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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)

OMB No 1545-0047 2009

Department of the Treasury

SCANNED JUN CE 2016

n to Public Inspection

Inter		enue Service The organization may have to use a copy of this return to satisfy state report			Орс	TO Public III	spection				
	For the 2009 calendar year, or tax year beginning 7/01 , 2009, and ending 6/30 , 2010 Check if applicable C D Employer Identification Number										
В	Check I	f applicable Please use C			-						
	∐ Ad	dress change		55-	0874	759					
	Na	me change or print 825 N. BROADWAY		E Teleph	one num	ber					
	Ini	specific SANTA ANA, CA 92701		(71	4) 5	58-2787					
	Пте	rmination tions.									
	∏ _{A⊓}	nended return		G Gross	receipts	s 4.214	,120.				
		plication pending F Name and address of principal officer	H(a) Is this								
	ш.,		H(b) Are all			Yes	F==				
$\overline{}$	Tax	-exempt status X 501(c) (3)	If 'No,'	attach a list	(see ins	structions)					
j			H(c) Group	evemption o	umbar Þ	•					
ĸ		of organization X Corporation Trust Association Other ► L Year of Format				legal domicile Ca	Δ				
	ırt I	Summary	1011 200	<u> </u>	State or	legar domiche Ca	· · · · · · · · · · · · · · · · · · ·				
1 0		Briefly describe the organization's mission or most significant activities OCEAA IS	Δ PIIR	LTC CH	IAPTE	TOUCHOO S					
_		SERVING APPROXIMATELY 500 STUDENTS IN GRADES K-8. ITS									
ဦ		LEARNERS TO BECOME CREATIVE, CRITICAL THINKERS BY PROV					4				
E E		STANDARDS-BASED INSTRUCTION THROUGH THE ARTS, TECHNOLO									
×		Check this box ► I if the organization discontinued its operations or disposed of mo									
ŏ		Number of voting members of the governing body (Part VI, line 1a)			3		7				
φ 9		Number of independent voting members of the governing body (Part VI, line 1b)			4		7				
ıţi.	5	Total number of employees (Part V, line 2a)			5		95				
Activities & Governance		Total number of volunteers (estimate if necessary)			6		755				
⋖		Total gross unrelated business revenue from Part VIII, column (C), line 12			7 a		0.				
	b	Net unrelated business taxable income from Form 990-T, line 34	1		7b		0.				
				rior Year		Current \					
•		Contributions and grants (Part VIII, line 1h)	4	,860,8	854.		<u>,866.</u>				
Ę	1	Program service revenue (Part VIII, line 2g)		226,			<u>, 234.</u>				
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		17,	610.	11	<u>,020.</u>				
	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u> </u>	105	401	4 01 4	100				
		Total revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1 5	,105,	401.	4,214	,120.				
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)									
	1	Benefits paid to or for members (Part IX, column (A), line 4)		CE1 1	222	2 011	470				
S	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		,651,3	322.	2,911	,478.				
Expenses	16 a	Professional fundraising fees (Part IX, column (A), line 1:1e)									
×	ь	Total fundraising expenses (Part IX, column_(D), line-25) 3, 134.									
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f ₂ 24)	1	, 695, 2	259.	1,653	964.				
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	4	, 346, !	581.	4,565	,442.				
		Revenue less expenses Subtract line 18 from line 12		758,8		-351	,322.				
88		CODEN, UT	Regir	ning of	/ear	End of Y	ear				
a ga	20	Total assets (Part X, line 16)		,044,2		26,560					
\$6	21	Total liabilities (Part X, line 26)		132,		24,969					
Net Assets or Fund Balancos		Net assets or fund balances Subtract line 21 from line 20	1	,912,			,679.				
	rt II	Signature Block	<u> </u>	,,,,,,,	137.	1,350	,, 0, 5.				
<u> </u>				4- 4b- b4	-4 t						
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and stat true, correct, and complete Declaration of preparer John than officer) is based on all information of which preparer	rer has any	knowledge	UI INY KIII	owieuge and beller,	IL IS				
Sig	'n	In Linda, Not the	1.4	5-11-1	//						
He		Signature of officer .	Da	te							
	-	> Prinapal									
		Type or print name and title		-			-				
_		Date /	<u> </u>	neck if	Pi	reparer's identifying ee instructions)	number				
Pa	id	Aboth I lan Shal	SE		. □ ^{(s}	ee instructions)					
Pr		Preparer's signature ELEXABETH NIGRO, CPA	e	iipioyeu *	닠。	00222251					
pa	rer's	ATODA C NICOO DO			ΓĒ	0022231					
Us	e	yours if self-	 	N ► 3	20-04	36241					
Or	ıly	address, and	EI		10-	536241 1) 698-87	03				
NA-	46.4	<u> </u>	. I PI	none no	(33.	X Yes	No				
ıvıa'	v เกe I	RS discuss this return with the preparer shown above? (see instructions)				IN TES	INO				

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

			res	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	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	3		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		<u> </u>
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? If 'Yes,' complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		<u>X</u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		<u>X</u>
	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? If 'Yes,' complete Schedule D, Part IV	9		_X_
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? It 'Yes,' complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	Х	
•	Did the organization report an amount for land, buildings and equipment in Part X, line 10° If 'Yes,' complete Schedule D, Part VI			i
•	Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII			1
•	Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	;		
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX			1
	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X			
	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If 'Yes,' complete Schedule D, Part X			1
12	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12	Х	
12 <i>A</i>	AWas the organization included in consolidated, independent audited financial statement for the tax year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional Yes No 12 A X			1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	Х	
14 a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I	14b		<u>X</u>
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? If 'Yes,' complete Schedule F, Part II	15		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? If 'Yes,' complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		Х
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 17 If 'Yes,' complete Schedule I, Parts I and II	21		x
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		X
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		х
24 a	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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	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? If 'Yes,' complete Schedule L, Part I	25a		X
b	Is the organization 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	25b		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? If 'Yes,' complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		<u>x</u>
28	Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		_	
а	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
ib	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		х
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		<u>X</u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		_X_
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		<u>x</u>
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? If 'Yes,' complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34	Х	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		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? If 'Yes,' complete Schedule R, Part VI	37		<u>X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38		<u>x</u>
ВАА		Form	990	(2009)

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 17 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1 b Ω c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 10 X (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements, filed for the 95 calendar year ending with or within the year covered by this return 2b Х 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) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by 3a Х b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule Q 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a 4a Х financial account in a foreign country (such as a bank account, securities account, or other financial account) **b** 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. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Х 5b b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited 5c Tax Shelter Transaction? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization 6a Х solicit any contributions that were not tax deductible? b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible? 6b Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services 7 a Х provided to the payor? b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Х 7с 7 d d If 'Yes,' indicate the number of Forms 8282 filed during the year e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal X 7 e benefit contract? 7f X f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 a a For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7h h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business 8 holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. 9a a Did the organization make any taxable distributions under section 4966? 9b **b** Did the organization make any distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 10 a **b** Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter: 11 a a Gross income from other members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)

Form **990** (2009)

12a

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year

Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

_		J. See iristructi							
Sec	ction A. Governir	ng Body and M	lanagement				1		
_						_		Yes	No
	a Enter the number of	=		-		1a /			į
	b Enter the number of	•	•			1b 7			
	officer, director, trust	ee or key employe	ee?			elationship with any other · ·	2		<u>X</u>
3	Did the organization of officers, directors of	delegate control of or trustees, or key	ver management of employees to a m	duties customari nanagement con	ly performed by or a pany or other pers	under the direct supervision on?	3		<u>X</u>
4	· 3		ant changes to its	organizational d	ocuments		4		X
5	since the prior Form Did the organization		ring the year of a i	material diversio	n of the organizatio	on's assats?	5		Х
6				material diversio	ir or the organization	0113 033013	6		X
	a Does the organization			ther persons wh	n may elect one or	more members of the			
	governing body?						7a 7b		X
	b Are any decisions of			_			/ D		
8	Did the organization of the following	contemporaneous	ly document the m	neetings held or	written actions und	ertaken during the year by	_		
a	a The governing body?						8a	Х	
-	b Each committee with	•	J				8b	Ì	X
9	Is there any officer, organization's mailing	firector or trustee, g address? <i>If 'Yes</i>	or key employee ,' provide the nam	listed in Part VII nes and addresse	, Section A, who ca es in Schedule O	annot be reached at the	9		Х
Sec	ction B. Policies	(This Section	n B requests ın	nformation ab	out policies not	required by the Internal			
Reve	renue Code)								
								Yes	No
	a Does the organization	•	•				10 a		<u>X</u>
ŀ	b If 'Yes,' does the org and branches to ensu	anızatıon have wrı ure their operation	itten policies and p is are consistent w	procedures gove vith those of the	rning the activities organization?	of such chapters, affiliates,	10 b		
	Has the organization						11	Х	
11/	A Describe in Schedule	O the process, if	any, used by the	organization to r	eview this Form 99	O SEE SCHEDULE O			
	a Does the organization						12 a	Х	
ı	b Are officers, directors to conflicts?	s or trustees, and	key employees red	quired to disclos	e annually interests	s that could give rise	12b	х	
(c Does the organization Schedule O how this	n regularly and co is done SEI	nsistently monitor E SCHEDULE C	and enforce cor	npliance with the po	olicy? If 'Yes,' describe in	12 c	х	
13	Does the organization	n have a written w	histleblower policy	y?			13		_X
14	Does the organization	n have a written d	ocument retention	and destruction	policy?		14	X	
15	Did the process for d persons, comparabili	letermining compe tv data, and conte	ensation of the follo	owing persons instantiation of the	nclude a review and deliberation and de	l approval by independent ecision?			,
í	a The organization's Cl						15 a	Χ_	
	b Other officers of key						15 b	Χ	
	If 'Yes' to line 15a or	15b, describe the	process in Sched	dule O. (See inst	ructions)			- 1	•
16	a Did the organization entity during the year		te assets to, or pa	articipate in a joii	nt venture or simila	r arrangement with a taxable	16a		X
ı	b If 'Yes,' has the orga in joint venture arran status with respect to	igements under ap	oplicable federal ta	procedure requi ax law, and takei	ring the organization steps to safeguard	n to evaluate its participation d the organization's exempt	16b		1
Sec	ction C. Disclosu		iito '					1	
	List the states with w		s Form 990 is real	uired to be filed	► NONE	*·			
		s an organization	to make its Forms	s 1023 (or 1024 i		and 990-T (501(c)(3)s only) a	vaılabl	e for p	oublic
	Own website		se avallable. Chec 's website	X all that apply. X Upon req	uest				
19	Describe in Schedule statements available	O whether (and i	f so, how) the org	janization makes	its governing docu	ments, conflict of interest pol	ıcy, ar	nd fina	incial
	State the name, phys					books and records of the org $94-3050$	anızat	ion	
	- COMO 40400 DC	STUDD TUW			= 7.77	<u>-</u>			

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations's tax year. 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees
 See instructions for definition of 'key employees'
- 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 no	t compen	sate a	ny d	curre	ent d	officer	, dır	ector, or trustee		
(A)	(B)			(0	•			(D)	(E)	(F)
Name and Title	Average hours per week	ndividual trustee or director	Institutional trustee		Rey employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W 2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
JOSEPH MATTHEWS										
MEMBER	2	X						0.	0.	0.
JOHN STRAW MEMBER	2	x						0.	0.	0.
MICHELLE NAVARRO CHAIRPERSON	2			Х				0.	0.	0.
DR. ALFONSO BUSTAMANTE										
VICE CHAIR	2			Х			_	0.	0.	0.
DR. KIMBERLY BARRAZA-LYONS PRESIDENT	2			Х				0.	0.	0.
NORMAN ROGERS										
TREASURER	2			Х			ļ	0.	0.	0.
ROBERTA A. KRAUS SECRETARY	2			Х				0.	0.	0.
LINDA HARDAN-GREENE PRINCIPAL	40				х			108,869.	0.	8,645.
	10							100,003.	<u></u>	0,0101
	}									

rail vii Section A. Officers, Directors, Trus	iees, r	\ey			_	c 5,	alli			iibio			н.)
(A)	(B)	ĺ			c)			(D)	(E)			(F)	
Name and Title	Average hours							Reportable compensation from	Reportable compensation from	,		timated	201
	per week	일	Inst	Officer	Ę.	Highest compensate employee	Former	the organization (W 2/1099-MISC)	related organization (W-2/1099-MISC)	15	comp	nt of oth pensatio	
		le d	Institutional trustee	હ	Key employee	nest olove	mer	(M 5/1093-WI2C)	(W-2/1099-MISC)	1	orga	om the anization	
		ğ <u>a</u>	ona		흥		1					d related nization:	
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1 b Total							•	108,869.		<u>0. </u>		8,6	
2 Total number of individuals (including but not limite	d to tho	se li	stec	d abo	ove)) wh	o re	ceived more than	\$100,000 in repo	ortabl	e com	npensa	ation
from the organization 1													
										_		Yes	No
3 Did the organization list any former officer, director	or trust	00	kov	emr	alov	ee 1	or hi	ighest compensati	ed employee	1		ļ	
on line 1a? If 'Yes,' complete Schedule J for such it	ndıvıduz	i/	,	٠۴	J. U.J		· · · · ·	ignost componicat	od omployee	L	3		_X_
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater t	portable	e coi	mpe	nsa	tion	and	oth	er compensation	from				
the organization and related organizations greater t individual	han \$15	50,00	002	If 'Y	'es'	com	plet	e Schedule J for s	such		4		X_,
						•			•	ŀ	- -+		
5 Did any person listed on line 1a receive or accrue or rendered to the organization? If 'Yes,' complete Sc.	ompens	atio	n fro	om a	any	unre	elate	ed organization for	services		5	ł	$\tilde{\mathbf{X}}$
	reduie .	101	Suc	n pe	-130	'' '						ŀ	<u> </u>
Section B. Independent Contractors 1 Complete this table for your five highest compensal	ed inde	nen	dent	COL	ntra	ctors	tha	t received more t	han \$100 000 of				
compensation from the organization	eu mue	pen	uciii	COI	ILI CI	Ciors) (IIQ	Treceived more t					
(A)						-		(B)	\		(C	·\	
Name and business addres	s							Description of	of Services	Co	omper	rsatior	n
													
													
2. Total number of independent analysis of the last of	hui ==1	1,	+ ~ ~ ¹	to 41	200	ا ما د	- had	ahova) who *****	ad mara than				
2 Total number of independent contractors (including		umi	ıea	נט נר	1056	: 115(eu a	annae) with teceto	ed more than				
\$100,000 in compensation from the organization	U								I				

rai	(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
NTS	1 a Federated campaigns b Membership dues 1 b			revenue		512, 513, 0r 514
\$ §	c Fundraising events. 1c 21,6	535				
F A	d Related organizations 1d					
ਰੁੱ≦	e Government grants (contributions) 1e 4,020,	735				
S S		-				
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above 11 14,4	196.				
동의	g Noncash contribns included in lns 1a-1f. \$		4 056 066			
3 4	h Total. Add lines 1a-1f		4,056,866.			
Ž	Business Co	oae	70 740	70 740		-
Ę,	2a STUDENT CAFETERIA SALES		78,740. 63,916.	78,740. 63,916.		
8	b AFTER SCHOOL PROGRAM c STUDENT LEADERSHIP FEES		3,578.	3,578.		
Š	C 210DENT TEMPERSUIT LEES		3,316.	3,310.		
A SE						
Ž.	e					
8	f All other program service revenue g Total. Add lines 2a-2f	▶	146,234.			<u> </u>
-		-	140,234.			
	3 Investment income (including dividends, interest ar other similar amounts)	ıa ▶	11,020.			11,020.
	4 Income from investment of tax-exempt bond process	eds ►				, i
ł	5 Royalties	▶				
	(i) Real (ii) Perso	nal			· 	
	6a Gross Rents					'
	b Less ⁻ rental expenses					·
	c Rental income or (loss)		,			
	d Net rental income or (loss)		,	•		
	(4) 0	er				
	7a Gross amount from sales of assets other than inventory					,
	b Less: cost or other basis			•		
	and sales expenses					
	c Gain or (loss)			-	-	
	d Net gain or (loss)					
NOE	8a Gross income from fundraising events (not including \$ 12,330.					
OTHER REVEN	of contributions reported on line 1c)					
8	See Part IV, line 18					
풀	b Less direct expenses b		•	-		
ا	c Net income or (loss) from fundraising events	•			···	ļ
	9a Gross income from gaming activities See Part IV, line 19 a					
	b Less direct expenses b		_		_	
	c Net income or (loss) from gaming activities				_	
	10a 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 Business C	ode				-
			Ì	,		
	11a					
	~ 					<u> </u>
	d All other revenue					
	e Total. Add lines 11a-11d	▶				
	12 Total revenue. See instructions	•	4,214,120.	146,234.	0.	11,020.

Page 10

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).

	not include amounts reported on lines	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
1	Grants and other assistance to governments and organizations in the U.S. See Part IV,		expenses	general expenses	expenses
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
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	117,514.	0.	117,514.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages.	2,306,452.	1,954,532.	351,920.	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	188,580.	155,249.	33,331.	
9	Other employee benefits.	168,600.	134,880.	33,720.	
10	Payroll taxes	130,332.	104,272.	26,060.	
11	Fees for services (non-employees)	200/002.			
	Management				
) Legal	39,886.		39,886.	
	: Accounting	03/0001			
	Lobbying				
	Prof fundraising svcs See Part IV, In 17	- ***			
	Investment management fees				
	other	212,900.	147,643.	65,257.	
_	Advertising and promotion	222/3001	21,70101		····
13	Office expenses	26,671.	20,637.	6,034.	
14	Information technology	39,853.	35,901.	3,952.	· · · · · · · · · · · · · · · · · · ·
15	Royalties	37,000.	00/2021		
16	Occupancy	88,349.	70,964.	17,385.	*
17	Travel	00,019.	7073011	21/0001	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	86,404.	25,955.	60,449.	
20	Interest	2.	2.		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	861,606.	691,153.	170,453.	
23 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)	43,404.	34,723.	8,681.	
:	FOOD PRODUCTS	115,339.	115,339.		
	BOOKS & INSTRUCTIONAL SUPPLIES	58,985.	58,985.		
	NONCAPITALIZED EQUIPMENT	38,051.	31,759.	6,292.	
	d STUDENT EVENTS	24,657.	24,657.	-,	
	OTHER OPERATING EXPENSES	14,811.	8,126.	3,551.	3,134.
	f All other expenses	3,046.	647.	2,399.	
	Total functional expenses. Add lines 1 through 24f	4,565,442.	3,615,424.	946,884.	3,134.
	Joint costs. Check here ► 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				
BAA					Form 990 (2009)

Balance Sheet

Part X

(A) End of year Beginning of year 132,257. 1 Cash — non-interest-bearing 959,457 2 Savings and temporary cash investments 461,246. 3 493, 185. 3 Pledges and grants receivable, net Accounts receivable, net 912,323 4 514,045. Receivables from current and former officers, directors, trustees, key employees, 5 and highest compensated employees. Complete Part II of Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)) 6 and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment, cost or other basis 10a 26,546,780 Complete Part VI of Schedule D 122,471 24,909,700. **b** Less accumulated depreciation 10b 1,637,080 10 c 11 Investments - publicly-traded securities 11 12 Investments - other securities. See Part IV, line 11 12 13 13 Investments - program-related. See Part IV, line 11 14 14 Intangible assets 50,000. 50,000. 15 15 Other assets. See Part IV, line 11 16 Total assets Add lines 1 through 15 (must equal line 34) 2,044,251. 16 26,560,433. 132,112. 17 185,704 17 Accounts payable and accrued expenses 18 Grants payable 18 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 23 24 24 Unsecured notes and loans payable to unrelated third parties 24,784,050 Other liabilities Complete Part X of Schedule D 25 132,112 24,969,754 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117, check here ▶ |X| and complete lines 27 through 29 and lines 33 and 34. 1,912,139 1,590,679. 27 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 31 31 Paid-in or capital surplus, or land, building, and equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 32 1,912,139 33 1,590,679. 33 Total net assets or fund balances 2,044,251 34 26,560,433. Total liabilities and net assets/fund balances 34

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Form 990 (2009)

orm	990_	(2009) U.	RANGE (COUNTY	EDUCATION	VAL ARTS	ACADEMY		55-08/4/59	_	Pa	ige 12
Part	XI	Financi	ial State	ments a	and Reportir	ıg						
											Yes	No
1	Acco	unting metl	hod used t	o prepare	the Form 990	Cash	X Accrual	Other				
		e organizati chedule O	on change	d its metl	hod of accounti	ng from a pri	or year or check	ed 'Other,' explain				
2a	Were	the organi	zation's fir	nancial st	atements comp	olled or review	ved by an indepe	endent accountant?		2a		Х
b	Were	the organi	zation's fir	nancial st	atements audit	ed by an inde	ependent accoun	tant?		2b	X	
С	lf 'Ye revie	es' to line 2 w, or comp	a or 2b, do	es the or	rganization hav al statements a	e a committe and selection	e that assumes of an independe	responsibility for oversi nt accountant?	ght of the audit,	2 c	Х	
		e organizati chedule O	on change	d either i	ts oversight pro	cess or selec	ction process dur	ring the tax year, expla	ın			
		es' to line 2 olidated ba				cate whether	the financial stat	tements for the year we	ere issued on a			
	X	Separate	basis	Cons	solidated basis	Both	consolidated and	d separate basis				
3 a	As a Audi	result of a t Act and O	federal av	vard, was ar A-133?	the organization	on required to	undergo an aud	dit or audits as set forth	in the Single	3a		х

b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

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Form 990 (2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Employer identification number

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

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

ORA	ORANGE COUNTY EDUCATIONAL ARTS ACADEMY 55-0874759											
Part	Reason for Pu	blic Charity Statu	s (All organizations	must o	comple	te this	part.)	See i	nstruct	ions		
The c	organization is not a priv	vate foundation becau	ise it is (For lines 1 thro	ugh 11,	check o	nly one	box)					
1		on of churches or ass	ociation of churches desc	cribed in	section	170(b)	(1)(A)(i)					
2	X A school described	in section 170(b)(1)(/	A)(ii). (Attach Schedule I	Ξ)								
3	A hospital or coope	erative hospital service	e organization described	ın secti	on 170(l)(1)(A)(iii).					
4	A medical research	ı organızatıon operate	d in conjunction with a h	ospital o	describe	d in sec	tion 17	0(b)(1)(A	A)(iii) Er	iter the hos	spital's	,
_	name, city, and sta											
5	170(b)(1)(A)(iv). (C	Complete Part II)	of a college or university			-	_	nmenta	l unit de:	scribed in s	section	7
6			governmental unit descri									
7	in section 170(b)(1	(Complete P			_	vernme	ntai uni	t or fron	n the ger	neral public	: aescr	ribed
8			170(b)(1)(A)(vi). (Comple									
9	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 Part III.)											
10	An organization org	ganized and operated	exclusively to test for pu	iblic safe	ety See	section	509(a)	(4).				
11	An organization or	ganized and operated orted organizations o of supporting organiz	exclusively for the benet described in section 509(a zation and complete lines	fit of, to a)(1) or s 11e thi	perform section ough 11	the fun 509(a)(2 h	ctions (2) See	of, or ca section	rry out th 509(a)(3	ne purpose). Check t	s of or he box	ne or that
	a Type I	b Type II	c Type II.	l – Fund	tionally	ıntegrat	ed		d 🗌	Type III-	Other	
е	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	, , , ,	received a written det	termination from the IRS	that is a	Type I	Type II	or Typ	e III sup	porting	organizatio	n,	
g	Since August 17, 2	006, has the organiza	ition accepted any gift o	r contrib	ution fro	m any	of the f	ollowing	persons	?		
											Yes	No
	(i) a person who below, the go	directly or indirectly overning body of the s	controls, either alone or upported organization?	together	with pe	rsons d	escribe	d in (ii) a	and (III)	11 g (i)		
	(ii) a family mem	ber of a person desc	cribed in (i) above?							11 g (ii)		
	(iii) a 35% contro	lled entity of a persor	n described in (i) or (ii) a	bove?						11 g (iii)	<u> </u>	
h	Provide the following	ng information about t	the supported organization	ons								
	(I) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organizat	is the ion in cold in your irning ment?	the organ	ou notify ization in (i) of ipport?	organizat	s the ion in col zed in the S ?	(VII) Amour	ıt of Sup	port
				Yes	No	Yes	No	Yes	No			
				 				ļ				
			5	1	Ì			ĺ				
			<u> </u>	<u> </u>				<u> </u>	<u> </u>			
												
				ļ	ļ			ļ				
Total										••-		

Schedule A (Form 990 or 990-EZ) 2009

Private foundation. If the organization did not check a box on line, 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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 (a) 2005 (c) 2007 (d) 2008 (e) 2009 (f) Total **(b)** 2006 Calendar year (or fiscal yr beginning in) Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ') Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a 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 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, 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 amount on line 13 for the c Add lines 7a and 7b 8 Public support (Subtract line 7c from line 6) Section B. Total Support **(b)** 2006 (c) 2007 (d) 2008 **(e)** 2009 (f) Total Calendar year (or fiscal yr beginning in) ► (a) 2005 9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 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 inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (add ins 9, 10c, 11, and 12) 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 ▶ Section C. Computation of Public Support Percentage 15 % 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f). 16 Public support percentage from 2008 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage 17 % Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 18 % 18 Investment income percentage from 2008 Schedule A, Part III, line 17 19a 33-1/3 support tests - 2009. 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 - 2008. If the organization did not check a box on line 14 or 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 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions 20

Schedule A	(Form 990	or 990-EZ)) 2009 OF	CANGE COL	INTY EDUC	TAITONAL	ARIS ACAI	JEMI 55	1-08/4/59	Page 4
Part IV	Supplem Part II, III	ental Inf ne 17a o	ormation. r 17b; and	. Complete d Part III, I	this part I ine 12. Pro	to provide ovide any	the explana other additio	tions require nal informat	d by Part II, ion. See inst	line 10; ructions.
										
	. – – – –									
										
	-									
										

TEEA0404L 02/05/10

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Schedule A (Form 990 or 990-EZ) 2009

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions OMB No 1545-0047

Open to Public Inspection

ODANICE COLLATE AND ADDES ACADEMY

Employer Identification number

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. 1 Total number at end of year QoDonor advised funds QoDonor advised funds are five organization inform all donors and donor advisors in writing that the assets held in donor advised funds are five organization inform all grantees, donors, and donor advisors in writing that the assets held in donor advised funds are five organization inform all grantees, donors, and donor advisors in writing that the assets held in donor advised funds are five organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for chartisble purposes and not for the benefit of the donor or donor advisor or for any other purpose conferring impermissible private benefit? Part II Conservation Casements Complete if the organization answered 'Yes' to Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization answered 'Yes' to Form 990, Part IV, line 7. 1 Purpose(s) of conservation assements held by the organization of certified historic structure Preservation of conservation easements Qualified Qual	ORA	INGE COUNTY EDUCATIONAL ARTS A	CADEMY	55-0874759
(a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) 4 Aggregate grants from (during year) 5 Dot the organization inform all denors and donor advisors in writing that the essets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No Dot the organization from all grantees, denors, and donor advisors in writing that the essets held in donor advised funds are the organization may be used only for characteristic property, subject to the organization's exclusive legal control? Yes No No Port of the organization are writing that grant funds may be used only for characteristic property in the organization of donor advisor or for any other Yes No Port of the organization and the property of the organization of donor advisor or for any other Yes No Port of the organization and the organization and the organization of the donor or donor advisor or for any other Yes No Port of the organization and the organization of the organization held a qualified conservation organization of conservation easements included in (a) Advisor of the organization of the organization held and organization of the organ	Par		r Advised Funds or Other Similar Form 990, Part IV, line 6.	unds or Accounts Complete if
2 Aggregate contributions to (during year) 3 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? 6 Did the organization inform all granted controls, 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? 6 Did the organization inform all granted controls, and donor advisors in writing that grant funds may be some property and the property of the p			·	(b) Funds and other accounts
3 Aggregate grains 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? Yes No	1	Total number at end of 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? 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? 8 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) 9 Preservation of land for public use (e.g., recreation or pleasure) 9 Preservation of of an historically important land area 1 Preservation of open space 2 Complete lines 2 at through 2 dif the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year 2 Total number of conservation easements 3 Total number of conservation easements 4 Total arrange restricted by conservation easements 5 Total arrange restricted by conservation easements 6 Total arrange restricted by conservation easements 7 Total arrange restricted by conservation easements or a certified historic structure included in (a) 8 Number of conservation easements included in (c) acquired after 817/106 9 Number of states where property subject to conservation easement is located by a conservation easement in the conservation easements in conservation easement is located by ear 9 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easement in holds? 9 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements 1 Total (A) (B)(I) and 170(I)(A)(B)(B)(B) 9 In Part XIV, describe how the organization exper	2	Aggregate contributions to (during year)		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advissed funds are the organization's property, subject to the organization's exclusive legal control? 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes conferring impermissible private benefit? Part II Conservation Easements Complete if the organization answered 'Yes' to Form 990, Part IV, Inne 7. 1 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of land for public use (e.g., recreation or pleasure) Preservation of one space 2 Complete lines 2 a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the late year a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements on of conservation easements included in (c) acquired after 8/17/06 3 Number of conservation have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easement is located * 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easement is located * 5 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 9 In Part XIV, describe have the organization answered 'Yes' to Form '990, Part IV, line 8. 1 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	3	Aggregate grants from (during year)		
funds are the organization's property, subject to the organization's exclusive legal control? Obd the organization inform all grantees, choors, and donor advisors in writing that grant funds may be upropose conferring impermissible private benefit? Part Conservation Easements Complete if the organization answered 'Yes' to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization answered 'Yes' to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization check all that apply) Preservation of land for public use (e.g., recreation or pleasure)	4	Aggregate value at end of year		
used only for charitable purposes and not for the benefit of the donor or donor advisor or for any other purpose conferring impermissible private benefit? Part Conservation Easements Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply)	5	Did the organization inform all donors and dor funds are the organization's property, subject	nor advisors in writing that the assets held to the organization's exclusive legal contro	in donor advised Yes 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) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of open space Protection of natural habitat Preservation of open space Protection of public use (e.g., recreation or pleasure) Preservation of certified historic structure Preservation of open space Preservation of open space Preservation of open space Preservation of certified historic structure Preservation of open space Preservation of certified historic structure included in conservation easement on the last day of the lax year Preservation easements Preservation easement Preservation easement Preservation easement Preservation easement Preservation easement Preservation easement Preservation Pre	6	used only for charitable purposes and not for	the benefit of the donor or donor advisor or	r for any other
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Protection of natural habitat	·			on of an historically important land area
Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements middled in (c) acquired after 817/06 3 Number of conservation easements middled in (c) acquired after 817/06 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, handling of violations, and enforcement of the conservation easement it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(8)(i) and 170(h)(4)(B)(ii)? 9 In Part XIV, describe how the organization reports conservation easements that describes the organization's accounting for conservation easements. 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 thems b) 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 fi			· · · ·	• •
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the lax year a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 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, handling of violations, and enforcement of the conservation easement it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year \(^*\) 4 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year \(^*\) 9 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(i)(i)? 9 In Part XIV, describe how the organization reports conservation easements that describes the organization's accounting for conservation easements 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 foolnote to its financial statements that describes them furtherance of public service, provide, in Part XIV, the text of the foolnote to resonate the furtherance of public service, provide, the following amounts required to be reported under SFAS 116, to report in its revenue statement and balance sheet works of art, histo		\blacksquare		
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8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? 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. 1 a 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	6		ng, inspecting, and enforcing conservation	easements
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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		(i) Revenues included in Form 990, Part VIII	, line 1 .	▶ \$
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a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X \$ \bar{\sum_{\text{s}}}\$		amounts required to be reported under SFAS	116 relating to these items	ets for financial gain, provide the following
b Assets included in Form 990, Part X ►\$	á	Revenues included in Form 990, Part VIII, line	e 1	^ \$
	ŀ	Assets included in Form 990, Part X		- \$

Schedule D (Form 990) 2009 ORANG				55-087		Page 2
Part III Organizations Maintai	ning Collection	s of Art, Histor	ical Treasures, or	Other Similar Ass	ets (contin	ued)
3 Using the organization's acquisition items (check all that apply)	on accession and ot	her records, check	any of the following	that are a significant us	e of its collect	lion
a Public exhibition		d Loan or	exchange programs			
b Scholarly research		e 🗌 Other				
c Preservation for future generation	ations	_		-		
4 Provide a description of the organ Part XIV.	nization's collections	and explain how	they further the organ	ization's exempt purpo	se in	
5 During the year, did the organizar assets to be sold to raise funds r	ather than to be ma	ntained as part of	the organization's co	llection?	Yes	No
Part IV Escrow and Custodial 9, or reported an amount	Arrangements unt on Form 990	Complete if org , Part X, line 2	ganization answer 1.	ed 'Yes' to Form 9	90, Part IV,	line
1a Is the organization an agent, trus included on Form 990, Part X?	tee, custodian, or of	her intermediary fo	or contributions or oth	ner assets not	Yes	 □No
b If 'Yes,' explain the arrangement	in Part XIV and con	nplete the following	a table		ا ۲۰۰۰ ا	
					Amount	
c Beginning balance				1c		
d Additions during the year				1 d		
e Distributions during the year				1 e		
f Ending balance				1f		
2a Did the organization include an a	mount on Form 990	Part X June 212			Yes	No
b If 'Yes,' explain the arrangement		Tare X, Inic 21				
Part V Endowment Funds Cor		ation answered	1 'Yes' to Form 99	0 Part IV line 10		
Tare V Zinaowii one i anab con	(a) Current year	(b) Prior year	(c) Two years back	1	(e) Four yea	rs hack
1 a Beginning of year balance	(a) burrent year	(b) Thor year	(c) The years back	(a) Three years back	(c) rour year	13 back
b Contributions		 				
b Contributions		 			-	
c Net Investment earnings, gains, and losses					<u> </u>	
d Grants or scholarships						
Other expenditures for facilities and programs						
f Administrative expenses						· · · · · · · · · · · · · · · · · · ·
g End of year balance						1
2 Provide the estimated percentage	e of the year end ba	lance held as:				
a Board designated or quasi-endow	/ment ►	%				
b Permanent endowment ►	 %					
c Term endowment ►	%					
3a Are there endowment funds not a organization by	n the possession of	the organization th	nat are held and admi	nistered for the	Yes	No
(i) unrelated organizations					3a(i)	
(ii) related organizations					3a(ii)	1
b If 'Yes' to 3a(ıı), are the related of	rganizations listed a	s required on Sch	edule R?		3b	
4 Describe in Part XIV the intended	-	•				
Part VI Investments-Land, B				line 10.		
Description of investment	(a) Cos	st or other basis	(b) Cost or other basis (other)	(c) Accumulated Depreciation	(d) Book V	'alue
1a Land	,		4,220,131.	<u> </u>	4,220	,131.
b Buildings			21,252,978.	1,298,793.	19,954	
c Leasehold improvements		 	970,599.	268,725.		,874.
d Equipment		·	79,907.	62,072.		,835.
e Other			23,165.	7,490.		,675.
Total. Add lines 1a through 1e (Column	n (d) must equal Fo	rm 990 Part X col		,,150.	24,909	
RAA	. (a) must equal I of	550, 1 411 71, 601	(D), IIIC 10(C) X	School	lule D (Form 9	

TEEA3302L 02/02/10

Schedule D (Form 990) 2009 ORANGE COUNTY EDUC	CATIONAL ARTS A	CADEMY	55-08	74759 Page 3
Part VII Investments—Other Securities See Fo	orm 990, Part X, Iir	ne 12.	N/A	
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valua Cost or end-of-year man	ation rket value
Financial derivatives .				
Closely-held equity interests				
Other				
			-	
				-
Total. (Column (b) must equal Form 990 Part X, col (B) line 12.)				
Part VIII Investments-Program Related (See I	orm 990, Part X, I	ine 13)	N/A	
(a) Description of investment type	(b) Book value		(c) Method of valua	ation
			Cost or end-of-year mai	ket value
auri .				
				
			, , , , , , , , , , , , , , , , , , ,	
Total. (Column (b) must equal Form 990, Part X, Col (B) line 13)				
Part IX Other Assets (See Form 990, Part X,				· · · · · · · · · · · · · · · · · · ·
(a) De	scription			(b) Book value
				<u> </u>
				ļ <u>-</u>
			<u></u>	
· · · - · - · · · · · · · · · · · · · ·				
				
			··-	
Total. (Column (b) must equal Form 990, Part X, col (B), I		_	<u> </u>	
Part X Other Liabilities (See Form 990, Part		ī		
(a) Description of Liability	(b) Amount			
Federal Income Taxes				
CAPITAL FACILITY LEASE	24,784,05	50.		
				1
Total (Column (b) must equal Form 990, Part X, col (B) line 25)	24,784,05	50.		
2. FIN 48 Footnote In Part XIV, provide the text of the foot for uncertain tax positions under FIN 48	note to the organization	n's financial	statements that reports the	e organization's liability

Part XI	Reconciliation of Change in Net Assets from Form 990 to Financial Statements		
	l revenue (Form 990, Part VIII,column (A), line 12)		4,214,120.
	l expenses (Form 990, Part IX, column (A), line 25).	Ļ	4,565,442.
3 Exce	ess or (deficit) for the year. Subtract line 2 from line 1	· -	-351,322.
	unrealized gains (losses) on investments	-	.
	ated services and use of facilities	 -	
	stment expenses	F	20.062
	r period adjustments .	-	29,862.
	er (Describe in Part XIV) .	⊢	29,862.
	I adjustments (net) Add lines 4 through 8	<u> </u>	-321,460.
	Reconciliation of Revenue per Audited Financial Statements With Revenue per Reconciliation of Revenue per Audited Financial Statements With Revenue per Reconciliation of Revenue per Audited Financial Statements With Revenue per Reconciliation of Revenue per Audited Financial Statements With Revenue per Reconciliation of Revenue per Audited Financial Statements With Revenue per Reconciliation of Revenue per Audited Financial Statements With Revenue per Reconciliation of Reconciliati	turn	321,400.
	I revenue, gains, and other support per audited financial statements	1	4,214,120.
	nunts included on line 1 but not on Form 990, Part VIII, line 12:		1,221,2201
	unrealized gains on investments		
	ated services and use of facilities 2b	1	
	overies of prior year grants 2c	1	
	er (Describe in Part XIV)		
	lines 2a through 2d	2e	
3 Sub	tract line 2e from line 1	3	4,214,120.
4 Amo	ounts included on Form 990, Part VIII, line 12, but not on line 1.		
a Inve	stments expenses not included on Form 990, Part VIII, line 7b		
b Othe	er (Describe in Part XIV)]	
	lines 4a and 4b	4c	
	I revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	4,214,120.
	Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retur	
	l expenses and losses per audited financial statements	\vdash	4,565,442.
	ounts included on line 1 but not on Form 990, Part IX, line 25		
	ated services and use of facilities r year adjustments 2a 2b	1	
	, ,	1	
	er losses er (Describe in Part XIV) 2d	1	
	lines 2a through 2d	2e	
	tract line 2e from line 1	3	4,565,442.
	bunts included on Form 990, Part IX, line 25, but not on line 1:		, ,
	stments expenses not included on Form 990, Part VIII, line 7b		
	er (Describe in Part XIV)		
	lines 4a and 4b	4c	
5 Tota	Il expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18)	5	4,565,442.
Part XI	/ Supplemental Information		
Ine 4, Pa	rt X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this pa		ovide any additional
	TEEA3304L 02/02/10	Sched	ule D (Form 990) 2009

55-0874759

Page 4

Schedule D (Form 990) 2009 ORANGE COUNTY EDUCATIONAL ARTS ACADEMY

Schedule D	Form 990) 2009 ORANGE COUNTY EDUCATIONAL ARTS ACADEMY	33-06/4/39	_ Page 5
Part®XIV	Supplemental Information (continued)		
	· · · · · · · · · · · · · · · · · · ·	-	
	~		
			
	~~		
			_ _

SCHEDULE E (Form 990 or 990-EZ)

Schools

► Complete if the organization answered 'Yes' to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.
 ► Attach to Form 990 or Form 990-EZ.

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization
ORANGE COUNTY EDUCATIONAL ARTS ACADEMY

Employer identification number

55-0874759

			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	х	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	х	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it had no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If 'Yes,' please describe If 'No', please explain If you need more space, use Schedule O (Form 990)	3		х
	THE ORGANIZATION DOES NOT PUBLICIZE ITS RACIALLY NONDISCRIMINATORY POLICY THROUGH MEDIA; HOWEVER THE POLICY IS INCLUDED IN THE ORGANIZATION'S ARTICLES OF INCORPORATION.			
	Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	х	
	b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b		х
	c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c		
	d Copies of all material used by the organization or on its behalf to solicit contributions?	<u>4d</u>	Х	
5	If you answered 'No,' to any of the above, please explain If you need more space, use Schedule O (Form 990) THE ORGANIZATION IS A PUBLIC CHARTER SCHOOL WHICH OPERATES TUITION-FREE; THEREFORE, NO SCHOLARSHIPS OR GRANTS ARE AWARDED. Does the organization discriminate by race in any way with respect to			:
-		5 a		х
	a Students' rights or privileges?	Эа		^
	b Admissions policies?	5 b		Х
	c Employment of faculty or administrative staff?	5с	<u> </u>	Х
	d Scholarships or other financial assistance?	5 d		Х
	e Educational policies?	5 e		Х
	f Use of facilities?	5f		Х
	g Athletic programs?	5 g		X
	h Other extracurricular activities? If you answered 'Yes,' to any of the above, please explain. If you need more space, use Schedule O (Form 990).	5 h		Х
6	a Does the organization receive any financial aid or assistance from a governmental agency?	6a	-	<u> </u>
	b Has the organization's right to such aid ever been revoked or suspended?	6b	ļ	X
7	If you answered 'Yes,' to either line 6a or line 6b, please explain on Schedule O (Form 990) Does the organization certify that it has complied with the applicable requirements of sections			
,	4 01 through 4.05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If 'No,' explain on Schedule O (Form 990)	7	х	

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service	or if the organization Attach to Form	n990 or F	orm 990-E	Z. ► See separate inst	ructions.	Inspection
Name of the organization					Employer identific	ation number
ORANGE COUNTY EDUCATIONA	AL ARTS ACA	DEMY			55-087475	59
Part I Fundraising Activities. Com Form 990EZ filers are not re	plete if the orga	nization a	nswered '\ irt	Yes' to Form 990, Part I	V, line 17	
1 Indicate whether the organization	n raised funds th	rough any	of the foll	lowing activities Check	all that apply	
Mail solicitations				Solicitation of non-	government grants	
Internet and email solicitation	ns			Solicitation of gove		
Phone solicitations				X Special fundraising	events	
In-person solicitations 2 a Did the organization have writter employees listed in Form 990, P.	n or oral agreeme art VII) or entity	ent with ai	ny individu tion with p	ial (including officers, di professional fundraising	rectors, trustees or key services?	Yes X No
b If 'Yes,' list the ten highest paid compensated at least \$5,000 by	individuals or en	tities (fun				
					(v) Amount paid to	<u> </u>
(i) Name of individual or entity (fundraiser)	(ii) Activity	have custo	fundraiser dy or control ributions?	(iv) Gross receipts from activity	`(or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
			<u> </u>			
		-				
	-	 				
		1		· · · · · ·		
						,
		<u> </u>			-	
		1				
		+	 			
			1			
		J	<u>. I</u>			
Total			•			0.
3 List all states in which the organ	ization is registe	red or lice	nsed to so	olicit funds or has been	notified it is exempt fr	
or licensing						
			· -			
			. – – – -			
			. -			
			. -			

55	_∩	Q	7	1	7	5	a
	·	O	•	-	•	_ 3	7

Page 2

		reported more than \$15,000 on F	orm 990-EZ, line 6	a. List events with	gross receipts gre	ater than \$5,000.
			(a) Event #1 BOOK FAIR	(b) Event #2 RILEY'S FARM	(c) Other Events	(d) Total Events (Add col. (a) through col (c))
E			(event type)	(event type)	(total number)	· ` ` ` · · · · · · · · · · · · · · · ·
EE>WZD	1	Gross receipts	6,480.	5,850.		12,330.
E	2	Less: Charitable contributions	6,480.	5,850.		12,330.
	3	Gross income (line 1 minus line 2)			• · · · · · · · · · · · · · · · · · · ·	
	4	Cash prizes				
D	5	Noncash prizes				
DIRECT	6	Rent/facility costs			·····	
	7	Food and beverages .				
EXPENSES		Entertainment				
S E S	9	Other direct expenses			<u>.</u>	
	10 11	Direct expense summary. Add lines 4- the Net income summary. Combine lines 3, of			•	
Par	t III	Gaming. Complete if the organization	ation answered 'Ye	s' to Form 990, Pai	rt IV, line 19, or re	ported more than
		\$15,000 on Form 990-EZ, line 6a	·			
REVENUE			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
Ŋ						
E	1	Gross revenue				
D X	2	Cash prizes				
DIRECT	3	Non-cash prizes				
S	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes%	Yes%	Yes%	
	7	Direct expense summary Add lines 2 thr	ough 5 in column (d)		•	
	8	Net gaming income summary Combine	lines 1, column (d) and	line 7		
						YES NO
9		er the state(s) in which the organization of the organization licensed to operate gaming				_{9a}
		lo, explain	g delivities in eden or a	1000 010100		
		re any of the organization's gaming license (es,' explain	es revoked, suspended	or terminated during th	e tax year?	10a
'	י ווע	ies, explain				
11	 Dos	es the organization operate gaming activiti	es with nonmembers?			
12		he organization operate gaining activition has observed as the organization of the organization of the organization of the organization operate gaining activities of the organization operate gain		ember of a partnership	or other entity formed	
	adn	ninister charitable gaming/				12

Schedule G (Form 990 or 990-EZ) 2009 ORANGE COUNTY ED	OUCATIONAL ARTS	ACADEMY 55-08/47	59	Р	age 3
,				YES	NO
13 Indicate the percentage of gaming activity operated in					
a The organization's facility	•	13a %	_		
b An outside facility		13b %			
14 Enter the name and address of the person who prepares the	organization's gaming	/special events books and records			
Name. ►		. 			
Address -					
15a Does the organization have a contact with a third party from b If 'Yes,' enter the amount of gaming revenue received by the	_		15 a		·
of gaming revenue retained by the third party \$					
c If 'Yes,' enter name and address of the third party					
Name •					
Address -					
16 Gaming manager information					
Name •					
Gaming manager compensation ► \$,
Description of services provided ►			-		1
Director/officer Employee	Independent c	contractor			
17 Mandatory distributions					
a Is the organization required under state law to make charital state gaming license?	ole distributions from th	ne gaming proceeds to retain the	17a		
b Enter the amount of distributions required under state law to		exempt organizations or spent in the	пе		:
organization's own exempt activities during the tax year		Schedule G (Form 9	100 or 00	L = 2\	2000
BAA	EA3703L 02/05/10	Schedule G (FOITH	ישט טו שני	/U-LZ)	, 2003

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2009

Department of the Treasury Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

► Attach to Form 990.

Open to Public Inspection

Name of the organization ORANGE COUNTY EDUCATIONAL ARTS ACADEMY	Employer identification number 55-0874759
FORM 990, PART VI. LINE 11 - FORM 990 REVIEW PROCESS	
THE_GOVERNING_BODY_DELEGATES_RESPONSIBLITY_TO_THE_BUSINESS_DEPA	RIMENT TO BE SURE
THAT THE FORM 990 IS APPROPRIATELY FILED. A CPA FIRM IS ENGAGE	D TO PREPARE THE
RETURN AND THEN THE RETURN IS SUBMITTED TO THE ORGANIZATION TO	REVIEW, SIGN AND FILE
IN_A_TIMELY_MANNTER	
FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMI	ENT OF CONFLICTS
MEMBERS OF THE GOVERNING BOARD ARE REQUIRED TO SUBMIT CALIFORNI	A FORM 700 STATEMENT
OF ECONOMIC INTEREST ON AN ANNUAL BASIS.	

Schedule O (Form 990	2009	Page 2
Name of the organization		Employer identification number
ORANGE COUNTY	EDUCATIONAL ARTS ACADEMY	55-0874759
		·

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

ORANGE COUNTY EDUCATIONAL ARTS ACADEMY

Related Organizations and Unrelated Partnerships

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 33, 34, 35, 36, or 37.
 Attach to Form 990.

2009

OMB No 1545-0047

Open to Public Inspection

Employer identification number 55-0874759

Schedule R (Form 990) (2009) (F)
Direct controlling entity (F)
Direct controlling entity Identification of Related Tax-Exempt Organizations (Complete of the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) (E)
Public charity status (if section 501(c)(3)) **(E)** End-of-year assets Identification of Disregarded Entities (Complete of the organization answered 'Yes' to Form 990, Part IV, line 33.) (**D)** Exempt Code section (**D)** Total income TEEA5001L 02/05/10 (C) Legal domicile (state or foreign country) (C)
Legal domicile (state or foreign country) BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. (B) Primary activity (B) Primary activity (A) Name, address, and EIN of related organization **(A)** Name, address, and EIN of disregarded entity Part Part II

Schedule R (Form 990) 2009 ORANGE COUNTY EDUCATIONAL ARTS ACADEMY

55-0874759

Page 2

General or managing partner? ŝ Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) Yes Code V-UBI amount in box 20 of Schedule K-1 N/A (Form 1065) (H)
Disproportionate
allocations? Yes No Share of total income Share of end-of-year assets o. 0 (E)
Predominant
income (related,
unrelated, excluded
from tax under
sections 512-514) 834,923 (D)
Direct
controlling entity OCEAA (C)
Legal
domicile
(state or
foreign CA(B) Primary Activity PROP ACQ (A)
Name, address, and EIN of related organization OCEAA FACILITIES, LLC SANTA ANA, CA 92701 825 N BROADWAY Part III

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete of the organization answering the tax year.)	axable as a Cor	rporation or Transcript treated as a c	rust (Complete	if the organizations in	zation answered 'Y	a Corporation or Trust (Complete if the organization answered 'Yes' to Form 990, Part IV intensity as a corporation or trust during the tax year.)	ırt IV,
(A) Name, address, and EIN of related organization	(B) Primary Activity	(C) Legal domicile (state or foreign	(D) Direct controlling entity	Type of entity (C corp, S corp,	(F) Share of total income	(B) (C) (D) (D) (E) (D) (D) (D) (D) (D) (D) (D) (D) (D) (D	(H) Percentage ownership
		country)		or trust)			
							!

Schedule R (Form 990) (2009)

TEEA5002L 02/05/10

BAA

55-0874759

Schedule R (Form 990) 2009 ORANGE COUNTY EDUCATIONAL ARTS ACADEMY Part V Transactions With Related Organizations (Complete of the organization answered 'Yes' to Form 990, Part IV, line 34, 35, or 36.)

(2005	л 990)	R (Forr	Schedule R (Form 990) (2009	BAA TEEA5003L 02/05/10
				(9)
				(5)
				(4)
				(3)
				(2)
834,923	834	i	ĵ.	(1) OCEAA FACILITIES, LLC
ved	(C) Amount involved	Amour	(B) Transaction type (a-r)	(A) Name of other organization
		lds.	ips and transaction thresho	
××	<u></u>	1 1		 q Other transfer of cash or property to other organization(s) r Other transfer of cash or property from other organization(s)
×		-		p Reimbursement paid by other organization for expenses
×		10		 Reimbursement paid to other organization for expenses
×		1-		n Sharing of paid employees
×	=	1 E		m Sharing of facilities, equipment, mailing lists, or other assets
×	_	=		Performance of services or membership or fundraising solicitations by other organization(s)
×	╀	- =		J. Lease of lacinites, equipment, of other assets from other organization(s). k. Performance of services or membership or fundraising solicitations for other organization(s).
	×	=		i Lease of facilities equipment or other assets from other organization(s)
×		=		i Lease of facilities, equipment, or other assets to other organization(s)
×		1		h Exchange of assets
×	<u>_</u>	19		a Purchase of assets from other organization(s)
×		-		f Sale of assets to other organization(s)
×	_	16		e Loans or loan guarantees by other organization(s)
×	_	19		d Loans or loan guarantees to or for other organization(s)
×	_	10		c Gift, grant, or capital contribution from other organization(s)
×	_	1 b		b Gift, grant, or capital contribution to other organization(s)
×		1a	•	a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity
ž	Yes	L	<u> </u>	Note Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

Page 4

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered 'Yes' to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total asset or gross revenue) that was not a related organization. See Instructions regarding exclusion for certain investment partnerships

			Ves No