

# 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



Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545-0052

2012

Department of the Treasury Internal Revenue Service

For cal		2/01 ,2012	, and ending 11			<del></del>		
		, , , , , , , , , , , , ,	, <u>-</u> <u>-</u> <u>-</u> <u>-</u> <u>-</u> <u>-</u> <u>-</u> <u>-</u> <u>-</u>	A	Employer identification nur	mber		
	DA FLEMING FOUNDATION		95-3950678					
C/0	RICHARD M. LEROY, CPA			В	Telephone number (see the	instructions)		
	O SANTA MONICA BLVD.		ļ					
TO2	ANGELES, CA 90025			С	If exemption application is	pending, check here		
G Che	eck all that apply Initial return		_					
<b>u</b> 0110	Final return	Initial return of a forn Amended return	ner public charity	D	1 Foreign organizations, chec	k here		
	Address change	Name change			2 Foreign organizations meet	ing the 85% test, check		
H C		(c)(3) exempt private f	oundation		here and attach computation	on P		
Γ	Section 4947(a)(1) nonexempt charitable t			Ε	If private foundation status	was terminated		
l Fa		counting method X C			under section 507(b)(1)(A)			
(t	from Part II, column (c), line 16)	Other (specify)	<b>□</b>	F	If the foundation is in a 60	-month termination		
<b>►</b> \$		column (d) must be or	r cash basis)		under section 507(b)(1)(B)			
Part		(a) Revenue and	(b) Net investment	t	(c) Adjusted net	(d) Disbursements		
	Expenses (The total of amounts in columns (b), (c), and (d) may not neces-	expenses per books	income		income	for charitable		
	sarıly equal the amounts ın column (a)	ĺ				purposes (cash basis only)		
	(see instructions) )				·	ousis offiy)		
	1 Contributions, gifts, grants, etc, received (att sch)	36,500.						
	2 Ck lif the foundn is not req to att Sch B 3 Interest on savings and temporary					t		
	cash investments					l l		
	4 Dividends and interest from securities							
	5 a Gross rents							
	b Net rental income or (loss)	Subsemble of the state of t				/		
₹	6 a Net gain/(loss) from sale of assets not on line 10 b Gross sales price for all					<u> </u>		
<b>S</b> y	assets on line 6a	Ĭ,	e has no order notes of the second of the second of			,		
E	7 Capital gain net income (from Part IV, line 2)	·	<del></del>		·	, , ,		
O U	8 Net short-term capital gain 9 Income modifications							
, 0 4 20 M, mc 2 m 2 m 2	10 a Gross sales less returns and		*			, 100		
<b>6</b>	allowances							
Z	b Less. Cost of goods sold				`			
3	c Gross profit/(loss) (att sch)							
¥	11 Other income (attach schedule)							
<b>3</b>	JSO-SHI		·					
NON CHARLES	12 Total Add lines through 11	36,500.		0.	0.			
5	13 Companisation of officers, directors, trustees, etc. 14 Other employee salaries and wages	<u> </u>				<del></del>		
	15 Pension plans, employee benefits		<u> </u>					
	16 a equi fees (attach schedile)		<u> </u>					
A D	b Accounting (see (attaches)) SEE ST 1	2,350.			·			
M !	c Other prof fees (attach see)	2/330.						
Ö İ	17 Interest O							
OPERATIVE EXPENSES	18 Taxes (attach schedule X see Tastra SEE STM 2	35.			·			
GA A	19 Depression affact.					!		
MJ I	20 Occupancy					,		
MA ¥	21 Travel, conferences, and meetings							
E	22 Printing and publications							
EXPEZ	23 Other expenses (attach schedule)							
N E								
E E	24 Total operating and administrative expenses. Add lines 13 through 23	2 205						
S	25 Contributions, gifts, grants paid PART XV	2,385. 35,825.		-		35 035		
<b>₩</b> /		33,045.		-		35,825.		
1	Add lines 24 and 25	38,210.		0.	0.	35,825.		
	27 Subtract line 26 from line 12:	(	•					
	a Excess of revenue over expenses and disbursements	-1,710.		-		!		
	b Net investment income (if negative, enter -0 )	1, /10.		0.				
	C Adjusted net income (if negative enter -0-)			<del>~  </del>	0.			
	, agasted net meanie (ii negative citter -5")							

Page 2

Dod	- 11	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	f year
Pan	111	Balance Sheets column should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash — non-interest-bearing	2,833.	1,273.	1,273.
	` 2	Savings and temporary cash investments		<del></del>	
	3	Accounts receivable			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable			
		Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach sch)			
A		Less allowance for doubtful accounts			
Š	8	Inventories for sale or use			
A S E T	9	Prepaid expenses and deferred charges			
Ś	10 a	a Investments — U S and state government obligations (attach schedule)			
	l t	Investments — corporate stock (attach schedule)			
		: Investments — corporate bonds (attach schedule)	-		
	11	Investments — land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans.			
	13	Investments — other (attach schedule)			**
	14	Land, buildings, and equipment basis ►			
		Less accumulated depreciation (attach schedule)	U TO 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	and a manufacture	
	15	Other assets (describe ► )			
	16	Total assets (to be completed by all filers — see the instructions Also, see page 1, item I)	2,833.	1,273.	1,273.
L	17	Accounts payable and accrued expenses			
À	18	Grants payable			!
B	19	Deferred revenue			† !
Ĺ	20	Loans from officers, directors, trustees, & other disqualified persons			
Ţ	21	Mortgages and other notes payable (attach schedule)			1
- 1	22	Other liabilities (describe			1
E S	23	Total liabilities (add lines 17 through 22)	0.	0.	A Management
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
NF	24	Unrestricted			:
E U	25	Temporarily restricted			,
או D	26	Permanently restricted			
A S B S A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			•
E L T A	27	Capital stock, trust principal, or current funds	· · · · · · · · · · · · · · · · · · ·		:
SNC	28	Paid-in or capital surplus, or land, building, and equipment fund			•
O E	29	Retained earnings, accumulated income, endowment, or other funds	2,833.	1,273.	<b>{</b>
R S	30	Total net assets or fund balances (see instructions)	2,833.	1,273.	1
	31	Total liabilities and net assets/fund balances (see instructions)	2,833.	1,273.	į 1
Parl		Analysis of Changes in Net Assets or Fund Balance		1,213.	
1	Total	I net assets or fund balances at beginning of year — Part II, colu			
		of-year figure reported on prior year's return)		1	2,833.
		r amount from Part I, line 27a	2	2	-1,710.
		increases not included in line 2 (itemize) SEE STATEMENT	3	3	150.
		Innes 1, 2, and 3 ases not included in line 2 (itemize)		5	1,273.
		ases not included in line 2 (itemize)  I net assets or fund balances at end of year (line 4 minus line 5)	- Part II column (b) I		1 272
	1014	i net assets of fund balances at end of year (line 4 minus line 3)	aren, column (b), n	ne 30 <b>6</b>	1,273.

(a) List and described 2-story brick warehold	b) How acquir P — Purchas D — Donation	(month, day, year)	(d) Date sold (month, day, year)			
la N/A						
b						
С					· · · · · · · · · · · · · · · · · · ·	
d						
е					-	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (e) plus (f) m		
a						
b				-		
c						
<u>d</u>						
e						
	wing gain in column (h) and owned by			(I) Gains (Coli	ımn (h)	
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i over column (j), if any		gain minus column (k than -0-) or Losses (fr		
a						
<b>b</b>				Re		
С					<del></del>	
d				·		
<u>e</u>		······································				
2 Capital gain net income or (n	et capital loss)	enter in Part I, line 7 er -0- in Part I, line 7		2		
	r (loss) as defined in sections 1222(5)	· · ·				
ın Part I, line 8	ne 8, column (c) (see instructions) If (			3		
L	er Section 4940(e) for Reduced ate foundations subject to the section 4			<b>3</b> 		
If 'Yes,' the foundation does not qu	ection 4942 tax on the distributable am alify under section 4940(e). Do not con t in each column for each year, see the	mplete this part		Yes	X No	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asset	s (c	(d) Distribution ratio (column (b) divided by column (c))		
2011	76,926.	4.	155.		18.514079	
2010	79,476.		155.		19.127798	
2009	45,395.		496.		4.324981	
2008	44,593.	7,	439.		5.994489	
2007	65,438.	20,	958.	·	3.122340	
2 Total of line 1, column (d)				2	51.083687	
	the 5-year base period — divide the too on has been in existence if less than 5			3	10.216737	
4 Enter the net value of noncha	aritable-use assets for 2012 from Part 2	X, line 5		1	8,349.	
5 Multiply line 4 by line 3		,		5		
	22222 (10) of Dod   1 - 275				85,300.	
6 Enter 1% of net investment in	ncome (1% of Part I, line 27b)			5		
7 Add lines 5 and 6				7	85,300.	
8 Enter qualifying distributions			L	3	35,825.	
Part VI instructions	than line 7, check the box in Part VI, I	ine 1b, and complete that pa	rt using a			
BAA				Forn	n <b>990-PF</b> (2012)	

Form	<b>990-PF</b> (2012) RHONDA FLEMING FOUNDATION 95-3950678		F	age 4
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instruction	s)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.			
	Date of ruling or determination letter (attach copy of letter if necessary — see instrs)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V,			<u>0.</u>
	check here Land enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)	-		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			_
_	foundations only Others enter -0-)			<u>0.</u>
3	Add lines 1 and 2			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)  Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			0.
5	Tax based on myestilent meeting easilest mile 1 mem mile 9 m zero or least on the			0.
6	Credits/Payments 2012 estimated tax pmts and 2011 overpayment credited to 2012  6 a			;
				,
	Exempt foreign organizations — tax withheld at source  Tax paid with application for extension of time to file (Form 8868)  6 c  6 b			•
				:
	Backup withholding erroneously withheld  Total credits and payments Add lines 6a through 6d  7	-	-	0.
,	Enter any penalty for underpayment of estimated tax. Check here			<u> </u>
٥				0.
9 10	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed  Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			<u></u>
11	Enter the amount of line 10 to be Credited to 2013 estimated tax			
	t VII-A   Statements Regarding Activities			
L			Yes	No
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1 a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	1 b		X
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities			,
c	Did the foundation file Form 1120-POL for this year?	1 c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			1
_	(1) On the foundation			ı
е	foundation managers \$ 0.			1
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	-	Х
_	If 'Yes,' attach a detailed description of the activities			
-	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			1
3	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	3		Х
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a		X
b	If 'Yes,' has it filed a tax return on Form 990-T for this year?	4 b	N	/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If 'Yes,' attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	,		,
	By language in the governing instrument, or	- 1		,
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?</li> </ul>	6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	7	X	
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	N/A			
b	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G <sup>2</sup> If 'No,' attach explanation	8 b	Х	!
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If 'Yes,' complete Part XIV	. 9		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names	10		
BAA	and addresses Fo	10 m 990	-PF (2	012)

Pa	int VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions)	12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14		286-6	830	
	Located at > 10340 SANTA MONICA BLVD. LOS ANGELES CA ZIP +4 > 90025			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	N/ <i>P</i>	· -	$\Box$
	and enter the amount of tax-exempt interest received or accrued during the year			N/A
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a		Yes	No
	bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If "Yes," enter the name of the foreign country.			
Pa	rt VII-B   Statements Regarding Activities for Which Form 4720 May Be Required	1	L	l
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.	·	Yes	No
1:	a During the year did the foundation (either directly or indirectly)			
•	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes XN			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?	o		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes XN	o		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? $\qquad \qquad	<b>o</b>		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?  Yes XN	<b>.</b>		
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days )  Yes XN			
	b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	îь	N	A
	Organizations relying on a current notice regarding disaster assistance check here		1	
	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
	that were not corrected before the first day of the tax year beginning in 2012?	1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
	a At the end of tax year 2012, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 20125	°		
	If 'Yes,' list the years 20 , 20 , 20 , 20			
	b Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions).	2 b	N	/A
	c If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here		114	<u> </u>
	20 _ , 20 _ , 20			
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?  Yes X N	0		
	b If 'Yes,' did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2012)	3 b	N	/A
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a		Х
	<b>b</b> Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?	46		х
DA		Form 90		

Form 990-PF (2012) RHONDA FLEMING FOU	JNDATION			3950678	8 Page <b>6</b>
Part VII-B Statements Regarding Activit		1 4720 May Be Req	uired (continued	d)	
5 a During the year did the foundation pay or incu	•	4045(3)3	П.,	l	
(1) Carry on propaganda, or otherwise attempt			Yes	X No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	X No				
(3) Provide a grant to an individual for travel,	X No				
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	X No				
(5) Provide for any purpose other than religio educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	c, literary, or or animals?	Yes	X No	
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?		5b N/A			
Organizations relying on a current notice rega	rding disaster assistanc	ce check here	<b>•</b>		
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	sibility for the grant?	·	N/A Yes	No	
If 'Yes,' attach the statement required by Reg	ulations section 53 4945	5-5(d)			
6 a Did the foundation, during the year, receive at on a personal benefit contract?			Yes	XNo	
<b>b</b> Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	iums, directly or indirec	itiy, on a personal bene	iit contract?		6 b X
7a At any time during the tax year, was the found	dation a party to a prob	ibited tax shelter transa	oction? Yes	ΧNο	
<b>b</b> If 'Yes,' did the foundation receive any proceed			البا	N/A	7 b
Part VIII Information About Officers, D	irectors, Trustees,	Foundation Manag	gers, Highly Pai	d Emplo	yees,
and Contractors					
1 List all officers, directors, trustees, foundation	· · · · · · · · · · · · · · · · · · ·	r	<del></del>	<del></del>	
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefing and deferring compensation	fit   `´ot	xpense account, ther allowances
RHONDA FLEMING	PRESIDENT	0.	C		0.
10340 SANTA MONICA BLVD	20.00				
LOS ANGELES, CA 90025					
			> 16 INC	NATE !	
Compensation of five highest-paid employees (o     Name and address of each employee	(b) Title, and average	(c) Compensation	(d)Contributions to		xpense account,
paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee beneft plans and deferre compensation	it   `ot	ther allowances
NONE			·		
	1				
Total number of other employees paid over \$50,00				<b>&gt;</b>	0
RAA	TEE 403061 1	2/25/12		For	m 990-PF (2012)

Form 990-PF (2012) RHONDA FLEMING FOUNDAT	TION		
Part VIII Information About Officers, Direc and Contractors (continued)	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
		ons). If none, enter 'NONE.'	
(a) Name and address of each person paid mo	re than \$50,000	(b) Type of service	(c) Compensation
NONE			
7.1.1			
			<u> </u>
Part IX-A Summary of Direct Charitable Act	ivities		
List the foundation's four largest direct charitable activities during the ta	ax year Include relevant statistical informa	tion such as the number of	Expenses
	earch papers produced, etc		
, N/A			
2			
3			
	·		
4			
Part IX-B Summary of Program-Related Inv	estments (see instructions)	)	
			Amount
1	5, the roundation during the tax yes	2 On miles I and Z	Amount
N/A			
2	· · · · · · · · · · · · · · · · · · ·		<del> </del>

TEEA0307L 12/22/12

Form 990-PF (2012)

All other program-related investments See instructions

Total. Add lines 1 through 3

BAA

Form 990-PF (2012) RHONDA FLEMING FOUNDATION Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes: a Average monthly fair market value of securities. 1 a 1 b 8,476. **b** Average of monthly cash balances c Fair market value of all other assets (see instructions) 1 c 1 d 8,476. d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1c 0. (attach detailed explanation) 1 e 2 0. Acquisition indebtedness applicable to line 1 assets 3 Subtract line 2 from line 1d 8,476. Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions) 127. 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 8,349. Minimum investment return. Enter 5% of line 5 6 417. Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations Part XI and do not complete this part.) and certain foreign organizations check here Minimum investment return from Part X, line 6 1 417. 2 a 2a Tax on investment income for 2012 from Part VI, line 5 2 b b Income tax for 2012 (This does not include the tax from Part VI) 2 c c Add lines 2a and 2b 3 Distributable amount before adjustments Subtract line 2c from line 1 3 417. 4 4 Recoveries of amounts treated as qualifying distributions 5 Add lines 3 and 4 417. 6 Deduction from distributable amount (see instructions) 7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1 7 417. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc. purposes a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1 a 35,825. **b** Program-related investments — total from Part IX-B 1 b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes. 2 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required) 3 a 3 b **b** Cash distribution test (attach the required schedule) Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 35,825 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income 5 Enter 1% of Part I, line 27b (see instructions) 6 35,825. Adjusted qualifying distributions. Subtract line 5 from line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Form 990-PF (2012)

Part XIII Undistributed Income (see instructions)

	<b>(a)</b> Corpus	(b) Years prior to 2011	<b>(c)</b> 2011	<b>(d)</b> 2012
Distributable amount for 2012 from Part XI, line 7	- 1 - 1			417.
2 Undistributed income, if any, as of the end of 2012				417.
a Enter amount for 2011 only			0.	
<b>b</b> Total for prior years 20 , 20 , 20		0.		
3 Excess distributions carryover, if any, to 2012				· · · · · · · · · · · · · · · · · · ·
a From 2007				
<b>b</b> From 2008				,
c From 2009				
d From 2010				,
e From 2011 16, 467.				
f Total of lines 3a through e	16,467.			ţ
4 Qualifying distributions for 2012 from Part				
XII, line 4 ► \$ 35,825.				
a Applied to 2011, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior years				
(Election required – see instructions)		0.		,
c Treated as distributions out of corpus				
(Election required – see instructions)	0.			
d Applied to 2012 distributable amount				417.
e Remaining amount distributed out of corpus	35,408.			
5 Excess distributions carryover applied to 2012	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				!
Same amount must be snown in column (2)				P. E.
6 Enter the net total of each column as				Į,
indicated below:	a a sa			i i
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	51,875.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		1
c Enter the amount of prior years' undistribut-		0.1		
ed income for which a notice of deficiency				
has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
· · · · · · · · · · · · · · · · · · ·			Mar	
d Subtract line 6c from line 6b Taxable amount — see instructions		0.		l
		, , , , , , , , , , , , , , , , , , ,		
e Undistributed income for 2011 Subtract line 4a from line 2a Taxable amount — see instructions			0.	Ę.
f Undistributed income for 2012 Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2013.				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)				
(see instructions)	0.			
8 Excess distributions carryover from 2007 not				
applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2013.				
Subtract lines 7 and 8 from line 6a	51,875.			
10 Analysis of line 9				
a Excess from 2008				
b Excess from 2009				
c Excess from 2010				
<b>d</b> Excess from 2011 16, 467.			1	
e Excess from 2012 35, 408.				
BAA				Form <b>990-PF</b> (2012)

		(2012) RHONDA FLEMING F				95-3950678	Page 10	
	alf the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling							
	is effect	tive for 2012, enter the date of the	ruling					
		pox to indicate whether the founda		erating foundation d		4942(j)(3) or	4942(j)(5)	
2 a		ne lesser of the adjusted net from Part I or the minimum	Tax year	4.0011	Prior 3 years	4 15 2000	<del>.</del>	
	ınvestm	ent return from Part X for ar listed	(a) 2012	<b>(b)</b> 2011	(c) 2010	(d) 2009	(e) Total	
	85% of							
C	Qualifyii line 4 fc	ng distributions from Part XII, or each year listed						
	for active	included in line 2c not used directly conduct of exempt activities			-			
	for active Subtraction	ng distributions made directly re conduct of exempt activities t line 2d from line 2c						
	alternat	te 3a, b, or c for the ive test relied upon						
а		alternative test – enter						
	` '	ue of all assets						
	sect	ue of assets qualifying under tion 4942(j)(3)(B)(i)				•		
Đ	minimum	ent' alternative test — enter 2/3 of investment return shown in Part X, each year listed						
c	'Suppor	t' alternative test — enter						
	inve divid on s	al support other than gross estment income (interest, dends, rents, payments securities loans (section						
	512	(a)(5)), or royalties)						
	more	oort from general public and 5 or e exempt organizations as provided ection 4942(j)(3)(B)(iii)						
	(3) Larg	gest amount of support from exempt organization						
<del></del>		ss investment income						
Par		Supplementary Information			foundation had	\$5,000 or more	in	
		assets at any time during th	<del></del>	Structions.)				
		ition Regarding Foundation Mana managers of the foundation who have	•	nan 2% of the total co	ontributions received b	v the foundation befo	ore the	
	NONE	any tax year (but only if they hav	e contributed more	than \$5,000) (See	section 507(d)(2))	,		
ь	List any	managers of the foundation who owi	n 10% or more of the	stock of a corporatio	n (or an equally large	portion of the owners	ship of	
	a partne NONE	ership or other entity) of which the	foundation has a 1	0% or greater intere	est			
2	Informa	tion Regarding Contribution, Gra	nt, Gift, Loan, Scho	larship, etc, Progra	ams:		· ··· <u></u> ··	
	Check h	. —	akes contributions to	preselected charitabl	e organizations and d			
a	<del></del>	ne, address, and telephone number of	or e-mail of the persor	to whom application	ns should be addresse	đ		
		STATEMENT 4					·	
t	The form	m in which applications should be	submitted and infor	mation and materia	als they should includ	le		
		STATEMENT FOR LINE 2A	,					
C	: Any sub	omission deadlines						
	CFF 6	STATEMENT FOR LINE 2A						
c		trictions or limitations on awards,	such as by geograp	hical areas, charita	ble fields, kinds of in	stitutions, or other	factors	
	משט (	בר מנדו ממם שמשתחת בר						
BAA	SEE 3	STATEMENT FOR LINE 2A	। य	EA0310L 12/23/12			orm <b>990-PF</b> (2012)	

3 Grants and Contributions Paid During the Year or Approved for Future Payment											
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor			Purpose of grant or contribution	Amount						
Name and address (home or business)	substantial contributor	recipient	ļ								
a Paid during the year											
SCHEDULE ATTACHED			SCH.	ATTACHED	35,825						
,											
			ļ								
			ł								
Total	L	!		► 3a	35,825						
b Approved for future payment	<u> </u>	<u> </u>			33,023.						
b Approved for father payment											
					1						
	L	l	L								
Total				► 3b							

## Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelate	ed business income	Excluded	by section 512, 513, or 514	(-)		
Program service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	<b>(d)</b> Amount	(e) Related or exempt function income (See instructions)		
a		-	<del>  </del>				
b							
С							
d							
е		·			···		
f		<del></del>	<del> </del>				
g Fees and contracts from government agencies		· · · · · · · · · · · · · · · · · · ·					
2 Membership dues and assessments 3 Interest on savings and temporary cash investments			<del> </del>				
4 Dividends and interest from securities			+ -		· · · · · · · · · · · · · · · · · · ·		
5 Net rental income or (loss) from real estate							
a Debt-financed property		<del></del>	1		<del> </del>		
<b>b</b> Not debt-financed property			† †				
6 Net rental income or (loss) from personal property							
7 Other investment income							
8 Gain or (loss) from sales of assets other than inventory		<del></del>					
9 Net income or (loss) from special events							
10 Gross profit or (loss) from sales of inventory							
11 Other revenue							
a							
b							
С	<u>.</u>	<del></del>	-		<del></del>		
d					<del></del>		
12 Subtotal Add columns (b), (d), and (e)			- <del> </del>				
13 Total. Add line 12, columns (b), (d), and (e)			1	13	0.		
See worksheet in line 13 instructions to verify calculation	ns )			•			
Part XVI-B Relationship of Activities to the	Accompl	ishment of Evemn	t Purne	)CAC			
Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	come is repo purposes (o	orted in column (e) of F ther than by providing t	Part XVI- funds for	A contributed importanti such purposes) (See ii	y to the nstructions )		
N/A			_				
					<del></del>		
					<del> </del>		
	# ·· · · · ·						
				· · · · · · · · · · · · · · · · · · ·			
	·						
		·		<del></del>			
				<del></del>			

# Form 990-PF (2012) RHONDA FLEMING FOUNDATION 95-3950678 [Part XVIII] Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		.xop. 0.5	,											
									ther organizatio ) or in section 5	n 127,	24 (2) 23 (2) 27 (2) 27 (2) 27 (2) 27 (2) 27 (2) 27 (2)	が表現	Yes	No
		•	_	foundation to								Sec. 1	15. 3.5.	
٠-,												1 a (1)		X
(2)	Other	assets										1 a (2)		X
b Ot	her trai	nsactions:									135	37(3)	16. 14	25.54
a	Sales	of assets to	а бог	ncháritáble ex	empt ofaa	nization .				<i></i>		16(1)		X
											<u></u>			X
٠.														X
				•										_
			_									1 b (4)	<b></b>	<u>X</u>
												1 b (5)		X
(6)	) Perfo	rmance of se	rvices	s or members	hip or fun	draising s	olicitations	• • • • • • • •			· · · · · · · · <u> </u>	1 b (6)		<u>X</u>
č St	iáriág d	of făcilities, ec	<b>juipm</b>	ient, mailing l	išts, óther	assets, o	or paid employ	ees				1 c		X
d If the an	the ans e goods ly trans	wer to any of , other assets, action or sha	the a or se ring a	above is 'Yes, ervices given by arrangement,	,' complete the report show in co	e the follo ting founda olumn <b>(d)</b>	wing schedule ation. If the fou the value of t	he goods	n <b>(b)</b> should alw eceived less than s, other assets,	or services	received.			
(a) Line	no.	(b) Amount invo	lved	(c) Name	of nonchari	table exempt	t organization	(d)	Description of tran	sfers, transacti	ons, and shar	ing arran	gement	S
A/N														
								1			**			
								1						
				-				†			<del></del>			
				<del> </del>				<del> </del>		·				
	$\rightarrow$		-	<del> </del>				<del>                                     </del>						
				<del></del>				+						
								-		<del></del>				
										·				
					·····			1		···				
				1				†	<del></del>		· ··			
				<del>                                     </del>				+			<del></del>			
		· · · · · · · · · · · · · · · · · · ·		<del>                                     </del>				+						
·				<del></del>		<del></del>	<del></del> .	<del>                                     </del>						
				<u> </u>			<del> </del>	<u></u> .						
				ndirectly affiliate of the Code ( ving schedule.		related to section s	, one or more t 501(c)(3)) or i	ax-exemp n section	ot organizations n 527?	·····		Yes	s X	No
	(ā)	Náme of orga	anizal	tion		<b>(b)</b> Type o	of organization	<u>i</u>	(6	) Descriptio	ñ of relatio	nship		
N/A														
								<del></del>	<del> </del>					
					<del> </del>	<del></del>		<del></del>	<del>                                     </del>					
	Under ne	enalties of perjury	Lděčlá	ěrě thát I havě evá	mined this	urā iāčludiā	เก ลัดดัดเกิดลักษณ์	chêduleê an	d statements, and to	the best of my	knowledge on	d bolief (	i io truo	
	correct,	and complete. De	claratio	n of preparer (other	er than texpay	ver) is based	ou all information	of which but	id statements, and to eparer has any know	edge.	KINOWIEUDA BIL	g bellet, li	t is true,	
Sign		0/6.	ا . ـــــــ ا	( ) . //		-					ſ	May the	RS disc	uss
lere	1	Não	22	A College	-total	- Tel	TA-15-16	<b>-</b> ▶,	PRESIDENT		į	this return preparer	shown t	below [
	Signat	ure of officer or tr	ustee				Pate		itte		<del></del> - [	(see inst	ructions)	<sup>12</sup> ,
		Print/Type prepa		arhe		Progaral's sig		<del>0</del> D '	Date	- Ta: -	1 1, 1 b	IN X	Yes	No
		1	/	/	1	- <del></del>		why	100.05-00	Check	□"			
Paid						RICHARI		Y,CP	A <u> </u>	self-empl		01438	<u> 3740</u>	
<sup>o</sup> rēpā	rêr	Firm's hame		LAURAND N						Firm's EIN	16~163	<u>7950</u>		
Jse Q	nly	Firm's address	-	10340 SAN										
		<u> </u>	]	LOS ANGEI	LES, CA	90025	5			Phone no.	(310)	286-	6830	<del>,</del>
BAA												orm 990		_
													~	

#### Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF

OMB No 1545-0047

2012

Name of the organization RHONDA FLE	MING FOUNDATION	Employer identification number
C/O RICHAR	D M. LEROY, CPA	95-3950678
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organiz	zation
	4947(a)(1) nonexempt charitable trust	not treated as a private foundation
	527 political organization	
	_	
Form 990-PF	$\boxed{X}$ 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust	treated as a private foundation
	501(c)(3) taxable private foundation	
Check if your organization is covere	d by the General Rule or a Special Rule	
<b>Note.</b> Only a section 501(c)(7), (8),	or (10) organization can check boxes for both the Gen-	ieral Rule and a Special Rule. See instructions
General Rule  [X] For an organization filing Form 990 contributor (Complete Parts I as	D, 990-EZ, or 990-PF that received, during the year, $$5,000$ and $$11$ )	or more (in money or property) from any one
Special Rules		
509(a)(1) and $170(b)(1)(A)(vi)$ a	ition filing Form 990 or 990-EZ that met the 33-1/3% si nd received from any one contributor, during the year, m 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Co	a contribution of the greater of (1) \$5,000 or
total contributions of more than	) organization filing Form 990 or 990-EZ that received from \$1,000 for use <i>exclusively</i> for religious, charitable, sciedren or animals. Complete Parts I, II, and III	n any one contributor, during the year, entific, literary, or educational purposes, or
contributions for use exclusively for	<ul> <li>organization filing Form 990 or 990-EZ that received from ir religious, charitable, etc, purposes, but these contribution he total contributions that were received during the year for he parts unless the <b>General Rule</b> applies to this organization</li> </ul>	ns did not total to more than \$1,000 r an <i>exclusively</i> religious, charitable, etc.
	outions of \$5,000 or more during the year	<b>►</b> \$
answer 'No' on Part IV, line 2, of its Form 9	y the General Rule and/or the Special Rules does not file Schedule B ( 390, or check the box on line H of its Form 990-EZ or on Part I, lin edule B (Form 990, 990-EZ, or 990-PF)	(Form 990, 990-EZ, or 990-PF) but it <b>must</b> ne 2, of its Form 990-PF, to certify that it does not
BAA For Paperwork Reduction Acor 990-PF.	t Notice, see the Instructions for Form 990, 990EZ,	Schedule <b>B</b> (Form 990, 990-EZ, or 990-PF) (2012

Schedule B	(Form 990)	990.F7	or 990-PF)	(2012)
Scriedule b	(1 01111 330	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	01 330-66	(2012)

Page

of

of Part 1

Name of organization

Employer identification num

RHONDA FLEMING FOUNDATION 95-3950678 Part 1 Contributors (see instructions) Use duplicate copies of Part I if additional space is needed (b) Name, address, and ZIP + 4 (d)
Type of contribution (c) Total (a) Number contributions Person X RHONDA FLEMING **Payroll** 11,500. 10281 CENTURY WOODS DRIVE Noncash (Complete Part II if there is LOS ANGELES, CA 90067 à noncash contribution ) (a) Number (c) Total contributions (d)
Type of contribution (b) Name, address, and ZIP + 4 Person 2 BLYTHE BRENDEN -MANN FOUNDATION **Payroll** 401 EAST EIGHTH STREET, ST 319 12,500. Noncash (Complete Part II if there is a noncash contribution ) SIOUX FALLS, SD 57103 (c) Total contributions (d)
Type of contribution (a) Number (b) Name, address, and ZIP + 4 Person Х 3 BRENDEN MANN FOUNDATION Payroli 4321 W. FLAMINGO RD 12,500. Noncash (Complete Part II if there is a noncash contribution) LAS VEGAS, NV 89103 (a) Number (b) Name, address, and ZIP + 4 (c) Total (d) Type of contribution contributions Person Payroll Noncash (Complete Part II if there is à noncash contribution) (a) Number (c) Total (b) (d) Name, address, and ZIP + 4 Type of contribution contributions Person Payroll Noncash (Complete Part II if there is a noncash contribution) (c) Total (d) Type of contribution (a) (b) Number Name, address, and ZIP + 4 contributions Person Payroll Noncash (Complete Part II if there is à noncash contribution)

Page

1 of Part II

RHONDA FLEMING FOUNDATION

Employer identification number 95-3950678

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional s	pace is needed	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A		
		\$	
		<del> </del>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
		-	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-	
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-	
<del></del>		_	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-	
		-	
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-	
		\$	1
BAA	Sche	dule <b>B</b> (Form 990, 990-EZ	, or 990-PF) (2012)

Schedule E	3 (Form 990, 990-EZ, or 990-PF) (2012)		Page	1 to	1 of Part III
Name of organ	nization FLEMING FOUNDATION			Employer identific 95-395067	
Part III	Exclusively religious, charitable, et organizations that total more than For organizations completing Part III, enter contributions of \$1,000 or less for the year Use duplicate copies of Part III if additional	\$1,000 for the year. Comple total of exclusively religious, ch (Enter this information once So	ete columns (a) through (e) paritable, etc.	)(7), (8) or (10)	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	Des	(d) scription of how g	ift is held
	N/A				
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship o	f transferor to trai	nsferee
(a)	(b)	(c)	Page	(d) scription of how gi	ift is hold
No. from Part I	Purpose of gift	Use of gift	Des	gi	iit is neid
	Transferee's name, addres	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	Des	(d) scription of how gi	ift is held
<del></del>					
	Transferee's name, addres	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	Des	(d) scription of how gi	ft is held
				-	
	Tungatana da mana a dalam	(e) Transfer of gift	Dalatianahin a	l tuamalavan ta tora	.cfara
	Transferee's name, addres	Relationship of transferor to transferee			

(Rev January 2013

### Application for Extension of Time To File an **Exempt Organization Return**

File a separate application for each return.

OMB No 1545-1709

Department of the Treasury

internal Reven	lue Service	e a separate appli	Cutton for tuon return	
• If you a	are filing for an Automatic 3-Month	Extension, complete only	Part I and check this box	<b>►</b> X
• If you a	are filing for an Additional (Not Auto	omatic) 3-Month Extensio	n, complete only Part II (on page 2 of this	
Do not cor	mplete Part II unless you have alread	dy been granted an autom	natic 3-month extention on a previously file	ed Form 8868
corporation request an Associated	n required to file Form 990-T), or an extension of time to file any of the form	additional (not automatic ns listed in Part I or Part II v racts, which must be sent	d a 3-month automatic extension of time to 3-month extension of time. You can elect with the exception of Form 8870, Information Fit to the IRS in paper format (see instruction of Charities & Nonprofits.	tronically file Form 8868 to Return for Transfers
Part I	Automatic 3-Month Extens	ion of Time. Only su	omit original (no copies needed).	
A corporat	ion required to file Form 990-T and	requesting an automatic 6	-month extension - check this box and co	mplete Part I only
All other connectar		partnerships, REMICs, a	nd trusts must use Form 7004 to request a Enter filer's identify	an extension of time to file
	Name of exempt organization or other filer,	see instructions		Employer identification number (EIN) or
Type or print	RHONDA FLEMING FOUNDA C/O RICHARD M. LEROY,	, CPA	C	95-3950678
File by the due date for	Number, street, and room or suite number			Social security number (SSN)
filing your return. See instructions	City, town or post office, state, and ZIP code		uctions	
	LOS ANGELES, CA 9002	5		
Enter the f	Return code for the return that this a	pplication is for (file a se	parate application for each return)	04
Applications of the second sec	n	Return Code	Application Is For	Return Code
Form 990 o	r Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-l	BL	02	Form 1041-A	08
Form 4720	(ındıvıdual)	03	Form 4720	09
Form 990-l	PF	04	Form 5227	10
Form 990-	T (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-	T (trust other than above)	06	Form 8870	12
Telepho If the control If this incheck the ext	one No   310 286-6830  organization does not have an office is for a Group Return, enter the orgaths box  If it is for part tension is for uest an automatic 3-month (6 months for 2/15 , 20 14 , to file the extension is for the organization's response to the organization.	inization's four digit Group of the group, check this b or a corporation required to the exempt organization re	e United States, check this box  Exemption Number (GEN)  If the contract of th	► □ his is for the whole group, es and EINs of all members
▶	calendar year 20 or			

payments made Include any prior year overpayment allowed as a credit c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions 3c \$

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax

X tax year beginning 12/01 , 20 12 , and ending 11/30 , 20 13

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions

2 If the tax year entered in line 1 is for less than 12 months, check reason

Change in accounting period

0.

0.

Final return

3 a S

3 Ы\$

Initial return

2012

### **FEDERAL STATEMENTS**

RHONDA FLEMING FOUNDATION C/O RICHARD M. LEROY, CPA PAGE 1

95-3950678

STATEMENT 1 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES

	(A) EXPENSES PER BOOKS		(B) NET INVESTMENT <u>INCOME</u>		(C) ADJUSTED NET INCOME		(D) CHARITABLE PURPOSES	
TOTAL	\$ \$	2,350. 2,350.	\$	0.	\$	0.	\$ 0.	

STATEMENT 2 FORM 990-PF, PART I, LINE 18 TAXES

	EXP PER	(A) ENSES BOOKS	 NET STMENT COME	ADJ NET	(C) USTED INCOME	 (D) RITABLE RPOSES
TOTAL	\$ \$	35. 35.	\$ 0.	\$	0.	\$ 0.

STATEMENT 3 FORM 990-PF, PART III, LINE 3 OTHER INCREASES

PRIOR YEAR ADJUSTMENT

TOTAL \$ 150.

#### STATEMENT 4 FORM 990-PF, PART XV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM:

NAME:

•••

RHONDA FLEMING LOS ANGELES, CA 90025

CARE OF:

RICHARD M LEROY, CPA

STREET ADDRESS: CITY, STATE, ZIP CODE: 10340 SANTA MONICA BLVD LOS ANGELES, CA 90025

TELEPHONE:

E-MAIL ADDRESS:

FORM AND CONTENT:

CORRESPONDENCE REQUESTING CONTRIBUTION INCLUDING COMPLETE

ORGANIZATION BACKGROUND DATA.

SUBMISSION DEADLINES:

NONE

RESTRICTIONS ON AWARDS:

NONE