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2009

Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

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

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

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

200809

Open to Public Inspection

Department of the Treasury Internal Revenue Service

A For the 2008 calendar year, or tax year beginning 2008, and ending 20

B Check if applicable: Address change, Name change, Initial return, Termination, Amended return, Application pending. C Name of organization: OLD MILL PARK II. D Employer identification number: 27-0782478. E Telephone number: 760-579-1601. F Group Exemption Number: 501(c)(3) NJTMC. G Accounting method: Cash.

I Website: H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF). J Organization type: 501(c)(6). K Check if the organization is not a section 509(a)(3) supporting organization. L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

Table with columns for Revenue, Expenses, and Net Assets. Revenue lines 1-9 total 38,002. Expenses lines 10-17 total 38,189. Net Assets lines 18-21 total 2,449.88. Includes handwritten notes and stamps like 'RECEIVED' and 'OPEN'.

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

Table with columns (A) Beginning of year and (B) End of year. Lines 22-27 showing assets and liabilities. Total assets at end of year: 2,449.88.

G5 6

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

33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity OLD MILL PPM #

	Yes	No
33		<input checked="" type="checkbox"/>
34		<input checked="" type="checkbox"/>
35		
35a		<input checked="" type="checkbox"/>
35b		<input checked="" type="checkbox"/>
36		
37a		<input checked="" type="checkbox"/>
37b		<input checked="" type="checkbox"/>
38a		<input checked="" type="checkbox"/>
38b		
39a		<input checked="" type="checkbox"/>
39b		
40a		
40b		<input checked="" type="checkbox"/>
40c		
40d		
40e		<input checked="" type="checkbox"/>
41		
42a		
42b		<input checked="" type="checkbox"/>
42c		<input checked="" type="checkbox"/>
43		<input type="checkbox"/>
44		<input checked="" type="checkbox"/>
45		<input checked="" type="checkbox"/>

34 Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes

35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.

a Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?

b If "Yes," has it filed a tax return on Form 990-T for this year?

36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N

37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 0

b Did the organization file Form 1120-POL for this year?

38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?

b If "Yes," complete Schedule L, Part II and enter the total amount involved

39 Section 501(c)(7) organizations. Enter:

a Initiation fees and capital contributions included on line 9

b Gross receipts, included on line 9, for public use of club facilities

40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ▶ _____, section 4912 ▶ _____; section 4955 ▶ _____

b Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I

c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ _____

d Enter amount of tax on line 40c reimbursed by the organization ▶ _____

e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.

41 List the states with which a copy of this return is filed. ▶ _____

42a The books are in care of ▶ JANN MITCHELL Telephone no. 760 876-1600
Located at ▶ CAALS BLDG, CA ZIP + 4 ▶ 92109

b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?

If "Yes," enter the name of the foreign country: ▶ _____
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.

c At any time during the calendar year, did the organization maintain an office outside of the U.S.?
If "Yes," enter the name of the foreign country: ▶ _____

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43

44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ

45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ

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

- 46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I
- 47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II
- 48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 49a Did the organization make any transfers to an exempt non-charitable related organization?
- 49b If "Yes," was the related organization(s) a section 527 organization?
- 50 Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

	Yes	No
46		
47		
48		
49a		
49b		

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Total number of other employees paid over \$100,000 ▶				

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

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
Total number of other independent contractors each receiving over \$100,000 ▶		

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

Sign Here
 Signature of officer: *John J. Mitzhak*
 Date: *4/1/10*
 Type or print name and title: *PROPRY/MGR*

Paid Preparer's Use Only
 Preparer's signature: _____
 Date: _____
 Check if self-employed:
 Preparer's Identifying Number (See instructions): _____
 Firm's name (or yours if self-employed), address, and ZIP + 4: _____
 EIN: _____
 Phone no: () _____

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

1/12/10

Income/Expense
1/1/09 Through 12/31/09

Category Description	1/1/09- 12/31/09
INCOME	
HOA ACCU-TECH	7,497.48
HOA MITCHELL	3,971.64
HOA NATURAL	15,120.17
HOA PACIFIC	5,117.40
HOA REID	3,178.01
HOA, TURK	3,116.88
TOTAL INCOME	38,001.58
EXPENSES	
BANKING	31.05
insurance	6,650.00
INSURANCE, FLOOD	2,828.37
LANDSCAPE.	8,180.00
OFFICE	4,584.76
Repairs	50.00
repairs, SPECIAL	729.02
tax	775.00
Trash Removal	3,283.69
Tree Service	400.00
Tree Removal	700.00
UTILITIES, ELEC	3,014.37
UTILITIES, WATER	6,962.96
TOTAL EXPENSES	38,189.22
OVERALL TOTAL	

JM 1/12/10

PN 1