



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-EZ****Short Form**  
**Return of Organization Exempt From Income Tax**

OMB No 1545-1150

**2009****Open to Public Inspection**Department of the Treasury  
Internal Revenue Service

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 \$500,000 and total assets less than \$1,250,000 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.

**A** For the 2009 calendar year, or tax year beginning **JANUARY 1**, 2009, and ending **DECEMBER, 31**, 20 **09****B** Check if applicable:

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

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

**C** Name of organization**SOUTHERN CALIFORNIA HELPING HANDS**

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

**8028 GREENLEAF AVE**

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

**WHITTIER, CA 90602****D** Employer identification number**56-2401627****E** Telephone number**562-698-8326****F** Group Exemption Number ►

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

**G** Accounting Method ☒ Cash ☐ Accrual  
Other (specify) ►

**I** Website: ►

**J** Tax-exempt status (check only one) — ☒ 501(c) ( 3 ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

**H** Check ☐ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

**K** Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

**L** Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts. If \$500,000 or more, file Form 990 instead of Form 990-EZ. **\$ 36,208**

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

Revenue	<b>1</b>	Contributions, gifts, grants, and similar amounts received	<b>1</b>	<b>36,005</b>
	<b>2</b>	Program service revenue including government fees and contracts	<b>2</b>	
	<b>3</b>	Membership dues and assessments	<b>3</b>	
	<b>4</b>	Investment income	<b>4</b>	<b>203</b>
	<b>5a</b>	Gross amount from sale of assets other than inventory	<b>5a</b>	
	<b>b</b>	Less: cost or other basis and sales expenses	<b>5b</b>	
	<b>c</b>	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	<b>5c</b>	
	<b>6</b>	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/>		
	<b>a</b>	Gross revenue (not including \$ _____ of contributions reported on line 1)	<b>6a</b>	
<b>b</b>	Less: direct expenses other than fundraising expenses	<b>6b</b>		
<b>c</b>	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	<b>6c</b>		
<b>7a</b>	Gross sales of inventory, less returns and allowances	<b>7a</b>		
<b>b</b>	Less: cost of goods sold	<b>7b</b>		
<b>c</b>	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	<b>7c</b>		
<b>8</b>	Other revenue (describe ► _____)	<b>8</b>		
<b>9</b>	<b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	<b>9</b>	<b>36,208</b>	
Expenses	<b>10</b>	Grants and similar amounts paid (attach schedule)	<b>10</b>	<b>45,550</b>
	<b>11</b>	Benefits paid to or for members	<b>11</b>	
	<b>12</b>	Salaries, other compensation, and employee benefits	<b>12</b>	
	<b>13</b>	Professional fees and other payments to independent contractors	<b>13</b>	<b>1,197</b>
	<b>14</b>	Occupancy, rent, utilities, and maintenance	<b>14</b>	
	<b>15</b>	Printing, publications, postage, and shipping	<b>15</b>	
	<b>16</b>	Other expenses (describe ► _____)	<b>16</b>	<b>1,312</b>
<b>17</b>	<b>Total expenses.</b> Add lines 10 through 16	<b>17</b>	<b>48,059</b>	
Net Assets	<b>18</b>	Excess or (deficit) for the year (Subtract line 17 from line 9)	<b>18</b>	<b>-11,851</b>
	<b>19</b>	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	<b>19</b>	<b>35,904</b>
	<b>20</b>	Other changes in net assets or fund balances (attach explanation)	<b>20</b>	
	<b>21</b>	Net assets or fund balances at end of year. Combine lines 18 through 20	<b>21</b>	<b>24,053</b>

**Part II** **Balance Sheets.** If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II)

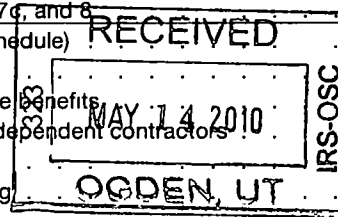
	(A) Beginning of year	(B) End of year
<b>22</b> Cash, savings, and investments	<b>35,904</b>	<b>24,053</b>
<b>23</b> Land and buildings	<b>23</b>	
<b>24</b> Other assets (describe ► _____)	<b>24</b>	
<b>25</b> <b>Total assets</b>	<b>35,904</b>	<b>24,053</b>
<b>26</b> <b>Total liabilities</b> (describe ► _____)	<b>26</b>	
<b>27</b> <b>Net assets or fund balances</b> (line 27 of column (B) must agree with line 21)	<b>35,904</b>	<b>24,053</b>

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

Cat No 106421

Form **990-EZ** (2009)

SCANNED JUN 22 2010



99

## Expenses

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

501(c)(3) and 501(c)(4)  
organizations and section  
4947(a)(1) trusts, optional  
for others )

28	SEE STATEMENT 1		
	(Grants \$ ) If this amount includes foreign grants, check here . . . . ▶ <input type="checkbox"/>	28a	45,550
29			
	(Grants \$ ) If this amount includes foreign grants, check here . . . . ▶ <input type="checkbox"/>	29a	
30			
	(Grants \$ ) If this amount includes foreign grants, check here . . . . ▶ <input type="checkbox"/>	30a	
31	Other program services (attach schedule) . . . . .		
	(Grants \$ ) If this amount includes foreign grants, check here . . . . ▶ <input type="checkbox"/>	31a	
32	Total program service expenses (add lines 28a through 31a) . . . . . ▶	32	

instructions for Part IV.)

[illegible]

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

	Yes	No
<b>33</b> Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity . . . . .		✓
<b>34</b> Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes . . . . .		✓
<b>35</b> 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 why the organization did not report the income on Form 990-T.		
<b>a</b> Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements? . . . . .	<b>35a</b>	✓
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>35b</b>	✓
<b>36</b> Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N . . . . .	<b>36</b>	✓
<b>37a</b> Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ <b>37a</b> . . . . .		
<b>b</b> Did the organization file <b>Form 1120-POL</b> for this year? . . . . .	<b>37b</b>	✓
<b>38a</b> 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 outstanding at the end of the period covered by this return? . . . . .	<b>38a</b>	✓
<b>b</b> If "Yes," complete Schedule L, Part II and enter the total amount involved . . . . . <b>38b</b> . . . . .		
<b>39</b> Section 501(c)(7) organizations. Enter:		
<b>a</b> Initiation fees and capital contributions included on line 9 . . . . . <b>39a</b> . . . . .		
<b>b</b> Gross receipts, included on line 9, for public use of club facilities . . . . . <b>39b</b> . . . . .		
<b>40a</b> Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ . . . . . ; section 4912 ▶ . . . . . ; section 4955 ▶ . . . . .		
<b>b</b> Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I . . . . .	<b>40b</b>	✓
<b>c</b> Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . . ▶ . . . . .		
<b>d</b> Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization . . . . . ▶ . . . . .		
<b>e</b> 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. . . . .	<b>40e</b>	✓
<b>41</b> List the states with which a copy of this return is filed. ▶ <b>CALIFORNIA</b>		
<b>42a</b> The organization's books are in care of ▶ <b>ALISSA CARLTON, CU SOCAL</b> Telephone no. ▶ <b>562-698-8326</b>		
Located at ▶ <b>500 POINT DRIVE, BUILDING 10, BREÁ, CA</b> ZIP + 4 ▶ <b>92821</b>		
<b>b</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)? . . . . .	<b>42b</b>	✓
If "Yes," enter the name of the foreign country: ▶ . . . . .		
See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts</b> .		
<b>c</b> At any time during the calendar year, did the organization maintain an office outside of the U S ? . . . . .	<b>42c</b>	✓
If "Yes," enter the name of the foreign country: ▶ . . . . .		
<b>43</b> Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041</b> —Check here . . . . . ▶ <input type="checkbox"/>		
and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . ▶ <b>43</b> . . . . .		
<b>44</b> Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .	<b>44</b>	✓
<b>45</b> 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 . . . . .	<b>45</b>	✓

**Part VI** **Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

	Yes	No
<b>46</b> 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 . . . . .	<b>46</b>	<input checked="" type="checkbox"/>
<b>47</b> Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II . . . . .	<b>47</b>	<input checked="" type="checkbox"/>
<b>48</b> Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .	<b>48</b>	<input checked="" type="checkbox"/>
<b>49a</b> Did the organization make any transfers to an exempt non-charitable related organization? . . . . .	<b>49a</b>	<input checked="" type="checkbox"/>
<b>b</b> If "Yes," was the related organization a section 527 organization? . . . . .	<b>49b</b>	<input checked="" type="checkbox"/>

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

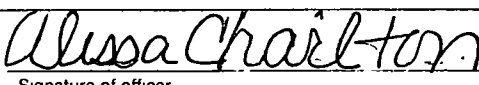
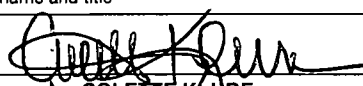
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances

**f** Total number of other employees paid over \$100,000 . . . . . ▶

**51** Complete this table for the organization's 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

**d** Total number of other independent contractors each receiving over \$100,000 . . . . . ▶

<b>Sign Here</b>	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.			
	 Signature of officer		Date <b>5-10-10</b>	
<b>Paid Preparer's Use Only</b>	 Preparer's signature		Date <b>5/10/10</b>	Check if self-employed <input type="checkbox"/>
	Firm's name (or yours if self-employed), address, and ZIP + 4 <b>COLETTE KURE</b> <b>8028 GREENLEAF AVE, WHITTIER, CA 90602</b>		Preparer's identifying number (See instructions) EIN ▶ Phone no ▶ <b>562-698-8326</b>	
	May the IRS discuss this return with the preparer shown above? See instructions . . . . . ▶ <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	Form 990-EZ (2009)			

Department of the Treasury  
Internal Revenue Service

**Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.**

**▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.**

OMB No. 1545-0047

2009

**Open to Public Inspection**

Name of the organization

**SOUTHERN CALIFORNIA HELPING HANDS**

Employer identification number

56 : 2401627

<b>Part I</b>	<b>Reason for Public Charity Status</b> (All organizations must complete this part.) See instructions.
---------------	--------------------------------------------------------------------------------------------------------

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 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).**
  - 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 33⅓ % 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 33⅓ % 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 Part III.)
  - 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
  - 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h
    - a ☐ Type I
    - b ☐ Type II
    - c ☐ Type III—Functionally integrated
    - d ☐ Type III—Other
  - e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
  - f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐
  - g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)	
(ii) A family member of a person described in (i) above?	11g(ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	
  - h Provide the following information about the supported organization(s).

[illegible]

**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) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") . . . . .	39409	23805	36058	68639	36005	203916
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .	0	0	0	0	0	0
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .	0	0	0	0	0	0
<b>4 Total.</b> Add lines 1 through 3 . . . . .	39409	23805	36058	68639	36005	203916
<b>5</b> 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) . . . . .						10000
<b>6 Public support.</b> Subtract line 5 from line 4 . . . . .						193916

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>7</b> Amounts from line 4 . . . . .	39409	23805	36058	68639	36005	203916
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .	0	0	0	252	203	455
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .	25514	25164	27962	0	0	78640
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) . . . . .						
<b>11 Total support.</b> Add lines 7 through 10 . . . . .						283011
<b>12</b> Gross receipts from related activities, etc. (see instructions) . . . . .					12	
<b>13 First five years.</b> 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 <b>stop here</b> . . . . . <input checked="" type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) . . . . .	<b>14</b>	.69 %
<b>15</b> Public support percentage from 2008 Schedule A, Part II, line 14 . . . . .	<b>15</b>	%
<b>16a 33⅓ % support test—2009.</b> If the organization did not check the box on line 13, and line 14 is 33⅓ % or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . <input type="checkbox"/>		
<b>b 33⅓ % support test—2008.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33⅓ % or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . <input type="checkbox"/>		
<b>17a 10%-facts-and-circumstances test—2009.</b> 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 <b>stop here.</b> 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>b 10%-facts-and-circumstances test—2008.</b> 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 <b>stop here.</b> 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>18 Private foundation.</b> 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"/>		

**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) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants") . . . . .						
<b>2</b> 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 . . . . .						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 . . . . .						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
<b>6 Total.</b> Add lines 1 through 5 . . . . .						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . . .						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year . . . . .						
<b>c</b> Add lines 7a and 7b . . . . .						
<b>8 Public support</b> (Subtract line 7c from line 6) . . . . .						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>9</b> Amounts from line 6 . . . . .						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . . .						
<b>c</b> Add lines 10a and 10b . . . . .						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on . . . . .						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) . . . . .						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12) . . . . .						
<b>14 First five years.</b> 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 <b>stop here</b> . . . . . <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) . . . . .	<b>15</b>	%
<b>16</b> Public support percentage from 2008 Schedule A, Part III, line 15 . . . . .	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) . . . . .	<b>17</b>	%
<b>18</b> Investment income percentage from 2008 Schedule A, Part III, line 17 . . . . .	<b>18</b>	%

- 19a 33⅓ % support tests—2009.** If the organization did not check the box on line 14, and line 15 is more than 33⅓ %, and line 17 is not more than 33⅓ %, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐
- b 33⅓ % support tests—2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33⅓ %, and line 18 is not more than 33⅓ %, 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 ► ☐

**Part IV** **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

Area for supplemental information with horizontal dashed lines.

# 2009 Family Address List

Group	Last Name	Street Address	City	Zip	Language
1	Sanson Family	11016 W. Hondo Pkwy. #2	Temple City	91780	\$ 300.00
2	Gamez Family	18206 Lanaca St.	La Puente	91744	\$350.00
3	Martinez	11324 Orchard St.	El Monte	91731	\$250.00
4	uerta/Robledo Fam	442 Alderton Ave.	La Puente	91744	\$350.00
5	Ybarra Family	10509 Hickson St.	El Monte	91701	\$200.00
		1600 W. Commonwealth Ave. #D	Alhambra	90801	
6	Gurrola Family	628 Big Dalton Way	La Puente	91746	\$250.00
7	Mora Family	11029 Reichling Lane	Whittier	90606	\$300.00
8	Guzman Family	152174 Homeward St.	La Puente	91744	\$250.00
9	Montenegro Family	6030 Rockne Ave.	Whittier	90606	\$350.00
10	Fernandez Family	2663 Santa Anita Ave.	El Monte	91733	\$300.00
11	Marquez Family	15240 Barrydale	La Puente	91744	\$300.00
12	Rivera Family	11120 Chadsey Dr.	Whittier	90604	\$200.00
13	Javana Family	7350 Valley View Ave. #E	Whittier	90602	\$300.00
14	Pimentel Family	5237 Buffington Dr	El Monte	91732	\$250.00
15	Hernandez Family	9427 Rush St. Spc #27	S. El Monte	91733	\$200.00
16	Amaya Family	9540 Garvey Ave.	El Monte	91733	\$300.00
17	Castro Family	9114 Bright Ave.	Whittier	90602	\$250.00
18	Murillo Family	2420 1/2 Portero Ave.	El Monte	91731	\$200.00
19	Chino Family	10037 Garvey Ave. #47	El Monte	91732	\$250.00
20	orres/Mendoza Fam	12575 Adler Dr. #7	Whittier	90606	\$200.00
21	Garcia Family	11518 Colima Rd. , Apt. 16	Whittier	92604	\$150.00
22	nales/Sanchez Fam	2438 Falling Leaf Rd.	Rosemead	91770	\$150.00
					\$5,650.00

Family Name	Address	City	State	Zip	# of Ppl.	
101 Alcazar/Torres Family	14332 Homeward St.	El Monte	CA	91744	5	100
35 Alvarez/Teloxa Family	3938 Gilman Rd. #111	El Monte	CA	91733	4	100
39 Alvarez/Tepetate Family	3424 Maxson Rd.	El Monte	CA	91732	4	100
58 Angel Family	12412 Schmidt Rd.	El Monte	CA	91732	5	100
1 Anguiano Family	2331 Valwood Ave.	El Monte	CA	91732	5	100
12 Bahena/Ramirez Family	10425 Garvey Ave. #B	El Monte	CA	91733	6	100
40 Batres Family	2818 Durfee Ave. #16	El Monte	CA	91732	4	100
70 Caceres Family	12348 Elliott Ave.	El Monte	CA	91732	3	50
66 Carreto Family	3152 1/2 Havenpark Ave.	El Monte	CA	91733	5	100
26 Casarez Family	12700 Elliott Sp. 68	El Monte	CA	91732	5	100
80 Coria Family	12700 Elliott Ave. Sp # 214	El Monte	CA	91732	4	100
33 Delgado Family	10115 Bodger St.	El Monte	CA	91733	4	100
60 Flores Family	2653 Parkway Dr.	El Monte	CA	91732	5	100
32 Garcia Family	3114 Santa Anita Ave. #A	El Monte	CA	91733	4	100
65 German Family	2408 Strozier Ave.	El Monte	CA	91733	5	100
31 Giron Family	2673 Santa Anita Ave.	El Monte	CA	91733	3	50
36 Guerrero Family	3445 Gilman Rd.	El Monte	CA	91732	3	50
17 Guzman Family	2705 1/2 Cogswell Rd.	El Monte	CA	91732	6	100
34 Hernandez Family	9929 Rio Hondo Pkwy. #B	El Monte	CA	91733	3	50
73 Hernandez Family	2221 Bunker Ave.	El Monte	CA	91732	4	100
13 Landa Family	2310 Valwood Ave.	El Monte	CA	91732	7	125
79 Lima Family	2542 Edwards Ave. #13	El Monte	CA	91733	3	50
27 Louie Family	2500 Edwards Ave. #C7	El Monte	CA	91733	2	50
28 Martinez Family	10425 Garvey Ave. #B	El Monte	CA	91733	4	100
72 Monzo Family	12427 Felipe St.	El Monte	CA	91732	3	50
107 Mora Family	12700 Elliott Ave. #486	El Monte	CA	91732	2	50
81 Morales Family	2314 Bunker Ave.	El Monte	CA	91732	4	100
55 Ortega Family	11711 Hallwood Dr.	El Monte	CA	91732	5	100
82 Paneda Family	3800 Winston Dr.	El Monte	CA	91732	4	100
83 Payan Family	4417 Cedar Ave.	El Monte	CA	91732	4	100
85 Raguex Family	11690 Ramona Blvd. #31	El Monte	CA	91732	4	100
86 Reyes Family	10107 Garvey Ave. #16	El Monte	CA	91733	5	100
56 Robles Family	12061 Hallwood Dr.	El Monte	CA	91732	5	100
88 Rodriguez Family	2734 Penn Mar	El Monte	CA	91732	2	50
78 Sanchez Family	10621 1/2 Garvey Ave. #4	El Monte	CA	91733	4	100
25 Sandoval Family	10343 Bodger St.	El Monte	CA	91733	5	100
68 Silva Family	12332 Ferris Rd.	El Monte	CA	91732	5	100
59 Teutla Family	12700 Elliott Ave. SP. # 478	El Monte	CA	91732	5	100
84 Treto/Nunez Family	11736 Roseglen St.	El Monte	CA	91732	3	50
29 Villatoro Family	10107 Garvey Ave. #31	El Monte	CA	91733	4	100

Van Wig Elementary

Attn: Violet Esparza

Family of Daniel/Brianna Mendoza

need in

20 Castillo Family

16019 Folger St.

Hacienda Height CA

91745

7 125

3 Batres Family	542 Trier Ave.	La Puente	CA	91744	6	100
69 Beas Family	930 N. Unruh #68	La Puente	CA	91744	5	100
4 Bustamonte Family	609 Sandyhook Ave.	La Puente	CA	91744	6	100
43 Carbajal Family	13815 Cagliero St.	La Puente	CA	91744	3	50
104 Corona Family	424 Workman Mill Rd.	La Puente	CA	91746	6	100
16 Cruz Family	421 S. Winton Ave.	La Puente	CA	91744	6	100
93 Cuevas Family	843 Dade	La Puente	CA	91744	5	100
2 DeLaTorre Family	1136 Broadmoor Ave.	La Puente	CA	91744	7	125
47 Flores/Solis Family	15856 Cadwell St.	La Puente	CA	91744	3	50
24 Garcia Family	15745 Francisquito Ave. #J-7	La Puente	CA	91744	5	100
22 Gay Family	770 Nantes Ave.	La Puente	CA	91744	6	100
45 Gonzalez Family	633 Millbury	La Puente	CA	91744	3	50
37 Hernandez Family	909 Stichman	La Puente	CA	91746	3	50
96 Hernandez Family	738 Aldgate Ave.	La Puente	CA	91744	4	100
102 Huerta Family	226 Clogsdon Dr.	La Puente	CA	91746	4	100
48 Lopez Family	1090 DelValle Ave.	La Puente	CA	91744	4	100
52 Lopez Family	823 Melham Ave.	La Puente	CA	91744	4	100
97 Macias Family	14570 Flanner St.	La Puente	CA	91744	4	100
54 Moran Family	903 Sandyhook	La Puente	CA	91744	5	100
6 Muniz Family	768 N. Nantes	La Puente	CA	91744	6	100
94 Murillo Family	17512 Calcutta St.	La Puente	CA	91744	4	100
95 Pedraza Family	827 Melham Ave.	La Puente	CA	91744	4	100
5 Pina Family	621 Duff Ave.	La Puente	CA	91744	8	125
100 Quinones Family	208 N. Third St.	La Puente	CA	91744	4	100
74 Ramos Family	15208 Flynn St.	La Puente	CA	91744	3	50
11 Reyes Family	14403 Homeward St.	La Puente	CA	91744	7	125
103 Rodriguez Family	209 Orange Blossom	La Puente	CA	91746	4	100
105 Rodriguez Family	13941 Lomita Ave.	La Puente	CA	91746	6	100
106 Sierra Family	258 Santa Mariana Ave.	La Puente	CA	91746	4	100
46 Spriggs Family	694 Unruh Ave.	La Puente	CA	91744	3	50
50 Sutton-Gaye Family	770 N. Nantes Ave.	La Puente	CA	91744	2	50
44 Vargas Family	1003 Big Dalton	La Puente	CA	91744	2	50
49 Vera Family	808 Duff Ave.	La Puente	CA	91744	4	100

61 Armentan Family	10735 S. Eastman Ave. #206	Los Angeles	CA	90023	5	100
--------------------	----------------------------	-------------	----	-------	---	-----

30 Veiga/Rasso Family	4334 Sandoval Ave.	Pico Rivera	CA	90660	2	50
10 Mendoza/Martinez Family	9423 Good Bee St.	Pico Rivera	CA	90660	6	100
71 Perez Family	8202 Rosemead #1	Pico Rivera	CA	90660	5	100
99 Valles Family	9050 Carron Dr. #174	Pico Rivera	CA	90660	4	100
23 Parada Family	5430 Rosemead #12A	Pico Rivera	CA	90660	7	125

8 Offield Family	1060 E. Mission Ave.	Pomona	CA	91769	5	100
87 Rosas Family	5201 Tyler Ave. #1	Temple City	CA	91780	2	50
64 Argomariz Family	6111 Norwalk #8	Whittier	CA	90606	5	100
98 Bugarin Family	10117 Gunn Ave. #E3	Whittier	CA	90605	4	100
9 Corona Family	10002 Lanett Ave.	Whittier	CA	90605	6	100
14 Diaz Family	13121 Foxley Dr.	Whittier	CA	90602	7	125
77 Durfey Family	8930 Painter Ave. #111	Whittier	CA	90604	4	100
57 Espinosa/Zamora Family	10800 Laurel Ave. #G32	Whittier	CA	90605	5	100
7 Fleming Family	6121 Norwalk #10	Whittier	CA	90606	6	100
38 Gonzalez/Ayala Family	14865 Mulberry Dr. #1107	Whittier	CA	90604	2	50
21 Hernandez Family	12612 1/2 Shreve Rd.	Whittier	CA	90602	6	100
53 Hernandez Family	8409 Painter Ave.	Whittier	CA	90602	5	100
76 Hernandez/Millan Family	8632 Greenleaf Ave.	Whittier	CA	90602	4	100
62 Jaimes Family	12807 Shreve Rd.	Whittier	CA	90602	5	100
67 Lara Family	9804 Maryknoll Ave.	Whittier	CA	90605	5	100
90 Lugo Family	14420 La Cuarta	Whittier	CA	90602	3	50
51 Majd Family	11827 Beverly Blvd. #9	Whittier	CA	90601	5	100
63 Manriquez/Zacarias Family	10418 Ceres Ave.	Whittier	CA	90604	4	100
19 Mendoza/Jaimes Family	12807 Shreve Rd.	Whittier	CA	90602	6	100
15 Mora Family	15852 Whittier Blvd.	Whittier	CA	90603	6	100
92 Pavon Family	13024 Shreve Rd.	Whittier	CA	90602	4	100
18 Rascon/Gutierrez Family	12560 Persing Dr.	Whittier	CA	90606	6	100
42 Reyes Family	13517 Virginia	Whittier	CA	90605	2	50
91 Romero Family	6536 Hill Ave.	Whittier	CA	90601	2	50
89 Sills/Hoover Family	13526 Dunton Dr.	Whittier	CA	90605	2	50
75 Velasquez Family	13012 1/2 Shreve Rd.	Whittier	CA	90602	4	100
41 Villagomez Family	12622 Danbrook Dr.	Whittier	CA	90602	3	50
						9475

Family Name	Address	City	State	Zip	# of Ppl.
78 Family of Miguel Mijares	5025 Buffington Rd.	El Monte	CA	91732	6 100
35 Family of Jaquin Dorado	5025 Buffington Rd.	El Monte	CA	91732	5 100
56 Family of Diana Lopez	5025 Buffington Rd.	El Monte	CA	91732	4 100
32 Family of Jaden Stinson	3400 N. California	El Monte	CA	91731	5 100
40 Family of Jesus Mendoza	3400 N. California	El Monte	CA	91731	5 100
20 Family of Daniel Gonzalez	3400 N. California	El Monte	CA	91731	2 50
74 Family of Luci Hidalgo Campos	3111 N. Potrero Ave.	El Monte	CA	91733	6 100
46 Family of Javier Ibarra	3111 N. Potrero Ave.	El Monte	CA	91733	5 100
25 Family of Stephanie Vega	3111 N. Potrero Ave.	El Monte	CA	91733	4 100
28 Family of Alexia Sebastian-Juan	3111 N. Potrero Ave.	El Monte	CA	91733	4 100
10 Family of Jose Martinez Jr.	3111 N. Potrero Ave.	El Monte	CA	91733	4 100
75 Family of Esmeralda Mondragon	3111 N. Potrero Ave.	El Monte	CA	91733	6 100
29 Family of Jonathan Cantoran	3111 N. Potrero Ave.	El Monte	CA	91733	4 100
68 Family of Lizbeth Ciranda	3111 N. Potrero Ave.	El Monte	CA	91733	4 100
77 Family of Richard Chavez-Martinez	3111 N. Potrero Ave.	El Monte	CA	91733	8 125
76 Family of Isabella Barajas	3111 N. Potrero Ave.	El Monte	CA	91733	6 100
66 Family of Alexis Prado	3111 N. Potrero Ave.	El Monte	CA	91733	3 50
73 Family of Angel Martinez					7 125
81 Family of Elizabeth Garcia					6 100
47 Family of Diego Nolasco-Ramos					5 100
55 Family of Johnny Martinez-Velasco					3 50
79 Family of Paola Tapia					6 100
45 Family of Martin Garzon	11121 Bryant Rd.	El Monte	CA	91731	5 100

18 Family of Ricardo Garcia	10900 Mulhall St.	El Monte	CA	91731	3	50
17 Family of Samantha Lira	10900 Mulhall St.	El Monte	CA	91731	3	50
14 Family of Matthew Gomez	10900 Mulhall St.	El Monte	CA	91731	3	50
16 Family of Ramon Ferrer	10900 Mulhall St.	El Monte	CA	91731	3	50
12 Family of Jonathan Sanchez	10900 Mulhall St.	El Monte	CA	91731	4	100
26 Family of Giovani Acevedo	10900 Mulhall St.	El Monte	CA	91731	3	50
65 Family of Ariel Marquez	10900 Mulhall St.	El Monte	CA	91731	3	50
34 Family of Cynthia Lopez	10900 Mulhall St.	El Monte	CA	91731	5	100
38 Family of Jasmine Trinidad	10900 Mulhall St.	El Monte	CA	91731	5	100
7 Family of Andrew Silva	10900 Mulhall St.	El Monte	CA	91731	4	100
8 Family of Sebastian Mejia	10900 Mulhall St.	El Monte	CA	91731	4	100
37 Family of Evelin Diaz	10900 Mulhall St.	El Monte	CA	91731	5	100
11 Family of Gerhard Lopez	10900 Mulhall St.	El Monte	CA	91731	4	100

36 Family of Osvaldo Hernandez	10410 E. Bodger St.	El Monte	CA	91733	4	100
9 Family of Jocelyn Rodriguez	10410 E. Bodger St.	El Monte	CA	91733	4	100
24 Family of Andre Inostros	10410 E. Bodger St.	El Monte	CA	91733	4	100
62 Family of Omar Hernandez	10410 E. Bodger St.	El Monte	CA	91733	5	100
19 Family of Hang Tu	10410 E. Bodger St.	El Monte	CA	91733	3	50
48 Family of Delilah Ly	10410 E. Bodger St.	El Monte	CA	91733	5	100

63

23 Family of Juan Delgado	10410 E. Bodger St.	El Monte	CA	91733	4	100
---------------------------	---------------------	----------	----	-------	---	-----

64

22 Family of Karina Rodriguez	10410 E. Bodger St.	El Monte	CA	91733	3	50
72 Family of Kimberly Villanueva	10410 E. Bodger St.	El Monte	CA	91733	7	125
33 Family of Diego Reyes	10410 E. Bodger St.	El Monte	CA	91733	5	100
4 Family of Francisco Fortoso	10410 E. Bodger St.	El Monte	CA	91733	4	100
61 Family of Simon Favela	10410 E. Bodger St.	El Monte	CA	91733	4	100
69 Family of Damian Galvan	10410 E. Bodger St.	El Monte	CA	91733	4	100
70 Family of Jenna York	10410 E. Bodger St.	El Monte	CA	91733	4	100
49 Family of Alexander Rojas	10410 E. Bodger St.	El Monte	CA	91733	5	100
50 Family of Yaremi Lopez	10410 E. Bodger St.	El Monte	CA	91733	5	100

3 Family of Teresa De Jesus Delgado	10410 E. Bodger St.	El Monte	CA	91733	4	100
41 Family of Ashley Paredes	2611 N. Potrero Ave.	El Monte	CA	91733	5	100
2 Family of Alexander Garcia	2611 N. Potrero Ave.	El Monte	CA	91733	4	100
80 Family of Willian Valdin	11425 Wildflower Rd.	Arcadia	CA	91006	6	100
51 Family of Jose Luis Becerra	11425 Wildflower Rd.	Arcadia	CA	91006	4	100
57 Family of Daisy Esparza	11425 Wildflower Rd.	Arcadia	CA	91006	4	100
71 Family of Alexandra Calixto	11425 Wildflower Rd.	Arcadia	CA	91006	4	100
58 Family of Ismael Pineda	11425 Wildflower Rd.	Arcadia	CA	91006	2	50
30 Family of Giovanni Zamora	11425 Wildflower Rd.	Arcadia	CA	91006	5	100
15 Family of Genesabeth Gutierrez	11425 Wildflower Rd.	Arcadia	CA	91006	3	50
52 Family of Evelyn Serna	11425 Wildflower Rd.	Arcadia	CA	91006	4	100
54 Family of Ramos Perla	4020 N. Gibson Rd.	El Monte	CA	91731	4	100
59 Family of Anthony Guerrero	4020 N. Gibson Rd.	El Monte	CA	91731	4	100
53 Family of William Zuniga Villalobos	4020 N. Gibson Rd.	El Monte	CA	91731	3	50
60 Family of Nancy Mariela Perez	4020 N. Gibson Rd.	El Monte	CA	91731	3	50
39 Family of Lucia Huerta	4020 N. Gibson Rd.	El Monte	CA	91731	5	100
44 Family of Anthony Alvarez	4020 N. Gibson Rd.	El Monte	CA	91731	5	100
82 Family of Noe Mondragon	4020 N. Gibson Rd.	El Monte	CA	91731	6	100
21 Family of Syarra Nava	4020 N. Gibson Rd.	El Monte	CA	91731	3	50
42 Family of Christopher Vasquez	4020 N. Gibson Rd.	El Monte	CA	91731	5	100
43 Family of Alexandra Lopez	4020 N. Gibson Rd.	El Monte	CA	91731	5	100
1 Family of Maite Santiago	4020 N. Gibson Rd.	El Monte	CA	91731	4	100
6 Family of Miguel Lopez	4020 N. Gibson Rd.	El Monte	CA	91731	4	100
Family of Michelle Perez-Rodriguez	4020 N. Gibson Rd.	El Monte	CA	91733	4	100
31 Family of Genesis Rodriguez	4020 N. Gibson Rd.	El Monte	CA	91731	4	100
Family of Christian Jimenez-Rodriguez	4020 N. Gibson Rd.	El Monte	CA	91731	4	100

5	Family of Alma Molina	12233 Star St.	El Monte	CA	91732	4	100	
13	Family of Jennifer Rodriguez	12233 Star St.	El Monte	CA	91732	4	100	
67	Family of Sofia Garcia	12233 Star St.	El Monte	CA	91732	4	100	16

7375

2	50
3	50
4	100
5	100
6	100
7	125

American Cancer Society	\$	7,941.00
Heart of Compassion	\$	6,500.00
Anna Blanco	\$	700.00
Junior Statesman Foundation	\$	250.00
Viviana Trejo	\$	1,000.00
Children's Miricle Network	\$	300.00
Irma Arellano's	\$	250.00
National Credit Union Foundation	\$	630.00
Ortega Family Fund	\$	1,000.00
Hacienda/La Puente School District	\$	1,779.00
Dena Mohr	\$	2,000.00
Mary DeLaTorre	\$	600.00
Southgate Police Officer's Assoc	\$	100.00
	\$	23,050.00