TAXABLE YEAR

2012

FORM

California Exempt Organization Annual Information Return

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Calendar	Year 2012 or fiscal year beginning monthday	yea	r, and ending	monthda	yyea	r
	/Organization Name				corporation number	
Address (su	uite, room, or PMB no.)			FEIN		
City		State	ZIP Code			
▲ First Re	rturn□Yes	□No	J If exempt under R&T	TC Section 23701d,	has the organiz	 zation
	ed Return		during the year: (1) p		-	
	ction 4947(a)(1) trust		or (2) attempted to it			easure,
	eturn? • Dissolved • Disrendered (Withdrawn)		or (3) made an electi			
Merged/Reorganized Enter date: Merged/Reorganized Enter date:			(relating to lobbying			● ∐Yes □No
	accounting method:		If "Yes," complete ar			
	Cash (2) ☐ Accrual (3) ☐ Other		K Is the organization ex	xempt under R&TC	Section 23701	g? ● □Yes □No
	return filed?		If "Yes," enter the gr			
	990T (2) ● □ 990(PF) (3) ● □ Sch H (990)		sources			
G Is this a	a group filing for the subordinates/affiliates? $lacktriangle$ Yes	□No	L If organization is exe	•		and is
If "Yes,"	" attach a roster. See instructions		exclusively religious, supported primarily			iono
H Is this o	organization in a group exemption? 🗆 Yes	□No	check box. No filing			
	" what is the parent's name?		M Is the organization a	•		
			N Did the organization	-		
■ Did the	organization have any changes in its activities,		taxable income?			
	ng instrument, articles of incorporation, or bylaws		• Is the organization u			
that hav	/e not been reported to the Franchise Tax Board?● □ Yes	□No	IRS audited in a prio			● □Yes □No
If "Yes,"	" explain, and attach copies of revised documents.		•			
Part I	omplete Part I unless not required to file this form. See Ger	neral Ins	tructions B and C.			
	1 Gross sales or receipts from other sources. From Side 2,	Part II, Ii	ne 8			00
	2 Gross dues and assessments from members and affiliate	s				00
Receipts	3 Gross contributions, gifts, grants, and similar amounts re				. • 3	00
and Revenues	4 Total gross receipts for filing requirement test. Add line 1					
	This line must be completed. If the result is less than \$5					00
	5 Cost of goods sold				00	
	6 Cost or other basis, and sales expenses of assets sold				00	
	7 Total costs. Add line 5 and line 6					0(
	8 Total gross income. Subtract line 7 from line 4					00
Expenses	9 Total expenses and disbursements. From Side 2, Part II, I 10 Excess of receipts over expenses and disbursements. Sul					0(
	11 Filing fee \$10 or \$25. See General Instruction F					00
	12 Total payments					00
Filing Fee	13 Penalties and Interest. See General Instruction J					0(
100	14 Use tax. See General Instruction K					00
	15 Balance due. Add line 11, line 13, and line 14. Then subt					0(
	Under penalties of perjury, I declare that I have examined this return.	, including	accompanying schedules ar	nd statements, and to t	he best of my kno	
Sign Here	true, correct, and complete. Declaration of preparer (other than taxpa	ayer) is ba: Title	sed on all information of whi	ch preparer has any kr Date	lowledge. I ● Telephone	
TICIC	Signature of officer	1110		Date	/ lelephone	
	of officer		Date		()	
D-1-I	Preparer's		Baic	Check if self- employed ▶ □	● PTIN	
Paid Preparer's	signature •			employed 🕨 🗀	● FEIN	
Use Only	Firm's name (or yours,					
	if self-employed) and address				● Telephone	
					()	
	May the FTB discuss this return with the preparer show	<u>n above</u>	? See instructions		● □ Yes □	No

Part II	Organizations with gross receipts of more than \$50,000 and private foundations
	regardless of amount of gross receipts — complete Part II or furnish substitute information.

		regardless of amount of gross receipts — comp	iete Part II or Turnish s	ubstitute information.			
		1 Gross sales or receipts from all business acti	vities. See instructions.			1	00
		2 Interest				2	00
		3 Dividends					00
	eipts				_		00
fron		4 Gross rents 5 Gross royalties				-	00
Othe		6 Gross amount received from sale of assets (\$					00
Juu	uus	,	,				
		7 Other income. Attach schedule					00
		8 Total gross sales or receipts from other source	-			8	00
		9 Contributions, gifts, grants, and similar amou	•				00
		10 Disbursements to or for members				1 1	00
		11 Compensation of officers, directors, and trustees. Attach schedule				11	00
		12 Other salaries and wages			•	12	00
Expe	enses	13 Interest			•	13	00
and		14 Taxes				14	00
	urse-	15 Rents				15	00
men	ts	16 Depreciation and depletion (See instructions)					00
		17 Other Expenses and Disbursements. Attach s					00
		18 Total expenses and disbursements. Add line				18	00
_		•	-				<u> </u>
	nedu	le L Balance Sheets		f taxable year		ia oi tax	table year
Ass			<u>(a)</u>	(b)	(c)		(d)
							•
		counts receivable					•
3	Net no	tes receivable					•
4	Invent	ories					•
5	Federa	al and state government obligations					•
6	Invest	ments in other bonds					•
7	Invest	ments in stock					
8	Morta	age loans					•
	-	investments. Attach schedule					•
		reciable assets					
		s accumulated depreciation	Y		()	
			,		· ·		
		assets. Attach schedule					
		assets. Attach schedule					
		and net worth					
		nts payable					•
		butions, gifts, or grants payable					
		and notes payable					•
		ages payable					•
		liabilities. Attach schedule					
19	Capita	I stock or principle fund					•
20	Paid-ii	n or capital surplus. Attach reconciliation 🔃					•
21	Retain	ed earnings or income fund					•
22	Total li	iabilities and net worth					
Sc	nedu	le M-1 Reconciliation of income per books w	ith income per return	40 1 (1)			
		Do not complete this schedule if the ar	mount on Schedule L, li	ne 13, column (d), is les	s than \$50,000.		
1	Net in	come per books		7 Income recorded of	n books this year		
		al income tax		1	s return. Attach sche	dule .	•
3		s of capital losses over capital gains		8 Deductions in this		- *-	
		ne not recorded on books this		against book incor	-		
•		Attach schedule	<u> </u>				•
5	-	ises recorded on books this year not		9 Total. Add line 7 ar			
5		ses recorded on books this year not steed in this return. Attach schedule		1			
c			7	10 Net income per retu			
6	iotal.	Add line 1 through line 5		Subtract line 9 fron	n line 6		