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## Short Form Return of Organization Exempt From Income Tax

~~2010~~  
**2009**

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.

Department of the Treasury  
Internal Revenue Service

**Open to Public  
Inspection**

**A** For the ~~2009~~ **2010** calendar year, or tax year beginning **2009**, and ending **2009**, and ending

<p><b>B</b> Check if applicable:</p> <p><input type="checkbox"/> Address change</p> <p><input type="checkbox"/> Name change</p> <p><input type="checkbox"/> Initial return</p> <p><input checked="" type="checkbox"/> Termination</p> <p><input type="checkbox"/> Amended return</p> <p><input type="checkbox"/> Application pending</p>	<p>Please use IRS label or print or type. See Specific Instructions.</p>	<p><b>C</b></p> <p>ISRAEL CALLS 2227 MIDVALE AVENUE LOS ANGELES, CA 90064</p>	<p><b>D</b> Employer identification number 26-3816963</p> <p><b>E</b> Telephone number 310-721-4090</p> <p><b>F</b> Group Exemption Number</p>
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• 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: WWW.ISRAELCALLS.ORG

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

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

**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. ▶ \$

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

	<b>1</b> Contributions, gifts, grants, and similar amounts received		
	<b>2</b> Program service revenue including government fees and contracts		
	<b>3</b> Membership dues and assessments		
	<b>4</b> Investment income		
REVENUE	<b>5a</b> Gross amount from sale of assets other than inventory		
	<b>5b</b> Less cost or other basis and sales expenses		
	<b>5c</b> Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)		
	<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>b</b> Less direct expenses other than fundraising expenses		
	<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>b</b> Less cost of goods sold		
	<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 Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8		<b>9</b> 0.
EXPENSES	<b>10</b> Grants and similar amounts paid (attach schedule)		<b>10</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> 2,696.
	<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: <u>SEE STATEMENT 1</u> )		<b>16</b> 14,118.
	<b>17 Total expenses.</b> Add lines 10 through 16		<b>17</b> 16,814.
	<b>18</b> Excess or (deficit) for the year (Subtract line 17 from line 9)		<b>18</b> -16,814.
NET ASSETS OR FUND BALANCES	<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> 16,814.
	<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> 0.

**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		16,814.	<b>22</b>
<b>23</b> Land and buildings			<b>23</b>
<b>24</b> Other assets (describe: _____)			<b>24</b>
<b>25 Total assets.</b>		16,814.	<b>25</b> 0.
<b>26 Total liabilities</b> (describe: _____)		0.	<b>26</b> 0.
<b>27 Net assets or fund balances</b> (line 27 of column (B) must agree with line 21)		16,814.	<b>27</b> 0.

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

Form 990-EZ (2009)

P 20



**Part V Other Information** (Note the statement requirements in the instrs for Part V.) **SEE STATEMENT 4**

		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity		X
34	Were any changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the changes		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T		
35a	a 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?		X
35b	b If 'Yes,' has it filed a tax return on Form 990-T for this year?		
36	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	X	
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0.		
37b	b Did the organization file Form 1120-POL for this year?		X
38a	38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?		X
38b	b If 'Yes,' complete Schedule L, Part II and enter the total amount involved 38b N/A		
39	39 Section 501(c)(7) organizations Enter		
39a	a Initiation fees and capital contributions included on line 9 39a N/A		
39b	b Gross receipts, included on line 9, for public use of club facilities 39b N/A		
40a	40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ 0., section 4912 ▶ 0., section 4955 ▶ 0.		
40b	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 40b		X
40c	c 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 ▶ 0.		
40d	d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization ▶ 0.		
40e	e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T 40e		X
41	41 List the states with which a copy of this return is filed ▶ CA		

42a The organization's books are in care of ▶ GERBER & CO. INC Telephone no ▶ 310-552-1600  
 Located at ▶ 1880 CENTURY PARK EAST #200 LOS ANGELES CA ZIP + 4 ▶ 90067

		Yes	No
42b	b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If 'Yes,' enter the name of the foreign country ▶		X
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of a Foreign Bank and Financial Accounts.			
42c	c At any time during the calendar year, did the organization maintain an office outside of the US? If 'Yes,' enter the name of the foreign country ▶		X

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

		Yes	No
44	44 Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ		X
45	45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-EZ		X

**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
46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I		X
47 Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II		X
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E		X
49a Did the organization make any transfers to an exempt non-charitable related organization?		X
b If 'Yes,' was the related organization a section 527 organization?		

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 and deferred compensation	(e) Expense account and other allowances
NONE				

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

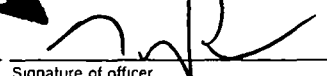
51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None'

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		

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

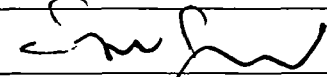
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer:  Date: 4/1/2011

TERRY PULLAN CEO

Paid Preparer's Use Only

Preparer's signature:  Date: 1/26/11

Check if self-employed:

Preparer's Identifying Number (See instructions): 070602539

Firm's name (or yours if self-employed), address, and ZIP + 4: GERBER & CO. INC. 1880 CENTURY PARK EAST, SUITE 200 LOS ANGELES, CA 90067-1602

EIN: 65-1210974

Phone no: (310) 552-1600

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

BAA Form 990-EZ (2009)



**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 'unusual grants'.)				25,000.	10,180.	35,180.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.
<b>3</b> The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.						0.
<b>4 Total.</b> Add lines 1-through 3	0.	0.	0.	25,000.	10,180.	35,180.
<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)						0.
<b>6 Public support.</b> Subtract line 5 from line 4						35,180.

**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	0.	0.	0.	25,000.	10,180.	35,180.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						0.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						0.
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0.
<b>11 Total support.</b> Add lines 7 through 10						35,180.
<b>12</b> Gross receipts from related activities, etc. (see instructions)					12	0.

**13 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

**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))	14	%
<b>15</b> Public support percentage from 2008 Schedule A, Part II, line 14	15	%

**16a 33-1/3 support test – 2009.** If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization

**b 33-1/3 support test – 2008.** If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

**17a 10%-facts-and-circumstances test – 2009** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization

**b 10%-facts-and-circumstances test – 2008.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization

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

**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 yr beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')						
2 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						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 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 year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

**Section B. Total Support**

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

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

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

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%
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))	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	%

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

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 with horizontal dashed lines for supplemental information.

**SCHEDULE N**  
(Form 990 or 990-EZ)

**Liquidation, Termination, Dissolution, or Significant Disposition of Assets**

Complete if the organization answer 'Yes' to Form 990, Part IV, lines 31 or 32; or Form 990-EZ, line 36.  
 Attach certified copies of any articles of dissolution, resolutions, or plans.  
 Attach to Form 990 or 990-EZ.

Department of the Treasury  
Internal Revenue Service

Name of the organization

ISRAEL CALLS

Employer identification number

26-3816963

2009-2010



**Part I** Liquidation, Termination, or Dissolution. Complete if the organization answered 'Yes' to Form 990, Part IV, line 31, or Form 990-EZ, line 36. Use Schedule N-1 if additional space is needed.

1	(a) Description of asset(s) distributed or transaction expenses paid	(b) Date of distribution	(c) Fair market value of asset(s) distributed or amount of transaction expenses	(d) Method of determining FMV for asset(s) distributed or transaction expenses	(e) EIN of recipient	(f) Name and address of recipient	(g) IRC Code section of recipient(s) (if tax-exempt) or type of entity
	TAX PREPARATION FEE	12/24/10	1,250			GERBER & CO, INC 1880 CENTURY PARK EAST, SUITE 200 LOS ANGELES, CA 90067	
	CONTRIBUTIONS	12/23/10	8,300.			TEMPLE ISAIAH 10345 WEST PICO BLVD LOS ANGELES, CA 90064	
	FILING FEE	12/27/10	10.			FRANCHISE TAX BOARD P O BOX 942857 SACRAMENTOP, CA 94257-0701	

	2 Did or will any officer, director, trustee, or key employee of the organization	
	Yes	No
a		X
b		X
c		X
d		X
e		X

**2** Did or will any officer, director, trustee, or key employee of the organization  
 a Become a director or trustee of a successor or transferee organization?  
 b Become an employee of, or independent contractor for, a successor or transferee organization?  
 c Become a direct or indirect owner of a successor or transferee organization?  
 d Receive, or become entitled to, compensation or other similar payments as a result of the organization's liquidation, termination, or dissolution?  
 e If the organization answered 'Yes' to any of the questions in this line, provide the name of the person involved and explain in Part III





## ISRAEL CALLS

26-3816963

**STATEMENT 1**  
**FORM 990-EZ, PART I, LINE 16**  
**OTHER EXPENSES**

BANK CHARGES	\$	6.
CONTRIBUTIONS		8,300.
FILING & REGISTRATION FEES		40.
OFFICE EXPENSES		196.
TELEPHONE		660.
TRAVEL		4,916.
TOTAL	\$	<u>14,118.</u>

**STATEMENT 2**  
**FORM 990-EZ, PART III**  
**ORGANIZATION'S PRIMARY EXEMPT PURPOSE**

ISRAEL CALLS IS ESTABLISHED EXCLUSIVELY FOR THE CHARITABLE AND PUBLIC PURPOSE OF ASSISTING SYNAGOGUE LEADERS IN VISITING ISRAEL.

**STATEMENT 3**  
**FORM 990-EZ, PART III, LINE 28**  
**STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS**

DURING OUR FIRST YEAR IN OPERATING AS ISRAEL CALLS WE WERE SUCCESSFUL IN CREATING A RABBINIC ADVISORY COUNCIL CONSISTING OF 10 PROMINENT RABBIS FROM THE UNITED STATES AND ISRAEL. WE RAISED \$45,000 IN INITIAL FUNDING FROM TWO DONORS THAT ALLOWED US TO BUILD OUR INFRASTRUCTURE THAT WOULD ALLOW US TO BEGIN TO TALK TO WEALTHY INDIVIDUALS AND NON-PROFIT ORGANIZATIONS ABOUT FUNDING TRIPS TO ISRAEL FOR CONGREGATIONAL LEADERS IN NORTH AMERICA. WE CREATED A WEBSITE AND OTHER PROMOTIONAL MATERIALS TO GIVE TO POTENTIAL DONORS AND TRIP PARTICIPANTS.

TO DATE WE HAVE NOT BEEN SUCCESSFUL IN SECURING NEW FUNDING SOURCES. WE ATTRIBUTE THIS TO THE ECONOMY. MANY DONORS TELL US THAT THEY ARE UNABLE TO FUND NEW INITIATIVES AT THIS TIME.

**STATEMENT 4**  
**FORM 990-EZ, PART V**  
**REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS**

(A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT? NO

(B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT? NO



State of California Secretary of State

DISS NP

Domestic Nonprofit Corporation Certificate of Dissolution

There is no fee for filing a Certificate of Dissolution. IMPORTANT - Read instructions before completing this form.

This Space For Filing Use Only

Corporate Name (Enter the name of the domestic nonprofit corporation exactly as it is of record with the California Secretary of State )

1 Name of corporation Israel Calls

Required Statements (The following statements are required by statute and should not be altered )

- 2 a) A final franchise tax return... b) The corporation has been completely wound up c) The corporation is dissolved

Debts and Liabilities (Check the applicable statement Note Only one box may be checked )

- 3. [X] The corporation's known debts and liabilities have been actually paid [ ] The corporation's known debts and liabilities have been paid as far as its assets permitted [ ] The corporation's known debts and liabilities have been adequately provided for by their assumption and the name and address of the assumer is [ ] The corporation's known debts and liabilities have been adequately provided for as far as its assets permitted (Specify in an attachment to this certificate...)

Assets (Mutual Benefit or Consumer Cooperative Corporations ONLY Check the applicable statement Note Only one box may be checked If the corporation is a public benefit or religious corporation, leave Item 4 blank and attach to this Certificate of Dissolution a letter from the Attorney General waiving objections to the distribution of the corporation's assets pursuant to California Corporations Code section 6716(c) or confirming the corporation has no assets (see instructions) )

- 4 [ ] The known assets have been distributed to the persons entitled thereto [ ] The corporation never acquired any known assets

Election (Check the "YES" or "NO" box as applicable Note If the "NO" box is checked, a Certificate of Election to Wind Up and Dissolve pursuant to California Corporations Code section 1901, 6611, 8611, 9680 or 12631 must be filed prior to or together with this Certificate of Dissolution )

- 5 The election to dissolve was made by the vote of all the members of the corporation or the corporation has no members and the election was made by the vote of all the directors of the corporation [X] YES [ ] NO

Verification and Execution (If additional signature space is necessary, the dated signature(s) with verification(s) may be made on an attachment to this certificate. Any attachments to this certificate are incorporated herein by this reference )

6. The undersigned constitute(s) the sole director or a majority of the directors now in office I declare under penalty of perjury under the laws of the State of California that the matters set forth in this certificate are true and correct of my own knowledge.

10/26/2010

Date

Signature of Director

Signature of Director

Signature of Director

Terry Pullan

Type or Print Name of Director

Andrea Pullan

Type or Print Name of Director

Type or Print Name of Director