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DLN: 93493208008812

Form **990** 

Department of the Treasury

# **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)

2011

OMB No 1545-0047

Open to Public

	Revenue		•		requirements	Inspection			
		2011 calendar year, or tax year beginning 01-01-201  C Name of organization	.1 and ending 12-31-20	11	D Employer ide	ntification number			
		LOS ANGELES SOCIAL VENTURE PARTNERS INC							
_	dress ch	Doing Business As		_	51-056356 E Telephone nu				
_	me char				(310)281-7	509			
_	tıal retur	PO BOX 5762	ered to street address) Room/s	uite	G Gross receipts s				
Ter	rmınated	1							
Am	ended r	return City or town, state or country, and ZIP + 4 PLAYA DEL REY, CA 90296							
App	plication	pending							
		F Name and address of principal officer		<b>H(a)</b> Is thu	s a group return				
		DIANE HELFREY 13323 W WASHINGTON BLVD SUITE 2	203	affilia		┌Yes ┌No			
		LOS ANGELES, CA 90066	<del>-</del>	H(b) Are all	affiliates include	ed?			
		<u>_</u>		1		(see instructions)			
Та	x-exem	pt status	4947(a)(1) or 527		p exemption nui				
W	ebsite	∷► HTTP //WWW LASVP ORG/							
<b>(</b> Forr	m of ord	ganization Corporation Trust Association Other		L Year of for	mation 2005 M	State of legal domicile CA			
	rt I	Summary							
		Briefly describe the organization's mission or most si	anıfıcant activities						
		ENGAGED PHILANTHROPY ORGANIZATION - SEE							
Governance	-								
Ē	-								
<u> </u>	2 0	Check this box 🔭 if the organization discontinued it	ts operations or disposed	of more than 2	5% of its net as	sets			
		Number of voting members of the governing body (Pa			з	9			
Acumines &	1	Number of independent voting members of the govern			4	9			
<u>≅</u>	1	Fotal number of individuals employed in calendar yea		•	5	1			
È	6 1	Total number of volunteers (estimate if necessary)		6	85				
₹	7a ⊺	Total unrelated business revenue from Part VIII, col	umn (C), line 12		7a	0			
	ь	Net unrelated business taxable income from Form 99	0-T, line 34		7b	0			
				Prio	r Year	Current Year			
nue	8	Contributions and grants (Part VIII, line 1h)			269,190	308,200			
	9	Program service revenue (Part VIII, line 2g) .		16,800	40				
Revenue	10	Investment income (Part VIII, column (A), lines 3		125	216				
Ξ.	11	Other revenue (Part VIII, column (A), lines 5, 6d,		0	0				
	12	Total revenue—add lines 8 through 11 (must equal		ne	286,115	308,456			
	13	Grants and similar amounts paid (Part IX, column (			53,740	116,750			
	14	Benefits paid to or for members (Part IX, column (A			0	0			
	15	Salaries, other compensation, employee benefits (F				121,067			
8		5-10)			114,440				
Expenses	16a	Professional fundraising fees (Part IX, column (A),	line 11e)		0	0			
ੜੋ	Ь	Total fundraising expenses (Part IX, column (D), line 25) •36							
	17	Other expenses (Part IX, column (A), lines 11a-1:			77,411	68,697			
	18	Total expenses Add lines 13–17 (must equal Part			245,591	306,514			
. 02	19	Revenue less expenses Subtract line 18 from line	12		40,524	1,942			
Net Assets of Fund Balances					of Current ear	End of Year			
5 E	20	Total assets (Part X, line 16)		<u>'</u>	187,156	206,944			
<u> </u>	21	Total liabilities (Part X, line 26)			4,887	22,733			
ğğ	22	Net assets or fund balances Subtract line 21 from			182,269	184,211			
Pai	rt II	Signature Block			•	·			
now	ledge a	ties of perjury, I declare that I have examined this return and belief, it is true, correct, and complete. Declaration o							
W	ledge.	П		1					
		****** Signature of officer		20 Da	12-07-25 te				
Sign Hero									
161	_	DIANE HELFREY EXECUTIVE DIRECTOR Type or print name and title							
		<u>                                      </u>	Date	Check If	Preparer's taypor	ver identification number			
Paid		Preparer's	self-	(see instructions)					
	arer's	, , , , , , , , , , , , , , , , , , ,		employed 🕨	P00743585				
•	Only	Firm's name (or yours of self-employed),		EIN • 22-213100	09				
	<b>,</b>	address, and ZIP + 4 9171 WILSHIRE BOULEVARD 5TH FL	OOR		Phone no 🕨 (3:	10) 273-2770			
		BEVERLY HILLS, CA 90210	BEVERLY HILLS, CA 90210						

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

Form	n 990 (2011)					Page <b>2</b>				
Par		ent of Program Servic Schedule O contains a respo			·	৮				
1	Briefly describe	the organization's mission								
ENG	AGED PHILANTH	ROPY - SEE SCHEDULE O								
2	Did the organizate the prior Form 99	tion undertake any significar 90 or 990-EZ?	nt program se		r which were not listed on	┌ Yes ┌ No				
	If "Yes," describe									
3	Did the organizate services?	tion cease conducting, or ma	ike significar	nt changes in how it co	onducts, any program	┌ Yes ┌ No				
	If "Yes," describe these changes on Schedule O									
4	expenses Section	anization's program service on 501(c)(3) and 501(c)(4) ations to others, the total ex	organızatıon	s and section 4947(a)	(1) trusts are required to re	port the amount of				
4a	(Code	) (Expenses \$	81,957	ıncludıng grants of \$	65,500 ) (Revenue \$	0)				
	ENGAGED GRANTM	AKING - SEE SCHEDULE O								
4b	(Code	) (Expenses \$	112,929	ıncludıng grants of \$	51,250 ) (Revenue \$	40 )				
	SOCIAL INNOVATIO	N FAST PITCH PROGRAM - SEE SC	HEDULE O							
4c	(Code	) (Expenses \$	14,949	ıncludıng grants of \$	0 ) (Revenue \$	0)				
	PHILANTHROPY DE	VELOPMENT - SEE SCHEDULE O								
4d	Other program	services (Describe in Sched	dule O )							
	(Expenses \$	ınclud	dıng grants o	f \$	) (Revenue \$	)				
4e	Total program s	service expenses +\$	209,83	15						
						Form <b>990</b> (2011)				

art TV	Check	dist of	Required	Schedules
		11136 01	IXCUUII CU	Scriculics

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes,"</i> complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
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		No
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? <i>If "Yes," complete Schedule D, Part VI</i> .	11a		No
b	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.	11b		No
C	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.	11c		No
d	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.	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		No
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts $XI$ , $XII$ , and $XIII$	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b		No
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 U S? If "Yes," complete Schedule F, Part II and IV	15		No
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 U S ? If "Yes," complete Schedule F, Part III and IV	16		No
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? <i>If "Yes," complete Schedule G, Part I</i>	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
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		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	t IV Checklist of Required Schedules (continued)			
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 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
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		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		No
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		No
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		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction 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			1
		28a		N o
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> " <i>Yes,"</i> complete <i>Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
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		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm <b>99</b> 0	(2011)

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Part V	Statements Regarding Other IRS Filings and Tax Compliance	

	Check if Schedule O contains a response to any question in this Part V		.  *				
4-	Fatautha numban nanamadan Bau 2 af Famus 1006 Fatau 0 af aat aan laasha		Yes	No			
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable						
	<b>1a</b> 0						
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0						
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax  Statements filed for the calendar year ending with or within the year covered by this						
	return						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes				
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)						
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No			
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)?	4a		No			
b	If "Yes," enter the name of the foreign country						
	See instructions for 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		N o			
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No			
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?						
		5c 6a					
6a	organization 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 tax deductible?	6b					
7	Organizations that may receive deductible contributions under section 170(c).						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Νo			
b	<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided?						
C	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?						
d	d If "Yes," indicate the number of Forms 8282 filed during the year   7d						
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit						
	contract?	7e		N o			
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N o			
y	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g					
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h					
8	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 holdings at any time during the year?	8					
9	Sponsoring organizations maintaining donor advised funds.						
а	Did the organization make any taxable distributions under section 4966?	9a					
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b					
10	Section 501(c)(7) organizations. Enter  Initiation fees and capital contributions included on Part VIII, line 12   10a						
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club  10b						
	facilities						
11	Section 501(c)(12) organizations. Enter  Gross income from members or shareholders						
	Gross income from other sources (Do not net amounts due or paid to other						
	sources against amounts due or received from them )						
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a					
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year						
13							
а	Is the organization licensed to issue qualified health plans in more than one state?  Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	13a					
b	Enter the aggregate amount of reserves the organization is required to maintain by						
c	Enter the aggregate amount of reserves on hand						
	13c						
	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		No_			

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

Se	ction A. Governing Body and Management							
			Yes	No				
1_	Enter the number of veting members of the governing heady at the and of the tay							
1a	Enter the number of voting members of the governing body at the end of the tax year							
b	b Enter the number of voting members included in line 1a, above, who are independent							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No				
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No				
4	4		No					
5	filed?  Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No				
6	Did the organization have members or stockholders?	6	Yes					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following							
а	The governing body?	8a	Yes					
b	Each committee with authority to act on behalf of the governing body?	8b		No				
9	9		No					
Se	organization's mailing address? If "Yes," provide the names and addresses in Schedule O ection B. Policies (This Section B requests information about policies not required by the Internal							
Re	venue Code.)							
			Yes	No				
	Did the organization have local chapters, branches, or affiliates?	10a		No				
Ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes					
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes					
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes					
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes					
13	Did the organization have a written whistleblower policy?	13	Yes					
14	Did the organization have a written document retention and destruction policy?	14	Yes					
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
а	The organization's CEO, Executive Director, or top management official	15a	Yes					
b	<b>b</b> Other officers or key employees of the organization							
16a	<b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?							
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its							
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?							
Se	ection C. Disclosure							
17	List the States with which a copy of this Form 990 is required to be filed▶CA							

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available.

Own website Another's website Vpon request

- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization DIANE HELFREY

13323 W WASHINGTON BLVD SUITE 203

LOS ANGELES, CA 90066

(310)279-5029

# <u>Part VII</u> Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0 in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ 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, or 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 neither the organiz	•	lated o	rganı	zatio	ons	compe	nsat	ed any current or fo	rmer officer, direct	or, or trustee	
(A) Name and Title	(B) A verage hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and	
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		MISC)	related organizations	
(1) CLAUDIA SANGSTER CHAIRMAN & PRESIDENT	1 80	х		х				0	0	0	
(2) KEN DEEMER PAST CHAIRMAN	2 60	х		х				0	0	0	
(3) STEPHEN GRONER VICE PRESIDENT	1 90	х		Х				0	0	0	
(4) WENDY DRISCOLL SECRETARY	1 00	х		х				0	0	0	
(5) BRAD SPARKS TREASURER	80	х		Х				0	0	0	
(6) ROB BINIAZ DIRECTOR	7 30	х						0	0	0	
(7) TODD DIPAOLA DIRECTOR	0 00	х						0	0	0	
(8) BETSY DENSMORE DIRECTOR	3 10	х						0	0	0	
(9) ELYSSA ELBAZ DIRECTOR	1 00	х						0	0	0	
(10) KEITH KEGLEY DIRECTOR	80	х						0	0	0	
(11) AMANDA SABICER DIRECTOR	2 80	х						0	0	0	
(12) DIANE HELFREY EXECUTIVE DIRECTOR	50 00			х				106,532	0	6,000	

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

	(A) Name and Title	(B) A verage hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)							( <b>D)</b> ortable ensation m the ation (W- 9-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	compensation from the		ated f other sation the on and
		hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)		organiza	
1b	Sub-Total			<u> </u>				<u> </u>						
C	Total from continuation sheets t	to Part VII, Sec	tion A		•	•		<u> </u>		106 522				5.000
2	Total (add lines 1b and 1c) .  Total number of individuals (inclusion),000 of reportable compens					• ted	above		receive	106,532 d more tha	ın	0		6,000
3	Did the organization list any <b>form</b>								or highes	t compens	ated employee		Yes	No
4	on line 1a? If "Yes," complete Sch For any individual listed on line 1 organization and related organization and related organization.	.a, is the sum of	report	able	com	pens	sation	and o				3 4		No No
5	Did any person listed on line 1a services rendered to the organiza						-		_		or individual for •	5		No
Se	ction B. Independent Con													
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax years.	the organizatio ear									ng with			
(A) Name and business address  (B) Description of services									(C) Compensation					
												4		
	Fotal number of independent conti \$100,000 of compensation from t			ot lin	nited	d to	those	liste	d above)	who recei	ved more than			

Part V	ш	Statement of Revenue					
				<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
99.92	1a	Federated campaigns 1a					
ませ							
ಕ್ಷಿತ	b	Membership dues 1b					
ું≣	С	Fundraising events 1c					
粗岩	d	Related organizations 1d					
<u>∵</u>	e	Government grants (contributions) <b>1e</b>					
띃등		- · · · · · · · · · · · · · · · · · · ·					
율놂	f	All other contributions, gifts, grants, and <b>1f</b> similar amounts not included above	308,200				
₹ē	g	Noncash contributions included in					
늍유		lines 1a-1f \$					
Contributions, gifts, grants and other similar amounts	h	Total. Add lines 1a-1f	▶	308,200			
e E		<u> </u>	Business Code				
ē	2a	PROGRAM AND EVENT FEES	541900	40	40		
Æ	b						
<u>.</u>	С						
ž	d						
B							
Program Serwce Revenue	е						
Š	f	All other program service revenue					
š	g	L Total. Add lines 2a-2f		40			
	3			40			
	3	Investment income (including dividend	-	216			216
		and other similar amounts)		210			210
	4	Income from investment of tax-exempt bond p					
	5	Royalties					
		(ı) Real	(II) Personal				
	6a	Gross rents					
	b	Less rental expenses					
	С	Rental income					
		or (loss)					
	d	Net rental income or (loss)	🟲				
		(ı) Securities	(II) Other				
	7a	Gross amount from sales of					
		assets other					
		than inventory Less cost or					
	b	other basis and					
		sales expenses					
	С	Gain or (loss)					
	d	Net gain or (loss)					
	8a	Gross income from fundraising					
Other Revenue		events (not including					
<u> হ</u>		\$ of contributions reported on line 1c)					
è		See Part IV, line 18					
Œ		a					
<u>∓</u>	ь	Less direct expenses b					
ŏ	С	Net income or (loss) from fundraising e	vents 🟲				
	9a	Gross income from gaming activities	ļ				
		See Part IV, line 19					
		а					
	b	Less direct expenses b					
	С	Net income or (loss) from gaming activ	ities				
	10a	Gross sales of inventory, less	Ī				
		returns and allowances .					
		a					
	b	Less cost of goods sold <b>b</b>					
	С	Net income or (loss) from sales of inve	ntory 🟲				
		Miscellaneous Revenue	Business Code				
	11a						
	ь						
			-				
	С						
	d	All other revenue					
	e	Total. Add lines 11a-11d					
			▶				
	12	<b>Total revenue.</b> See Instructions	. •	308,456	40	0	216
				,			

#### Part IX Statement of Functional Expenses

combined educational campaign and fundraising solicitation

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) ~ Check if Schedule O contains a response to any question in this Part IX (B) (C) (D) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 116,750 116,750 Grants and other assistance to individuals in the United States See Part IV, line 22 3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and 112,532 50,639 38,261 23,632 key employees . . . Compensation not included above, to disqualified persons 6 (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . 7 Other salaries and wages Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . Other employee benefits . . . . . . 8,535 3,840 2,902 1,793 10 Fees for services (non-employees) 11 Management . . . . . Legal . . . . . . . . . Accounting . . . . . . . Lobbying . . . . . . . . . . . . Professional fundraising See Part IV, line 17 . . Investment management fees . . . . . . g 9,112 5,237 2,880 995 Advertising and promotion . . . 5,573 5,250 73 250 12 1,713 Office expenses . . . . 4,614 2,664 13 237 14 Information technology . . . . . 15 Royalties . . 16 11,443 5,149 3,891 2,403 3,249 2,474 775 17 Payments of travel or entertainment expenses for any federal, 18 state, or local public officials . . . . . 19 Conferences, conventions, and meetings . . . . 2,910 1,511 898 501 20 21 Payments to affiliates . 22 Depreciation, depletion, and amortization . . . . 23 4,078 1,835 1,387 856 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O) PROGRAM-RELATED EVENTS 9,969 8,000 939 1,030 MEMBERSHIP DUES 8,363 3,764 1,756 2,843 WEBSITE HOSTING & TELEC 2,275 1,540 454 281 **BANK & TRANSACTION FEES** 1,934 68 432 1,434 d е All other expenses 5,177 2,065 1,452 1,660 25 Total functional expenses. Add lines 1 through 24f 306,514 209,835 59,851 36,828 Joint costs. Check here ► 🗀 If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a

_ Pa	irt X	Balance Sheet					
				(A) Beginning of year		<b>(B)</b> End of year	
	1	Cash—non-interest-bearing		14,464	1	42,727	
	2	Savings and temporary cash investments		163,817		146,534	
	3	Pledges and grants receivable, net		8,875	<del></del>	16,583	
	4	Accounts receivable, net	•		4	,	
	5	Receivables from current and former officers, directors, trustees, k highest compensated employees Complete Part II of	key employees, and				
		Schedule L			5		
	6	Receivables from other disqualified persons (as defined under sections described in section 4958(c)(3)(B). Complete Part II of					
		Schedule L		6			
Assets	7	Notes and loans receivable, net			7		
SS	8	Inventories for sale or use			8		
⋖	9	Prepaid expenses and deferred charges	openses and deferred charges				
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a				
	ь	Less accumulated depreciation	Less accumulated depreciation 10b				
	11	Investments—publicly traded securities			11		
	12	Investments—other securities See Part IV, line 11			12		
	13	Investments—program-related See Part IV, line 11			13		
	14	Intangible assets			14		
	15	Other assets See Part IV, line 11			15		
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	•	187,156	16	206,944	
	17	Accounts payable and accrued expenses .		4,887	17	2,733	
	18	Grants payable			18	20,000	
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities			20		
Ø	21	Escrow or custodial account liability Complete Part IV of Schedule D			21		
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
ge g		persons Complete Part II of Schedule L			22		
	23	Secured mortgages and notes payable to unrelated third parties			23		
	24	Unsecured notes and loans payable to unrelated third parties $oldsymbol{\cdot}$			24		
	25	Other liabilities (including federal income tax, payables to related and other liabilities not included on lines 17-24) Complete Part X D			25		
	26	Total liabilities. Add lines 17 through 25		4,887	26	22,733	
ر ان		Organizations that follow SFAS 117, check here ▶	e lines 27	,,,,,,	20		
걸	27	Unrestricted net assets		153,962	27	173,258	
Balance	28	Temporarily restricted net assets		28,307	28	10,953	
<u>~</u>	29	Permanently restricted net assets		20,007	29	10,000	
Fund	29	•	complete		29		
or Fi		Organizations that do not follow SFAS 117, check here ► and of lines 30 through 34.	complete				
	30	Capital stock or trust principal, or current funds			30		
Assets	31	Paid-in or capital surplus, or land, building or equipment fund .			31		
	32	Retained earnings, endowment, accumulated income, or other fund	S		32		
Met	33	Total net assets or fund balances		182,269	$\vdash$	184,211	
_	34	Total liabilities and net assets/fund balances		187 156	1 34 l	206 944	

Pa	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI			.୮	Ū
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3	308,456
2	Total expenses (must equal Part IX, column (A), line 25)	2		3	306,514
3	Revenue less expenses Subtract line 2 from line 1	3			1,942
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1	182,269
5	Other changes in net assets or fund balances (explain in Schedule O)	5			· (
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6			184,21
Pai	Financial Statements and Reporting  Check if Schedule O contains a response to any question in this Part XII			・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・	No
1	SEE  Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b		No
C	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain its Schedule O		2c		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	ssued			
	Separate basis Consolidated basis Both consolidated and separated basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

#### OMB No 1545-0047

Inspection

## **SCHEDULE A**

(Form 990 or 990EZ)

Name of the organization LOS ANGELES SOCIAL VENTURE PARTNERS INC

Department of the Treasury Internal Revenue Service

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

**Public Charity Status and Public Support** 

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

**Employer identification number** 

51-0563566

Pai	rt I	Reas	Reason for Public Charity Status (All organizations must complete this part.) See instructions								
The c	rganı	zatıon ıs	not a priva	te foundation becaus	seitis (Forl	ınes 1 throu	gh 11, check	only one bo	x )		
1	Γ	A chur	ch, convent	ion of churches, or a	ssociation of	churches <b>s</b>	ection 170(b	)(1)(A)(i).			
2	Γ	A scho	ol described	d in <b>section 170(b)(1</b>	<b>L)(A)(ii).</b> (At	tach Schedu	ıle E )				
3	$\sqcap$	A hosp	ital or a cod	perative hospital se	rvice organiz	atıon descri	bed in <b>sectio</b>	n 170(b)(1)	(A)(iii).		
4	Γ			h organization opera ity, and state	ted in conjun	ction with a	hospital desc	cribed in <b>sec</b>	tion 170(b)(	1)(A)(iii). E	nter the
5	Γ	_	•	erated for the benefi	_	or universit	ty owned or o	perated by a	ı government	al unit desc	rıbed ın
_	_			( <b>A)(iv).</b> (Complete P	•	al unit daga	whad in each	170(b)(1	)(A)()		
6 7	<u> </u>	An orga describ	anızatıon th oed ın	rlocal government or at normally receives (A)(vi) (Complete P	a substantia					om the gene	eral public
8	$\Gamma$		community trust described in <b>section 170(b)(1)(A)(vi)</b> (Complete Part II )								
9		An orga receipt its sup	n organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross eceipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses cquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)								
10	$\Gamma$	An orga	anızatıon or	ganized and operated	d exclusively	to test for p	oublic safety	See <b>section</b>	509(a)(4).		
11	_	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h  a									
e f g	ı	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)  If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box  Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?									
				rectly or indirectly c			=	persons aes	cribed in (II)	l aa	Yes No
		-		governing body of th	7.7	_	ation			11g	
			-	er of a person descri			h2			11g(	
h				lled entity of a perso ng information about						11g(	)
9	(i) Name suppoi	e of rted	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizati col (i) list your gove docume	on in ced in rning	(v) Did you not organizati col (i) of suppor	on in your	(vi) Is the organizati col (i) organizati	ion in anized	(vii) A mount of support?
				instructions))	Yes	No	Yes	No	Yes	No	1
Total											

Part II

Support Schedule for Organizations Described in IRC 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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A Public Support

Se	ection A. Public Support				, ,	•	
Cale	endar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	<b>(c)</b> 2009	( <b>d)</b> 2010	<b>(e)</b> 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	173,500	340,817	195,899	269,190	308,200	1,287,606
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities						
3	furnished by a governmental unit to the organization without charge						
4 5	<b>Total.</b> Add lines 1 through 3 The portion of total contributions by each person (other than a	173,500	340,817	195,899	269,190	308,200	1,287,606
	governmental unit or publicly supported organization) included or line 1 that exceeds 2% of the amount shown on line 11, column	١					39,353
6	(f) <b>Public Support.</b> Subtract line 5 from line 4	1					1,248,253
Se	ection B. Total Support		1				
	endar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	<b>(d)</b> 2010	<b>(e)</b> 2011	(f) Total
7	A mounts from line 4	173,500	340,817	195,899	269,190	308,200	1,287,606
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	7	1,234	1,664	125	216	3,246
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income (Explain in Part IV ) Do not include gain or loss from the sale of capital assets		3,650	11,760	16,800	40	32,250
11	<b>Total support</b> (Add lines 7 through 10)						1,323,102
12	Gross receipts from related activiti	es, etc (See insti	ructions )			12	
13	First Five Years If the Form 990 is check this box and stop here			thırd, fourth, or fı	fth tax year as a	501(c)(3) orgar	iization, ▶
	ection C. Computation of Pul						
14	Public Support Percentage for 201			11 column (f))		14	94 340 %
15	Public Support Percentage for 201	•				15	
	33 1/3% support test—2011. If the and stop here. The organization qua 33 1/3% support test—2010. If the box and stop here. The organizatio	alıfıes as a publıcl e organızatıon dıd ı	y supported orga not check the box	nızatıon con lıne 13 or 16			► ✓ , check this_
	10%-facts-and-circumstances test is 10% or more, and if the organization Part IV how the organization medorganization	— <b>2011.</b> If the orga tion meets the "fa ets the "facts and	inization did not d icts and circumst circumstances"	theck a box on lin tances" test, chec test The organiza	ck this box and <b>st</b> ation qualifies as	t <b>op here.</b> Explair a publicly suppo	
b	10%-facts-and-circumstances test 15 is 10% or more, and if the organ Explain in Part IV how the organiza	nızatıon meets the	facts and circu	mstances" test, c	heck this box an	d <b>stop here.</b>	
18	supported organization  Private Foundation If the organization instructions	ion did not check	a box on line 13,	16a, 16b, 17a or	17b, check this	box and see	►□ ►□

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 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 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 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) Total support (Add lines 9, 10c, 13 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 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

19a 33 1/3% support tests—2011. 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

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

33 1/3% support tests-2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

**▶**[

Part IV	<b>Supplemental Information.</b> Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).
	Facts And Circumstances Test
	Explanation

Schedule A (Form 990 or 990-EZ) 2011

#### **Additional Data**

Software ID:

**Software Version:** 

**EIN:** 51-0563566

Name: LOS ANGELES SOCIAL VENTURE PARTNERS INC

#### Form 990, Special Condition Description:

**Special Condition Description** 

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Schedule I (Form 990)

# **Grants and Other Assistance to Organizations, Governments and Individuals in the United States**

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

Attach to Form 990

OMB No 1545-0047

2011

DLN: 93493208008812

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization
LOS ANGELES SOCIAL VENTURE PARTNERS INC

Employer identification number

51-0563566

		Governments and	of grant funds in the U		Complete if the o	rganization answered	l "Yes" to
Form 990, Part I\	V, line 21 for any i	recipient that received 0) if additional space i	more than \$5,000.	Check this box if no	one recipient rece	eived more than \$5,0	)00. Use
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	( <b>f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) LOS ANGELES DIAPER DRIVEPO BOX 192 PACIFIC PALISADES, CA 90272	56-2517353	501(C)(3)	40,000				GENERAL SUPPORT AND CAPACITY BUILDING
(2) GRO WINGGREAT2711 SEPULVEDA BLVD 279 MANHATTAN BEACH,CA 90266	56-2565503	501(C)(3)	25,500				CAPACITY BUILDING
(3) SYNERGY ACADEMIES PO BOX 78999 LOS ANGELES,CA 90016	20-0672173	501(C)(3)	20,000				CAPACITY BUILDING
(4) LOS ANGELES COMMUNITY REINVESTMENT COMMITTEE FBO THE GUMBALL FOUNDATION 4060 SOUTH FIGUEROA ST LOS ANGELES, CA 90037	95-4378092	501(C)(3)	10,000				GENERAL SUPPORT
(5) CENTER FOR RESTORATIVE JUSTICE WORKS (AKA GET ON THE BUS)5411 CAMELLIA AVE NORTH HOLLYWOOD, CA 91601	68-0547196	501(C)(3)	5,000	0			GENERAL SUPPORT

Enter total number of other organizations listed in the line 1 table . . .

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

(a)Type of grant or assistance	( <b>b)</b> Number of recipients	<b>(c)</b> A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 FOR GRANTEES RECEIVING CAPACITY-BUILDING ASSISTANCE, LASVP DEVELOPS ANNUAL PLANS THAT OUTLINE THE GOALS, MILESTONES AND TIMING OF CAPACITY-BUILDING INITIATIVES THAT LASVP'S GRANT FUNDS AND VOLUNTEER ASSISTANCE SUPPORT BECAUSE LASVP WORKS VERY CLOSELY WITH THE LEADERSHIP TEAM OF THESE GRANTEES, PROGRESS AGAINST THESE INITIATIVES IS MONITORED THROUGH MEETINGS AND INTERIM REPORTS THROUGHOUT THE YEAR, AND FORMALLY EVALUATED BY LASVP'S GRANT COMMITTEE AT THE END OF THE GRANT PERIOD PROGRESS AGAINST THE ANNUAL PLANS IS A KEY DETERMINANT FOR REFUNDING GRANTEES RECEIVING ONE-TIME GENERAL OPERATING SUPPORT ARE THOSE WHO HAVE PARTICIPATED IN LASVP'S SOCIAL INNOVATION FAST PITCH PROGRAM THE GRANTS ARE AWARDS GIVEN TO TOP-PERFORMING NONPROFITS IN THE PROGRAM, AND LASVP MONITORS HOW THE GRANT FUNDS AND PROGRAM PARTICIPATION HAVE MADE A DIFFERENCE TO THE RECIPIENTS BY ADMINISTERING PERIODIC SURVEYS AND CAPTURING THE ORGANIZATIONS' SUCCESS STORIES IN 2011, LOS ANGELES DIAPER DRIVE WAS AWARDED A ONE-TIME \$20,000 GRANT FOR GENERAL OPERATING SUPPORT THROUGH THE FAST PITCH PROGRAM, AND ALSO WAS CHOSEN AS LASVP'S INVESTEE, RECEIVING AN INITIAL \$20,000 CAPACITY BUILDING GRANT AND THE OPPORTUNITY FOR FOLLOW-ON GRANTS IN 2013 AND 2014 PLUS SIGNIFICANT IN-KIND VOLUNTEER ASSISTANCE FOR 3-4 YEARS
		SCHEDULE I, PART II, COLUMN 1(G) IN ADDITION TO CASH GRANTS, LASVP PROVIDES SIGNIFICANT NON-CASH ASSISTANCE TO THESE AND OTHER 501(C)(3) ORGANIZATIONS IN THE FORM OF STRATEGIC VOLUNTEER ASSISTANCE PLEASE SEE NARRATIVE ON FORM 990 PART III, STATEMENT OF PROGRAM AND SERVICE ACCOMPLISHMENTS

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Open to Public Inspection

# Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

Name of the organization LOS ANGELES SOCIAL VENTURE PARTNERS INC

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Employer identification number

51-0563566

ldentifier	Return Reference	Explanation
ORGANIZATION MISSION STATEMENT	FORM 990, PART I, QUESTION 1	LOS ANGELES SOCIAL VENTURE PARTNERS (LASVP) IS AN AFFILIATE OF SOCIAL VENTURE PARTNERS INTERNATIONAL (SVPI), AND IMPLEMENTS A MODEL OF ENGAGED PHILANTHROPY LASVPS MISSION IS TO CREATE SIGNIFICANT, LONG-TERM SOCIAL CHANGE IN LOS ANGELES BY ACHIEVING A DUAL MISSION EXPANDING THE CAPACITY OF INNOVATIVE NONPROFITS BY INVESTING OUR TIME, EXPERTISE, AND MONEY TO COLLABORATIVELY STRENGTHEN THESE ORGANIZATIONS, AND EXPANDING PHILANTHROPY BY EDUCATING INDIVIDUALS TO BE WELL-INFORMED, EFFECTIVE AND ENGAGED PHILANTHROPISTS

ldentifier	Return Reference	Explanation
ORGANIZATION MISSION STATEMENT	FORM 990, PART III, QUESTION 1	LASVP IS AN AFFILIATE OF SVPI, AND IMPLEMENTS A MODEL OF ENGAGED PHILANTHROPY LASVPS MISSION IS TO CREATE SIGNIFICANT, LONG-TERM SOCIAL CHANGE IN LOS ANGELES BY ACHIEVING A DUAL MISSION EXPANDING THE CAPACITY OF INNOVATIVE NONPROFITS BY INVESTING OUR TIME, EXPERTISE, AND MONEY TO COLLABORATIVELY STRENGTHEN THESE ORGANIZATIONS, AND EXPANDING PHILANTHROPY BY EDUCATING INDIVIDUALS TO BE WELL-INFORMED, EFFECTIVE AND ENGAGED PHILANTHROPISTS

ldentifier	Return Reference	Explanation
PROGRAM SERVICE STATEMENT	FORM 990, PART III, LINE 4A, DESCRIPTION OF PROGRAM SERVICE	ENGAGED GRANTMAKING IN 2011, LASVP SUPPORTED GROWINGGREAT, HEALTHY CHILD HEALTHY WORLD, LOS ANGELES DIAPER DRIVE, AND SYNERGY ACADEMIES WITH FINANCIAL AND/OR VOLUNTEER ASSISTANCE INVESTEES RECEIVE VOLUNTEER ASSISTANCE ON EXECUTIVE COACHING AND LEADERSHIP DEVELOPMENT, STRATEGIC AND FINANCIAL PLANNING, PROGRAM EXPANSION, BOARD DEVELOPMENT, MARKETING, WEBSITE DEVELOPMENT, FUNDRAISING AND OTHER AREAS OVER 25 PARTNERS VOLUNTEERED THEIR TIME TO WORK DIRECTLY WITH OUR INVESTEES ON STRATEGIC INITIATIVES, TO LEVERAGE THEIR NETWORKS TO BRING ADDITIONAL FINANCIAL OR PRO-BONO RESOURCES TO BENEFIT OUR INVESTEES, OR TO PARTICIPATE IN THE DUE DILIGENCE PROCESSES FOR NEW INVESTEES OR REINVESTMENTS COLLECTIVELY, LASVP'S MEMBERS VOLUNTEERED MORE THAN 750 HOURS IN GRANTEE-RELATED WORK LASVP "GRADUATED" HEALTHY CHILD HEALTHY WORLD AFTER 3 1/2 YEARS OF PARTNERSHIP THAT PROVIDED STRATEGIC ADVICE, CONNECTIONS, AND OVER \$100,000 IN FINANCIAL SUPPORT THAT HELPED TRANSFORM THEIR BRAND, BOARD, BUDGET, AND PROGRAMS LASVP WAS HONORED TO RECEIVE THE "SERVICE" AWARD AT HEALTHY CHILD'S 2011 FUNDRAISING GALA

ldentifier	Return Reference	Explanation
PROGRAM SERVICE STATEMENT	FORM 990, PART III, LINE 4B, DESCRIPTION OF PROGRAM SERVICE	SOCIAL INNOVATION FAST PITCH PROGRAM LASVP'S MEMBERS, EXPERIENCED IN FUNDING FOR-PROFIT VENTURES, RECOGNIZED A GAP IN LOS ANGELES'S NONPROFIT LANDSCAPE - THERE WAS NO FORUM FOR NON-PROFIT ENTREPRENEURS TO PITCH THEIR IDEAS TO POTENTIAL SUPPORTERS LASVP'S SOLUTION THE SOCIAL INNOVATION FAST PITCH 2011 WAS THE FOURTH YEAR THAT LASVP IMPLEMENTED THE PROGRAM, WORKING IN CLOSE COLLABORATION WITH THE ANNENBERG FOUNDATION (ANNENBERG) TO HOLD THE FINAL COMPETITION AT ANNENBERG'S PEER TO PEER EVENT OVER TWO MONTHS, LEADERS FROM 20 INNOVATIVE NONPROFITS RECEIVED TRAINING, FEEDBACK AND MENTORING ON HOW TO SUCCINCTLY AND POWERFULLY TELL THEIR STORY IN A 3-MINUTE "ELEVATOR PITCH" FORTY EXPERIENCED BUSINESS PROFESSIONALS, INCLUDING LASVP PARTNERS, SERVED AS VOLUNTEER COACHES OTHER LASVP PARTNERS ASSISTED IN COORDINATING THE PROGRAM OF VOLUNTEERING AT THE EVENT IN TOTAL, VOLUNTEER TIME EXCEEDED 1,500 HOURS THE PROGRAM CULMINATED AT THE PEER TO PEER EVENT AT LA LIVE'S CLUB NOKIA, WHERE 10 FINALISTS MADE THEIR PITCH BEFORE A PANEL OF JUDGES AND AN AUDIENCE OF OVER 1,100 PHILANTHROPISTS, INVESTORS, BUSINESS AND NON-PROFIT LEADERS, AND OTHER MEMBERS OF LOS ANGELES'S ENTREPRENEURIAL COMMUNITY 99% OF EVENT ATTENDEES INDICATED THAT THE EVENT WAS INSPIRING AND INFORMATIVE \$51,250 IN GRANTS WERE AWARDED, BUT IN LINE WITH LASVP'S ENGAGED PHILANTHROPY MODEL, THE PARTICIPANTS CONSISTENTLY RATED THE VALUE OF THE COACHING, VISIBILITY, AND CONNECTIONS AS FAR GREATER THAN THE GRANTS AT STAKE SINCE THE PROGRAM BEGAN IN 2008, FAST PITCH "ALUMNI" HAVE RAISED MORE THAN \$700,000 THAT THEY ATTRIBUTE TO THEIR FAST PITCH EXPERIENCE. IN ADDITION, THE PROGRAM IS NOW BEING REPLICATED IN VARIOUS WAY'S BY 8 OTHER SVP CHAPTERS IN THE US AND CANADA

ldentifier	Return Reference	Explanation
PROGRAM SERVICE STATEMENT	FORM 990, PART III, LINE 4C, DESCRIPTION OF PROGRAM SERVICE	PHILANTHROPY DEVELOPMENT LASVP EDUCATES AND ENABLES MEMBERS AND PROSPECTIVE MEMBERS TO BECOME MORE INFORMED AND EFFECTIVE DONORS WE HOST WORKSHOPS AND SEMINARS WHERE PEOPLE LEARN FROM EACH OTHER, FROM NONPROFIT PROFESSIONALS, AND FROM SUBJECT-MATTER EXPERTS SOME OF THE MOST HIGH-IMPACT LEARNING EXPERIENCES FOR PARTNERS ARE PARTICIPATING IN THE GRANTMAKING PROCESS, VOLUNTEERING ON CAPACITY-BUILDING PROJECTS WITH GRANTEES, OR COACHING A SOCIAL ENTREPRENEUR IN THE FAST PITCH PROGRAM BASED ON THE MOST RECENT SURVEY OF LASVP'S MEMBERS, 68% INDICATED THAT THEIR ANNUAL GIVING TO CHARITABLE CAUSES HAS INCREASED SINCE JOINING LASVP, AND 76% INDICATE THAT LASVP HAS INFLUENCED THEIR GIVING LEVEL. FOR EXAMPLE, A NUMBER OF OUR MEMBERS HAVE MADE DIRECT PERSONAL CONTRIBUTIONS TO THESE AND OTHER NONPROFITS THEY LEARNED ABOUT THROUGH OUR DUE DILIGENCE PROCESS AND OTHER PROGRAMS WE ESTIMATE THESE ADDITIONAL CONTRIBUTIONS OVER TIME TO TOTAL MORE THAN \$1,675,000 PARTNERS ALSO INDICATE THAT THEY HAVE BECOME MORE INVOLVED IN THE COMMUNITY AT LARGE, AND 85% SAY LASVP HAS HAD AN INFLUENCE ON THIS THE SURVEY RESULTS ALSO INDICATE THAT PARTNERS ARE EMPLOYING A WIDER VARIETY OF DECISION-MAKING PRACTICES CONSIDERED BY THE PHILANTHROPIC COMMUNITY TO BE "STRATEGIC" IN NATURE, SUCH AS USING FORMAL SELECTION AND EVALUATION PROCESSES, AND FUNDING NONPROFIT INFRASTRUCTURE

Identifier	Return Reference	Explanation
	FORM 990, PART V, QUESTION 2A	THE AMOUNT SHOWN IN BOX 2A REPRESENTS THE NUMBER OF EMPLOYEES AND W-2'S FILED SINCE THE W-2 WAS FILED ELECTRONICALLY, NO W-3 WAS REQUIRED TO BE FILED IN 2011 LASVP ALSO HAD ONE FULL-TIME AMERICORPS VISTA (VOLUNTEER IN SERVICE TO AMERICA) ON STAFF, BEGINNING IN FEBRUARY THIS NATIONAL SERVICE ORGANIZATION CONNECTS VOLUNTEERS TO YEAR-LONG SERVICE OPPORTUNITIES TO ASSIST IN BUILDING THE CAPACITY OF NON-PROFIT ORGANIZATIONS THAT HAVE A POSITIVE IMPACT ON COMMUNITIES IN POVERTY WHILE LASVP BENEFITTED FROM THE SERVICE OF A FULL-TIME WORKER, SHE WAS TECHNICALLY EMPLOYED BY THE CORPORATION FOR NATIONAL & COMMUNITY SERVICE, A GOVERNMENT-FUNDED ORGANIZATION THAT PROVIDES STIPENDS, TRAINING AND RELOCATION EXPENSES FOR AMERICORPS VOLUNTEERS

Identifie	Return Reference	Explanation
		ACCORDING TO LASVPS BY LAWS, THE ORGANIZATION'S DONORS WHO MAKE MINIMUM ANNUAL FINANCIAL CONTRIBUTIONS TO LASVP AT LEVELS ESTABLISHED BY THE BOARD OF DIRECTORS ARE CONSIDERED "MEMBERS" OF THE CORPORATION, ALSO KNOWN AS "PARTNERS"

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 7A	ACCORDING TO LASVP'S BY LAWS, THE ORGANIZATION'S MEMBERS (OR PARTNERS) HAVE THE RIGHT TO ELECT, APPOINT, OR REMOVE ANY DIRECTOR OF THE CORPORATION

Identifier	Return Reference	Explanation
	PART VI, SECTION A, LINE 7B	LASVPS MEMBERS (OR PARTNERS) HAVE THE RIGHT TO VOTE ON DECISIONS OR RECOMMENDATIONS MADE BY THE BOARD OF DIRECTORS, INCLUDING MATTERS SUCH AS BUT NOT LIMITED TO AMENDING, ALTERING, OR REPEALING THE BYLAWS, ARTICLES OF INCORPORATION, OR BOARD RESOLUTIONS, PLANS FOR CORPORATE MERGERS, CONSOLIDATIONS OR DISSOLUTIONS, AND THE SALE, LEASE, OR EXCHANGE OF SIGNIFICANT ASSETS OF THE CORPORATION NOT IN THE ORDINARY COURSE OF BUSINESS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 8B	LASVPS EXECUTIVE COMMITTEE IS THE ONLY COMMITTEE WITH THE AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY GENERAL PRACTICE WAS NOT TO CREATE MINUTES FOR EXECUTIVE COMMITTEE MEETINGS, BUT THAT ALL ACTIONS TAKEN WERE COMMUNICATED TO THE BOARD AT THE NEXT BOARD MEETING AND CAPTURED IN THAT MEETING'S MINUTES FOR FUTURE EXECUTIVE COMMITTEE MEETINGS, COMMITTEE ACTIONS WILL BE REFLECTED EITHER IN CONTEMPORANEOUS MINUTES, CONSENT ACTIONS, OR BOTH

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	THE EXECUTIVE DIRECTOR FORWARDS THE FORM 990 AND SIGNIFICANT SCHEDULES TO THE BOARD OF DIRECTORS AND THE EXECUTIVE COMMITTEE FOR THEIR REVIEW PRIOR TO FILING THE FORM 990 WITH THE INTERNAL REVENUE SERVICE BOARD MEMBERS AND EXECUTIVE COMMITTEE MEMBERS (WHO ARE ALSO BOARD MEMBERS) ARE ENCOURAGED TO REVIEW THE FORM 990 AND TO FORWARD THEIR QUESTIONS OR COMMENTS TO THE EXECUTIVE DIRECTOR EITHER THE EXECUTIVE DIRECTOR OR THE ACCOUNTING FIRM ADDRESSES THE QUESTIONS FROM THE BOARD AND THE EXECUTIVE COMMITTEE.

Identifier	Return Reference	Explanation	
	FORM 990, PART VI, SECTION B, LINE 12C	IN THE EVENT THAT A POTENTIAL CONFLICT OF INTEREST IS IDENTIFIED, THE CONFLICT OF INTEREST POLICY IS REVIEWED ALONG WITH THE BOARD MEMBER'S CIRCUMSTANCES TO DETERMINE IF IN FACT SUCH A CONFLICT EXISTS IF IT IS DETERMINED THAT SUCH CONFLICT OF INTEREST DOES EXIST, THE BOARD WILL DISCUSS THE MATTER OUTSIDE THE PRESENCE OF THE PARTY WHOSE INTEREST IS THE BASIS FOR SUCH CONFLICT AND WILL MAKE ITS DECISIONS WITHOUT THE INPUT OR VOTE OF SUCH PARTY THE PROCESS AND VOTE ARE REFLECTED IN THE MINUTES OF THE MEETING OF THE BOARD	

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15A	ALL EMPLOYMENT AGREEMENTS AND COMPENSATION ARRANGEMENTS ARE REVIEWED ANNUALLY BY THE BOARD OF DIRECTORS AND ADJUSTED BASED ON THE MUTUALLY AGREED SCOPE OF SERVICES TO BE RENDERED AND A THOROUGH PERFORMANCE REVIEW ALL EMPLOYMENT AGREEMENTS, WHEN UTILIZED, ARE NEGOTIATED ON AN ARM'S LENGTH BASIS, IN ACCORDANCE WITH THE ORGANIZATION'S CONFLICT OF INTEREST POLICY STEPS ARE TAKEN TO ENSURE COMPENSATION IS CONSISTENT WITH THE FAIR MARKET VALUE FOR SUCH ARRANGEMENT BY COMPARING THE COMPENSATION OF EMPLOYEES IN THE NONPROFIT SECTOR PROVIDING SIMILAR SERVICES (E.G., OTHER SOCIAL VENTURE PARTNER AFFILIATES AROUND THE COUNTRY, INDUSTRY COMPENSATION SURVEYS, OR SIMILAR) WITH COMPARABLE LEVELS OF EXPERIENCE AND EXPERTISE FEE ARRANGEMENTS FOR INDEPENDENT CONTRACTORS ARE NEGOTIATED ANNUALLY AND WITHIN A COMPETITIVE MARKET ENVIRONMENT FOR FIRMS OFFERING SIMILAR SERVICES

Identifier	Return Reference	Explanation
	1 '	THE FORM 990 (OR FORM 990-EZ) ARE AVAILABLE ON THIRD-PARTY WEBSITES SUCH AS GUIDESTAR (WWW GUIDESTAR ORG) ADDITIONALLY, LASVP MAKES ITS FORMS 990 (NOT INCLUDING SCHEDULE B) AND FORM 1023 AVAILABLE FOR PUBLIC INSPECTION UPON REQUEST

Identifier	Return Reference	Explanation	
	FORM 990, PART VI, SECTION C, LINE 19	IN ADDITION TO THE FORMS 990 AND 1023, LASVP'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE FOR PUBLIC INSPECTION UPON REQUEST WE RESERVE THE RIGHT TO CHARGE A REASONABLE COPYING FEE PLUS ACTUAL POSTAGE FOR MULTIPLE COPIES REQUESTED FROM THE SAME INDIVIDUAL OR RELATED GROUP OF INDIVIDUALS	

Identifier	Return Reference	Explanation
	FORM 990, PART VII, SECTION A, QUESTION 1A	THE FOLLOWING DIRECTOR SERVED A TERM THAT ENDED IN JANUARY, 2011 TODD DIPAOLA

Identifier	Return Reference	Explanation
		IN 2011, LASVP'S MANAGEMENT AND GENERAL EXPENSES WERE HIGHER BECAUSE THE EXECUTIVE DIRECTOR SPENT A SIGNIFICANT AMOUNT OF HER TIME WORKING WITH LASVP PARTNERS ON A LONG-TERM STRATEGIC PLAN ADDITIONAL PROJECT MANAGEMENT AND FACILITATION RESOURCES WERE SECURED FROM POINT B CONSULTING, A MANAGEMENT CONSULTING COMPANY, ON A PRO-BONO BASIS

Identifier	Return Reference	Explanation
		THE ORGANIZATION USES THE ACCRUAL METHOD OF ACCOUNTING FOR ITS CONTRIBUTIONS AND GRANTS RECEIVED, AS WELL AS, GRANTS TO BE MADE. ALL OTHER CASH RECEIPTS AND DISBURSEMENTS ARE RECORDED ON CASH BASIS OF ACCOUNTING

Identifier	Return Reference	Explanation
		DUE TO SOFTWARE LIMITATIONS, THE FOLLOWING QUESTIONS HAVE BEEN ANSWERED "NO" OR LEFT BLANK, BUT SHOULD HAVE BEEN ANSWERED "N/A" PART IV, QUESTION 11(F) PART V, QUESTION 1(C) PART V, QUESTIONS 7 (G), (H) PART V, QUESTIONS 8 THROUGH 13 PART VI, QUESTION 15(B) PART XII, QUESTION 3(A)