TAXABLE YEAR

2011

FORM

## California Exempt Organization Annual Information Return

199

Calendar Y	ear 2011 or fiscal year beginning monthd	lay	_year	·, and ending	month	_day	year			
Corporation	/Organization Name				Califo	nia corpo	ration number			
Address (su	ite, room, or PMB no.)				FEIN					
								1 1	1	
City		St	ate	ZIP Code						
A First Ref	turn	.□Yes □	□No	J If exempt under R&T			-	ı		
<b>B</b> Amende	mended Return									
C IRC Sec					or (2) attempted to influence legislation or any ballot measure, or (3) made an election under R&TC Section 23704.5					
□ Dissolved    □ Surrendered (Withdrawn)			□No	(relating to lobbying by public charities)? ■ □Yes						
				If "Yes," complete and attach form FTB 3509.						
	erged/Reorganized Enter date:			K Is the organization ex				Yes	□No	
E Check accounting method:				If "Yes," enter the gro						
(1) □ Cash (2) □ Accrual (3) □ Other				sources				. \$		
F Federal return filed? (1) ● □ 990T (2) ● □ 990(PF) (3) ● □ Sch H (990)				■ If organization is exe						
	group filing for the subordinates/affiliates?	. □Vac □		exclusively religious, educational, or charitable, and is						
	attach a roster. See instructions			supported primarily (						
	rganization in a group exemption?	□Ves □	∃No	check box. No filing f						
	what is the parent's name?			M Is the organization a				<b>→</b> ∐Yes	∐No	
11 100,	what to the parents hame.			N Did the organization taxable income?				■ □Vaa	□No	
■ Did the	organization have any changes in its activities,							□ 162		
governii	ng instrument, articles of incorporation, or bylaws			<ul> <li>Is the organization un IRS audited in a prior</li> </ul>	-			■ □ Yes	□No	
that hav	e not been reported to the Franchise Tax Board? •	□ Yes □	□No	into additod in a prior	your			_ 100		
If "Yes,"	explain, and attach copies of revised documents.									
Part I C	omplete Part I unless not required to file this form.	See Genera	al Inst	ructions B and C.						
	1 Gross sales or receipts from other sources. From						1		00	
	2 Gross dues and assessments from members and						2		00	
Receipts and	<b>3</b> Gross contributions, gifts, grants, and similar am					●	3		00	
Revenues	4 Total gross receipts for filing requirement test. Ac								100	
	This line must be completed. If the result is less					00	4		00	
	<ul><li>5 Cost of goods sold</li></ul>					00				
	7 Total costs. Add line 5 and line 6					122	7		00	
	8 Total gross income. Subtract line 7 from line 4						8		00	
							9		00	
Expenses	9 Total expenses and disbursements. From Side 2, Part II, line 18					1	10		00	
	11 Filing fee \$10 or \$25. See General Instruction F.						11		00	
Filing	12 Total payments						12		00	
Fee	13 Penalties and Interest. See General Instruction J .						13		00	
	<b>14</b> Use tax. See General Instruction K						14		00	
	15 Balance due. Add line 11, line 13, and line 14. Th						15		00	
Sign	Under penalties of perjury, I declare that I have examined the true, correct, and complete. Declaration of preparer (other t	his return, inc than taxpayer	cluding	accompanying schedules ar sed on all information of whice	nd statements, an ch preparer has a	d to the bea ny knowled	st of my knowled lge.	ge and belie	ef, it is	
Here		Title			Date		elephone			
	Signature of officer					(	)			
	Preparer's			Date	Check if self-	● P	TIN			
Paid	signature employed									
Preparer's Use Only	Firm's name (or yours,					• F	EIN			
200 Omy	if self-employed)						● Telephone			
	and address					16	Telephone			
						(	)			
	May the FTB discuss this return with the prepare	er shown a	above'	? See instructions	<u></u>	● □	☐ 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.

		1 Gross sales or receipts from all business a							00
		<b>2</b> Interest							00
Receipts from	inte	<b>3</b> Dividends					3		00
	•	4 Gross rents					4		00
Other		<b>5</b> Gross royalties					5		00
Sour	ces	6 Gross amount received from sale of assets	(See Instructions)				6		00
		7 Other income. Attach schedule	7 Other income. Attach schedule						00
		8 Total gross sales or receipts from other so							
							. 8		00
		Enter here and on Side 1, Part I, line 1							00
									00
								00	
•	nses		2 Other salaries and wages●						00
and			<b>3</b> Interest						00
men	urse-	<b>4</b> Taxes					14		00
IIIGII	ıs	<b>15</b> Rents	<b> 5</b> Rents						00
		16 Depreciation and depletion (See instruction	ns)				16		00
		17 Other Expenses and Disbursements. Attacl	n schedule				17		00
		18 Total expenses and disbursements. Add lin	ne 9 through line 17. Enter	r here	and on Side 1, Part	I, line 9	. 18		00
Sch	nedu	•	Beginning of					cable year	
Asse			(a)		(b)	(c)			d)
			· · · · · · · · · · · · · · · · · · ·		(10)	(0)		•	<u> </u>
		counts receivable							
		ites receivable							
		<b>!</b>							
		ories							
		al and state government obligations							
		ments in other bonds		-				•	
7	nvest	ments in stock						•	
8	Mortga	age loans						•	
9	Other	investments. Attach schedule						•	
10	a Dep	reciable assets							
	<b>b</b> Less	accumulated depreciation	(	)		(	)		
11	Land .							•	
12	Other :	assets. Attach schedule						•	
13	Total a	ssets							
		and net worth							
		nts payable							
		butions, gifts, or grants payable							
		and notes payable						•	
		ages payable							
		liabilities. Attach schedule						_	
	•	I stock or principle fund		-				•	
		n or capital surplus. Attach reconciliation		-				•	
		ed earnings or income fund						•	
22	<u>Total li</u>	abilities and net worthle M-1 Reconciliation of income per books							
Sci	iedu	Do not complete this schedule if the	s with income per return	no 19	column (d) is less	than \$25,000			
		Do not complete this schedule if the	allibuilt oil Scheuule L, ill	116 13	colullii (u), is less	Παπ φ25,000			
1	Net in	come per books	•	7	Income recorded on	books this year			
2	Federa	al income tax	•		not included in this	return.			
3	Exces	s of capital losses over capital gains	•	Attach schedule				•	
		ne not recorded on books this	8 Deductions in this return not charged						
		r. Attach schedule against book income this year.							
5 Expenses recorded on books this year not			_	Attach schedule				•	
				_	Total. Add line 7 and				
	deducted in this return. Attach schedule								
	Total.   10 Net income per return.   Add line 1 through line 5   Subtract line 9 from line 6								
	AUU III	ne 1 through line 5			oubliact line 9 from	IIIIE 0			
			_						