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For calendar year 2014, or tax year beginning 01-01-2014 , and ending 12-31-2014

Name of foundation LOS ANGELES TRIAL LAWYERS CHARITIES A CA NONPROFIT PUBLIC BENEFIT CORP		A Employer identification number  20-5658982	
Number and street (or P O box number if mail is not delivered to street address) 11766 WILSHIRE BLVD SUITE 1160		B Telephone number (see instructions)  (310) 207-4030	
City or town, state or province, country, and ZIP or foreign postal code LOS ANGELES, CA 90025		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) <input checked="" type="checkbox"/> \$ 226,887		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule) . . . . .	595,061			
	2 Check <input checked="" type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities. . . . .				
	5a Gross rents . . . . .				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV, line 2) . . .				
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold . . . . .				
	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .				
	12 <b>Total.</b> Add lines 1 through 11 . . . . .	595,061	0		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule) . . . . .	1,225			
	b Accounting fees (attach schedule) . . . . .				
	c Other professional fees (attach schedule) . . . . .				
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . .				
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) . . . . .	243,020			
	24 <b>Total operating and administrative expenses.</b> Add lines 13 through 23 . . . . .	244,245	0		0
	25 Contributions, gifts, grants paid . . . . .	145,400			145,400
	26 <b>Total expenses and disbursements.</b> Add lines 24 and 25	389,645	0		145,400
	27 Subtract line 26 from line 12				
	a <b>Excess of revenue over expenses and disbursements</b>	205,416			
	b <b>Net investment income</b> (if negative, enter -0-)		0		
	c <b>Adjusted net income</b> (if negative, enter -0-)				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing . . . . .	21,481	226,897	226,887
	2	Savings and temporary cash investments . . . . .			
	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 schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) . . . . .			
	c	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) ▶ _____			
	15	Other assets (describe ▶ _____)			
	16	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	21,481	226,897	226,887
Liabilities	17	Accounts payable and accrued expenses . . . . .			
	18	Grants payable . . . . .			
	19	Deferred revenue . . . . .			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule) . . . . .			
	22	Other liabilities (describe ▶ _____)			
	23	<b>Total liabilities</b> (add lines 17 through 22) . . . . .		0	
Net Assets or Fund Balances	<b>Foundations that follow SFAS 117, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>				
	24	Unrestricted . . . . .	21,481	226,897	
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 27 through 31.</b>				
	27	Capital stock, trust principal, or current funds . . . . .			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
	30	<b>Total net assets or fund balances</b> (see instructions) . . . . .	21,481	226,897	
	31	<b>Total liabilities and net assets/fund balances</b> (see instructions) . . .	21,481	226,897	

Part III Analysis of Changes in Net Assets or Fund Balances		
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year’s return) . . . . .	1 21,481
2	Enter amount from Part I, line 27a . . . . .	2 205,416
3	Other increases not included in line 2 (itemize) ▶ _____	3
4	Add lines 1, 2, and 3 . . . . .	4 226,897
5	Decreases not included in line 2 (itemize) ▶ _____	5
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6 226,897

<b>2</b>	Capital gain net income or (net capital loss)	<div> <div>If gain, also enter in Part I, line 7</div> <div>If (loss), enter -0- in Part I, line 7</div> </div>	<b>2</b>	
<b>3</b>	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)	<div> <div>If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8</div> <div> <div>.</div> <div>.</div> <div>.</div> <div>.</div> <div>.</div> <div>.</div> <div>.</div> <div>.</div> <div>.</div> <div>.</div> <div>.</div> <div>.</div> <div>.</div> <div>.</div> <div>.</div> <div>.</div> <div>.</div> <div>.</div> <div>.</div> <div>.</div> <div>.</div> </div> </div>	<b>3</b>	

(a) Base period years Calendar year (or tax year beginning in)		(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))	
2013					
2012					
2011					
2010					
2009					
<b>2</b>	<b>Total</b> of line 1, column (d). . . . .			<b>2</b>	
<b>3</b>	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years . . . .			<b>3</b>	
<b>4</b>	Enter the net value of noncharitable-use assets for 2014 from Part X, line 5. . . . .			<b>4</b>	
<b>5</b>	Multiply line 4 by line 3. . . . .			<b>5</b>	
<b>6</b>	Enter 1% of net investment income (1% of Part I, line 27b). . . . .			<b>6</b>	
<b>7</b>	Add lines 5 and 6. . . . .			<b>7</b>	
<b>8</b>	Enter qualifying distributions from Part XII, line 4. . . . .			<b>8</b>	
If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.					

Part VI

Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a		Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1		1	0		
Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)							
b		Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b . . . . .		2			
c		All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
2		Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-).				2	
3		Add lines 1 and 2. . . . .				3	
4		Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-).		4			
5		Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- . . . . .		5			
6		Credits/Payments		7			
a		2014 estimated tax payments and 2013 overpayment credited to 2014					
b		Exempt foreign organizations—tax withheld at source . . . . .					
c		Tax paid with application for extension of time to file (Form 8868) . . . . .					
d		Backup withholding erroneously withheld . . . . .		6d			
7		Total credits and payments. Add lines 6a through 6d. . . . .		7			
8		Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached.		8			
9		Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed . . . . .		9			
10		Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. . . . .		10			
11		Enter the amount of line 10 to be Credited to 2015 estimated tax Refunded		11			

Part VII-A

Statements Regarding Activities

1a	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? . . . . .	1a	Yes	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . . <i>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.</i>	1b		No
c	Did the foundation file Form 1120-POL for this year? . . . . .	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \$ (2) On foundation managers \$			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities.</i>	2		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes.</i> . . . .	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year? . . . . .	4b		No
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T.</i>	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • 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? . . . . .	6		No
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i> . . . . .	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) CA			
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? <i>If "No," attach explanation.</i> . . . .	8b	Yes	
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 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV.</i> . . . . .	9		No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i> . . . . .	10		No

Part 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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
Website address <b>www.latlac.com</b>				
14	The books are in care of <b>SCOTT J CORWIN ESQ</b> Telephone no <b>(310) 207-4030</b> Located at <b>11766 WILSHIRE BLVD SUITE 1160 LOS ANGELES CA</b> ZIP +4 <b>90025</b>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year.	15		
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country				

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (6) Agree to pay money or property to a government official? ( <b>Exception.</b> 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 ). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. <input checked="" type="checkbox"/>	1b		No
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 2014?	1c		No
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 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <b>20</b> , <b>20</b> , <b>20</b> , <b>20</b>			
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 <b>all</b> years listed, answer "No" and attach statement—see instructions ).	2b		No
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 <b>20</b> , <b>20</b> , <b>20</b> , <b>20</b>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2014 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? ( <i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014.</i> )	3b		No
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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 2014?	4b		No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a

During the year did the foundation pay or incur any amount to

(1)

Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

Yes

No

(2)

Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

Yes

No

(3)

Provide a grant to an individual for travel, study, or other similar purposes?

Yes

No

(4)

Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions).

Yes

No

(5)

Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

Yes

No

b

If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

5b

No

Organizations relying on a current notice regarding disaster assistance check here.

c

If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

Yes

No

If "Yes," attach the statement required by Regulations section 53.4945–5(d).

6a

Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

Yes

No

b

Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

No

If "Yes" to 6b, file Form 8870.

7a

At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

Yes

No

b

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b

No

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1

List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(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 benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				

2

Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total

number of other employees paid over \$50,000.

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Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services. . . . .		

Part IX-A

Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 The primary purpose of the Los Angeles Trial Lawyers' Charities (LATLC) is to make a positive difference in the quality of life for people within the greater Los Angeles area, focusing on issues related to education, children, battered women, and homelessness, by providing financial assistance to needy persons and groups in the greater Los Angeles area	0
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3 . . . . .	



Part X

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. . . . .	1a	0
b	Average of monthly cash balances. . . . .	1b	0
c	Fair market value of all other assets (see instructions). . . . .	1c	0
d	Total (add lines 1a, b, and c). . . . .	1d	0
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	1e	0
2	Acquisition indebtedness applicable to line 1 assets. . . . .	2	
3	Subtract line 2 from line 1d. . . . .	3	0
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	4	0
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	0
6	Minimum investment return. Enter 5% of line 5. . . . .	6	0

Part XI

Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6. . . . .	1	
2a	Tax on investment income for 2014 from Part VI, line 5. . . . .	2a	
b	Income tax for 2014 (This does not include the tax from Part VI ). . . . .	2b	
c	Add lines 2a and 2b. . . . .	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	3	
4	Recoveries of amounts treated as qualifying distributions. . . . .	4	
5	Add lines 3 and 4. . . . .	5	
6	Deduction from distributable amount (see instructions). . . . .	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	7	0

Part XII

Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	1a	145,400
b	Program-related investments—total from Part IX-B. . . . .	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required). . . . .	3a	
b	Cash distribution test (attach the required schedule). . . . .	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	145,400
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions). . . . .	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4. . . . .	6	145,400
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			

Part XIII

Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				0
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only. . . . .				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2014				
a From 2009. . . . .				
b From 2010. . . . .				
c From 2011. . . . .				
d From 2012. . . . .				
e From 2013. . . . .	56,500			
f Total of lines 3a through e. . . . .	56,500			
4 Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ 145,400				
a Applied to 2013, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions). . . . .				
c Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
d Applied to 2014 distributable amount. . . . .				
e Remaining amount distributed out of corpus	145,400			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	201,900			
b Prior years' undistributed income Subtract line 4b from line 2b. . . . .				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .				
d Subtract line 6c from line 6b Taxable amount—see instructions . . . . .				
e Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .				
f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015 . . . . .				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . .				
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions) . . .				
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a . . . . .	201,900			
10 Analysis of line 9				
a Excess from 2010. . . .				
b Excess from 2011. . . .				
c Excess from 2012. . . .				
d Excess from 2013. . . .	56,500			
e Excess from 2014. . . .	145,400			

Part XIVPrivate Operating Foundations (see instructions and Part VII-A, question 9)

1a

If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling.

b

Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

☐ 4942(j)(3) or ☐ 4942(j)(5)

2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed.	Tax year	Prior 3 years			(e) Total
		(a) 2014	(b) 2013	(c) 2012	(d) 2011	
b	85% of line 2a					
c	Qualifying distributions from Part XII, line 4 for each year listed.					
d	Amounts included in line 2c not used directly for active conduct of exempt activities.					
e	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c.					
3	Complete 3a, b, or c for the alternative test relied upon.					
a	"Assets" alternative test—enter					
	(1) Value of all assets.					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i).					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.					
c	"Support" alternative test—enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties).					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
	(3) Largest amount of support from an exempt organization.					
	(4) Gross investment income.					

Part XVSupplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1

Information Regarding Foundation Managers:

a

List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

b

List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a

The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

EXECUTIVE COMMITTEE  
11766 WILSHIRE BLVD STE 1160  
LOS ANGELES, CA 90066  
(310) 207-4030  
info@latlc.org

b

The form in which applications should be submitted and information and materials they should include

PLEASE SUBMIT ONLINE VIA WEBSITE [www.latlc.org](http://www.latlc.org)

c

Any submission deadlines

NONE

d

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

\$5,000 LIMITATION ON FIRST AWARD, \$20,000 PER YEAR LIMITATION ON SUBSEQUENT AWARDS

Part XV

Supplementary Information (continued)

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	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year See Additional Data Table				
Total . . . . .			3a	145,400
b Approved for future payment				
Total . . . . .			3b	

Enter gross amounts unless otherwise indicated

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Form **990-PF** (2014)

Part XVII

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1

Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

Yes

No

a

Transfers from the reporting foundation to a noncharitable exempt organization of

(1)

Cash.

1a(1)

No

(2)

Other assets.

1a(2)

No

b

Other transactions

(1)

Sales of assets to a noncharitable exempt organization.

1b(1)

No

(2)

Purchases of assets from a noncharitable exempt organization.

1b(2)

No

(3)

Rental of facilities, equipment, or other assets.

1b(3)

No

(4)

Reimbursement arrangements.

1b(4)

No

(5)

Loans or loan guarantees.

1b(5)

No

(6)

Performance of services or membership or fundraising solicitations.

1b(6)

No

c

Sharing of facilities, equipment, mailing lists, other assets, or paid employees.

1c

No

d

If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

2a

Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

☐

Yes

☒

No

b

If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here

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

\*\*\*\*\*

2015-08-11

\*\*\*\*\*

Signature of officer or trustee

Date

Title

May the IRS discuss this return with the preparer shown below (see instr.)?

☒

Yes

☐

No

Paid Preparer Use Only

Print/Type preparer's name

MARC L EDWARDS

Preparer's Signature

Date

Check if self-employed

☒

PTIN

P01330814

Firm's name

EDWARDS & LIPTZ

Firm's address

18321 VENTURA BLVD STE 320 TARZANA, CA 913564252

Firm's EIN


Phone no

(818) 344-8200

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation


(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 benefit plans and deferred compensation	(e) Expense account, other allowances
JOSEPH M BARRETT	PAST PRESIDENT 0 00	0		
644 S FIGUEROA STREET LOS ANGELES, CA 90017				
PEJMAN BEN-COHEN	PAST PRESIDENT 0 00	0		
9401 WILSHIRE BLVD STE 550 BEVERLY HILLS, CA 90212				
SCOTT J CORWIN	Treasurer 0 00	0		
11766 WILSHIRE BLVD STE 1160 LOS ANGELES, CA 90025				
CONAL DOYLE	Director 0 00	0		
280 S BEVERLY DR STE 504 BEVERLY HILLS, CA 90212				
JEFFREY GREENMAN	Director 0 00	0		
18851 BARDEEN AVE STE 200 IRVINE, CA 92612				
AIMEE KIRBY	PRESIDENT ELECT 0 00	0		
1438 MARKET STREET SAN FRANCISCO, CA 94102				
CANDICE S KLEIN	Director 0 00	0		
11111 SANTA MONICA BLVD 700 LOS ANGELES, CA 90025				
PHILIP J LAYFIELD	Vice President 0 00	0		
525 S DOUGLAS ST STE 280 EL SEGUNDO, CA 90245				
SPENCER LUCAS	Director 0 00	0		
11111 SANTA MONICA BLVD 700 LOS ANGELES, CA 90025				
MICHAEL ALDER	Secretary 0 00	0		
1875 Century Park East 1500 LOS ANGELES, CA 90067				
MINH T NGUYEN	President 0 00	0		
111 W OCEAN BLVD STE 1900 LONG BEACH, CA 90802				
ROBERT T SIMON	PAST PRESIDENT 0 00	0		
11755 WILSHIRE BLVD LOS ANGELES, CA 90025				
BRUCE TRANEY	PAST PRESIDENT 0 00	0		
11150 W OLYMPIC BLVD 1080 LOS ANGELES, CA 90064				
ARASH Homampour	Director 0 00	0		
15303 Ventura BLVD STE 1000 SHERMAN OAKS, CA 91403				
DAVID DeRubertis	Director 0 00	0		
4219 Coldwater Canyon Avenue STUDIO CITY, CA 91604				
ROBERT Ounjian	Director 0 00	0		
8827 West Olympic Boulevard LOS ANGELES, CA 90211				
IBIERE SECK	Director 0 00	0		
4929 Wilshire BLVD STE 1010 LOS ANGELES, CA 90010				
LISA MAKI	Director 0 00	0		
523 West 6th Street Suite 450 LOS ANGELES, CA 90014				
GERALDINE WEISS	Director 0 00	0		
11755 Wilshire BLVD STE 1170 LOS ANGELES, CA 90025				

Form 990PF Part XV Line 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	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
OPCC 1751 CLOVERFILED BLVD SANTA MONICA,CA 90404	NONE	501(c)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	10,000
TEAM PRIME TIME PO BOX 241496 LOS ANGELES,CA 90024	NONE	501(c)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	2,500
VISTA DEL MAR CHILD FAMILY SERVICES 3200 MOTOR AVENUE LOS ANGELES,CA 90034	NONE	501(c)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	10,000
TOBERMAN NEIGHBORHOOD CENTER 131 NORTH GRAND AVENUE SAN PEDRO,CA 90731	NONE	501(c)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	5,000
CLARE FOUNDATION INC 909 PICO BLVD SANTA MONICA,CA 90405	NONE	501(c)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	10,000
IMAGINE LA 5455 WILSHIRE BLVD STE 1001 LOS ANGELES,CA 90036	NONE	501(c)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	2,500
VENICE COMMUNITY HOUSING CORP 720 ROSE AVENUE VENICE,CA 90291	NONE	501(c)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	5,000
KIWANIS CLUB KESCA 11127 ORCAS AVENUE SYLMAR,CA 91342	NONE	501(c)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	5,000
YOUTH MENTORING CONNECTION 1818 S WESTERN AVE STE 505 LOS ANGELES,CA 90006	NONE	501(c)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	10,000
ADVANCEMENT PROJECT 1910 W Sunset Blvd Suite 500 LOS ANGELES,CA 90026	NONE	501(c)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	2,500
Alliance College Ready Public Schoo 601 South Figueroa Street 4th FL LOS ANGELES,CA 90017	NONE	501(C)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	2,500
AVIVA Family Children's Services 7120 FRANKLIN AVENUE LOS ANGELES,CA 90029	NONE	501(C)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	1,000
Blind Children's Center 4120 Marathon St LOS ANGELES,CA 90029	NONE	501(C)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	2,500
CASA Los Angeles 201 Centre Plaza Drive Suite 1100 MONTEREY PARK,CA 91754	NONE	501(C)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	2,500
Clothes The Deal 9525 Imperial Highway DOWNEY,CA 90242	NONE	501(C)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	5,000
<b>Total . . . . .</b>  <b>3a</b>				145,400



Form 990PF Part XV Line 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	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
Downtown Women's Center 442 South San Pedro Street LOS ANGELES, CA 90013	NONE	501(C)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	10,000
LOS ANGELES MISSION 303 E 5th St LOS ANGELES, CA 90013	NONE	501(C)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	10,500
MUSIC 21701 AMBAR DRIVE WOODLAND HILLS, CA 91364	NONE	501(C)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	5,000
Pediatric Cancer Research Foundatio 9272 Jeronimo Road Suite 122 IRVINE, CA 92618	NONE	501(C)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	2,500
RESEDA HIGH SCHOOL 18230 Kittridge St RESEDA, CA 91335	NONE	501(C)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	2,500
ST ANNE's 155 N OCCIDENTAL BLVD LOS ANGELES, CA 90026	NONE	501(C)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	10,400
St Baldrick's Foundation 1333 South Mayflower Ave STE 400 MONROVIA, CA 91016	NONE	501(C)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	2,500
THE RAPE FOUNDATION 1223 Wilshire Blvd No 410 LOS ANGELES, CA 90403	NONE	501(C)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	5,000
US VETS INC 800 W 6TH STREET SUITE 1505 LOS ANGELES, CA 90017	NONE	501(C)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	2,500
Westchester Family YMCA 8015 S Sepulveda Blvd LOS ANGELES, CA 90045	NONE	501(C)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	5,000
Westside Center for Independent Liv 12901 Venice Blvd LOS ANGELES, CA 90066	NONE	501(C)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	2,500
HEARTWELL BASEBALL INC 6264 CARSON STREET LONG BEACH, CA 90808	NONE	501(C)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	1,000
AAJ STUDENT TRIAL ADVOCACY co CAALA 800 W 6TH ST STE 700 LOS ANGELES, CA 90017	NONE	501(C)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	1,000
ARCADIA ARMENIAN LITTLE LEAGUE PO BOX 1050 ARCADIA, CA 91077	NONE	501(c)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	500
Cabrillo High School 2001 SANTA FE AVENUE LONG BEACH, CA 90810	NONE	501(c)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	2,000
<b>Total . . . . .</b>  <b>3a</b>				145,400

Form 990PF Part XV Line 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	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Chatsworth Junior Baseball League I 21350 MAYALL STREET CHATSWORTH,CA 91311	NONE	501(c)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	500
Cleveland High School 8140 Vanalden Ave RESEDA,CA 91335	NONE	501(c)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	500
East Long Beach Pony 6150 EAST CARSON STREET LONG BEACH,CA 90808	NONE	501(c)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	500
Gondolier Booter Club 13000 VENICE BOULEVARD LOS ANGELES,CA 90066	NONE	501(c)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	500
Jordan High School 2265 E 103rd Street LOS ANGELES,CA 90002	NONE	501(c)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	500
LA Valley Seahawks Notre Dame 13730 Riverside Dr SHERMAN OAKS,CA 91423	NONE	501(c)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	500
Long Beach Little League PO BOX 15217 LONG BEACH,CA 90815	NONE	501(c)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	500
Long Beach Poly High School 1600 Atlantic Ave LONG BEACH,CA 90813	NONE	501(c)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	500
Northridge Pacers Granada Hills HS PO BOX 34152 GRANADA HILLS,CA 91394	NONE	501(c)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	500
Redondo Beach Little League PO Box 1085 Redondo Beach,CA 90278	NONE	501(c)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	500
Santa Monica Girls Fast Pitch 1650 16th STREET SANTA MONICA,CA 90404	NONE	501(c)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	500
West Long Beach Little League 1545 WEST 31ST STREET LONG BEACH,CA 90810	NONE	501(c)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	500
Wilshire Softball Association 579 N GOWER STREET LOS ANGELES,CA 90004	NONE	501(c)(3)	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	500
<b>Total . . . . .</b>  <b>3a</b>				145,400

<div>Schedule B</div> <div>(Form 990, 990-EZ, or 990-PF)</div> <div>Department of the Treasury Internal Revenue Service</div>	<div>Schedule of Contributors</div> <div>▶ Attach to Form 990, 990-EZ, or 990-PF.</div> <div>▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a>.</div>	<div>OMB No 1545-0047</div> <div>2014</div>
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<div>Name of the organization</div> <div>LOS ANGELES TRIAL LAWYERS CHARITIES</div> <div>A CA NONPROFIT PUBLIC BENEFIT CORP</div>	<div>Employer identification number</div> <div>20-5658982</div>
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Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<div><input type="checkbox"/> 501(c)( ) (enter number) organization</div> <div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation</div> <div><input type="checkbox"/> 527 political organization</div>
Form 990-PF	<div><input checked="" type="checkbox"/> 501(c)(3) exempt private foundation</div> <div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation</div> <div><input type="checkbox"/> 501(c)(3) taxable private foundation</div>

Check if your organization is covered by the **General Rule** or a **Special Rule**.  
**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc , purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc , contributions totaling \$5,000 or more during the year . . . . . ▶ \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer “No” on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

<b>Name of organization</b> LOS ANGELES TRIAL LAWYERS CHARITIES A CA NONPROFIT PUBLIC BENEFIT CORP	<b>Employer identification number</b> 20-5658982
--	---

Part I	Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
    	See Additional Data Table    	    \$ 	    Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II for noncash contribution )
    	    	    \$ 	    Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II for noncash contribution )
    	    	    \$ 	    Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II for noncash contribution )
    	    	    \$ 	    Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II for noncash contribution )
    	    	    \$ 	    Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II for noncash contribution )
    	    	    \$ 	    Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II for noncash contribution )
    	    	    \$ 	    Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II for noncash contribution )

<b>Name of organization</b> LOS ANGELES TRIAL LAWYERS CHARITIES A CA NONPROFIT PUBLIC BENEFIT CORP	<b>Employer identification number</b> 20-5658982
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**Part II** **Noncash Property** (see instructions) Use duplicate copies of Part II if additional space is needed

(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
_____	_____ _____ _____ _____	_____ \$	_____
(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
_____	_____ _____ _____ _____	_____ \$	_____

<b>Name of organization</b> LOS ANGELES TRIAL LAWYERS CHARITIES A CA NONPROFIT PUBLIC BENEFIT CORP	<b>Employer identification number</b> 20-5658982
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Part III

**Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor.** Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ \_\_\_\_\_

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
_____		_____	

Additional Data

Software ID: 14000265

Software Version: 2014v5.0

EIN: 20-5658982

Name: LOS ANGELES TRIAL LAWYERS CHARITIES  
A CA NONPROFIT PUBLIC BENEFIT CORP

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<div>1</div>	<div>DAVID DERUBERTIS</div> <div>4219 Coldwater Canyon Avenue</div> <div>STUDIO CITY, CA 91604</div>	<div>\$ 21,000</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>2</div>	<div>MINH NGUYEN</div> <div>111 West Ocean BLVD 19th FL</div> <div>LONG BEACH, CA 90802</div>	<div>\$ 17,650</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>3</div>	<div>SCOTT J CORWIN</div> <div>11766 WILSHIRE BLVD STE 1160</div> <div>LOS ANGELES, CA 90025</div>	<div>\$ 17,109</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>4</div>	<div>MICHAEL ALDER</div> <div>1875 Century Park East 15th F</div> <div>LOS ANGELES, CA 90067</div>	<div>\$ 15,350</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>5</div>	<div>ROBERT SIMON</div> <div>34 Hermosa Avenue</div> <div>HERMOSA BEACH, CA 90254</div>	<div>\$ 13,500</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>6</div>	<div>Patrick C Farber &amp; Associates</div> <div>1851 East First Street Suite</div> <div>SANTA ANA, CA 90275</div>	<div>\$ 11,500</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<div>7</div>	<div>ARASH Homampour</div> <div>15303 VENTURA BLVD STE 1000</div> <div>SHERMAN OAKS, CA 91403</div>	<div>\$ 10,450</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>8</div>	<div>GARY DORDICK</div> <div>509 South Beverly Drive</div> <div>BEVERLY HILLS, CA 90212</div>	<div>\$ 10,250</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>9</div>	<div>CONAL DOYLE</div> <div>280 South Beverly Drive 504</div> <div>BEVERLY HILLS, CA 90212</div>	<div>\$ 10,000</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>10</div>	<div>MAURO FIORE</div> <div>1901 West Pacific Ave STE 260</div> <div>WEST COVINA, CA 91790</div>	<div>\$ 10,000</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>11</div>	<div>LISA MAKI</div> <div>523 WEST 6TH ST STE 450</div> <div>LOS ANGELES, CA 90014</div>	<div>\$ 10,000</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>12</div>	<div>Hess Rehabilitation Centers</div> <div>3001 West Beverly BLVD 103</div> <div>LOS ANGELES, CA 90046</div>	<div>\$ 10,000</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>



(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<div>13</div>	<div>GERALD MARCUS</div> <div>24025 Park Sorrento Suite 430</div> <div>CALABASAS, CA 91302</div>	<div>\$ 8,800</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>14</div>	<div>PHILIP LAYFIELD</div> <div>9170 Irvine Center Dr 100</div> <div>IRVINE, CA 92618</div>	<div>\$ 7,925</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>15</div>	<div>Landmark Imaging Medical Group Inc</div> <div>11620 Wilshire BLVD 100</div> <div>LOS ANGELES, CA 90025</div>	<div>\$ 7,500</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>16</div>	<div>ADAM SHEA</div> <div>11111 SANTA MONICA BLVD 700</div> <div>LOS ANGELES, CA 90025</div>	<div>\$ 7,250</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>17</div>	<div>Verdict Videos Inc</div> <div>1346 East Walnut St STE 120</div> <div>PASADENA, CA 91106</div>	<div>\$ 6,500</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>18</div>	<div>FindLaw Inc</div> <div>610 Opperman Drive C2S353</div> <div>EAGAN, MN 55123</div>	<div>\$ 6,500</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<div>19</div>	<div>Medical Finance LLC</div> <div>300 East San Antonio Drive</div> <div>LONG BEACH, CA 90807</div>	<div>\$ 6,500</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>20</div>	<div>MICHAEL WAKS</div> <div>300 East San Antonio Drive</div> <div>LONG BEACH, CA 90807</div>	<div>\$ 6,450</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>21</div>	<div>BOBBY SADIAN</div> <div>3055 Wilshire BLVD 12th FL</div> <div>LOS ANGELES, CA 90010</div>	<div>\$ 5,500</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>22</div>	<div>JAMES DESIMONE</div> <div>715 Freemont Avenue Suite A</div> <div>SOUTH PASADENA, CA 91030</div>	<div>\$ 5,375</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>23</div>	<div>RICARDO Echeverria</div> <div>600 South Indian Hill BLVD</div> <div>CLAREMONT, CA 91711</div>	<div>\$ 5,250</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>24</div>	<div>KEVIN BOYLE</div> <div>11111 SANTA MONICA BLVD 700</div> <div>LOS ANGELES, CA 90025</div>	<div>\$ 5,040</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<div>25</div>	<div>CRAIG COLLARD</div> <div>107 TRELLINGWOOD DRIVE</div> <div>MORRISVILLE, NC 27560</div>	<div>\$ 5,000</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>26</div>	<div>VICTOR GEORGE</div> <div>20355 HAWTHORNE BLVD 1ST FL</div> <div>TORRANCE, CA 90503</div>	<div>\$ 5,000</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>27</div>	<div>THOMAS GIRARDI</div> <div>1126 Wilshire Boulevard</div> <div>LOS ANGELES, CA 90017</div>	<div>\$ 5,000</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>28</div>	<div>ALAN GURVEY</div> <div>5900 SEPULVEDA BLVD STE 500</div> <div>VAN NUYS, CA 91411</div>	<div>\$ 5,000</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>29</div>	<div>MICHAEL MARZBAN</div> <div>16000 VENTURA BLVD STE 700</div> <div>ENCINO, CA 91436</div>	<div>\$ 5,000</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>30</div>	<div>BRIAN PANISH</div> <div>11111 SANTA MONICA BLVD 700</div> <div>LOS ANGELES, CA 90025</div>	<div>\$ 5,000</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<div>31</div>	<div>DAVID RING</div> <div>10900 WILSHIRE BLVD STE 920</div> <div>LOS ANGELES, CA 90024</div>	<div>\$ 5,000</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>32</div>	<div>BRUCE TRANEY</div> <div>11150 West Olympic Blvd 1080</div> <div>LOS ANGELES, CA 90064</div>	<div>\$ 5,000</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>33</div>	<div>Creative Care Inc</div> <div>5941 Trancas Canyon Road</div> <div>MALIBU, CA 90265</div>	<div>\$ 5,000</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>34</div>	<div>Roughan &amp; Associates at LINC Inc</div> <div>114 West Colorado Boulevard</div> <div>MONROVIA, CA 91016</div>	<div>\$ 5,000</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>35</div>	<div>Personal Court Reports</div> <div>14250 Sylvan Street</div> <div>VAN NUYS, CA 91411</div>	<div>\$ 5,000</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>36</div>	<div>Doctors on Liens Inc</div> <div>15233 Ventura Blvd ste 1004</div> <div>sherman oaks, CA 91402</div>	<div>\$ 5,000</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<div>37</div>	<div>ALEXANDER POLSKY</div> <div>500 N STATE COLLEGE BLVD 14TH</div> <div>ORANGE, CA 92868</div>	<div>\$ 5,000</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>38</div>	<div>Elkins Jones Insurance Agency Inc</div> <div>12100 WILSHIRE BLVD STE 300</div> <div>LOS ANGELES, CA 90025</div>	<div>\$ 5,000</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>39</div>	<div>Cal West Attorney Services Inc</div> <div>3436 Foothill BLVD STE 144</div> <div>GLENDALE, CA 91214</div>	<div>\$ 5,000</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>
<div>40</div>	<div>ROBERT Ounjian</div> <div>8827 West Olympic Boulevard</div> <div>LOS ANGELES, CA 90211</div>	<div>\$ 5,000</div>	<div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div>

**TY 2014 Legal Fees Schedule**

**Name:** LOS ANGELES TRIAL LAWYERS CHARITIES  
A CA NONPROFIT PUBLIC BENEFIT CORP

**EIN:** 20-5658982

**Software ID:** 14000265

**Software Version:** 2014v5.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL & PROFESSIONAL FEES	1,225	0	0	0

**TY 2014 Other Expenses Schedule****Name:** LOS ANGELES TRIAL LAWYERS CHARITIES

A CA NONPROFIT PUBLIC BENEFIT CORP

**EIN:** 20-5658982**Software ID:** 14000265**Software Version:** 2014v5.0

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ADVERTISING	2,653			
BANK, CREDIT CARD & PAYPAL FEES	2,072			
COMPUTER AND INTERNET	281			
FILING FEES	30			
FUNDRAISING - Casino Night 2014	116,778			
Fundraising - Casino Night 2015	12,691			
FUNDRAISING - Golf Tournament 2014	70,190			
Gifts In Kind to PARTNER CHARITIES	19,170			
INSURANCE	4,375			
OFFICE EXPENSE	1,441			
SUPPLIES	2,611			
WEBSITE	5,998			
Youth Sports Program	4,730			