

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



SCANNED MAR 2 6 201

Form 990

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047
2011
Open to Public

Department of the Treasury Internal Revenue Service The organization may have to use a copy of this return to satisfy state reporting requirements

A	ror the	2011 calendar year, or tax year beginning SEP 1,	ZUII and	enaing A	10G 31, ZU1Z	
В	Check if applicable	C Name of organization			D Employer identific	cation number
Г	Addre	THE WOODEN FLOOR FOR YOUTH 1	MOVEMENT			
X	Name				33-0	299356
	Initial	Number and street (or P.O. box if mail is not delivered to stre	eet address)	Room/suite	E Telephone number	
	Terminated		,			541-8314
	Ameno	City or town, state or country, and ZIP + 4			G Gross receipts \$	4,468,267.
	Applic	BANTA ANA, CA J2700 2727			H(a) Is this a group re	turn
	pendir	F Name and address of principal officer DAWN S. I	REESE		for affiliates?	Yes X No
		SAME AS C ABOVE			H(b) Are all affiliates inc	uded? Yes No
		empt status: X 501(c)(3) 501(c) () ◀ (insert r	no.) 4947(a)(1)	or 527		list. (see instructions)
		e: THEWOODENFLOOR.ORG	T		H(c) Group exemption	
	_	organization: X Corporation Trust Association	Other >	L Year	of formation: 1983 N	State of legal domicile: CA
		Summary	A D m C	DACEE	VOTIMIT DESTRE	ODMENT
ç	1	Briefly describe the organization's mission or most significant THROUGH DANCE, ACADEMIC AND FAI	activities. ARTS	-BASEL	D TOW THEOM	POLIMA POLIMA
Governance	1					
Veri		Check this box I if the organization discontinued its	•	sea or more	1 1	sets 25
Ĝ	1	Number of voting members of the governing body (Part VI, Iin Number of independent voting members of the governing bo			3 4	25
Activities &	1	Number of independent voting members of the governing boo Total number of individuals employed in calendar year 2011 (l	• •		5	22
ite		Total number of volunteers (estimate if necessary)	art v, mic zaj		6	491
휹		Total unrelated business revenue from Part VIII, column (C), In	ne 12		7a	0.
Ř		Net unrelated business taxable income from Form 990-T, line			7b	0.
	 				Prior Year	Current Year
Ф	8	Contributions and grants (Part VIII, line 1h)	CEIVED		1,743,092.	1,984,046.
ž	9	Program service revenue (Part VIII, line 2g)	CLIVLU	,] [32,913.	27,657.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4 and 7d)	_ 3 707 -		200,276.	46,763.
ш	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c; 9c, 10c,	And 116 2013		44,765.	86,614.
	12	Total revenue - add lines 8 through 11 (must equal Pa <u>rt VIII,</u> c	column (A), line 12)	8	2,021,046.	2,145,080.
	13	Grants and similar amounts paid (Part IX, column (A), lines 13	DEN IIT	, <u> </u>	202,149.	226,266.
	14	Benefits paid to or for members (Part IX, column (A), line 4)—		' <u> </u>	0.	0.
Ses	15	Salanes, other compensation, employee benefits (Part IX, col	umn (A), lines 5-10)	_	1,158,486.	1,255,982.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	E11 0	67 W	55,200.	55,200.
ᄶ	b	Total fundraising expenses (Part IX, column (D), line 25)	511,0	<u>07.</u>	889,995.	908,475.
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	(A) I OF)		2,305,830.	2,445,923.
	1	Total expenses. Add lines 13-17 (must equal Part IX, column i	(A), line 25)	\vdash	-284,784.	-300,843.
or Sec		Revenue less expenses. Subtract line 18 from line 12		Re	ginning of Current Year	End of Year
ets (20	Total assets (Part X, line 16)			8,188,084.	8,064,176.
t Assets	21	Total liabilities (Part X, line 26)			110,810.	126,511.
Set	22	Net assets or fund balances. Subtract line 21 from line 20			8,077,274.	7,937,665.
		Signature Block		··		<u> </u>
Unc	der pena	ities of perjury, I declare that I have examined this return, including ac	companying schedule	es and statem	ents, and to the best of my	knowledge and belief, it is
true	e, correc	t, and complete. Declaration of preparer (other than officer) is based of	on all information of w	hich preparer	has any knowledge.	
		Melon & Reese			2-2	6-13
Sig	ın	Signature of officer			Date	
He	re	DAWN S. REESE, EXECUTIVE DI	RECTOR		-	
		Type or print name and title		1 1)ata	PTIN
		Print/Type preparer's name Preparer's	signature		Date Check	
Pai		RICK SMETANKA	500		02-21-13 self-employe	
	parer	Firm's name HASKELL & WHITE LLP	ርጣው ኃላለ		Firm's EIN	33-0310569
US	Only	Firm's address 8001 IRVINE CENTER DR IRVINE, CA 92618	, DIE 300		Dhone so O	49-450-6200
N4=			octa ictions/		Phone no. 9	77
		RS discuss this return with the preparer shown above? (see in		ions	· · · · · · · · · · · · · · · · · · ·	Form 990 (2011) 7
132	001 01-2	3-12 LIM FOI Fapel WOLK neutrolibil Act Notice, see the	, separate instructi	ioris.		1 OIIII 330 (2011) (

	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Bnefly describe the organization's mission:
	TO EMPOWER LOW-INCOME YOUTH TO BUILD SELF-ESTEEM, SELF-DISCIPLINE AND
	A SENSE OF ACCOMPLISHMENT THROUGH DANCE, ACADEMIC AND FAMILY PROGRAMS.
	BREAKING THE CYCLE OF POVERTY THROUGH GENERATIONAL CHANGE IS THE
	LONG-TERM GOAL OF THE WOODEN FLOOR.
2	Did the organization undertake any significant program services during the year which were not listed on
	the pnor Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses
4	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to
	others, the total expenses, and revenue, if any, for each program service reported.
40	722 016
4a	(Code) (Expenses \$ 732,916 including grants of \$) (Revenue \$ 3,757) YEAR-ROUND DANCE EDUCATION IS OUR CORE PROGRAM FOR TRANSFORMATIONAL
	GROWTH. A RIGOROUS 10-LEVEL CURRICULUM (53 CLASSES/WEEK IN BALLET,
	MODERN, IMPROVISATION, CHOREOGRAPHY) LEADS OUR LOW-INCOME STUDENTS TO DEVELOP SELF-KNOWLEDGE, CONFIDENCE, CREATIVITY, TEAMWORK AND A SENSE OF
	WELL-BEING AND JOY.
	205 052
4b	(Code) (Expenses \$ 305,273 • including grants of \$) (Revenue \$ 23,900 •)
	PERFORMANCES: REHEARSAL AND PERFORMANCE TEACH DISCIPLINE, GOAL-SETTING,
	COMMITMENT AND ACHIEVEMENT THROUGH HARD WORK. OUR STUDENTS PERFORM AT
	AN ANNUAL CONCERT IN JUNE OF EACH YEAR. OTHER PERFORMANCES OCCUR IN
	THE WOODEN FLOOR STUDIO THEATRE AND OCCASIONALLY AT TOURING VENUES SUCH
	AS REDCAT IN LOS ANGELES.
	542.000
4c	(Code
	SUPPORTING PROGRAMS:
	ACADEMIC - TUTORING, REMEDIAL WORKSHOPS, PRE-COLLEGIATE MENTORING AND
	COLLEGE SCHOLARSHIPS ENSURE OUR STUDENTS GRADUATE HIGH SCHOOL ON-TIME,
	ENROLL IN AND ARE PREPARED TO SUCCEED IN COLLEGE.
	FAMILY SERVICES - COUNSELING, CRISIS INTERVENTION AND SOCIAL SERVICE
	REFERRALS HELP OUR FAMILIES OVERCOME SOCIO-ECONOMIC HARDSHIPS. INCLUDES
	COLLEGE TOURS, CAREER SEMINARS, HEALTH AND FINANCIAL LITERACY
	WORKSHOPS, AND SUMMER CAMP SCHOLARSHIPS.
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ 26,303 • including grants of \$) (Revenue \$)
_4e	Total program service expenses ▶ 1,608,300.
	Form 990 (2011)
13200	2

Form 990 (WOODEN		FOR	YOUTH	MOVE
Part IV	Checklist of	f Require	d Schedule	es			

			V	
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		 ₩	l
	If "Yes," complete Schedule A	1	X	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors	2	Х	
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		١.,	
	dunng the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	İ		1
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
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		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	<u> </u>		
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X		,	1
••	as applicable	v	1.	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
u	Part VI	11a	х	
ь	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	Х	
_	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	-110		
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
а	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	110		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116		
•	the organization's separate or consolidated initial organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
120	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
12.0	Schedule D, Parts XI, XII, and XIII	12a	x	
h		120		
D	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		х
12	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
13				X
14a	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		
D	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	146		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	14b		
15	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	13		
10	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		
17	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	х	
10	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	-1/	-41	
18		40	х	
40	1c and 8a? If "Yes," complete Schedule G, Part II	18	-22	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40		Х
20-	complete Schedule G, Part III	19		$\frac{\mathbf{x}}{\mathbf{x}}$
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a 20b		
<u>D</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		99n <i>"</i>	2011)
		I OIII	J J J (,	_UII)

132003 01-23-12

Form 990 (2011) THE WOODEN FLOOR F

Rart V Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the	Į		
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			ľ
	Schedule J	23		X
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 lines 24b through 24d and complete			ŀ
	Schedule K If "No", go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		X
Ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			v
07	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	27		
	instructions for applicable filing thresholds, conditions, and exceptions)		**	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	2002000	X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	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 direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			•
	Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity?	33		<u> </u>
-	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ь	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of	338		
_	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	- 1	Х
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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	
		Form 5	990 (2	2011)

33-0299356 THE WOODEN FLOOR FOR YOUTH MOVEMENT Page 5 Form 990 (2011) Statements Regarding Other IRS Filings and Tax Compliance Part V Check if Schedule O contains a response to any question in this Part V Yes No 49 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0 1b b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 1c (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 22 filed for the calendar year ending with or within the year covered by this return X 2b b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За b 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 Х financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a 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. X 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X **b** Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit X 6a 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 6b were not tax deductible? Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? X 7a $\overline{\mathbf{x}}$ b If "Yes." did the organization notify the donor of the value of the goods or services provided? 7Ь Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required 7с to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 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. a Did the organization make any taxable distributions under section 4966? 9a Did the organization make a distribution to a donor, donor advisor, or related person? 9b Section 501(c)(7) organizations. Enter: 10 a Initiation fees and capital contributions included on Part VIII, line 12 10a 10b b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: 11a 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.) 11b 12a 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12b b If "Yes." enter the amount of tax-exempt interest received or accrued during the year

> 14a X 14b

13a

Form 990 (2011)

13b

13c

Section 501(c)(29) qualified nonprofit health insurance issuers.

organization is licensed to issue qualified health plans

c Enter the amount of reserves on hand

a Is the organization licensed to issue qualified health plans in more than one state?

14a Did the organization receive any payments for indoor tanning services during the tax year?

Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

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

	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 25	, ^	,	
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 25			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	454		77 .
	officer, director, trustee, or key employee?	2		X
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		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	X	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		Х
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		X
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		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			<u>.</u>
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	_
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		X
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	.	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	احت	X	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	40-	x	
10	In Schedule O how this was done	12c	$\frac{\Lambda}{X}$	_
13	Did the organization have a written whistleblower policy?	13	X	
14 15	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent	14	^	
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		.	
	The organization's CEO, Executive Director, or top management official	15a	X	ننىد
a	Other officers or key employees of the organization	15a		X
J	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	130	, i,	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	7-3	ţ	,
	taxable entity during the year?	16a		X
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		į	
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶CA			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finan	cial	
	statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organizar	ion 🕨		
	DAWN REESE - 714-541-8314			
	1810 N. MAIN STREET, SANTA ANA, CA 92706			
13200t)1-23-	12	Form	9 90 (2011)

Form 990 (2011)

Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response to any question in this Part VII

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 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A) Name and Title	(B) Average hours per week	box	, unle	Pos heck ss pe	rson	than is bot or/trus	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Kay employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) ERNESTO VASQUEZ	4 00							•		
CHAIR	1.00	Х						0.	0.	0
(2) GLENNDA ADAIR	0.50									
DIRECTOR	0.50	Х				<u> </u>		0.	0.	0
(3) JOAN BEALL	0.50	\								0
DIRECTOR	0.50	X		_	_	<u> </u>	\vdash	0.	0.	0
(4) CATHERINE CHASE DIRECTOR	0.50	x	ĺ					0.	0.	0
(5) JIM DRISCOLL	0.30	₽		-		├		0.	0.	
DIRECTOR	0.50	X			ŀ	1		0.	0.	0
(6) FRANK HALL	0.30	-	├	-	├	├	-	0.	0.	<u></u>
DIRECTOR	0.50	х						0.	0.	0
(7) SHARON HARTSHORN			\vdash	\vdash	-	\vdash	_			
DIRECTOR	0.50	x						0.	0.	0
(8) VIRGINIA HUNSAKER										
DIRECTOR	0.50	X		l	l			0.	0.	0
(9) YVONNE JORDAN										
DIRECTOR	0.50	X						0.	0.	0
(10) JUAN LAGUNA										
DIRECTOR	0.50	X						0.	0.	0
(11) CATHERINE MACIVER								_	_	
DIRECTOR	0.50	X						0.	0.	0
(12) DONALD MCKAYLE		l						•		_
DIRECTOR	0.50	X	_	Щ	L_	Ļ.,		0.	0.	0
(13) YVONNE O'NEILL	0.50	,,						,		•
DIRECTOR	0.50	X	\vdash		<u> </u>		\dashv	0.	0.	0
(14) CYRUS PARKER-JEANETTE	0.50	x			l			0.	0.	0
DIRECTOR (15) LARRY STOFKO	0.30	┝	\vdash	\vdash	_	\vdash	$\vdash \vdash$	U •	<u> </u>	0
DIRECTOR	0.50	y						0.	0.	0
(16) SUSAN WHITTAKER	0.30	A	\vdash	H	\vdash		\vdash		0.	
DIRECTOR	0.50	x						0.	0.	0
(17) BARBARA YINGLING	- 1000	Ħ	\vdash	\vdash	_	\vdash				
DIRECTOR	0.50	x						0.	0.	0

132007 01-23-12

Form **990** (2011)

Part VII Section A. Officers, Directors, Tru	ustees, Key E	mplo	yee	s, a	nd l	ligh	est	Compensated Employ	rees (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do	not c	Pos	nore	than	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	s bot	han	compensation	compensation	amount of
	week	H	er an	Gau	I	A/a US	T	from	from related	other
	(describe hours for	rec to						the	organizations	compensation from the
	related	5	<u>a</u>			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	organization
	organizations	trustee or director	1 trus		8	uadu		(***-2/1099*181130)		and related
	ın Schedule		institutional trustee	_	힐	stcol	_k			organizations
	0)	Individual	Instit	Officer	Key employee	Highest compensated employee	Form	<u> </u>		
(18) WILLIAM YINGLING III										
DIRECTOR	0.50	X						0.	0.	0.
(19) DAMIEN JORDAN								_	_	_
IMMEDIATE PAST CHAIR	0.50	Х		X		<u>L</u>		0.	0.	0.
(20) RICHARD HUNSAKER					ļ					
TREASURER	1.00	Х		X		L.	_	0.	0.	0.
(21) FRANK FOSTER	1 00			,,					_	
SECRETARY	1,00	Х		Х	<u> </u>	<u> </u>		0.	0.	0.
(22) JIM SLAUGHTER	1.00	х		Х				0.	0.	0.
VICE CHAIR	1.00	Λ		₽		<u> </u>		0.	0.	
(23) DANNY MELITA	0.50	х						0.	0.	0.
DIRECTOR	0.50	^		_		_		0.	0.	<u> </u>
(24) KRISTY SANTIMEYER-MELITA	0.50	X						0.	0.	0.
DIRECTOR (25) LUZ OROZCO	0.50	^		_		-	-	0.	0.	
DIRECTOR	0.50	x						0.	0.	0.
(26) DAWN REESE	0.50	~		H		-		0.	<u> </u>	
EXECUTIVE DIRECTOR	40.00			x				102,446.	0.	8,189.
1b Sub-total		1			<u> </u>		L	102,446.	0.	8,189.
c Total from continuation sheets to Part V	II. Section A							128,273.	0.	
d Total (add lines 1b and 1c)	.,					•		230,719.	0.	
Total number of individuals (including but r	not limited to th	ose	liste	ed al	bove	e) wt	no re	eceived more than \$100	,000 of reportable	
compensation from the organization										2
	•									Yes No
3 Did the organization list any former officer,	, director, or tru	uste	e, ke	y er	nplo	yee,	, or h	highest compensated e	mployee on	
line 1a? If "Yes," complete Schedule J for s	such individual									3 X
4 For any individual listed on line 1a, is the si									the organization	
and related organizations greater than \$15										4 X
5 Did any person listed on line 1a receive or							elate	ed organization or indivi	idual for services	
rendered to the organization? If "Yes," con	plete Schedul	e J f	or su	ıch	pers	on				5 X

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

	(A) Name and business address	NONE	(B) Description of services	(C) Compensation

<u>. </u>				

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization
SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2011)

132008 01-23-12

Part VII Section A. Officers, Directors, 1									rees (continued)	
(A) Name and title	(B) Average hours	(ct		Pos all t	ition		ıly)	(D) Reportable compensation	(E) Reportable compensation from related	(F) Estimated amount of
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(27) MELANIE RIOS GLASER	40.00					x		120 272	0.	6 504
ARTISTIC DIRECTOR	40.00					_		128,273.	0.	6,504
Total to Part VII, Section A, line 1c								128,273.		6,504

	irt Vi	iii Statemeni				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	a Federated campa	iigns	1a					
Sra Iou	l t	Membership dues	S	1b					,
Arr	•	Fundraising event	ts	1c	60,622.		ļ		
를 를	•	d Related organizat	ions	1d					
Si.	6	e Government gran	ts (contribut	tions) 1e					
e tio	f	All other contribution	ns, gifts, gran	its, and					
ğ.		sımılar amounts not	included abo	ve 1f	1923424.				,
dat	9	Noncash contributions	included in lines	i 1a-1f \$	149,595.				
<u>8 0</u>	<u> </u>	n Total. Add lines 1	a-1f		•	1984046.			
	ŀ			_	Business Code				
ce	2 8	·			711120	23,900.	23,900.		
er.	t	YEAR-ROUN	ID PROG	RAM	711120	3,757.	3,757.		
n S ren	۰	·			_			74	
Rev	(d			_				
Program Service Revenue	•	e			-				
ъ.	f	f All other program		enue		07 657			
	· · · · · ·	Total. Add lines 2		<u> </u>	<u> </u>	27,657.			
	3	Investment incom	· -	dividends, int	erest, and	05 062			05 060
	_	other similar amou	•			95,062.			95,062.
	4	Income from inves	stment of ta	x-exempt bon	d proceeds				
	5	Royalties			_	*	·		
				(i) Real	(ıí) Personal				
	i	a Gross rents					•	~	-
	1	Less: rental exper							
:		Rental income or Net rental income		L				·	
	L	Gross amount from		(i) Secuntie	s (II) Other				
	' °	assets other than		2,178,10		;			
	١,	Less: cost or other	•	,-,-			* *		· :
	i '	and sales expens		2,226,40	1.		, , ,	` ;	
	١,	Gain or (loss)	00	-48299		-			2.5
		Net gain or (loss)				-48,299.			-48,299.
•		Gross income from	m fundraisin	a events (not		,			
Other Revenue	•	including \$		22. of		•		•	•
eve		contributions repo				-			· .
<u>σ</u>		Part IV, line 18		,	a 183400.				
the	l t	Less: direct exper	nses		ь 96,786.	:			- A -
O	(Net income or (los	ss) from fund	draising event	s 🕨	86,614.			86,614.
		Gross income from		-					1
		Part IV, line 19			a				· ·
	t	Less: direct exper	nses		b				
	(Net income or (los	ss) from gam	ning activities	•				
	10 a	Gross sales of inv	entory, less	returns		-			
		and allowances			а				,
		Less cost of good			b				
	<u></u>	Net income or (los			ĭ				
	ļ	Miscellane	ous Revenu	ie	Business Code				
	11 a	a			-				
	t	·			-				
	۱ ۹	·			-				
	1	All other revenue							<u> </u>
	ļ	Total Add lines 1			P	2145080.	27 657		122 200
1320	12 09	Total revenue. See	IIISTructions.			Z145U8U.	27,657.	0.	
13200 01-23	3-12								Form 990 (2011)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

Do i	Check if Schedule O contains a respon- not include amounts reported on lines 6b,	(A)	(B) Program service	(C) Management and	(D) Fundraising
	8b, 9b, and 10b of Part VIII	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in	226,266.	226,266.		
	the United States. See Part IV, line 22	220,200.	220,200.		
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,	119,383.	69,624.	11,556.	38,203
_	trustees, and key employees Compensation not included above, to disqualified	117,303.	05,024.	11,550.	30,203
6					
	persons (as defined under section 4958(f)(1)) and	į			
-	persons described in section 4958(c)(3)(B)	930,459.	487,494.	175,404.	267,561
7	Other salanes and wages Pension plan accruals and contributions (include	730,437.	407,434.	173,404.	207,301
8	·	;			
_	section 401(k) and section 403(b) employer contributions)	122,160.	70,576.	16,907.	34 677
9	Other employee benefits	83,980.	44,566.	14,955.	34,677 24,459
10	Payroll taxes Fees for services (non-employees):	03,3001	11,500.	11,555.	21,133
11					
a	Management				
b	Legal		<u>-</u>		
C	Accounting Lobbying				
d	Professional fundraising services. See Part IV, line 17	55,200.	, ,		55,200
e	Investment management fees	337200.	<u></u>	` `	33,200
f	Other	92,623.	37,834.	34,399.	20,390
g 12	Advertising and promotion	52,020	0.,002.		
13	Office expenses	140,036.	73,284.	31,041.	35,711
14	Information technology	210,0001	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	32,0220	33,111
15	Royalties				
16	Occupancy	54,117.	46,989.	4,491.	2,637
17	Travel	16,250.	13,215.	1,041.	1,994
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	121,888.	113,116.	8,772.	·
23	Insurance	29,351.	24,607.	2,466.	2,278
24	Other expenses. Itemize expenses not covered	مشيد بويود	<i>"</i>		· · · · · · · · · · · · · · · · · · ·
	above. (List miscellaneous expenses in line 24e. If line			me finding	, , ,
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)		•	<i>'</i> , ,	•
а	TNOMOTIONODO	149,907.	149,907.	0.	0
b	DEDATEC AND MATNERNANCE	96,887.	70,722.	10,862.	15,303
c	DRODITOMION OFFICE	57,231.	57,231.	0.	0
d	A CA DEMT C MITMOD TAIC	32,332.	32,332.	0.	0
_	All other expenses	117,853.	90,537.	14,662.	12,654
25	Total functional expenses. Add lines 1 through 24e	2,445,923.	1,608,300.	326,556.	511,067
26	Joint costs. Complete this line only if the organization	i			<u> </u>
	reported in column (B) joint costs from a combined		!		
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				

132010 01-23-12

Pa	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	293,329.	1	47,572
	2	Savings and temporary cash investments	518,178.	2	484,581
	3	Pledges and grants receivable, net	316,699.	3	411,638
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II			
		of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	1	employers and sponsoring organizations of section 501(c)(9) voluntary			
_	ł	employees' beneficiary organizations (see instructions)		6	
2	7	Notes and loans receivable, net		7	
Assets	8	Inventones for sale or use		8	
-	9	Prepaid expenses and deferred charges	11,488.	9	3,992
	10a	Land, buildings, and equipment: cost or other	•		
		basis Complete Part VI of Schedule D 10a 5,030,			,
	ь	Less: accumulated depreciation 10b 1,608,	868. 3,532,009.	10c	3,421,659
	11	Investments - publicly traded securities	2,566,745.	11	2,846,044
	12	Investments - other securities. See Part IV, line 11	949,636.	12	848,690
	13	Investments - program-related See Part IV, line 11		13	-1
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	8,188,084.	16	8,064,176
	17	Accounts payable and accrued expenses	110,810.	17	126,511
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
2	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employe	ees,		
riaoiiines Liaoiiines		highest compensated employees, and disqualified persons. Complete P	art II		
3		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		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part >	Cof		
		Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	110,810.	26	126,511.
		Organizations that follow SFAS 117, check here X and comp	plete		Ţ
S		lines 27 through 29, and lines 33 and 34.			
5	27	Unrestricted net assets	5,269,742.	27	4,966,321
B	28	Temporanly restricted net assets	510,270.	28	671,582
2	29	Permanently restricted net assets	2,297,262.	29	2,299,762
2		Organizations that do not follow SFAS 117, check here	nd	,	
5		complete lines 30 through 34.			
S	30	Capital stock or trust principal, or current funds		30	
Ĉ	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
net Assets of Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		32	
Z	33	Total net assets or fund balances	8,077,274.	33	7,937,665.
	34	Total liabilities and net assets/fund balances	8,188,084.	34	8,064,176.

Form **990** (2011)

_	990 (2011) THE WOODEN FLOOR FOR YOUTH MOVEMENT	<u> 33-029</u>	9356	Pa	ge 12
Pa	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,14		
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,44		
3	Revenue less expenses Subtract line 2 from line 1	3	-30(
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	8,07		
5	Other changes in net assets or fund balances (explain in Schedule O)	5			34.
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	7,93	7,6	65.
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII .				
	<u></u>			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			,	1
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.			·
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
C	If "Yes" to line 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?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O.			
đ	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued	on a			į
	separate basis, consolidated basis, or both		1 :	,	
	X Separate basis Consolidated basis Both consolidated and separate basis		- -		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	gle Audıt			
	Act and OMB Circular A-133?		3a		X
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require	ed audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b		

Form **990** (2011)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury nternal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization Employer identification number 33-0299356 THE WOODEN FLOOR FOR YOUTH MOVEMENT Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 city, and state: **5** [An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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. c Type III - Functionally integrated d Type III - Other Type I b Type II 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 f supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes No the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) <u>11g(iii)</u> (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s). h (vi) Is the organization in col. (iii) Type of (iv) Is the organization (v) Did you notify the (i) Name of supported (ii) EIN (vii) Amount of organization in col. (i) listed in your organization in col organization support (described on lines 1-9 (i) organized in the U.S.? governing document? (i) of your support? above or IRC section (see instructions)) Yes No Yes Yes No No

132021 01-24-12

Schedule A (Form 990 or 990-EZ) 2011

Form 990 or 990-EZ.

LHA For Paperwork Reduction Act Notice, see the Instructions for

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 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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and						·
	membership fees received. (Do not						
	include any "unusual grants.")	2,222,326.	2,103,733.	2,083,547.	1,743,092.	1,834,451.	9,987,149.
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to					İ	
	the organization without charge					ļi	
4	Total. Add lines 1 through 3	2,222,326.	2,103,733.	2,083,547.	1,743,092.	1,834,451.	9,987,149.
5	The portion of total contributions						_
	by each person (other than a		٠	•	y	'	
	governmental unit or publicly	,		,			
	supported organization) included		· · ·			'	
	on line 1 that exceeds 2% of the		*		•		
	amount shown on line 11,				•		
	column (f)	, 1	* *	٠,			1,047,394.
6	Public support. Subtract line 5 from line 4	. , . ,		` , , , , ,			8,939,755.
Sec	tion B. Total Support					-	
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	2,222,326.	2,103,733.	2,083,547.	1,743,092.	1,834,451.	9,987,149.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	155,172.	141,260.	101,670.	107,571.	95,062.	600,735.
9	Net income from unrelated business					·	
	activities, whether or not the						
	business is regularly carned on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)				·		
11	Total support. Add lines 7 through 10		" " " " " " " " " " " " " " " " " " "		, , , , , ,		10,587,884.
12	Gross receipts from related activities,	etc (see instruction	ons)			12	189,576.
13	First five years. If the Form 990 is for	r the organization's	first, second, thir	d, fourth, or fifth ta	x year as a sectio	n 501(c)(3)	
	organization, check this box and stop						▶ □
Sec	tion C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2011 (line 6, column (f) di	vided by line 11, c	olumn (f))		14	84.43 %
15	Public support percentage from 2010	Schedule A, Part	II, line 14			15	79.80 %
16a	33 1/3% support test - 2011. If the	organization did no	t check the box or	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	
	stop here. The organization qualifies	as a publicly supp	orted organization	-	-		ightharpoons X
b	33 1/3% support test - 2010. If the	organization did no	t check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	lifies as a publicly s	supported organiza	ation	-		
17a	10% -facts-and-circumstances tes	t - 2011. If the org	anızatıon dıd not d	heck a box on line	: 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	cts-and-circumstan	ces" test, check th	nis box and stop h	ere. Explaın ın Par	rt IV how the organ	ızatıon
	meets the "facts-and-circumstances"	test The organiza	tion qualifies as a	publicly supported	dorganization		ightharpoons
b	10% -facts-and-circumstances tes	t - 2010. If the org	anızatıon did not d	heck a box on line	13, 16a, 16b, or 1	17a, and line 15 is	10% or
	more, and if the organization meets the	he "facts-and-circu	mstances" test, ch	neck this box and	stop here. Explain	n in Part IV how the	
	organization meets the "facts-and-circ	cumstances" test.	The organization of	qualifies as a public	cly supported orga	anızatıon	▶□
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17b	, check this box a	and see instructions	<u>, ▶</u>
					Sche	dule A (Form 990	or 990-EZ) 2011

Schedule A (Form 990 or 990-EZ) 2011 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 or if the organization failed to qualify under Part II. If the organization fails to	to
qualify under the tests listed below, please complete Part II.)	

qualify under the tests listed	l below, please con	nplete Part II)				
Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
 Gifts, grants, contributions, and 						
membership fees received (Do not	i					
include any "unusual grants.")			ļ	ļ		
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ- ization'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, and		- 				
3 received from disqualified person b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b			 			
8 Public support (Subtract line 7c from line 6) Section B. Total Support	Bernell School St. St. St. St. St.		To the second second second	THE CONTRACTOR OF COLUMN		<u> </u>
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6	(4,200.	(5) 2000	(0) 2000	(4) 2010	(0) 2011	(1) Total
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 businesse acquired after June 30, 1975	s					
c Add lines 10a and 10b						
11 Net income from unrelated busines activities not included in line 10b, whether or not the business is regularly carried on	s					
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12)	·	<u> </u>	<u> </u>	<u></u>		L
14 First five years. If the Form 990 is	for the organization	's first, second, thi	rd, fourth, or fifth t	ax year as a sectio	n 501(c)(3) organi	zation,
check this box and stop here	blic Current D					▶└
Section C. Computation of Pu					[]	•
15 Public support percentage for 201	•		column (f))		15	%
16 Public support percentage from 20					16	%
Section D. Computation of Inv					47	
17 Investment income percentage for	•		ne 13, column (f))	-	17	%
18 Investment income percentage from				- 4 <i>F</i>	18	%
19a 33 1/3% support tests - 2011. If the	•				•	1/ is not
more than 33 1/3%, check this box	=	•				. ▶□
b 33 1/3% support tests - 2010. If the	•				•	
line 18 is not more than 33 1/3%, o		· ·	·		•	
20 Private foundation. If the organiza	uon dia not check a	a DOX OF TIPE 14, 19	a, or 190, check t			0 == 000 577 2011
132023 01-24-12				Sch	eaule A (Form 99	0 or 990-EZ) 2011

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name	e of the organization ${ t THE t WOODEN t t t t t t t t t t t t t $	OR YOUTH MOVEMENT	Em	ployer identification nui 33-0299356	
Par			Acco		
ı uı	organization answered "Yes" to Form 990, Part IV, lin				
	organization answered Tes to Form 990, Fart 14, in		(b) Fur	nds and other accounts	
	Tatal number at and of year	(-),	·-, · -··		
1	Total number at end of year			· · · · · · · · · · · · · · · · · · ·	
2	Aggregate contributions to (during year)				
3	Aggregate grants from (during year)				
4	Aggregate value at end of year	waters that the essets held in depar advised for	nde		
5	Did the organization inform all donors and donor advisors in		ilus	Yes] No
_	are the organization's property, subject to the organization's		only	165	_ 140
6	Did the organization inform all grantees, donors, and donor a				
	for chantable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose confe	iiiig	Yes	No
Par	impermissible private benefit? t II Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990. Part IV	line 7		<u></u>
			, 11110 7	·	
1	Purpose(s) of conservation easements held by the organization	[]	ıllız ımn	ortant land area	
	Preservation of land for public use (e.g., recreation or o	Preservation of a certified h			
	Protection of natural habitat	Freservation of a certified i	iistoric	Structure	
_	Preservation of open space Complete lines 2a through 2d if the organization held a quality	find concentration contribution in the form of a c	oncon	ration eacement on the la	et
2		med conservation continuation in the form of a c	OHSCIV	ation easement on the la	.51
	day of the tax year.		`	Held at the End of the Tax	Year
_	Total number of conservation easements		2a	THORE EL CHO ELLO OF THE FUN	
a	Total acreage restricted by conservation easements		2b		
	Number of conservation easements on a certified historic st	nucture included in (a)	2c		
ن	Number of conservation easements included in (c) acquired				
d	listed in the National Register	and of 17700, and not on a motorio chaotoro	2d		
3	Number of conservation easements modified, transferred, re	eleased extinguished or terminated by the orga		n during the tax	
3	vear >	noused, extriguistics, of terminated by the engage			
4	Number of states where property subject to conservation ea	sement is located			
5	Does the organization have a written policy regarding the pe				
	violations, and enforcement of the conservation easements			Yes	No
6	Staff and volunteer hours devoted to monitoring, inspecting		the ye	ar 🕨	
7	Amount of expenses incurred in monitoring, inspecting, and				
8	Does each conservation easement reported on line 2(d) abo				
	and section 170(h)(4)(B)(ii)?			Yes	No
9	In Part XIV, describe how the organization reports conservation	tion easements in its revenue and expense state	ement,	and balance sheet, and	
	include, if applicable, the text of the footnote to the organiza				
	conservation easements.				
Pa	t III Organizations Maintaining Collections of	of Art, Historical Treasures, or Other	Simi	lar Assets.	
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8			
1a	If the organization elected, as permitted under SFAS 116 (A	SC 958), not to report in its revenue statement a	and ba	lance sheet works of art,	
	historical treasures, or other similar assets held for public ex	hibition, education, or research in furtherance o	f publi	c service, provide, in Part	i XIV,
	the text of the footnote to its financial statements that described	nbes these items.			
þ	If the organization elected, as permitted under SFAS 116 (A	SC 958), to report in its revenue statement and	balanc	e sheet works of art, histe	orical
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of public s	ervice,	provide the following am	ounts
	relating to these items:				
	(i) Revenues included in Form 990, Part VIII, line 1			\$	
	(ii) Assets included in Form 990, Part X			\$	
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financial gain	, provi	de	
	the following amounts required to be reported under SFAS	116 (ASC 958) relating to these items:			
а	Revenues included in Form 990, Part VIII, line 1			\$	
b	Assets included in Form 990, Part X			\$	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

4903___1

Schedule D (Form 990) 2011

		DEN FLOOR					<u> </u>	33-02	9935	6 Pa	age 2
Pal	rt III Organizations Maintaining (•	<u>`</u>	
3	Using the organization's acquisition, access	on, and other record	ds, check a	any of the	following tha	it are a sig	gnificant	use of its	collectio	n item	S
	(check all that apply):										
а	Public exhibition	d			hange progra	ams					
b	Scholarly research	е	· L Ot	ther							
С	Preservation for future generations										
4	Provide a description of the organization's c	ollections and explai	n how the	y further tl	he organizati	on's exem	npt purpo	ose in Par	t XIV.		
5	During the year, did the organization solicit of	r receive donations	of art, histo	oncal trea	sures, or oth	er sımılar a	assets	_	_	_	,
	to be sold to raise funds rather than to be m							<u> </u>	Yes		No
Pai	t IV Escrow and Custodial Arran		ete if the o	organizatio	n answered '	"Yes" to F	orm 990	, Part IV,	line 9, or		
	reported an amount on Form 990, Pa										
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for co	ontribution	s or other as	sets not II	ncluded		_		,
	on Form 990, Part X?								」Yes		No
ь	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing tal	ble:							
									Amount	t	
С	Beginning balance						1c				
d	Additions during the year						1d			·	
е	Distributions during the year						1e				
f	Ending balance						1f		•		
2a	Did the organization include an amount on F	orm 990, Part X, line	21?						Yes		No
	If "Yes," explain the arrangement in Part XIV										
Pai	t V Endowment Funds. Complete	f the organization an									
		(a) Current year	(b) Pno		(c) Two year			ears back	(e) Four	years t	back
1a	Beginning of year balance	2,344,027.		22,936.		3,245.	2,3	33,083.		<u> </u>	
ь	Contributions	2,500.		69,480.	35	,000.	_	700.		· ,	
С	Net investment earnings, gains, and losses	142,117.	2	04,046.	114	1,691.		60,423.	, ,	-	٠ , ا
d	Grants or scholarships	··									- '
е	Other expenditures for facilities									, 4°5	
	and programs									À 📜	-3-
f	Administrative expenses	132,000.		.52,435.		,000.		95,115.	, , ;	1 ,	ì.
g	End of year balance	2,356,644.	2,3	44,027.	2,222	936.	2,1	78,245.			
2	Provide the estimated percentage of the cur	rent year end balanc	e (line 1g,	column (a	ı)) held as:						
а	Board designated or quasi-endowment		_%								
b	Permanent endowment ► 100.00	%									
С	Temporanly restricted endowment ▶	%									
	The percentages in lines 2a, 2b, and 2c should	•									
3a	Are there endowment funds not in the posse	ssion of the organiza	ation that a	are held ar	nd administe	red for the	e organız	ation	_		
	by									Yes	No
	(i) unrelated organizations								3a(i)		X
	(ii) related organizations								3a(ii)		X
b	If "Yes" to 3a(ii), are the related organizations	•							3ь		
4	Describe in Part XIV the intended uses of the										
Par	t VI Land, Buildings, and Equipm	ent. See Form 990), Part X, Iır	ne 10.							
	Description of property	(a) Cost or o	ther	(b) Cost	or other	(c) Acc	cumulate	d	(d) Book	value	•
		basis (investr		basis (other)		eciation				
1a	Land	800,					ighter, Rock			, 22	
b	Buildings	3,757,	074.			1,1	76,52	24.	2,580),5 <u>5</u>	<u>.0</u>
C	Leasehold improvements										
d	Equipment	456,					17,7			3,63	
	Other	16,				<u> </u>	14,62			2,24	
Total	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, column	(B), line 1	0(c).)			>	3,421	L,65	59.
							5	chedule	D (Form	990) (2011

2. FIN 48 (ASC 740) 132053 01-23-12

(11)

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)
FIN 48 (ASC 740) Founds: In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions

	dule D (Form 990) 2011 THE WOODEN FLOOR FOR YOUTH		_				0299356	Page 4
Pa	t XI: Reconciliation of Change in Net Assets from Form 990 to	Audi	ted Finan	cial S	State	ement		
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1			2,145	
2	Total expenses (Form 990, Part IX, column (A), line 25)			2			2,445	
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3				,843.
4	Net unrealized gains (losses) on investments			4			161	,234.
5	Donated services and use of facilities			5				
6	Investment expenses			6				
7	Prior period adjustments			7				
8	Other (Describe in Part XIV.)			8				
9	Total adjustments (net). Add lines 4 through 8			9				,234.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and			10				,609.
Par	t XII Reconciliation of Revenue per Audited Financial Statemer	nts W	ith Reve	nue p	er R	leturn		
1	Total revenue, gains, and other support per audited financial statements					1	2,403	<u>,100.</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:							
а	Net unrealized gains on investments	2a	16	1,2	34.	2000		
b	Donated services and use of facilities	2b						
С	Recovenes of prior year grants	2c						
d	Other (Describe in Part XIV.)	2d						
е	Add lines 2a through 2d					2e	161 2,241	<u>,234.</u>
3	Subtract line 2e from line 1					3	2,241	<u>,866.</u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					100		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				185		
b	Other (Describe in Part XIV.)	4b	-9	6,7	<u>86.</u>	**3.7		
С	Add lines 4a and 4b					4c	-96	<u>,786.</u>
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)					5	2,145	<u>,080.</u>
Par	t XIII Reconciliation of Expenses per Audited Financial Stateme	nts V	Vith Expe	enses	per	Retu		
1	Total expenses and losses per audited financial statements					1	2,542	<u>,709.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					44		
а	Donated services and use of facilities	2a						
b	Prior year adjustments	2b						
c	Other losses	2c				F 5		
d	Other (Describe in Part XIV.)	2d				المستعدد		
е	Add lines 2a through 2d					2e		0.
3	Subtract line 2e from line 1					3	2,542	,709.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	_	_			200		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a						
b	Other (Describe in Part XIV.)	4b	-9	6,7	86.			
С	Add lines 4a and 4b					4c		,786.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)					5	2,445	,923.
Par	t XIV Supplemental Information							
Comp	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III,	lines	1a and 4; Pa	ırt IV, lı	nes 1	b and 2	b; Part V, line	4, Part
	e 2, Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b Also comple							
PAF	T V, LINE 4: THE WOODEN FLOOR'S ENDOWMENT	FUN	DS ARE	PE	RMA	NENT		
ENI	OWMENTS, FUNDED BY DONOR RESTRICTED GIFTS,	ME	ANT TO	BE	MA	INT	LINED FO	OR
THE	PURPOSE OF PROVIDING A PERMANENT SOURCE O	FI	NCOME	FOR	OR	GAN I	ZATION	
<u>USI</u>	NG UPMIFA POLICIES FOR CALCULATING PERCEN	TAG	E OF A	NNU	AL	DISE	BURSEMEN	NT.
PAF	T XII, LINE 4B - OTHER ADJUSTMENTS:							
	DDITATNA BUDDNADA TNATUDDO AN DIDA UTT						^ ^	706
F.UV	DRAISING EXPENSES INCLUDED ON PART VIII						-96	,786.
						0-1 :	ula D /Farm 0	00) 00 1 1

132054 01-23-12

Schedule D (Form 990) 2011 THE WOODEN FLOOR FOR YOUTH MOVEMENT	33-0299356 Page 5
Schedule D (Form 990) 2011 THE WOODEN FLOOR FOR YOUTH MOVEMENT Part XIV Supplemental Information (continued)	
PART XIII, LINE 4B - OTHER ADJUSTMENTS:	
DINIDDATATNA EVDENARA INGLIDED ON DADE ULLI	06 706
FUNDRAISING EXPENSES INCLUDED ON PART VIII	-96,786.
	
	

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

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

2011

Open To Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

Employer identification number

THE WOODEN FLOOR FOR YOUTH MOVEMENT 33-0299356 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not Part I required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. a X Mail solicitations e X Solicitation of non-government grants f X Solicitation of government grants X Internet and email solicitations g X Special fundraising events X Phone solicitations d X In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or X Yes ☐ No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (iv) Gross receipts (i) Name and address of individual to (or retained by) (ii) Activity to (or retained by) or entity (fundraiser) from activity fundraiser organization listed in col. (i) LINDA T. MESESAN - 1810 NORTH Yes No MAIN STREET, SANTA ANA, CA GRANT WRITING х 55,200 -55,200. 55,200 -55,200, 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

LHA Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990 or 990-EZ) 2011

33-0299356 Page 2 Schedule G (Form 990 or 990-EZ) 2011 THE WOODEN FLOOR FOR YOUTH MOVEMENT Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events PROMISE WINE NONE (add col. (a) through TASTING col. (c)) (event type) (event type) (total number) 244,022. 244,022. 1 Gross receipts 60,622. 60,622. 2 Less: Charitable contributions 183,400. 3 Gross income (line 1 minus line 2) 183,400. 4 Cash prizes 49,797. 49,797. 5 Noncash prizes Direct Expenses 26,415. 26,415. 6 Rent/facility costs 3,323. 3,323. 7 Food and beverages 400. 400. 8 Entertainment 16,851. 16,851. 9 Other direct expenses 96,786 10 Direct expense summary. Add lines 4 through 9 in column (d) 86,614. 11 Net income summary. Combine line 3, column (d), and line 10 Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col (c)) 1 Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes Rent/facility costs Other direct expenses Yes % Yes % Yes 6 Volunteer labor 7 Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary Combine line 1, column d, and line 7 9 Enter the state(s) in which the organization operates gaming activities: a is the organization licensed to operate gaming activities in each of these states? ___ Yes **b** If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? J Yes b If "Yes," explain:

132082 01-23-12

Schedule G (Form 990 or 990-EZ) 2011

Sch	edule G (Form 990 or 990-EZ) 2011 THE WOODEN FLOOR FOR YOUTH MOVEMENT 33-	<u> </u>	Page 3
11	Does the organization operate gaming activities with nonmembers?	└─ Yes	∟ No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed		
	to administer chantable gaming?	, └── Yes	L No
13	Indicate the percentage of gaming activity operated in:]	
а	The organization's facility	13a	<u>%</u>
b	An outside facility	13b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address >		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	☐ Yes	□ No
.04	bood the diganization have a contract time party from the diganization received gaming forestable.		
ь	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount		
_	of gaming revenue retained by the third party \blacktriangleright \$		
c	If "Yes," enter name and address of the third party:		
·	100, Otto, harro and address of the ania party.		
	Name ►		
	Name		
	Address ►		
	Addiess P		
16	Gaming manager information		
10	Garring manager information		
	Name		
	Name >		
	Gaming manager compensation ▶ \$		
	Garning manager compensation 5		
	Decorption of convices provided		
	Description of services provided		
			
			
	☐ Director/officer ☐ Employee ☐ Independent contractor		
	Employee Entractor		
17	Mandatony distributions:		
	Mandatory distributions:		
а	sthe organization required under state law to make charitable distributions from the gaming proceeds to	Yes	□ No
_	retain the state gaming license?	res	
D	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
Βã	organization's own exempt activities during the tax year ► \$ Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (1) and	Dort III
i _A CI			•
	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information	n (see instruc	uons)
פת	HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISE	20.	
<u> </u>	HEDOED G, TAKE I, BINE 2D, BIDE OF TEN HIGHEDT THE TONDRINGE		
(I) NAME OF FUNDRAISER: LINDA T. MESESAN		
<u>`</u>	, mile of tombule but, but to the but to	·	
(I) ADDRESS OF FUNDRAISER: 1810 NORTH MAIN STREET, SANTA ANA, CA	A 9270	6
<u>\</u>	, IDDREDD OF FORDINIDER: FOTO NORTH FILLY DIRECT, DIRVIN MAN, CA	1 3270	
1200	83 01-23-12 Schedule G (Form	n 000 or 000	E7\ 2011

SCHEDULE

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

▶ Attach to Form 990.

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

|--|--|

Employer identification number 33-0299356

ž [(h) Purpose of grant or assistance X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Check this box if no one recipient received more than \$5,000 Part II can be duplicated if additional space is needed ame and address of organization (box) if applicable cash grant or government if applicable cash grant or government or gover Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States YOUTH MOVEMENT THE WOODEN FLOOR FOR 名 General Information on Grants and Assistance criteria used to award the grants or assistance? 1 (a) Name and address of organization

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

0

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2011)

33-0299356

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
SCHOLARSHIPS FOR STUDENTS ATTENDING COLLEGE; PERFORMANCE TICKETS; ADVANCED DANCE TRAINING INTENSIVES AND SUMMER CAMP OPPORTUNITIES	0	126,468.	99,798.	FWV	DONATED PERFORMANCE TICKETS, CAMP SPONSORSHIPS, COMPUTER SOFTWARE AND OFFICE SUPPLIES.
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	ide the information	required in Part I,	line 2, and any other	additional information	
SCHEDULE I, PART I, LINE 2: GRANT FUNDS	FUNDS ARE	ISSUED TO	O EDUCATION	N	
INSTITUTIONS, OUTSIDE DONEE RELATED	- 1	ZATIONS AN	ORGANIZATIONS AND SUMMER CAMP	AMP	
ESTABLISHMENTS FOR USE IN ACCORDANCE	WITH	THE ORGANI	ZATION ANN	ORGANIZATION ANNUAL OPERATING	
BUDGET, WHICH IS APPROVED BY THE B	BOARD OF 1	DIRECTORS.			

132102 01-27-12

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Noncash Contributions

OMB No 1545-0047

Open to Public Inspection

Name of the organization

THE WOODEN FLOOR FOR YOUTH MOVEMENT

Employer identification number 33-0299356

Types of Property Part I (a) (b) (d) Check if Number of Noncash contribution Method of determining contributions or amounts reported on applicable noncash contribution amounts items contributed Form 990, Part VIII, line 1g Art - Works of art Art - Historical treasures 3 Art - Fractional interests Books and publications Clothing and household goods Cars and other vehicles 6 7 Boats and planes 8 Intellectual property 9 Securities - Publicly traded 10 Securities - Closely held stock Secunties · Partnership, LLC, or trust interests Securities - Miscellaneous 12 Qualified conservation contribution -Historic structures Qualified conservation contribution - Other 14 15 Real estate - Residential 16 Real estate - Commercial Real estate - Other 17 Collectibles 18 X 440. COST Food inventory 19 20 Drugs and medical supplies 21 Taxidermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 86,567. (MISCELLANEOUS) X 47 COST 25 Other -X 40,736. SOFTWARE COST 26 Other OFFICE FURNIT X 2 21,852. COST 27 Other > Other 28 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1.28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for X the entire holding period? 30a **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? X 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? Х 32a b If "Yes," describe in Part II. If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) (2011)

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2011
Openito Public

Name of the organization

THE WOODEN FLOOR FOR YOUTH MOVEMENT

Employer identification number 33-0299356

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

DANCE EDUCATION OUTREACH: DANCEFREE WEEKS: WEEK-LONG INTRODUCTORY DANCE
WORKSHOPS THAT REACH APPROXIMATELY 3,000 STUDENTS IN APPROXIMATELY 20
PUBLIC SCHOOLS IN SANTA ANA AND NEIGHBORING CITIES.

EXPENSES \$ 26,303. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 4: THE ORGANIZATION CHANGED ITS NAME FROM "SAINT JOSEPH BALLET COMPANY" TO "THE WOODEN FLOOR FOR YOUTH MOVEMENT" DURING THIS TAX YEAR.

FORM 990, PART VI, SECTION B, LINE 11: THE AUDIT COMMITTEE SHALL HAVE THE RESPONSIBILITY FOR REVIEWING THE ORGANIZATION'S FORM 990 (INCLUDING ALL PERTINENT SCHEDULES) BEFORE IT IS FILED WITH THE INTERNAL REVENUE SERVICE.

ONCE THE AUDIT COMMITTEE HAS COMPLETED ITS INITIAL REVIEW OF THE FORM 990,

A MEETING OR CONFERENCE CALL WILL BE SCHEDULED WITH THE PREPARER OF THE FORM 990 TO DISCUSS ANY QUESTIONS, COMMENTS, AND SUGGESTED REVISIONS

IDENTIFIED BY THE AUDIT COMMITTEE. AFTER SUGGESTED REVISIONS ARE COMPLETED BY THE PREPARER AND APPROVED BY THE AUDIT COMMITTEE, THE AUDIT CHAIR WILL PRESENT THE FORM 990 AT THE NEXT FULL BOARD OF DIRECTORS MEETING AFTER WHICH THE RETURN WILL BE FILED WITH THE INTERNAL REVENUE SERVICE.

FORM 990, PART VI, SECTION B, LINE 12C: IN AN EFFORT TO ACHIEVE THE
HIGHEST STANDARDS OF CONDUCT, EACH STAFF MEMBER AND BOARD MEMBER IS
REQUESTED TO ACKNOWLEDGE (BY SIGNING) THE CONFLICT OF INTEREST POLICY
ANNUALLY OR WHEN CHANGES IN CIRCUMSTANCES OR ANY FURTHER FINANCIAL

INTEREST, SITUATION, ACTIVITY, INTEREST OR CONDUCT THAT MAY DEVELOP BEFORE

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2011)

132211
132212
132213
132212

Schedule O (Form 990 or 990-EZ) (2011) **Employer identification number** Name of the organization 33-0299356 THE WOODEN FLOOR FOR YOUTH MOVEMENT COMPLETION OF THEIR NEXT ANNUAL QUESTIONNAIRE. THIS ACKNOWLEDGEMENT WILL BE KEPT ON FILE IN THE HUMAN RESOURCE DEPARTMENT. DEFINITION: THE POTENTIAL FOR A CONFLICT OF INTEREST VIOLATION EXISTS WHEN AN EMPLOYEE OR BOARD MEMBER -HAS A DECISION-MAKING ROLE IN ANY CONTRACT, TRANSACTION OR ARRANGEMENT OF THE WOODEN FLOOR IN WHICH HE OR SHE, A FAMILY MEMBER OR BUSINESS RELATION MAY BENEFIT; OR -HAS A DECISION-MAKING ROLE IN ANY CONTRACT, TRANSACTION OR ARRANGEMENT OF THE WOODEN FLOOR THAT INVOLVES AN ENTITY IN WHICH HE OR SHE, A FAMILY MEMBER OR BUSINESS RELATION ALSO HAS A FIDUCIARY POSITION (E.G., MEMBER, OFFICER, DIRECTOR, COMMITTEE MEMBER). REPORTING: ANY EMPLOYEE OR MEMBER OF THE BOARD OF DIRECTORS IS REQUIRED TO PROMPTLY AND FULLY DISCLOSE TO EITHER THE EXECUTIVE DIRECTOR OR A MEMBER OF THE EXECUTIVE COMMITTEE OF THE BOARD, ANY ACTUAL, APPARENT OR POTENTIAL CONFLICT OF INTEREST OR VIOLATION OF THE CODE OF ETHICS HE OR SHE MAY BE INVOLVED IN OR BECOME AWARE OF. IF IT IS DETERMINED BY EITHER THE EXECUTIVE DIRECTOR OR THE EXECUTIVE COMMITTEE THAT AN ACTUAL CONFLICT OF INTEREST OR VIOLATION EXISTS, AN AD HOC COMMITTEE OF MEMBERS OF THE BOARD WILL BE APPOINTED TO DETERMINE -WHETHER THE WOODEN FLOOR COULD REASONABLY OBTAIN A MORE ADVANTAGEOUS CONTRACT, TRANSACTION OR ARRANGEMENT; OR MAKE A BETTER BUSINESS DECISION,

-WHETHER, REGARDLESS OF THE CONFLICT OF INTEREST, PROCEEDING WITH THE 132212 01-23-12

AND IF SO, SET THE REQUIRED NEXT STEPS IN MOTION; OR

Schedule O (Form 990 or 990-EZ) (2011)

Employer identification number 33-0299356

PROPOSED CONTRACT, TRANSACTION OR ARRANGEMENT OR BUSINESS DECISION FURTHERS THE WOODEN FLOOR'S CHARITABLE MISSION AND IS IN THE WOODEN FLOOR'S BEST INTERESTS.

ANNUAL REVIEWS:

TO ENSURE THAT THE WOODEN FLOOR OPERATES IN A MANNER CONSISTENT WITH ITS CHARITABLE PURPOSES AND THAT IT DOES NOT ENGAGE IN ACTIVITIES THAT COULD JEOPARDIZE ITS STATUS AS AN ORGANIZATION EXEMPT FROM FEDERAL INCOME TAX, THE FOLLOWING PERIODIC REVIEWS SHALL BE CONDUCTED BY DESIGNATED COMMITTEES OF THE BOARD OF DIRECTORS:

-WHETHER EMPLOYEE COMPENSATION ARRANGEMENTS AND BENEFITS ARE REASONABLE AND IMPARTIALLY NEGOTIATED;

-WHETHER ACQUISITIONS OF PROPERTY AND SERVICES FROM ANY PERSON, OR AGREEMENTS OR PARTNERSHIPS WITH OTHER ORGANIZATIONS FURTHER THE WOODEN FLOOR'S CHARITABLE PURPOSES AND DO NOT INURE TO THE PERSONAL BENEFIT OF ANY EMPLOYEE, MEMBER OF THE BOARD OF DIRECTORS, OR OTHER INVOLVED PARTY.

FORM 990, PART VI, SECTION B, LINE 15A: THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS ACTS ON BEHALF OF AND WITH CONCURRENCE OF THE BOARD WITH RESPECT TO MATTERS RELATING TO COMPENSATION, BENEFITS, OTHER PERSONNEL PLANS FOR EXECUTIVES. THE COMMITTEE REVIEWS AND RECOMMENDS TO THE BOARD COMPENSATION AND INCENTIVE PROGRAMS FOR EXECUTIVE OFFICERS, AND REVIEWS AND RECOMMENDS POLICIES RELATING TO PERQUISITES FOR EXECUTIVE MANAGEMENT.

FORM 990, PART VI, SECTION C, LINE 19: THE FOLLOWING ORGANIZATIONAL DOCUMENTS OF THE WOODEN FLOOR WILL BE AVAILABLE (FOR INSPECTION OR COPYING) AT THE ORGANIZATION'S MAIN OFFICE DURING NORMAL BUSINESS HOURS AT NO CHARGE: INTERNAL REVENUE SERVICE DETERMINATION LETTER, INTERNAL REVENUE 132212 01-23-12 Schedule O (Form 990 or 990-EZ) (2011)

35

Depreciation	on and Amo	1 (124	tion bet	ciii r		, .		990
Asset					Description	of property		
Number		ethod/ C sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
BU	ILDINGS							
1011	ILDING		<u> </u>	<u> </u>				
I I	083099SL		40.00	116	3,292,498.		987,744.	82,312
	990 PAGE				UILDINGS	· · · · · · · · · · · · · · · · · · ·		
	222	. 10	moma.	<u> </u>	3,292,498.	0.	987,744.	82,312
	990 PAGE	: 10	TOTA	Г –	3,292,498.	0.	987,744.	82,312
BU	ILDINGS		l <u>.</u>		3,232,1500		20171220	02,312
	ADMIN OF 11,30,03SL		ES 39.00	116	20,310.		4 020 1	521
	RPET	1	33.00	μ0	20,310.		4,038.	. 521
	091505SL	,	7.00	16	26,459.		22,680.	3,779
	NCRETE P			4.6				
	09 ₂ 3 ₀ 55L UDIO THE		7.00 F	π6	1,641.		1,385.	234
	02,28,06SL		39.00	16	323,156.		45,573.	8,286
6CO	UNSELING	OF	FICE	•	J. 4	· · · · · · · · · · · · · · · · · · ·		
530F	0518 ₀ 651		39.00	16	4,100.	: :	551.	105
	05,31,07,SL	,	39.00	16	43,535.	· · · · · · · · · · · · · · · · · · ·	4,745.	1,116
	BICLE MO	VIN	G				* * * * * * * * * * * * * * * * * * * *	
	06 ₀ 3 ₀ 7 SL		39.00	16	307.		34.	. 8
	ILDI N G S 081010SL			16	45,068.		6,975.	6,438
	990 PAGE				UILDINGS		0,575.	0,430
			•		464,576.	0.	85,981.	20,487
*	990 PAGE	: 10	TOTA	.L –	464,576.	0.	85,981.	20 407
LA	ND		<u> </u>	L	404,570.		03,301.	20,487
	1 1	, -		. 1			-	
7LA					000 000			
	083099L 990 PAGE	10	ጥ∩ጥል	T T.	800,229. AND			0
	1 1		10171		800,229.	0.	0.1	- 0
OT	HER							
OT A	ND IMPRO	TEM	TENTOC					
	08,30,99,SL			16	16,874.		13,500.	1,125
	990 PAGE				THER		<u> </u>	
					16,874.	0.	13,500.	1,125
	990 PAGE	: 10	TOTA	<u>ь –</u>	817,103.	0.	13,500.	1,125
MA	CHINERY	& E	OUIPM	ENT		0.	13,300.	1,123
			Ĺ					
	MDIAL DG						11 464 15	
	081799SL RKSTATIO		5.00 L.W.	<u>μο</u>	11,464.		11,464.	0
	06 ₁ 02 ₁ 995L	ī	5.00		5,322.		5,322.	0
	NDOW CVR						, -	·
	081299SL ARM SYST		7.00 - ELE		15,883. O SPEC		15,883.	0 .
	083099SL		5.00		2,120.		2,120.	0
116261 05-01-11			•		- Current year section 179	(D) - Asset dispos		

Asset Imber	Date Method/	Life Line	Cost or	Basis	Accumulated	Current year
	in service IRC sec.	or rate No.	other basis	reduction	depreciation/amortization	deduction
	FICE FURNIT	URE - IKE 7.00 16	12,478.		12,478.	
	UND SYSTEMS	L			12,470.	
		7.00 16	13,156.		13,156.	
	LLCOVERING				······································	
		7.00 16	1,999.		1,999.	
	UNTERTOPS -		100 600			· · · · · · · · · · · · · · · · · · ·
	021099SL UNTERTOPS -	7.00 16	109,692.		109,692.	
		7.00 16	3,600.		3,600.	
	UNTERTOPS -		3,000.		3,0001	
	081799SL	7.00 16	1,172.	· · · · · · · · · · · · · · · · · · ·	1,172.	<u>-</u>
	UDENT BENCH					
		7.00 16	44,482.		44,482.	
-	RNITURE - L	.w. 17.00 116 T	53,844.		T 50 044 T	
	083199SL OMMETS - CO				53,844.	
		7.00 16	756.		756.	
	RNITURE - D		· · · · · · · · · · · · · · · · · · ·		1,	
	07µ5 ₁ 99 SL	7.00 16	839.	4 ° 8	839.	\$,
		L.W.				
		7.00 16	614.	· ·	614.	
	ANO - BEALL 08,31,00200DB		4,068.		4,068.	· · · · · · · · · · · · · · · · · · ·
25BL		7.00 10	4,000.		, 4,000.	
	092199200DB	7.00 16	6,429.		6,429.	
	RKSTATION		······································	4		
	091599200DB		1,206.		1,206.	
	LLCOVERINGS		0.00		000	
	06 ₁ 06 ₁ 00 200DB TIO FURNITU		987.		987.	
	122199200DB		14,568.		14,568.	
		DOP	21,300.		1 11,500.	
	03 <mark>31</mark> 00 200DB	5.00 16	1,147.		1,147.	
	TV/VCR					
	122199200DB		1,313.	*	1,313.	
	BBY BENCHES		2 572 1		7 573 1	
	123199200DB OKSHELVES/T		2,573.		2,573.	
	123199200DB		2,034.		2,034.	
	OOLS - VOLU		, , , , , , , , , , , , , , , , , , , ,			
	123199200DB		1,324.		1,324.	
34(D	DLP PROJEC				,	-
-3.5/5	072100200DB		5,722.		5,722.	
) PANASONIC 11,08,00200DB		517.		517.	
	ELVES - ED	Σ.00 μ0 [<u> </u>		J17•	
		7.00 16	578.		539.	
37AC	COUNTING SO	FTWARE				
	08 ₀ 6 ₀ 1 200DB		3,600.		2,400.	
)STAFF COMP		44 040			• •
		5.00 16 [11,810.		11,810.	· · ·
	EA FURNITUR 11,07,03SL	E - KB & F	1,001.		1,001.	
61 1-11	TTO (IO 2D)		Current year section 179	(D) - Asset disp		

Depresia	THOI AND AND UZA	THOI DE	lan F	ORM 990 PAGE			990
Asset				Description	of property		
Number	Date placed IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
403	2.22						
	031504SL		16	1,500.		1,500.	0
41	D)DELL COMPU		16 16	OFCR) 2,379.		2,379.	, 0
427	D)DELL COMP			ASST)		2,3/3.	,
321	02,21,03 SL		16	2,390.		2,390.	0
43(D)DELL COMPU		ACA	-	<u> </u>		286. 42
	02,21,03 SL		16	1,132.	J	1,132.	0
44(D)DESK (ACAI		14.6				
· · · · · · · · · · · · · · · · · · ·	043003SL		16	675.		675.	0
43	D)DELL COMPU		16	1,291.	·	1,291.	. 0
460	IGITAL CAMER		μО	- 1,291.	• •	1,291.	
	02,03,05SL		16	1,073.		1,073.	0
47S	EWING MACHIN		•	- [- [-] -] - [-]	J. 50 J. 50 J. 50 J. 50 J. 50 J. 50 J. 50 J. 50 J. 50 J. 50 J. 50 J. 50 J. 50 J. 50 J. 50 J. 50 J. 50 J. 50 J.		
	031605SL		16-	<u> </u>		1,579.	145
48M		FLOOR				12 244	0.011
406	072005SL		16	15,352. TUDIO THEATRE		13,341.	2,011
~49W	090805SL			8,146.		8,146	<u></u>
507	D)H&D TECH I				<u> </u>	1. 4. ".X." "O.V.T.#O.0].	
	06 ₂ 8 ₀ 6 SL		16	1,292.		1,292.	0
51C	D PLAYERS (C						4.1000000000000000000000000000000000000
			16	1,505.		1,505	/ (š. · <u>.</u> · · 0
52	D)APPLE LAPT		11 (2 0 0 0		2 050	
55	08,31,06SL OCKERS	5.00	16	3,059.		3,059.	0
	111306SL	7.00	11.6	3,041.		2,082.	434
56(D)BEN'S LAPI			, , , , , , , , , , , , , , , , , , , ,		1 7 - 1, 2 - 2 - 2	,,,,,,
	02 ₀ 7 ₀ 7 ₅ L		16	1,164.		1,063.	101
57	APTOP - TWF	·, · · · ;				are different laget to e	
F 0 F				(a./ a.e. 0# 1; 344.		**· 1,227.	112
2 817	DEPOSIT ON CU	7.00		10,263.		6,659.	1,466
59P	BALANCE ON CU			10,203			1,400
				10,264.		6,442.	1,466
605	24 BUTTON E			, , , , , , , , , , , , , , , , , , , ,			
	0510 ₀ 7 SL	5.00		1,336.		1,151.	178
618	SERVER - PHON						Z
537	052407SL D)KKT GRANT		SER	VED 3,103.	3.3 (1) 32 (1)	2,652.	451
04(052407SL		16	7,906.		6,753.	1,153
630	FFICE CHAIR		<u> </u>	77.500		1 2 42 4 1 4 1 4 1 4 1 4 1 4 1 4 1 4 1 4	1,133
	06,03,07 SL	7.00	16	899.		5.43.	128
645	24 BUTTON P						
	061207SL	5.00		1,401.		1,181.	210
. 65D	ONOR FILE CA			2 907		1 667	401
667	07,05,07SL D)BLACKBAUD	7.00		2,807. SION SERVICES		1,667.	401
30[07,30,07 SL		16	3,137.		3,137.	0
67E	BLACKBAUD	1			a garante de la composição de la composição de la composição de la composição de la composição de la composição	"	
	07,30,07,SL	3.00	16	19,215.		19,215.	0.
68H	IP 3800 PRINT		14 6				
116261	073107SL	5.00		1,504.	(D) Accet direct	1,240.	264
116261 05-01-11			#	- Current year section 179	(D) · Asset dispo	SCU	

			Description (330
Asset umber	Date Method/	Life Line	Cost or	Basis	Accumulated	Current year
	in service IRC sec.	or rate No.	other basis	reduction	depreciation/amortization	Current year deduction
69	(D)DELL DUAL 08,31,07SL	CORE XEO	ON PROCESSOR 3,115.	- 1	2,492.	57:
70	(D)LABOR FOR				2,432.	57.
, ,	083107SL	5.00 16	1,171.		936.	21!
71	(D)DELL SERV	ĒR	<u> </u>			
	10 ₁ 05 ₁ 07 SL	5.00 16	2,330.		1,825.	42
72	(D)MRG DIR DO			· · · · · · · · · · · · · · · · · · ·		
72	12 ₀ 5 ₀ 75L BLINDS FAMIL	5.00 16	460.		345.	8
/ 3	020108SL	7.00 16	700.		358.	10
74	THIN CLIENT	7.00 10	700.		330.	, 10
	02,12,08SL	5.00 16	257.		183.	, 5
75	(D) SERVER CO					•
	022908SL	5.00 16	4,629.		3,241.	84
76	BLINDS DEV D			·		
	04 ₀ 1 ₀ 8 _{SL}	7.00 16	686.		335.	9
77	(D)SONIC WAL	5.00 16	5,917.		3,746.	
79	D63008SL PROJECTOR - S	оц оυ до IT OIOUTS			3,740.	
, 0	071008SL	5.00 16	1,200:	· / !	760.	24
79	(D)COMPUTER			<u> </u>	7.004	~ -
	080808EL	5.00 16	904.		559.	16
80	COMPUTER	•		4		
	030309ST	5.00 16	11,800.	, , , ,	5,900.	2,36
8 2	TELEPHONE SY		PGRADE		1 200	
0.2	030110SL COMPUTER	5.00 16	4,633.		1,390.	92
. 0.3	05,03,10,SL	5.00 16	2,419.	· · ·	645.	48
84	BANNER SIGN	р.00 до	1, 2, 31, 91	<u> </u>		. 10
<u> </u>	11 ₃ 30 ₀ 95L	7.00 16	6,010.		1,503.	85
85	EMERGENCY EX	IT SIGNS		; ; · · ·	3	
٠ _	043009SL	7.00 16	2,512.		838.	.35
86	MEETING TABL				0.400	
	01 ₃ 31 ₀ 9 _{SL}	7.00 16	6,756.		2,493.	96
87	(D)EAD COMPU'	5.00 16	1,240.		661.	22
88		OH OLOUTS			001.1	
00	120508SL	5.00 16	1,690.		930.	33
90	COMPUTER - M				, , ,	,
	062812SL	5.00 16	990.			3
91	DELL SERVER				•	·
	083112SL	5.00 16	10,821.			
92	APPLE IPAD	E 00 6 6	044	·	r	
0.3	072412SL VECTORWORKS	5.00 16	SOFTWARE			1
9.5	062712SL	5.00 16	2,306.			7
			MACHINERY & EQ	UTPMENT	<u></u>	<u>'</u>
			518,590.	0.	458,573.	17,96
	* 990 PAGE 1	0 TOTAL				
			518,590.	0.	458,573.	17,96
	* GRAND TOTA	L 990 PA				
		<u> </u>	5,092,767.	0.	1545798.	121,88
	<u> </u>					
		_11	# - Current year section 179	(D) - Asset dispos	and and	

Department of the Treasury Name(s) shown on return

Depreciation and Amortization

(Including Information on Listed Property)

► Attach to your tax return. See separate instructions. Business or activity to which this form relates

990

Sequence No 179

Identifying number

OMB No 1545-0172

33-0299356 FORM 990 PAGE 10 THE WOODEN FLOOR FOR YOUTH MOVEMENT Part 1 Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I 500,000. Maximum amount (see instructions) 2 2 Total cost of section 179 property placed in service (see instructions) 2,000,000. 3 Threshold cost of section 179 property before reduction in limitation 4 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-5 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions (c) Elected cost (a) Description of property 7 7 Listed property Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 Tentative deduction. Enter the smaller of line 5 or line 8 10 Carryover of disallowed deduction from line 13 of your 2010 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 11 12 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2012. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during 14 the tax vear 15 15 Property subject to section 168(f)(1) election 121,888. 16 Other depreciation (including ACRS) Part III MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 17 MACRS deductions for assets placed in service in tax years beginning before 2011 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2011 Tax Year Using the General Depreciation System (c) Basis for depreciation (business/investment use only - see instructions) (b) Month and year placed in service (d) Recovery (a) Classification of property 19a 3-year property b 5-year property 7-year property C d 10-year property 15-year property е 20-year property 25 yrs S/L 25-year property g 27.5 yrs MM S/L Residential rental property S/L 27 5 yrs. MM мм S/L 39 yrs. Nonresidential real property ММ S/L Section C - Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System Class life S/L 20a 12 yrs S/L 12-year 40-year 40 yrs. MM S/L Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. 121,888. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr 22 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23 Form 4562 (2011) LHA For Paperwork Reduction Act Notice, see separate instructions.

Part V: Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

249. Do you have endonce to support the business investment see claimed? 1 yes		Section A	- Depreciation	on and Other	nforma	ation (Ca	aution:	See the	ınstruc	tions for l	ımıts for j	oasseng	er autor	nobiles.)	
(s) type of property (fig. et and property (fig. et and property place of service) services (service) servic	248	Do you have evidence to :	support the bu	siness/investme	nt use cl	laimed?		res 🗀	No	24b If "\	es," is th	ne evide	nce writ	ten?	Yes □	No
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use: 26 Property used more than 50% in a qualified business use: 27 Property used 50% or less in a qualified business use: 28 Add amounts in column (i), lines 25 through 27. First here and on line 21, page 1 29 Sadd amounts in column (ii), lines 25 through 27. First here and on line 21, page 1 29 Add amounts in column (ii), lines 25 through 27. First here and on line 31, page 1 29 Sadd amounts in column (ii), lines 25 through 27. First here and on line 31, page 1 29 Cacting 8 - Information on Use of Vehicles Complete this section for vehicles used by a sole propinetor, partner, or other "more than 5% owner, or related person." (if) you provided vehicles to your employees, first answer the questions in Section 51 formation on Use of Vehicle vehicle vehicles to your employees, first answer the questions in Section Co to see if you meet an exception to completing this section for those vehicles are also through 42 to the partner, or other "more than 5% owner, or related person." (if) to be year (do not mobile commissing miles) (c) (d) (e) (f) (d) (e) (f) (e) (f) (e) (f) (e) (f) (e) (f) (e) (f) (f) (e) (f) (f) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f		Type of property	Date placed in	Business/ investment	e oi	Cost or	l /b	isis for depr usiness/inv	estment	Recovery	Met	thod/	Depre	eciation	Ele sectio	cted on 179
used more than 50% in a qualified business use: 194	25	Special depreciation alle	owance for o	ualified listed p	property	y placed	ın serv	ice durin	g the t	ax year ar	nd					
95 96 96 97 98 98 98 98 98 98 98									•	•		25				
27 Property used 50% or less in a qualified business user	26	Property used more that	ın 50% ın a c	qualified busine	ss use:			_			-		•			
27 Property used 50% or less in a qualified business user				9/	5											
S/L S/L				%	5											
Section B - Information on Use of Vehicle Set Se				%	5											
Add amounts in column (ti), lines 25 through 27. Enter here and on line 21, page 1 28 Add amounts in column (ti), lines 26. Enter here and on line 7, page 1 29 Add amounts in column (ti), lines 26. Enter here and on line 7, page 1 29 Add amounts in column (ti), lines 26. Enter here and on line 7, page 1 29 Action 8 - Information on Use of Vehicles Complete this section for vehicles used by a sole propinetor, partner, or other "more than 5% owner," or related person. If you provided whelices to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles. 30 Total inbusiness/investment miles driven during the year (do not include communing miles) and 1 Total communing miles driven during the year. Add lines 30 through 3.2 31 Total miles driven during the year. Add lines 30 through 3.2 32 Was the vehicle available for personal use during off duty hours? 33 Was the vehicle available for personal use during off duty hours? 34 Was the vehicle available for personal use and the security of the second	27	Property used 50% or l	ess in a quali	ıfıed busıness ı	ıse.											
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 29 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole propnetor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles. (a) (b) (c) (d) (e) (f) Vehicle Ve				%	5						S/L·					
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 7, page 1 29 Add amounts in column (h), line 26. Enter here and on line 7, page 1 29 Add amounts in column (h), line 26. Enter here and on line 7, page 1 29 Add amounts in column (h), line 26. Enter here and on line 7, page 1 29 Add amounts in column (h), line 26. Enter here and on line 7, page 1 29 Add amounts in column (h), line 26. Enter here and on line 7, page 1 29 Add amounts in column (h), line 26. Enter here and on line 7, page 1 29 Action 10 vehicles used by a sole propietor, partner, or other "more than 5% owner," or related person. 20 Total business/investment miles driven during the year (a) to include commuting miles driven during the year (do not include commuting miles driven during the year. 20 Add lines 30 through 32 30 Total miles driven during the year. 21 Add lines 30 through 32 31 Was the vehicle available for personal use during officially hours? 32 Was the vehicle used primarily by a more than 5% owner or related person? 33 Is another vehicle available for personal use? 34 Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons. 35 Do you amantain a written policy statement that prohibits all personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you amantain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees as personal use? 40 Do you provide more than five vehicles to your employees obtain information from your employees about the use of the vehicles of your employees as personal use? 40 Do you owned the requirements concerning qualified automobile demonstration use? 41 Do you owned the requirements concerning qualified automobile demonstration				9/	; [S/L-					
29 Add amounts in column (ii), line 26. Enter here and on line 7, page 1 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles. 30 Total business/investment miles driven during the year (do not include commuting miles) 31 Total commuting miles driven during the year 2 Total commuting miles driven during the year 2 Total commuting miles driven during the year 2 Total commuting miles driven during the year 3 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle available for personal use during off-duty hours? 36 Was the vehicle available for personal use during off-duty hours? 37 Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits all personal use of vehicles, except commuting, by your employees? 40 Do you provide more than few evhicles to your employees obtain information from your employees about the use of the vehicles used by comporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than few evhicles to your employees, obtain information from your employees about the use of the vehicles to your employees obtain information from your employees. 41 Do you meet the requirements concerning qualified automobile demonstration use? 42 Amortization of costs that begins duri	_		<u> </u>	9/	<u> </u>						S/L·					
Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles. (a) (b) (c) (d) (e) (f) Vehicle Vehic	28	Add amounts in column	n (h), lines 25	through 27. Er	nter her	e and or	n line 2	I, page 1				28				
Complete this section for vehicles used by a sole prophetor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles. 30 Total business/investment miles driven during the year (do not include commuting miles) 31 Total commuting miles of the vehicle year (do not include commuting miles) 31 Total other personal (noncommuting) miles driven during the year (as not include commuting) miles driven during the year. 42 Add lines 30 through 32 43 Was the vehicle available for personal use during off-duty hours? 54 Was the vehicle available for personal use during off-duty hours? 55 Was the vehicle available for personal use during off-duty hours? 56 Is another vehicle available for personal use? 57 Do you maintain a written policy statement that prohibits all personal use of vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? 40 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? 41 Do you mental all use of vehicles by employees as personal use? 42 Do your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles. 43 Amortization of costs that begins during your 2011 tax year 44 Amortization of costs that begins during your 2011 tax year 45 Amortization of costs that begins during your 2011 tax year	29	Add amounts in column	ı (i), line 26. E	nter here and	on line	7, page	1							29		
If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles. 30 Total business/investment miles driven during the year (40 not include commuting miles) 31 Total commuting miles driven during the year 32. Total other personal (noncommuting) miles driven during the year. Add lines 30 through 32 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle available for personal use full state of the vehicle available for personal use? 45 Was the vehicle available for personal use? 56 Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? See the instructions for vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 42 Amortization 43 Amortization of costs that begins during your 2011 tax year 44 Amortization of costs that begins during your 2011 tax year 45 Amortization of costs that began before your 2011 tax year 46 Total. Add amounts in column (f), See the instructions for where to report				S	ection	B - Infor	mation	on Use	of Vet	nicles						
30 Total business/investment miles driven during the year (do not include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year 33 Total miles driven during the year 44 Amortization of costs that begins during (9.5 et he instructions for whice is vehicle a value of vehicles or where to report 44 Total. Add amounts in column (f), See the instructions for whicere to report where to report 44 Total. Add amounts in column (f), See the instructions for whicere to report where to report 44 Total. Add amounts in column (f), See the instructions for whicere to report where to report 44 Total. Add amounts in column (f), See the instructions for whicere to report where to report 44 Total. Add amounts in column (f), See the instructions for whichere to report	If y	ou provided vehicles to y												ing this	section fo	or
year (do not include commuting miles of the during the year 2 Total other personal (noncommuting) miles driven during the year 3 Total other personal (noncommuting) miles driven during the year. Add lines 30 through 32 Add lines 30 through 32 Amortization of costs that begins during of the the color of where to report Yes No Ye							I	• •		(c)	(0	d)	(4	e)	(f)
Total commuting miles driven during the year Total other personal (noncommuting) miles driven during the year. Add lines 30 through 32 Was the vehicle available for personal use during off-duty hours? Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons. Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners Do you maintain a written policy statement that prohibits personal use? Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners Do you maintain a written policy statement that prohibits personal use? Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? Do you meet the requirements concerning qualified automobile demonstration use? Note: If you answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles. Partivity Amortization of costs that begins during your 2011 tax year An Amortization of costs that begins before your 2011 tax year A Amortization of costs that began before your 2011 tax year	30			uring the	Vel	hicle	Ve	hicle	V	/ehicle	Veh	ncle	Vet	nicle	Veh	ıcle
Total other personal (noncommuting) miles driven 3 Total miles driven 3 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? 37 Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles. 42 Amortization of costs that begins during your 2011 tax year 43 Amortization of costs that begins during your 2011 tax year 44 Total. Add amounts in column (f). See the instructions for where to report		, ,	. ,				ļ		ļ		ļ		ļ			
driven 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirement's concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles. Part VI Amortization (a) (b) (c) (d) (e) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f		-	_	· · ·			ļ		<u> </u>		ļ				<u> </u>	
33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles. Partial Amortization (a) Obscription of costs that begins during your 2011 tax year: 42 Amortization of costs that begins during your 2011 tax year 43 Amortization of costs that began before your 2011 tax year 44 Total. Add amounts in column (f). See the instructions for where to report	32	,	oncommuting	j) miles							1					
Add lines 30 through 32 34 Was the vehicle available for personal use duming off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you menter than five vehicles to your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles. 42 Amortization of costs that begins during your 2011 tax year 43 Amortization of costs that began before your 2011 tax year 44 Total. Add amounts in column (f), See the instructions for where to report					····				ļ		<u> </u>				ļ	
Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirement's concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles. Partixil Amortization (b) Desemption of costs that begins during your 2011 tax year 42 Amortization of costs that began before your 2011 tax year 43 Amortization of costs that began before your 2011 tax year 44 Total. Add amounts in column (f). See the instructions for where to report	33															
duning off-duty hours? 36 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles. Part W Amortization (a) Description of costs that begins during your 2011 tax year: 42 Amortization of costs that begins during your 2011 tax year: 43 Amortization of costs that began before your 2011 tax year 44 Total. Add amounts in column (f). See the instructions for where to report		•				· · · · · · · · · · · · · · · · · · ·			<u> </u>		ļ	·			ļ	
than 5% owner or related person? Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons. 7 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 8 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? 9 Do you treat all use of vehicles by employees as personal use? 9 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 10 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 10 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles. 10 Description of costs 10 Description of costs that begins during your 2011 tax year. 11 Description of costs that begins during your 2011 tax year. 12 Amortization of costs that began before your 2011 tax year. 13 Amortization of costs that began before your 2011 tax year.	34		le for person	nal use	Yes	No	Yes	No	Yes	No No	Yes	No	Yes	No	Yes	No_
Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirement's concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles. Part XIV Amortization (a) Description of costs (b) Date amortization (a) Description of costs that begins during your 2011 tax year: 43 Amortization of costs that began before your 2011 tax year 44 Total. Add amounts in column (f). See the instructions for where to report	35	Was the vehicle used p	nmanly by a	more												
Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles. Partial! Amortization (a) Description of costs (b) Date amortization (c) Date amortization Egins Amortization of costs that begins during your 2011 tax year: 42 Amortization of costs that began before your 2011 tax year: 43 Amortization column (f). See the instructions for where to report		than 5% owner or relate	ed person?			L		1								
Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles. Partivit Amortization (a) Description of costs (b) Date amortizable Employees (c) Code Amortization of costs that begins during your 2011 tax year 42 Amortization of costs that began before your 2011 tax year 43 Amortization in column (f). See the instructions for where to report	36	Is another vehicle availa	able for perso	onal												
Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles. Partivic Amortization (a) Description of costs (b) Date amortization (c) Amortization (d) Code Amortization (e) Amortization (f) Amortization (g) Description of costs that begins during your 2011 tax year. 42 Amortization of costs that began before your 2011 tax year 43 Amortization for costs that began before your 2011 tax year		use?														
owners or related persons. 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles. Part W. Amortization (a) Description of costs (b) Date amortizable Amortizable Amortization of costs that begins during your 2011 tax year: 42 Amortization of costs that began before your 2011 tax year 43 Amortization foliosis in column (f). See the instructions for where to report			Section C	- Questions fo	or Emp	loyers V	Vho Pro	vide Ve	hicles	for Use b	y Their E	Employe	ees			
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirement's concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles. Part VI Amortization (a) Description of costs (b) Date amortizable amount (c) Amortizable section (d) Code Amortizable Amortization pend of percentage (f) Amortization for this year 42 Amortization of costs that began before your 2011 tax year 43 Amortization of costs that began before your 2011 tax year 43 Amortization so clumn (f). See the instructions for where to report 44 Total. Add amounts in column (f). See the instructions for where to report	An	swer these questions to	determine if	you meet an ex	ception	n to com	pleting	Section	B for v	ehicles us	sed by er	nployee	s who a	re not n	ore than	5%
employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles. Part VI: Amortization (a) Description of costs (b) Date amortizable amount Description of costs that begins during your 2011 tax year: 43 Amortization of costs that began before your 2011 tax year 44 Total. Add amounts in column (f). See the instructions for where to report 44 Total. Add amounts in column (f). See the instructions for where to report	ow	ners or related persons.														
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles. Partivity Amortization (a) Description of costs (b) Date amortization Amortization (c) Code Amortization For this year 42 Amortization of costs that begins during your 2011 tax year: 43 Amortization of costs that began before your 2011 tax year 44 Total. Add amounts in column (f). See the instructions for where to report	37		en policy stat	tement that pro	hibits a	all perso	nal use	of vehicl	es, inc	luding co	mmuting,	, by you	r		Yes	No
employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirement's concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles. Pairtwill Amortization (a) Description of costs (b) Date amortization (c) Amortization (d) Code Amortization pend or percentage Amortization for this year 42 Amortization of costs that begins during your 2011 tax year: 43 Amortization of costs that began before your 2011 tax year 44 Total. Add amounts in column (f). See the instructions for where to report 44 Total. Add amounts in column (f). See the instructions for where to report	38		en policy stat	tement that pro	hibits i	personal	use of	vehicles.	excep	t commu	tına, by v	our			<u> </u>	<u> </u>
39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements' concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles. Part WE Amortization (a) Description of costs (b) Date amortization begins Amortization (c) Amortization Code section Amortization for this year 42 Amortization of costs that begins during your 2011 tax year: 43 Amortization of costs that began before your 2011 tax year 44 Total. Add amounts in column (f). See the instructions for where to report 44 Total. Add amounts in column (f). See the instructions for where to report		•		•					•		٠,,,	00.			Ì	
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles. Part: VI: Amortization (a) Description of costs (b) Date amortization Amortization Amortization Section Amortization For this year 42 Amortization of costs that begins during your 2011 tax year: 43 Amortization of costs that began before your 2011 tax year 44 Total. Add amounts in column (f). See the instructions for where to report 44 Total. Add amounts in column (f). See the instructions for where to report	39						,	u 00.0.0	, 0	01 111010	01111010					
the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles. Part: VIS Amortization (a) Description of costs Date amortization begins Amortizable amount begins Amortizable amount amount Amortizable section pend of percentage 42 Amortization of costs that begins during your 2011 tax year: 43 Amortization of costs that began before your 2011 tax year 44 Total. Add amounts in column (f). See the instructions for where to report 45 Amortization of costs that began before your 2011 tax year		•	-	. , .			ınforma	tion fron	n vour e	emplovee	s about					
Anortization of costs that began before your 2011 tax year 43 Amortization of costs that began before your 2011 tax year 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles. (a) (b) (c) (d) (c) (d) (c) Amortization Code Section Amortization for this year 42 Amortization of costs that begins during your 2011 tax year. 43 Amortization of costs that began before your 2011 tax year 44 Total. Add amounts in column (f). See the instructions for where to report 45 Amortization of costs that began before your 2011 tax year									. ,							
Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles. Part VI Amortization (a)	41						monstr	ation use	e?							
(a) Description of costs Date amortization begins Amortization begins Amortization for this year 42 Amortization of costs that begins during your 2011 tax year: 43 Amortization of costs that began before your 2011 tax year 44 Total. Add amounts in column (f). See the instructions for where to report 45 (c) Code Amortization pend or percentage 46 Amortization of costs that began before your 2011 tax year 47 Total. Add amounts in column (f). See the instructions for where to report 48 Amortization of costs that began before your 2011 tax year 49 Amortization of costs that began before your 2011 tax year 40 Amortization of costs that began before your 2011 tax year 41 Amortization of costs that began before your 2011 tax year 42 Amortization of costs that began before your 2011 tax year 43 Amortization of costs that began before your 2011 tax year 44 Amortization of costs that began before your 2011 tax year 45 Amortization of costs that began before your 2011 tax year 46 Amortization of costs that began before your 2011 tax year 47 Amortization of costs that began before your 2011 tax year 48 Amortization of costs that began before your 2011 tax year 49 Amortization of costs that began before your 2011 tax year 40 Amortization of costs that began before your 2011 tax year 41 Amortization of costs that began before your 2011 tax year 42 Amortization of costs that began before your 2011 tax year 43 Amortization of costs that began before your 2011 tax year 43 Amortization of costs that began before your 2011 tax year 44 Amortization of costs that began before your 2011 tax year 45 Amortization of costs that began before your 2011 tax year 46 Amortization of costs that began before your 2011 tax year 47 Amortization of costs that began before your 2011 tax year 48 Amortization of costs that began before your 2011 tax year 49 Amortization of costs that began before your 2011 tax year 49 Amortization of costs that began befor										covered ve	ehicles.	-				
begins amount section pend or percentage for this year 42 Amortization of costs that begins during your 2011 tax year: 43 Amortization of costs that began before your 2011 tax year 44 Total. Add amounts in column (f). See the instructions for where to report 45 Instruction of costs that began before your 2011 tax year 46 Total. Add amounts in column (f). See the instructions for where to report	P	The second secon		· 							**				. Ja y-was	2.80 61.02.2
42 Amortization of costs that begins during your 2011 tax year: 43 Amortization of costs that began before your 2011 tax year 44 Total. Add amounts in column (f). See the instructions for where to report 45 Amortization of costs that began before your 2011 tax year 46 Total. Add amounts in column (f). See the instructions for where to report			of costs	Date a	mortzation		Amortiza	ible		(d) Code		Amortiza		A	mortization	
43 Amortization of costs that began before your 2011 tax year 44 Total. Add amounts in column (f). See the instructions for where to report 43	42	Amortization of costs th	nat hegine di			l ar	a.11001			Section		penod or per	centage		uno year	
44 Total. Add amounts in column (f). See the instructions for where to report 44		, 4.1014244011 01 00318 (1	iai begins du	g your 2011	ian yea	<u></u>			1							
44 Total. Add amounts in column (f). See the instructions for where to report 44			<u> </u>			 	-						-+			
44 Total. Add amounts in column (f). See the instructions for where to report 44	43	Amortization of costs th	nat hegan ba	fore your 2011	tay yes								142			
							n renor									
				22 2.10 2.10110011	<u> </u>		<u> </u>	·					1	F	orm 4561	(2011)

ENDORSED - FILED in the office of the Secretary of State of the State of California

FEB - 3 2012

CERTIFICATE OF AMENDMENT OF ARTICLES OF INCORPORATION

Ernesto Vasquez and Frank Foster certify that:

- 1. They are the president and the secretary, respectively, of Saint Joseph Ballet Company, a California corporation.
- 2. Article I of the Articles of Incorporation of this corporation is amended to read as follows:

I.

The name of this corporation is The Wooden Floor for Youth Movement.

- 3. The foregoing amendment of Articles of Incorporation has been duly approved by the board of directors.
- 4. The corporation has no members.

We further 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 our own knowledge.

Date:

Ernesto Vasquez

President

Frank Foster



res 17 2012

Date:_

Jan

Jeden Bonnen.
DEBINA BOWEN, Secretary of State

Form **8868**, (Rev. January 2012)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

If you a	re filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box		J	► [X]
If you a	re filing for an Additional (Not Automatic) 3-Month Ex	ctension, c	complete only Part II (on page 2 of	this form).		
Do not co	implete Part II unless you have already been granted	an automa	atic 3-month extension on a previou	sly filed Fo	orm 8868.	
Electroni	c filing (e-file). You can electronically file Form 8868 if	you need a	a 3-month automatic extension of til	me to file (6 months for a cor	poration
required t	o file Form 990-T), or an additional (not automatic) 3-mo	onth extens	sion of time. You can electronically t	file Form 8	868 to request an	extension
of time to	file any of the forms listed in Part I or Part II with the ex	ception of	Form 8870, Information Return for	Transfers.	Associated With C	Certain
Personal	Benefit Contracts, which must be sent to the IRS in pap	oer format	(see instructions). For more details	on the ele	ctronic filing of this	s form,
visit www	irs.gov/efile and click on e-file for Charities & Nonprofits	s				
Part 1	Automatic 3-Month Extension of Time	e. Only s	submit original (no copies ne	eded).		
A corpora	tion required to file Form 990-T and requesting an auto	matic 6-mo	onth extension - check this box and	complete		
Part I only	1)	▶ □
	corporations (including 1120-C filers), partnerships, RENome tax returns	IICs, and t	rusts must use Form 7004 to reque	st an exter	nsion of time	
Type or print	Name of exempt organization or other filer, see instru	Employe	Employer identification numl			
File by the	THE WOODEN FLOOR FOR YOUTH			X	33-02993	56
due date for filing your return See	Number, street, and room or suite no. If a P.O. box, s 1810 NORTH MAIN STREET	see instruc	tions	Social se	ecunty number (SS	iN)
instructions	City, town or post office, state, and ZIP code. For a fine SANTA ANA, CA 92706-2727	oreign add	dress, see instructions			
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			[0]1
Applicati	on	Return	Application			Return
ls For		Code	is For			Code
Form 990		01	Form 990-T (corporation)			07
Form 990	-BL	02	Form 1041-A			08
Form 990	-EZ	01	Form 4720		_	09
Form 990	-PF	04	Form 5227			10
Form 990	T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990	-T (trust other than above)	06	Form 8870			12
	DAWN REESE					
	ooks are in the care of > 1810 N. MAIN S	TREET	- SANTA ANA, CA 9	2706		
	one No. ► 714-541-8314		FAX No 🕨			
	organization does not have an office or place of busines		· · · · · · · · · · · · · · · · · · ·		•	-
If this if	s for a Group Return, enter the organization's four digit					
box 🕨 l	If it is for part of the group, check this box			-	ers the extension	ıs for.
1 I re	quest an automatic 3-month (6 months for a corporation	required	to file Form 990-T) extension of time	until		
		ot organiza	tion return for the organization nam	ed above	The extension	
ıs fo	or the organization's return for					
D L	calendar year or		NTTO 21 0010			
►L	X tax year beginning SEP 1, 2011	, an	d ending AUG 31, 2012		·	
2 If th	ne tax year entered in line 1 is for less than 12 months, o	cneck reas	on. Initial return	Final retur	T)	
	☐ Change in accounting period					
33 If 41	us application is for Form 900 BL 000 BE 000 T 4700	or 6060 =	nter the tentative tax lass as:		T	
	nis application is for Form 990-BL, 990-PF, 990-T, 4720, prefundable credits. See instructions	or bobs, e	miler the teritative tax, less any	3-		0.
	refundable credits. See instructions. his application is for Form 990-PF, 990-T, 4720, or 6069,	ontor or:	rofundable grades and	3a	\$	
				21-		0.
	mated tax payments made. Include any prior year over			3b	\$	
	ance due. Subtract line 3b from line 3a. Include your pausing EFTPS (Electronic Federal Tax Payment System)	•	· · · · · · · · · · · · · · · · · · ·	3c	\$	0.
	If you are going to make an electronic fund withdrawal					structions.
	or Privacy Act and Paperwork Reduction Act Notice	_	:		Form 8868 (