis For Depreciation	,640	72,049
Management	Reduction In Basis		0 0
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Method Life  MANAGEMENT AND GENERAL LEASEHOLD LIMPROVEMENTS VARIESSL * 990 PAGE 10 TOTAL * GRAND TOTAL 990 PAGE 10 DEPR * GRAND TOTAL 990 PAGE 10 DEPR	<u>2</u> 2	16	19
MANAGEMENT AND GENERAL LEASEHOLD  LEASEHOLD  TMPROVEMENTS  * 990 PAGE 10 TOTAL MANAGEMENT AND GEN  * GRAND TOTAL 990  PAGE 10 DEPR	Life		2.00
MANAGEMENT AND GENERAL LEASEHOLD LIMPROVEMENT * 990 PAGE 10 TOTAL MANAGEMENT AND GEN * GRAND TOTAL 990 PAGE 10 DEPR	Method	Z.	75 75
Description  MANAGEMENT AND GENERAL LEASEHOLD LIMPROVEMENTS * 990 PAGE 10 MANAGEMENT AND * GRAND TOTAL PAGE 10 DEPR	Date Acquired	VARIES	VA LI
	Description	MANAGEMENT AND GENERAL LEASEHOLD LIMPROVEMENTS	E 10 OTAL EPR
	Asset No.		

(D) - Asset disposed

\* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction