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Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

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

OMB No 1545-0047

2008Open to Public
Inspection**A** For the 2008 calendar year, or tax year beginning **OCT 1, 2008** and ending **SEP 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**VARIETY - THE CHILDREN'S CHARITY OF SOUTHERN CALIFORNIA, TENT 25**

Doing Business As

Number and street (or P O box if mail is not delivered to street address) Room/suite
4601 WILSHIRE BLVD. 260City or town, state or country, and ZIP + 4
LOS ANGELES, CA 90010**F** Name and address of principal officer: **ELIZABETH O'NEIL****4601 WILSHIRE BLVD., #260, LOS ANGELES, CA****D** Employer identification number**95-1330495****E** Telephone number**323-655-1547****G** Gross receipts \$**2,242,230.****H(a)** Is this a group return for affiliates? ☐ Yes ☒ No**H(b)** Are all affiliates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

H(c) Group exemption number ▶**I** Tax-exempt status: ☒ 501(c) (3) (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: ▶ **WWW.VARIETYSOCAL.ORG****K** Type of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation **1941** **M** State of legal domicile **CA****Part I Summary****1** Briefly describe the organization's mission or most significant activities: **TO SUPPORT DISABLED, ABUSED, AND UNDERPRIVILEGED CHILDREN THROUGHOUT SOUTHERN CALIFORNIA.****2** Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its assets.**3** Number of voting members of the governing body (Part VI, line 1a)**3 27****4** Number of independent voting members of the governing body (Part VI, line 1b)**4 27****5** Total number of employees (Part V, line 2a)**5 5****6** Total number of volunteers (estimate if necessary)**6 300****7a** Total gross unrelated business revenue from Part VIII, line 12, column (C)**7a 0.****b** Net unrelated business taxable income from Form 990-T, line 34**7b 0.****8** Contributions and grants (Part VIII, line 1h)**9** Program service revenue (Part VIII, line 2g)**10** Investment income (Part VIII, column (A), lines 3, 4, and 7d)**11** Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)**12** Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)**13** Grants and similar amounts paid (Part IX, column (A), lines 1-3)**14** Benefits paid to or for members (Part IX, column (A), line 4)**15** Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)**16a** Professional fundraising fees (Part IX, column (A), line 11e)**b** Total fundraising expenses (Part IX, column (D), line 25) ▶ **154,902.****17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)**18** Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)**19** Revenue less expenses. Subtract line 18 from line 12**20** Total assets (Part X, line 16)**21** Total liabilities (Part X, line 26)**22** Net assets or fund balances. Subtract line 21 from line 20

Prior Year

1,492,632.

Current Year

1,519,560.**25,972.****73,782.****11,143.****1,592,386.****1,530,703.****426,669.****1,097,148.****248,656.****287,723.****204,338.****153,232.****879,663.****1,538,103.****712,723.****<7,400.>**

Beginning of Year

3,140,953.

End of Year

3,679,050.**1,698,176.****2,243,673.****1,442,777.****1,435,377.****Part II Signature Block**

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 O'NEIL, EXECUTIVE DIR.

Type or print name and title

Paid
Preparer's
Use OnlyPreparer's
signature

Date

AUG 13 2010Check if
self-
employed ▶ ☐Preparer's identifying number
(see instructions)Firm's name (or
yours if
self-employed),
address, and
ZIP + 4**GREEN HASSON & JANKS, LLP
10990 WILSHIRE BLVD., 16TH FLOOR
LOS ANGELES, CALIFORNIA 90024**

EIN ▶

Phone no ▶ **(310) 873-1600**

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

832001 12-18-08

LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

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Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission:

TO PROVIDE LIFESAVING SUPPORT FOR DISABLED, ABUSED,
PHYSICALLY-CHALLENGED AND UNDERPRIVILEGED CHILDREN IN THE SOUTHERN
CALIFORNIA COMMUNITY.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

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

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

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

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

SEE SCHEDULE O FOR CONTINUATION(S)

4a (Code:) (Expenses \$ 600,000 . including grants of \$ 600,000 .) (Revenue \$)
VARIETY BOYS AND GIRLS CLUB:

THE VARIETY BOYS & GIRLS CLUB HAS BEEN SERVING CHILDREN IN THE BOYLE HEIGHTS COMMUNITY FOR 60 YEARS. FOUNDED IN 1949 BY VARIETY - THE CHILDREN'S CHARITY OF SOUTHERN CALIFORNIA, THE BOYS & GIRLS CLUB NOW SERVES OVER 4,000 AT-RISK AND PRIMARILY LOW-INCOME CHILDREN A YEAR. THE CLUB PROVIDES DAILY PROGRAMS SUCH AS: HOMEWORK ASSISTANCE, MENTORING, COMPUTER LESSONS, LITERACY, ARTS & CRAFTS, GAMES AND MORE.

4b (Code:) (Expenses \$ 70,000 . including grants of \$ 70,000 .) (Revenue \$)
ST. FRANCIS MEDICAL CENTER:

ST. FRANCIS MEDICAL CENTER TREATED 732 NEWBORNS IN ITS NEONATAL INTENSIVE CARE UNIT LAST YEAR. THROUGH THIS GRANT AND THE ONGOING SUPPORT THE HOSPITAL RECEIVES FROM VARIETY - THE CHILDREN'S CHARITY OF SOUTHERN CALIFORNIA, THE NEO-NATAL INTENSIVE CARE UNIT IS ABLE TO COUPLE ADVANCED NEONATAL EQUIPMENT AND TECHNOLOGY WITH DEDICATED, COMPASSIONATE CARE FROM ITS TEAM OF DOCTORS AND NURSES TO HELP ENSURE THAT THE TINIEST LIFE ENTRUSTED TO ITS CARE, RECEIVES THE BEST START IN LIFE FOR A FULL AND HEALTHY FUTURE. THE \$70,000 GRANT WAS USED TO PURCHASE TWO LIFE-SAVING GIRAFFE INFANT WARMERS. ST. FRANCIS MEDICAL CENTER IS ABLE TO PROVIDE LIFE-SAVING CARE FOR PREMATURE BABIES BY

4c (Code:) (Expenses \$ 60,000 . including grants of \$ 60,000 .) (Revenue \$)
SCHOLARSHIP PROGRAM:

VARIETY OF SOUTHERN CALIFORNIA, TENT 25, SUPPORTS THE LOS ANGELES COMMUNITY WITH A REWARDING SCHOLARSHIP PROGRAM THAT GIVES ITS YOUTH AN OPPORTUNITY TO EXPAND THEIR KNOWLEDGE BASE, ENABLING THEM TO STRIVE FOR THEIR DREAM. THE SCHOLARSHIP PROGRAM HAS AWARDED OVER \$1 MILLION TO OVER 500 RECIPIENTS SINCE THE INCEPTION OF THE PROGRAM. ALL OF THE SCHOLARSHIP RECIPIENTS ARE AT-RISK YOUTH FROM THE GREATER LOS ANGELES AREA - MANY FROM THE VARIETY BOYS AND GIRLS CLUB OF BOYLE HEIGHTS - WHO HAVE WORKED HARD TO BETTER THEIR LIVES THROUGH EDUCATION. AMONG ITS GRADUATES ARE THE MAYOR OF LOS ANGELES, DOCTORS, LAWYERS, TEACHER AND OTHER COMMUNITY LEADERS.

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

(Expenses \$ 479,194 . including grants of \$ 367,148 .) (Revenue \$)

4e Total program service expenses \$ 1,209,194 . (Must equal Part IX, Line 25, column (B).)

**VARIETY - THE CHILDREN'S CHARITY OF
SOUTHERN CALIFORNIA, TENT 25**

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Part IV Checklist of Required Schedules

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

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SOUTHERN CALIFORNIA, TENT 25

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Part IV Checklist of Required Schedules (continued)

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

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SOUTHERN CALIFORNIA, TENT 25**

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Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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**VARIETY - THE CHILDREN'S CHARITY OF
SOUTHERN CALIFORNIA, TENT 25**

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

Section A. Governing Body and Management

	Yes	No
<i>For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.</i>		
1a Enter the number of voting members of the governing body	1a	27
b Enter the number of voting members that are independent	1b	27
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	X
5 Did the organization become aware during the year of a material diversion of the organization's assets?	5	X
6 Does the organization have members or stockholders?	6	X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	8a	X
b Each committee with authority to act on behalf of the governing body?	8b	X
9a Does the organization have local chapters, branches, or affiliates?	9a	X
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b	
10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X
11 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11	X

Section B. Policies

	Yes	No
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	X
13 Does the organization have a written whistleblower policy?	13	X
14 Does the organization have a written document retention and destruction policy?	14	X
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:		
a The organization's CEO, Executive Director, or top management official?	15a	X
b Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions)	15b	X
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **CA**

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

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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **►**
ELIZABETH O'NEIL - (323) 655-1547
4601 WILSHIRE BLVD, STE 260, LOS ANGELES, CA 90010

832006
12-18-08

Form **990** (2008)

**VARIETY - THE CHILDREN'S CHARITY OF
SOUTHERN CALIFORNIA, TENT 25**

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

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

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
SHIRLEY BECKER DIRECTOR	1.00	X						0.	0.	0.
ANN-ELIZABETH CROTTY DIRECTOR	1.00	X						0.	0.	0.
KYLE DAVIES DIRECTOR	1.00	X						0.	0.	0.
SAM ENGLEBARDT DIRECTOR	1.00	X						0.	0.	0.
SCOTT FORMAN DIRECTOR	1.00	X						0.	0.	0.
DONNA FREED DIRECTOR	1.00	X						0.	0.	0.
MARY BETH GARBER DIRECTOR	1.00	X						0.	0.	0.
PATRICIA GONZALEZ DIRECTOR	1.00	X						0.	0.	0.
DAVID JOHNSON DIRECTOR	1.00	X						0.	0.	0.
DAVID KEITH DIRECTOR	1.00	X						0.	0.	0.
NANCY L. KLUETER DIRECTOR	1.00	X						0.	0.	0.
DALE DAVISON DIRECTOR	1.00	X						0.	0.	0.
GRETCHEN MCCOURT DIRECTOR	1.00	X						0.	0.	0.
DAVID MCDONALD DIRECTOR	1.00	X						0.	0.	0.
BRANDEN D. MILLER DIRECTOR	1.00	X						0.	0.	0.
JIM ORR DIRECTOR	1.00	X						0.	0.	0.
DOMINIC PARERO DIRECTOR	1.00	X						0.	0.	0.

**VARIETY - THE CHILDREN'S CHARITY OF
SOUTHERN CALIFORNIA, TENT 25**

Form 990 (2008)

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
JERRY POKORSKI DIRECTOR	1.00	X						0.	0.	0.
BRETT RESNICK DIRECTOR	1.00	X						0.	0.	0.
LAMONT SHEDRICK DIRECTOR	1.00	X						0.	0.	0.
ADRIAN SMITH DIRECTOR	1.00	X						0.	0.	0.
MICKIE SULLIVAN DIRECTOR	1.00	X						0.	0.	0.
ERIC TABAK DIRECTOR	1.00	X						0.	0.	0.
JOHN V TAMBORELLI, ESQ. DIRECTOR	1.00	X						0.	0.	0.
ALAN DAVY PRESIDENT	1.00	X		X				0.	0.	0.
MARY NAKAGAWA-MARTI CHAIRMAN	1.00	X		X				0.	0.	0.
WILLIAM D. ESENSTEN TREASURER	1.00	X		X				0.	0.	0.
1b Total								182,225.	0.	19,096.

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization 0

- 3** Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4		X
5		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization 0

SEE SCHEDULE J-2 FOR PART VII, SECTION A CONTINUATION

Form **990** (2008)

**VARIETY - THE CHILDREN'S CHARITY OF
SOUTHERN CALIFORNIA, TENT 25**

Form 990 (2008)

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Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a					
	b Membership dues	1b	15,470.				
	c Fundraising events	1c	1415010.				
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	89,080.				
	g Noncash contributions included in lines 1a-1f \$		10,150.				
	h Total. Add lines 1a-1f			1,519,560.			
Program Service Revenue	2 a	Business Code					
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			11,143.			11,143.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross Rents	(i) Real	(ii) Personal				
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss)						
	8 a Gross income from fundraising events (not including \$ 1415010. of contributions reported on line 1c). See Part IV, line 18						
	a 674,936.						
	b Less: direct expenses						
	b 653,450.						
	c Net income or (loss) from fundraising events			21,486.			21,486.
	9 a Gross income from gaming activities. See Part IV, line 19						
	a 36,591.						
b Less: direct expenses							
b 58,077.							
c Net income or (loss) from gaming activities			<21,486.>			<21,486.>	
10 a Gross sales of inventory, less returns and allowances							
a							
b Less: cost of goods sold							
b							
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue							
11 a							
b							
c							
d All other revenue							
e Total. Add lines 11a-11d							
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e				1,530,703.	0.	0.	11,143.

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**VARIETY - THE CHILDREN'S CHARITY OF
SOUTHERN CALIFORNIA, TENT 25**

Form 990 (2008)

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Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	980,139.	980,139.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	117,009.	117,009.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	200,208.	57,217.	67,383.	75,608.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	40,935.	11,699.	13,777.	15,459.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	24,556.	6,876.	8,594.	9,086.
10 Payroll taxes	22,024.	6,167.	7,708.	8,149.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	32,150.		32,150.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses	40,220.	12,274.	13,584.	14,362.
14 Information technology				
15 Royalties				
16 Occupancy	46,735.	13,086.	16,357.	17,292.
17 Travel	578.	163.	201.	214.
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	8,546.		8,546.	
22 Depreciation, depletion, and amortization	4,243.	1,188.	1,485.	1,570.
23 Insurance	11,473.	3,212.	4,016.	4,245.
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a OTHER FUNDRAISING EXP.	8,700.			8,700.
b AUTO EXPENSE	587.	164.	206.	217.
c				
d				
e				
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	1,538,103.	1,209,194.	174,007.	154,902.
26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

**VARIETY - THE CHILDREN'S CHARITY OF
SOUTHERN CALIFORNIA, TENT 25**

Form 990 (2008)

95-1330495 Page **11**

Part X Balance Sheet

		(A) Beginning of year		(B) End of year		
Assets	1 Cash - non-interest-bearing	1,234,286.	1	2,394,160.		
	2 Savings and temporary cash investments	1,786,821.	2	1,154,415.		
	3 Pledges and grants receivable, net	73,257.	3	67,493.		
	4 Accounts receivable, net		4			
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5			
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6			
	7 Notes and loans receivable, net		7			
	8 Inventories for sale or use		8			
	9 Prepaid expenses and deferred charges	31,232.	9	42,436.		
	10a Land, buildings, and equipment: cost basis	29,324.				
	b Less: accumulated depreciation. Complete Part VI of Schedule D	8,778.	10b	15,357.	10c	20,546.
	11 Investments - publicly traded securities		11			
	12 Investments - other securities. See Part IV, line 11		12			
	13 Investments - program-related. See Part IV, line 11		13			
	14 Intangible assets		14			
	15 Other assets. See Part IV, line 11		15			
16 Total assets. Add lines 1 through 15 (must equal line 34)	3,140,953.	16	3,679,050.			
Liabilities	17 Accounts payable and accrued expenses	13,745.	17	3,052.		
	18 Grants payable	1,674,181.	18	2,205,621.		
	19 Deferred revenue	10,250.	19	35,000.		
	20 Tax-exempt bond liabilities		20			
	21 Escrow account liability. Complete Part IV of Schedule D		21			
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22			
	23 Secured mortgages and notes payable to unrelated third parties		23			
	24 Unsecured notes and loans payable		24			
	25 Other liabilities. Complete Part X of Schedule D		25			
	26 Total liabilities. Add lines 17 through 25	1,698,176.	26	2,243,673.		
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> X and complete lines 27 through 29, and lines 33 and 34.					
	27 Unrestricted net assets	531,403.	27	<374,959.>		
	28 Temporarily restricted net assets	911,374.	28	1,810,336.		
	29 Permanently restricted net assets		29			
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.					
	30 Capital stock or trust principal, or current funds		30			
	31 Paid-in or capital surplus, or land, building, or equipment fund		31			
	32 Retained earnings, endowment, accumulated income, or other funds		32			
	33 Total net assets or fund balances	1,442,777.	33	1,435,377.		
34 Total liabilities and net assets/fund balances	3,140,953.	34	3,679,050.			

Part XI Financial Statements and Reporting

- 1** Accounting method used to prepare the Form 990: ☐ Cash ☒ **X** Accrual ☐ Other
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
- b** Were the organization's financial statements audited by an independent accountant?
- c** If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits?

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

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 VARIETY - THE CHILDREN'S CHARITY OF
SOUTHERN CALIFORNIA, TENT 25

Employer identification number
95-1330495

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

The organization is not a private foundation because it is: (Please check only one organization.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).** (Attach Schedule H.)

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete the Part III.)

10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).** (see instructions)

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.

a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f ☐ If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box _____

g ☐ Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i) ☐ A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

(ii) ☐ A family member of a person described in (i) above?

(iii) ☐ A 35% controlled entity of a person described in (i) or (ii) above?

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

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

[illegible]

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

Schedule A (Form 990 or 990-EZ) 2008

VARIETY - THE CHILDREN'S CHARITY OF

Schedule A (Form 990 or 990-EZ) 2008 **SOUTHERN CALIFORNIA, TENT 25**

95-1330495 Page 2

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.")	1805930.	2104429.	1118837.	1518604.	1519560.	8067360.
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	1805930.	2104429.	1118837.	1518604.	1519560.	8067360.
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)						950,570.
6 Public Support. Subtract line 5 from line 4						7116790.

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	1805930.	2104429.	1118837.	1518604.	1519560.	8067360.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	33,213.	78,987.	105,755.	73,782.	11,143.	302,880.
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						8370240.
12 Gross receipts from related activities, etc. (see instructions)					12	3,034,389.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	85.02 %
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	77.01 %
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 ▶ <input checked="" type="checkbox"/>		
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 ▶ <input type="checkbox"/>		
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 ▶ <input type="checkbox"/>		
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 ▶ <input type="checkbox"/>		
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 ▶ <input type="checkbox"/>		

Schedule A (Form 990 or 990-EZ) 2008

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

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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 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						
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)						

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						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

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

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 A (Form 990 or 990-EZ) 2008

Schedule D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization **VARIETY - THE CHILDREN'S CHARITY OF
SOUTHERN CALIFORNIA, TENT 25**

Employer identification number
95-1330495

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

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

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

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

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

2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

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

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

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

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

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

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

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

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

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

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

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

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

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

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

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

VARIETY - THE CHILDREN'S CHARITY OF
SOUTHERN CALIFORNIA, TENT 25

Schedule D (Form 990) 2008

95-1330495 Page 2

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

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

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

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

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

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

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

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

	Amount
1c	
1d	
1e	
1f	

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

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Investment earnings or losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ► _____ %
b Permanent endowment ► _____ %
c Term endowment ► _____ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
(ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

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

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		29,324.	8,778.	20,546.
e Other				
Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				20,546.

Schedule D (Form 990) 2008

2008.05050 VARIETY - THE CHILDREN'S CH 3406 1

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 990 or Form 990-EZ.** Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

OMB No 1545-0047

2008

Open To Public Inspection

Employer identification number
95-1330495

Part I	Fundraising Activities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 17.
---------------	---

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a ☐ Mail solicitations
- b ☐ Email solicitations
- c ☐ Phone solicitations
- d ☐ In-person solicitations
- e ☐ Solicitation of non-government grants
- f ☐ Solicitation of government grants
- g ☐ Special fundraising events

- 2 a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☐ **Yes**☐ No

- b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(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			
Total						

Total

- 3** List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

VARIETY - THE CHILDREN'S CHARITY OF

Schedule G (Form 990 or 990-EZ) 2008

SOUTHERN CALIFORNIA, TENT 25

95-1330495 Page 2

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		TRIBUTE JOURNAL (event type)	GOLD HEARTS (event type)	7 (total number)	(Add col. (a) through col. (c))
Revenue	1 Gross receipts	487,105.	531,583.	1,071,258.	2,089,946.
	2 Less: Charitable contributions	458,442.	439,136.	517,432.	1,415,010.
	3 Gross revenue (line 1 minus line 2)	28,663.	92,447.	553,826.	674,936.
Direct Expenses	4 Cash prizes				
	5 Non-cash prizes		9,800.	17,926.	27,726.
	6 Rent/facility costs			71,581.	71,581.
	7 Other direct expenses	28,663.	82,647.	442,833.	554,143.
	8 Direct expense summary. Add lines 4 through 7 in column (d)				653,450.
	9 Net income summary. Combine lines 3 and 8 in column (d)				21,486.

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col. (a) through col. (c))
Revenue	1 Gross revenue			36,591.	36,591.
	2 Cash prizes				
Direct Expenses	3 Non-cash prizes			53,738.	53,738.
	4 Rent/facility costs				
	5 Other direct expenses			4,339.	4,339.
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes 90.00 % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				58,077.
	8 Net gaming income summary. Combine lines 1 and 7 in column (d)				<21,486.>

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

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

b If "No," Explain:

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

b If "Yes," Explain:

11 Does the organization operate gaming activities with nonmembers?

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

	Yes	No
9a	X	
10a		X
11		X
12		X

Schedule G (Form 990 or 990-EZ) 2008

13 Indicate the percentage of gaming activity operated in:

a The organization's facility

b An outside facility

13a	%
13b	100.00 %

14 Provide the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ ELIZABETH O'NEIL, EXECUTIVE DIRECTOR

Address ▶ 4601 WILSHIRE BLVD., STE260 - LOS ANGELES, CA 90010

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?

15a Yes No **X**

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.

c If "Yes," enter name and address:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

☐ Director/officer

☐ Employee

☐ Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

17a Yes No **X**

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

Schedule G (Form 990 or 990-EZ) 2008

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2008

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

Open to Public
Inspection

Name of the organization **VARIETY - THE CHILDREN'S CHARITY OF
SOUTHERN CALIFORNIA, TENT 25** Employer identification number **95-1330495**

Part I General Information on Grants and Assistance

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

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOYS AND GIRLS CLUB OF VISTA 410 W. CALIFORNIA AVE VISTA, CA 92083	95-2266749	501(C)3	10,000.	0	BOOK	N/A	FUND THE ORGANIZATION'S PROGRAM(S) FOR CHILDREN WHICH EMBODY THE MISSION STATEMENT OF VARIETY
RIDE ON THERAPEUTIC 21126 CHATSWORTH ST. CHATSWORTH, CA 91311	95-4465783	501(C)3	10,000.	0	BOOK	N/A	FUND THE ORGANIZATION'S PROGRAM(S) FOR CHILDREN WHICH EMBODY THE MISSION STATEMENT OF VARIETY
CAMP KINDLE 25000 STANDFORD AVE., #212 SANTA CLARITA, CA 91355	47-0814125	501(C)3	5,000.	0	BOOK	N/A	FUND THE ORGANIZATION'S PROGRAM(S) FOR CHILDREN WHICH EMBODY THE MISSION STATEMENT OF VARIETY
BOYS AND GIRLS CLUB-WEST VALLEY P.O. BOX 6576 MISSION HILLS, CA 91365	95-4419365	501(C)3	10,000.	0	BOOK	N/A	FUND THE ORGANIZATION'S PROGRAM(S) FOR CHILDREN WHICH EMBODY THE MISSION STATEMENT OF VARIETY
SURFER HEALING FOUNDATION 26791 CALLE MARIA CAPISTRANO BEACH, CA 92624	33-0931538	501(C)3	15,000.	0	BOOK	N/A	FUND THE ORGANIZATION'S PROGRAM(S) FOR CHILDREN WHICH EMBODY THE MISSION STATEMENT OF VARIETY
FRESH START SURGICAL GIFTS 2011 PALOMAR AIRPORT RD., #206 CARLSBAD, CA 92011	33-0460177	501(C)3	10,000.	0	BOOK	N/A	FUND THE ORGANIZATION'S PROGRAM(S) FOR CHILDREN WHICH EMBODY THE MISSION STATEMENT OF VARIETY

2 Enter total number of section 501(c)(3) and government organizations **25.**

3 Enter total number of other organizations **25.**

VARIETY - THE CHILDREN'S CHARITY OF
SOUTHERN CALIFORNIA, TENT 25

Schedule I (Form 990) 2008

95-1330495

Page 2

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
SCHOLARSHIPS	36	60,000.	0.	BOOK	N/A
COMPASSION GRANTS	12	46,859.	0.	BOOK	N/A
OTHER ASSISTANCE	500	0.	10,150.	FMV	BOOKS AND MOVIE TICKETS.

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

SCHEDULE I, PART I, LINE 2: ANY GRANT REQUESTS RECEIVED BY THE ORGANIZATION ARE FIRST REVIEWED BY THE EXECUTIVE DIRECTOR WHO ENSURES THAT ALL NECESSARY FINANCIAL AND ORGANIZATIONAL BACK GROUND INFORMATION IS COMPLETE. THE REQUESTS THEN GO TO THE GRANTS COMMITTEE FOR REVIEW AND DETERMINATION IF THE GRANT REQUEST SHOULD GO BEFORE THE BOARD OF DIRECTORS. ANY GRANT REQUESTS THAT ARE PRESENTED TO THE FULL BOARD OF DIRECTORS FOR REVIEW AND DISCUSSION REQUIRE A MAJORITY BOARD VOTE TO BE APPROVED.

ANY GRANTS AWARDED ARE DOCUMENTED IN THE BOARD OF DIRECTORS MEETING WHEN

SCHEDULE I-1

(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

▲ Attach to Form 990 to list additional information for
Part II and Part III, Schedule I (Form 990).

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization

VARIETY - THE CHILDREN'S CHARITY OF
SOUTHERN CALIFORNIA, TENT 25

Employer identification number

95-1330495

Part I

Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II).

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEFFREY FOUNDATION FOR THE HANDICAPPED - 5470 W. WASHINGTON BLVD. - LOS ANGELES, CA 90016	23-7208851	501(C)3	10,000.	0 BOOK		N/A	FUND THE ORGANIZATION'S PROGRAM(S) FOR CHILDREN WHICH EMBODY THE MISSION STATEMENT OF VARIETY
MY FRIEND'S PLACE P.O. BOX 3867 HOLLYWOOD, CA 90078	75-2308741	501(C)3	18,000.	0 BOOK		N/A	FUND THE ORGANIZATION'S PROGRAM(S) FOR CHILDREN WHICH EMBODY THE MISSION STATEMENT OF VARIETY
CAMP KESEM P.O. BOX 1113 LAFAYETTE, CA 94549	51-0454157	501(C)3	5,000.	0 BOOK		N/A	FUND THE ORGANIZATION'S PROGRAM(S) FOR CHILDREN WHICH EMBODY THE MISSION STATEMENT OF VARIETY
ST. FRANCIS MEDICAL CENTER 3630 E. IMPERIAL HIGHWAY LYNNWOOD, CA 90262	91-2154439	501(C)3	70,000.	0 BOOK		N/A	FUND THE ORGANIZATION'S PROGRAM(S) FOR CHILDREN WHICH EMBODY THE MISSION STATEMENT OF VARIETY
SERT P.O. BOX 4116 CHATSWORTH, CA 91313	95-4121079	501(C)3	15,000.	0 BOOK		N/A	FUND THE ORGANIZATION'S PROGRAM(S) FOR CHILDREN WHICH EMBODY THE MISSION STATEMENT OF VARIETY
URBAN YOUTH GOLF 201 S. FIGUEROA ST., #300 LOS ANGELES, CA 90012	95-6051006	501(C)3	5,000.	0 BOOK		N/A	FUND THE ORGANIZATION'S PROGRAM(S) FOR CHILDREN WHICH EMBODY THE MISSION STATEMENT OF VARIETY
TS ALLIANCE / STEP FORWARD 801 ROEDER RD., #750 SILVER SPRINGS, MD 20910	95-3018799	501(C)3	5,000.	0 BOOK		N/A	FUND THE ORGANIZATION'S PROGRAM(S) FOR CHILDREN WHICH EMBODY THE MISSION STATEMENT OF VARIETY
CHILDREN TODAY P.O. BOX 16004 LONG BEACH, CA 90806	95-4635295	501(C)3	10,000.	0 BOOK		N/A	FUND THE ORGANIZATION'S PROGRAM(S) FOR CHILDREN WHICH EMBODY THE MISSION STATEMENT OF VARIETY

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

832241 12-17-08

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

Schedule I-1 (Form 990) 2008

SCHEDULE I-1

(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

▲ Attach to Form 990 to list additional information for
Part II and Part III, Schedule I (Form 990).

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization

**VARIETY - THE CHILDREN'S CHARITY OF
SOUTHERN CALIFORNIA, TENT 25**

Employer identification number

95-1330495

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILDREN'S BUREAU FOUNDATION 1910 MAGNOLIA AVE LOS ANGELES, CA 90007	95-4160248	501(C)3	10,000.	0	BOOK	N/A	FUND THE ORGANIZATION'S PROGRAM(S) FOR CHILDREN WHICH EMBODY THE MISSION STATEMENT OF VARIETY
DISCOVERY ARTS 1938 NORTH BATAVIA, NO. B ORANGE, CA 92867	95-4700750	501(C)3	10,000.	0	BOOK	N/A	FUND THE ORGANIZATION'S PROGRAM(S) FOR CHILDREN WHICH EMBODY THE MISSION STATEMENT OF VARIETY
DUBNOFF CENTER 10526 DUBNOFF WAY NORTH HOLLYWOOD, CA 91606	95-2098863	501(C)3	20,000.	0	BOOK	N/A	FUND THE ORGANIZATION'S PROGRAM(S) FOR CHILDREN WHICH EMBODY THE MISSION STATEMENT OF VARIETY
LAS FLORISTAS 81905 MOUNTAIN VIEW LN LA QUINTA, CA 92253	95-6093688	501(C)3	25,000.	0	BOOK	N/A	FUND THE ORGANIZATION'S PROGRAM(S) FOR CHILDREN WHICH EMBODY THE MISSION STATEMENT OF VARIETY
VARIETY CHILDREN'S LIFELINE, INC. 514 VIA DE LA VALLE, #207 SOLANA BEACH, CA 92075	77-0620629	501(C)3	6,000.	0	BOOK	N/A	FUND THE ORGANIZATION'S PROGRAM(S) FOR CHILDREN WHICH EMBODY THE MISSION STATEMENT OF VARIETY
PROJECT JORDAN 1404 E. 107TH ST. LOS ANGELES, CA 90002	23-7016809	501(C)3	10,000.	0	BOOK	N/A	FUND THE ORGANIZATION'S PROGRAM(S) FOR CHILDREN WHICH EMBODY THE MISSION STATEMENT OF VARIETY
SUCCESS THROUGH EDUCATION 756 AVONGLEN TERRACE GLENDALE, CA 91206	33-1135637	501(C)3	35,000.	0	BOOK	N/A	FUND THE ORGANIZATION'S PROGRAM(S) FOR CHILDREN WHICH EMBODY THE MISSION STATEMENT OF VARIETY
VARIETY CHILDREN'S CHARITY OF THE DESERT - 74040 HWY 111, NO. JJ-4 - PALM DESERT, CA 92260	33-0278817	501(C)3	20,000.	0	BOOK	N/A	FUND THE ORGANIZATION'S PROGRAM(S) FOR CHILDREN WHICH EMBODY THE MISSION STATEMENT OF VARIETY

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

Name of the organization

VARIETY - THE CHILDREN'S CHARITY OF
SOUTHERN CALIFORNIA, TENT 25

Employer identification number
95-1330495

Part I	Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)
---------------	---

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WILL ROGERS MOTION PICTURE PIONEERS - 10045 RIVERSIDE DRIVE, 3RD FL - TOLUCA LAKE, CA 91602	15-0533551	501(C)3	11,048.	0.	BOOK	N/A	FUND THE ORGANIZATION'S PROGRAM(S) FOR CHILDREN WHICH EMBODY THE MISSION STATEMENT OF VARIETY
WONDER OF READING 5371 WILSHIRE BLVD., STE 210 LOS ANGELES, CA 90036	95-4484325	501(C)3	25,450.	0.	BOOK	N/A	FUND THE ORGANIZATION'S PROGRAM(S) FOR CHILDREN WHICH EMBODY THE MISSION STATEMENT OF VARIETY
VARIETY BOYS AND GIRLS CLUB 2530 CINCINNATI ST. LOS ANGELES, CA 90033	95-1919219	501(C)3	600,000.	0.	BOOK	N/A	FUND THE ORGANIZATION'S PROGRAM(S) FOR CHILDREN WHICH EMBODY THE MISSION STATEMENT OF VARIETY

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

Part IV Supplemental Information

THE GRANTS ARE VOTED ON BY THE BOARD OF DIRECTORS. THE EXACT AMOUNT OF THE GRANT IS VOTED ON AND NOTED IN THE MINUTES OF THE MEETING. IN THE EVENT OF AN ELECTRONIC VOTE, THE GRANT AMOUNT IS NOTED IN THE ELECTRONIC VOTE, ALL REPLIES ARE PRINTED AND SAVED BY THE EXECUTIVE DIRECTOR AND RESULTS OF THE VOTE ARE SUBSEQUENTLY NOTED IN THE NEXT BOARD OF DIRECTORS MEETING TO BE RECORDED INTO THE MINUTES.

SCHOLARSHIP REQUESTS RECEIVED ARE SENT TO THE SCHOLARSHIP COMMITTEE AND REVIEWED. STUDENTS REQUESTING SCHOLARSHIPS ARE INTERVIEWED IN PERSON BY THE COMMITTEE AND REQUIRED TO PRESENT ACADEMIC TRANSCRIPTS, NOTICES OF ACCEPTANCE TO ACCREDITED COLLEGES OR TRADE SCHOOLS AND ESSAYS. ANY STUDENT WHO RECEIVES A FINANCIAL SCHOLARSHIP BY THE ORGANIZATION RECEIVES THE AWARD ON A SEMESTER BY SEMESTER BASIS AND MUST SEND PROOF OF ACADEMIC GOOD STANDING BEFORE RECEIVING THE NEXT SEMESTER'S AWARD.

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.**

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the Organization

VARIETY - THE CHILDREN'S CHARITY OF
SOUTHERN CALIFORNIA, TENT 25

Employer Identification number
95-1330495

Part I	Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
---------------	--

[illegible]

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

Schedule J-2 (Form 990) 2008

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

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

► Attach to Form 990.

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization **VARIETY - THE CHILDREN'S CHARITY OF
SOUTHERN CALIFORNIA, TENT 25**

Employer identification number
95-1330495

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications	X		5,600.	FMV
5 Clothing and household goods	X		25,300.	FMV
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution (historic structures)				
14 Qualified conservation contribution (other)				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (<u>MERCHANDISE</u>)	X	11	207,015.	FMV
26 Other ► (<u>GOODY BAGS</u>)	X	950	112,500.	FMV
27 Other ► (<u>PRINTING</u>)	X	6	78,555.	FMV
28 Other ► ()				

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

29

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

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

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

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

b If "Yes," describe in Part II.

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

	Yes	No
30a		X
31	X	
32a		X
33		

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

Schedule M (Form 990) 2008

Part II

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

SCHEDULE M, PART I, COLUMN (B): NON-CASH DONATIONS ARE BEING REPORTED
BY TOTAL NUMBER OF CONTRIBUTIONS.

THE TOTAL DONATED GOODS FOR THE YEAR WERE 413,370. OF WHICH 10,150 ARE
INCLUDED IN FORM 990, PART VIII, LINE 1G AND 403,222 ARE INCLUDED IN
PART VIII, LINE 8A.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization

VARIETY - THE CHILDREN'S CHARITY OF
SOUTHERN CALIFORNIA, TENT 25

Employer identification number
95-1330495

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

UTILIZING THESE WARMERS TO PROVIDE A PROTECTIVE, CONTROLLED ENVIRONMENT
ALLOWING PREMATURE BABIES TO GROW AND GAIN STRENGTH.

FORM 990, PART VI, SECTION A, LINE 10: THE FORM 990 IS REVIEWED BY THE
EXECUTIVE DIRECTOR AND THE TREASURER. ONCE THE DRAFT IS APPROVED A COPY OF
THE FORM IS DISTRIBUTED TO ALL BOARD MEMBERS PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C: THE CONFLICT OF INTEREST POLICY IS
DISTRIBUTED AND REVIEWED AT THE BEGINNING OF THE CALENDAR YEAR FOR ANY NEW
BOARD MEMBER AND AS A REMINDER FOR CURRENT BOARD MEMBERS. EVERY BOARD
MEMBER SIGNS AN AGREEMENT THAT THEY HAVE RECEIVED, READ AND UNDERSTAND THE
CONFLICT OF INTEREST POLICY. THE MONITORING OF THIS PROCEDURE IS DONE BY
THE EXECUTIVE DIRECTOR, AND THE SIGNED ORIGINAL DOCUMENTS ARE KEPT IN THE
EXECUTIVE DIRECTOR'S OFFICE.

FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION FOR THE EXECUTIVE
DIRECTOR AND OTHER OFFICERS IS REVIEWED IN A SPECIAL MEETING OF THE
EXECUTIVE COMMITTEE USING GUIDELINES FROM THE "BENEFITS IN NONPROFIT
CORPORATIONS" SURVEYS. THE ED'S COMPENSATION IS APPROVED BY THE ENTIRE
BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS
AVAILABLE TO THE PUBLIC UPON REQUEST.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization

VARIETY - THE CHILDREN'S CHARITY OF
SOUTHERN CALIFORNIA, TENT 25

Employer identification number
95-1330495

FORM 990, PART XI, LINE 2C

FINANCIAL STATEMENTS AND REPORTING

THE EXECUTIVE COMMITTEE IS RESPONSIBLE FOR REVIEWING THE FINANCIAL STATEMENTS. THE COMMITTEE INVOLVES A CPA AND ATTORNEY IN THE REVIEW PROCESS. THE EXECUTIVE COMMITTEE INTERVIEWS ACCOUNTING FIRMS THAT ARE SELECTED TO PERFORM WORK FOR THE ORGANIZATION. AFTER THE INTERVIEW PROCESS THE COMMITTEE MAKES THEIR SELECTION.

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

▶ **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ **X**
 - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868**

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on **e-file for Charities & Nonprofits**.

Type or print	Name of Exempt Organization VARIETY - THE CHILDREN'S CHARITY OF SOUTHERN CALIFORNIA, TENT 25	Employer identification number 95-1330495
	Number, street, and room or suite no. If a P.O. box, see instructions. 8455 BEVERLY BOULEVARD, NO. 260	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. LOS ANGELES, CA 90048	

Check type of return to be filed (file a separate application for each return):

- | | | |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

ELIZABETH O'NEIL

- The books are in the care of ▶ **4601 WILSHIRE BLVD, STE 260 - LOS ANGELES, CA 90010**

Telephone No. ▶ **(323) 655-1547**

FAX No. ▶

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ☐. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension will cover.

- 1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **MAY 17, 2010**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶ ☐ calendar year _____ or
▶ ☒ tax year beginning **OCT 1, 2008**, and ending **SEP 30, 2009**

- 2 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$ N/A

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

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- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print File by the extended due date for filing the return. See instructions	Name of Exempt Organization VARIETY - THE CHILDREN'S CHARITY OF SOUTHERN CALIFORNIA, TENT 25	Employer identification number 95-1330495
	Number, street, and room or suite no. If a P.O. box, see instructions. 8455 BEVERLY BOULEVARD, NO. 260	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. LOS ANGELES, CA 90048	

Check type of return to be filed (File a separate application for each return):

- ☒ Form 990
 ☐ Form 990-EZ
 ☐ Form 990-T (sec. 401(a) or 408(a) trust)
 ☐ Form 1041-A
 ☐ Form 5227
 ☐ Form 8870
☐ Form 990-BL
☐ Form 990-PF
☐ Form 990-T (trust other than above)
☐ Form 4720
☐ Form 6069

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

ELIZABETH O'NEIL

- The books are in the care of **4601 WILSHIRE BLVD, STE 260 - LOS ANGELES, CA 90010**

Telephone No. **(323) 655-1547**

FAX No.

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

- 4 I request an additional 3-month extension of time until **AUGUST 16, 2010**
- 5 For calendar year , or other tax year beginning **OCT 1, 2008**, and ending **SEP 30, 2009**
- 6 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period
- 7 State in detail why you need the extension
TAXPAYER NEEDS ADDITIONAL TIME TO ACCUMULATE ALL OF THE INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$
8b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$
8c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions.	8c	\$ N/A

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature  Title **CPA**

Date **5/12/10**

Form 8868 (Rev. 4-2009)