

Form 990-EZ

Department of the Treasury
Internal Revenue Service**Short Form
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)

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form.

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

OMB No. 1545-1150

2008Open 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:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Termination
☐ Amended return
☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization**GRAND VISION FOUNDATION**

Number and street (or P.O. box, if mail is not delivered to street address)

434 W. 6TH STREET

City or town, state or country, and ZIP + 4

SAN PEDRO, CA 90731**D** Employer identification number**95-4554570****E** Telephone number**310 833-4813****F** Group Exemption

Number ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method: ☐ Cash ☒ Accrual
Other (specify) ▶**I** Website: ▶ **GRANDVISION.ORG****J** Organization type (check only one) — ☒ 501(c) (3) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**H** Check ☐ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).**K** Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.**L** Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$1,000,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ **298,518.****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See the instructions for Part I.)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	193,123.
	2	Program service revenue including government fees and contracts	2	45,290.
	3	Membership dues and assessments	3	19,850.
	4	Investment income	4	1,286.
	5a	Gross amount from sale of assets other than inventory	5a	
	b	Less: cost or other basis and sales expenses	5b	
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach schedule)	5c	
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ☐		
	a	Gross revenue (not including \$ of contributions reported on line 1)	6a	38,969.
Expenses	b	Less: direct expenses other than fundraising expenses	6b	
	c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	38,969.
	7a	Gross sales of inventory, less returns and allowances	7a	
	b	Less: cost of goods sold	7b	
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
	8	Other revenue (describe ▶)	8	
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 ▶	9	298,518.
	10	Grants and similar amounts paid (attach schedule)	10	
	11	Benefits paid to or for members	11	
Net Assets	12	Salaries, other compensation, and employee benefits	12	37,111.
	13	Professional fees and other payments to independent contractors	13	13,336.
	14	Occupancy, rent, utilities, and maintenance	14	75,153.
	15	Printing, publications, postage, and shipping	15	1,611.
	16	Other expenses (describe ▶ SEE STATEMENT 1)	16	118,746.
	17	Total expenses. Add lines 10 through 16 ▶	17	245,957.
	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	52,561.
Net Assets	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	779,686.
	20	Other changes in net assets or fund balances (attach explanation)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20 ▶	21	832,247.

Part II Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	91,430.	22 156,047.
23	Land and buildings	664,832.	23 660,452.
24	Other assets (describe ▶ SEE STATEMENT 2)	34,534.	24 19,070.
25	Total assets	790,796.	25 835,569.
26	Total liabilities (describe ▶ SEE STATEMENT 3)	11,110.	26 3,322.
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	779,686.	27 832,247.

Expenses

(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; optional for others.)

28a

29a

30a

31a

32

(e) Expense account and other allowances

DIRECTOR	5.00
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Part V Other Information (Note the statement requirements in the instructions for Part VI.)

		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	34	X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.		
a	Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?	35a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b	N/A
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Sch. N	36	X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions.	37a	0.
b	Did the organization file Form 1120-POL for this year?	37b	X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38a	X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	N/A
39	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on line 9	39a	N/A
b	Gross receipts, included on line 9, for public use of club facilities	39b	N/A
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 <u>0.</u> ; section 4912 <u>0.</u> ; section 4955 <u>0.</u>		
b	Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I	40b	X
c	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0.
d	Enter amount of tax on line 40c reimbursed by the organization		0.
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	X
41	List the states with which a copy of this return is filed. <u>CA</u>		
42a	The books are in care of <u>ELIZABETH SCHINDLER JOHNSON</u> Telephone no. <u>310-833-4813</u> Located at <u>434 W. 6TH STREET, SAN PEDRO, CA</u> ZIP + 4 <u>90731</u>		
b	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)? If "Yes," enter the name of the foreign country: <u>See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.</u>	42b	X
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: <u></u>	42c	X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here ☐ and enter the amount of tax-exempt interest received or accrued during the tax year <u>43</u> <u>N/A</u>		
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45	X

Form 990-EZ (2008)

Part VI Section 501(c)(3) organizations only. All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51.

	Yes	No
46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	46	X
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47	X
48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	X
49a Did the organization make any transfers to an exempt non-charitable related organization?	49a	X
b If "Yes," was the related organization(s) a section 527 organization?	49b	

50 Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
NONE				
Total number of other employees paid over \$100,000				

51 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		
Total number of other independent contractors each receiving over \$100,000		

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

Sign Here Signature of officer _____ Date _____

ELIZABETH SCHINDLER JOHNSON, PRESIDENT/CEO
Type or print name and title.

Paid Preparer's Use Only Preparer's signature _____ Date _____ Check if self-employed ☐ Preparer's Identifying Number (See instr.) _____

Firm's name (or yours if self-employed), address, and ZIP + 4 **PIAZZA, DONNELLY & MARLETTE, LLP**
3460 TORRANCE BLVD., STE 150
TORRANCE, CA 90503

EIN _____ Phone no. **310-540-4118**

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

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

GRAND VISION FOUNDATION

Employer identification number

95-4554570

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

	Yes	No
(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?	11g(i)	
(ii) A family member of a person described in (i) above?	11g(ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	

h Provide the following information about the organizations the organization supports.

[illegible]

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 ▶ ☐						

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 ▶ ☐		

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.")	514,446.	224,809.	429,684.	217,715.	193,123.	1,579,777.
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		23,698.	6,174.	7,020.	45,290.	82,182.
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	514,446.	248,507.	435,858.	224,735.	238,413.	1,661,959.
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.)						1,661,959.

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	514,446.	248,507.	435,858.	224,735.	238,413.	1,661,959.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	556.		6,906.	3,040.	1,286.	11,788.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	556.		6,906.	3,040.	1,286.	11,788.
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.)		8,145.				8,145.
13 Total support (Add lines 9, 10c, 11, and 12.)						1,681,892.
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						☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	98.81 %
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	98.81 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	.70 %
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	.57 %

- 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

GRAND VISION FOUNDATION

Employer identification number

95-4554570

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

GRAND VISION FOUNDATION

95-4554570

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	JERICO DEVELOPMENT, INC. 222 WEST 6TH STREET, SUITE 1010 SAN PEDRO, CA 90731	\$ 48,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
2	KENNETH T. & EILEEN L. NORRIS FOUNDATION 11 GOLDEN SHORE, SUITE 450 LONG BEACH, CA 90802	\$ 5,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
3	DON KNABE'S YOUTH ARTS 500 W. TEMPLE STREET LOS ANGELES, CA 90012	\$ 26,200.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
4	CENTRAL SAN PEDRO NEIGHBORHOOD COUNCIL 1840 S. GAFFEY STREET PMB 212 SAN PEDRO, CA 90731	\$ 5,500.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)

2008 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-EZ PAGE 1

990-EZ

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
18	ELECTRICAL UPGRADES	11/14/06	SL	39.00	MM	16	50,000.				50,000.	2,084.		1,282.	3,366.
19	RIGGING	01/04/07	SL	39.00	MM	16	182,799.				182,799.	6,839.		4,687.	11,526.
20	SEATING	06/18/07	SL	39.00	MM	16	409,480.				409,480.	10,937.		10,499.	21,436.
21	SOUND SYSTEM	04/10/07	SL	39.00	MM	16	14,406.				14,406.	446.		369.	815.
22	UPGRADES	01/31/07	SL	39.00	MM	16	17,826.				17,826.	667.		457.	1,124.
23	CARPETS	08/15/07	SL	7.00	HY	16	7,272.				7,272.	952.		1,039.	1,991.
24	STAGE EXTENSION	12/10/07	SL	39.00	MM	16	11,466.				11,466.	172.		294.	466.
25	LIGHTING, SOUND & TICKET BOOTH	01/01/09	SL	39.00	HY	16	13,380.				13,380.			172.	172.
26		01/01/09	SL	7.00	HY	16	1,299.				1,299.			93.	93.
	* TOTAL 990-EZ PG 1 DEPR						707,928.				707,928.	22,097.		18,892.	40,989.

FORM 990-EZ	OTHER EXPENSES	STATEMENT	1
DESCRIPTION	AMOUNT		
PRODUCTION COSTS	38,710.		
MARKETING	35,095.		
FUNDRAISING EVENTS	887.		
WARNER GRAND MAINT	617.		
PUBLIC RELATIONS	6,200.		
CONSULTING	14,000.		
INSURANCE	5,458.		
CONTRIBUTIONS	1,000.		
CONFERENCES & SEMINARS	2,012.		
MERCHANT FEES	1,400.		
WEBSITE	1,150.		
DUES	560.		
ALARM	359.		
BANK CHARGES	650.		
BAD DEBT	1,017.		
ADMINISTRATIVE	2,473.		
EQUIPMENT REPAIRS	600.		
OFFICE	627.		
TAX & FEES	561.		
PAYROLL TAXES	3,615.		
TELEPHONE	1,755.		
TOTAL TO FORM 990-EZ, LINE 16	118,746.		

FORM 990-EZ	OTHER ASSETS	STATEMENT	2
DESCRIPTION	BEG. OF YEAR	END OF YEAR	
ACCOUNTS RECEIVABLE	26,903.	11,272.	
PREPAID EXPENSES AND DEFERRED CHARGES	1,311.	1,311.	
OTHER DEPRECIABLE ASSETS	6,320.	6,487.	
TOTAL TO FORM 990-EZ, LINE 24	34,534.	19,070.	

FORM 990-EZ	OTHER LIABILITIES	STATEMENT	3
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DESCRIPTION	BEG. OF YEAR	END OF YEAR
ACCOUNTS PAYABLE AND ACCRUED EXPENSES	11,110.	3,322.
TOTAL TO FORM 990-EZ, LINE 26	11,110.	3,322.

FORM 990-EZ	OCCUPANCY, RENT, UTILITIES AND MAINTENANCE	STATEMENT	4
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DESCRIPTION	AMOUNT
DEPRECIATION	18,892.
OTHER EXPENSES	56,261.
TOTAL TO FORM 990-EZ, LINE 14	75,153.

FORM 990-EZ

INFORMATION REGARDING TRANSFERS
ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS

STATEMENT 5

- A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS,
DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL
BENEFIT CONTRACT? [] YES [X] NO
- B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS,
DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT? . . [] YES [X] NO

990-EZ PG 2

STATEMENT 6

THE PURPOSE OF THE EXEMPT ORGANIZATION IS TO PRESERVE AND PROMOTE THE
HISTORIC WARNER GRAND THEATRE AND FOSTER ARTS AND EDUCATIONAL EVENTS.

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? ☐ Yes ☒ No **B** Type of organization Exempt under Section 23701 **d** (insert letter)
IRC Section 4947(a)(1) trust ☐

CORP #
1780530

Corporation/Organization Name

FEIN

GRAND VISION FOUNDATION**95-4554570**

Address

434 W. 6TH STREET

City

State

ZIP Code

SAN PEDRO**CA****90731**

C Amended Return? ☐ Yes ☒ No

D Are you a subordinate/affiliate in a group exemption? ☐ Yes ☒ No

(a) Is this a group filing for affiliates? See General Instruction L ☐ Yes ☐ No

(b) If "Yes," enter the number of affiliates _____

(c) Are all affiliates included? ☐ Yes ☐ No
(If "No," attach a list. See instructions.)

(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☐ No

(e) Federal Group Exemption Number _____

(f) Is a roster of subordinates attached? ☐ Yes ☐ No

E Final return?
☐ Dissolved ☐ Surrendered (Withdrawn)
☐ Merged/Reorganized (attach explanation)

If a box is checked, enter date _____

F Check the box if the organization filed: (1) ☐ 990T (2) ☐ 990PF (3) ☐ 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. ☐

H Accounting method used (1) ☐ Cash (2) ☒ Accrual (3) ☐ Other

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 ☐ Yes ☒ 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 ☐ Yes ☒ No

K Is the organization exempt under R&TC Section 23701g? ☐ Yes ☒ No
If "Yes," enter amount of gross receipts from nonmember sources \$ _____

L Is the organization under audit by the IRS or has the IRS audited in a prior year? ☐ Yes ☒ No

M Is the organization a Limited Liability Corporation? ☐ Yes ☒ No

N Did the organization file Form 100 or Form 109 to report taxable income? ☐ Yes ☒ No

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	85,545.00
	2	Gross dues and assessments from members and affiliates	• 2	19,850.00
	3	Gross contributions, gifts, grants, and similar amounts received STMT 1	• 3	193,123.00
	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	298,518.00
	5	Cost of goods sold	• 5	00
	6	Cost or other basis, and sales expenses of assets sold	• 6	00
	7	Total costs. Add line 5 and line 6	7	00
	8	Total gross income. Subtract line 7 from line 4	• 8	298,518.00
Expenses	9	Total expenses and disbursements. From Side 2, Part II, line 18	• 9	245,957.00
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8	• 10	52,561.00
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

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.

Sign Here

Signature of officer **PRESIDENT/CEO** Title **PRESIDENT/CEO** Date _____ Telephone **(310) 833-4813**

Preparer's signature _____ Date _____ Check if self-employed ☐ Preparer's SSN/PTIN **P00366806**

Paid Preparer's Use Only

Firm's name (or yours, if self-employed) and address **PIAZZA, DONNELLY & MARLETTE, LLP** Telephone **33-0783700**
3460 TORRANCE BLVD., STE 150
TORRANCE, CA 90503 Telephone **310-540-4118**

May the FTB discuss this return with the preparer shown above? See instructions ☒ Yes ☐ 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	38,969.00
	2	Interest	• 2	1,286.00
	3	Dividends	• 3	00
	4	Gross rents	• 4	00
	5	Gross royalties	• 5	00
	6	Gross amount received from sale of assets (See instructions)	• 6	00
	7	Other income	• 7	45,290.00
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	85,545.00
	9	Contributions, gifts, grants, and similar amounts paid	• 9	00
	10	Disbursements to or for members	• 10	00
	11	Compensation of officers, directors, and trustees	• 11	0.00
	12	Other salaries and wages	• 12	37,111.00
	13	Interest	• 13	00
	14	Taxes	• 14	3,615.00
	15	Rents	• 15	56,261.00
	16	Depreciation and depletion (See instructions)	• 16	18,892.00
	17	Other	• 17	130,078.00
	18	Total expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9	18	245,957.00

Schedule L Balance Sheets

Beginning of taxable year

End of taxable year

	(a)	(b)	(c)	(d)
Assets				
1 Cash		91,430.		• 156,047.
2 Net accounts receivable		26,903.		• 11,272.
3 Net notes receivable				•
4 Inventories				•
5 Federal and state government obligations				•
6 Investments in other bonds				•
7 Investments in stock				•
8 Mortgage loans (number of loans)				•
9 Other investments				•
10 a Depreciable assets	693,249.		707,928.	
b Less accumulated depreciation	(22,097.)	671,152.	(40,989.)	666,939.
11 Land				•
12 Other assets	STMT 5	1,311.		• 1,311.
13 Total assets		790,796.		835,569.
Liabilities and net worth				
14 Accounts payable		11,110.		• 3,322.
15 Contributions, gifts, or grants payable				•
16 Bonds and notes payable				•
17 Mortgages payable				•
18 Other liabilities				
19 Capital stock or principle fund				•
20 Paid-in or capital surplus. Attach reconciliation				•
21 Retained earnings or income fund		779,686.		• 832,247.
22 Total liabilities and net worth		790,796.		835,569.

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	• 52,561.	7 Income recorded on books this year not included in this return	•
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	
4 Income not recorded on books this year	•	10 Net income per return.	
5 Expenses recorded on books this year not deducted in this return	•	Subtract line 9 from line 6	52,561.
6 Total.			
Add line 1 through line 5	52,561.		

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
JERICO DEVELOPMENT, INC.	222 WEST 6TH STREET, SUITE 1010 SAN PEDRO, CA 90731		48,000.
KENNETH T. & EILEEN L.NORRIS FOUNDATION	11 GOLDEN SHORE, SUITE 450 LONG BEACH, CA 90802		5,000.
DON KNABE'S YOUTH ARTS	500 W. TEMPLE STREET LOS ANGELES, CA 90012		26,200.
CENTRAL SAN PEDRO NEIGHBORHOOD COUNCIL	1840 S. GAFFEY STREET PMB 212 SAN PEDRO, CA 90731		5,500.
TOTAL INCLUDED ON LINE 3			84,700.

FORM 199	OTHER INCOME	STATEMENT 2
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DESCRIPTION	AMOUNT
PROGRAM SERVICE REVENUE	45,290.
TOTAL TO FORM 199, PART II, LINE 7	45,290.

FORM 199	COMPENSATION OF OFFICERS, DIRECTORS AND TRUSTEES	STATEMENT	3
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NAME AND ADDRESS	TITLE AND AVERAGE HRS WORKED/WK	COMPENSATION
ELIZABETH SCHINDLER JOHNSON 8 EASTFIELD DRIVE ROLLING HILLS, CA 90274	PRESIDENT & CEO 45.00	0.
JOHN EK 461 W 6TH STREET, SUITE 302 SAN PEDRO, CA 90731	DIRECTOR 1.00	0.
ALAN C. JOHNSON 222 W. 6TH STREET SUITE 1010 SAN PEDRO, CA 90731	TREASURER 1.00	0.
FRED ALLEN 880 W. 18TH STREET SAN PEDRO, CA 90731	DIRECTOR 10.00	0.
LESLIE VALDEZ 3418 BOWFIN SAN PEDRO, CA 90732	SECRETARY 8.00	0.
TERRY SEGARRA BLANEY 1357 W. 35TH STREET SAN PEDRO, CA 90731	DIRECTOR 1.00	0.
IRENE MENDOZA P.O. BOX 1904 SAN PEDRO, CA 90733	DIRECTOR 1.00	0.
NORMAMAE MUNSTER 743 WEST 38TH STREET SAN PEDRO, CA 90731	DIRECTOR 1.00	0.
CAMILLA TOWNSEND 2019 WEST 35TH STREET SAN PEDRO, CA 90731	DIRECTOR 1.00	0.
LEE SWEET 478 W. 6TH STREET SAN PEDRO, CA 90731	DIRECTOR 1.00	0.
KATHLEEN CADIEN 1006 W. 37TH STREET SAN PEDRO, CA 90731	DIRECTOR 5.00	0.

TOTAL TO FORM 199, PART II, LINE 11

0.

FORM 199	OTHER EXPENSES	STATEMENT	4
DESCRIPTION		AMOUNT	
PRODUCTION COSTS		38,710.	
MARKETING		35,095.	
FUNDRAISING EVENTS		887.	
WARNER GRAND MAINT		617.	
PUBLIC RELATIONS		6,200.	
CONSULTING		14,000.	
INSURANCE		5,458.	
CONTRIBUTIONS		1,000.	
CONFERENCES & SEMINARS		2,012.	
MERCHANT FEES		1,400.	
WEBSITE		1,150.	
DUES		560.	
ALARM		359.	
BANK CHARGES		650.	
BAD DEBT		1,017.	
ADMINISTRATIVE		2,473.	
EQUIPMENT REPAIRS		600.	
OFFICE		627.	
TAX & FEES		561.	
TELEPHONE		1,755.	
PROFESSIONAL FEES AND OTHER PAYMENTS TO INDEPENDENT CONTRACTORS		13,336.	
PRINTING, PUBLICATIONS, POSTAGE AND SHIPPING		1,611.	
TOTAL TO FORM 199, PART II, LINE 17		130,078.	

FORM 199	OTHER ASSETS	STATEMENT	5
DESCRIPTION	BEG. OF YEAR	END OF YEAR	
PREPAID EXPENSES AND DEFERRED CHARGES	1,311.	1,311.	
TOTAL TO FORM 199, SCHEDULE L, LINE 12	1,311.	1,311.	

Corporation Depreciation and Amortization

Attach to Form 100 or Form 100W.

FORM 199

FEIN 95-4554570

Corporation name

California corporation number

GRAND VISION FOUNDATION

1780530

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 6		707,928.	22,097.				
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	18,892.				

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	18,892.
17	Total depreciation claimed for federal purposes from federal Form 4562, line 22	17	18,892.
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		6
ASSET NO./ DESCRIPTION	DATE IN SERVICE	COST OR BASIS	PRIOR DEPR	METHOD	LIFE	DEPRE- CIATION	BONUS	
18 ELECTRICAL UPGRADES	11/14/06	50,000.	2,084.	SL	39.00	1,282.		
19 RIGGING	01/04/07	182,799.	6,839.	SL	39.00	4,687.		
20 SEATING	06/18/07	409,480.	10,937.	SL	39.00	10,499.		
21 SOUND SYSTEM	04/10/07	14,406.	446.	SL	39.00	369.		
22 UPGRADES	01/31/07	17,826.	667.	SL	39.00	457.		
23 CARPETS	08/15/07	7,272.	952.	SL	7.00	1,039.		
24 STAGE EXTENSION	12/10/07	11,466.	172.	SL	39.00	294.		
25 LIGHTING, SOUND & TICKET BOOTH	01/01/09	13,380.		SL	39.00	172.		
26	01/01/09	1,299.		SL	7.00	93.		
TOTAL DEPR TO FORM 3885		707,928.	22,097.			18,892.		

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 102027

GRAND VISION FOUNDATION

Name of Organization

434 W. 6TH STREET

Address (Number and Street)

SAN PEDRO, CA 90731

City or Town, State and ZIP Code

Check if:

☐ Change of address

☐ Amended report

Corporate or Organization No. 1780530

Federal Employer I.D. No. 95-4554570

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 \$ 298,518. Total assets \$ 835,569.

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 310 833-4813

Organization's e-mail address LIZSCHIN@AOL.COM

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.

ELIZABETH SCHINDLER
JOHNSON

PRESIDENT/CEO

Signature of authorized officer

Printed Name

Title

Date