

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	350,270	702,515	702,515		
	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	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	350,270	702,515	702,515			
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	Total liabilities (add lines 17 through 22)		0			
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.						
	24	Unrestricted	350,270	702,515			
	25	Temporarily restricted					
	26	Permanently restricted					
	Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 27 through 31.						
	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	Total net assets or fund balances (see instructions)	350,270	702,515				
31	Total liabilities and net assets/fund balances (see instructions) .	350,270	702,515				

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	350,270
2	Enter amount from Part I, line 27a	2	352,245
3	Other increases not included in line 2 (itemize) ▶ _____	3	
4	Add lines 1, 2, and 3	4	702,515
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	702,515

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a			
b			
c			
d			
e			

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

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☐ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(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))
2015			
2014			
2013			
2012			
2011			


2 Total of line 1, column (d)	2	
3 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	3	
4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5	4	
5 Multiply line 4 by line 3	5	
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	
7 Add lines 5 and 6	7	
8 Enter qualifying distributions from Part XII, line 4	8	

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 instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 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	1	0
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		
a	2016 estimated tax payments and 2015 overpayment credited to 2016	6a	
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
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 2017 estimated tax ▶ Refunded ▶	11	

Part VII-A Statements Regarding Activities

	Yes	No
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	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	Yes
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 2016 or the taxable year beginning in 2016 (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	Yes

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? Website address www.latlc.org	13	Yes	
14	The books are in care of SCOTT J CORWIN Telephone no (310) 207-4030			

Located at [11766 WILSHIRE BLVD SUITE 1160 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 <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 2016, 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? 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 ▶	16	Yes	No

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.

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(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? (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). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
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)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. ▶ <input 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 2016? <input type="checkbox"/>	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 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not 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). <input type="checkbox"/>	2b		No
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
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 2016 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 2016). <input type="checkbox"/>	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 2016?	4b		No

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))?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
	(2) Influence the outcome of any specific public election (see section 4955), or to carry	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
	on, directly or indirectly, any voter registration drive?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
	(4) Provide a grant to an organization other than a charitable, etc., organization described	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
	in section 4945(d)(4)(A)? (see instructions).	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
	educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in	5b		No	
	Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?				
	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?				
	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?				
	(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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7b		No	
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?				

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

[illegible][illegible]

▶

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 2016 from Part VI, line 5.	2a	
b	Income tax for 2016 (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	476,401
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	476,401
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	476,401

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 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				0
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only.				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2016				
a From 2011.				
b From 2012.				
c From 2013.				56,500
d From 2014.				145,400
e From 2015.				336,040
f Total of lines 3a through e.	537,940			
4 Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ <u>476,401</u>				
a Applied to 2015, 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 2016 distributable amount.				
e Remaining amount distributed out of corpus	476,401			
5 Excess distributions carryover applied to 2016 (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	1,014,341			
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 2015 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017				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 2011 not applied on line 5 or line 7 (see instructions).				
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	1,014,341			
10 Analysis of line 9				
a Excess from 2012.				
b Excess from 2013.				56,500
c Excess from 2014.				145,400
d Excess from 2015.				336,040
e Excess from 2016.				476,401

Part XIV Private 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 2016, 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)

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) 2016	(b) 2015	(c) 2014	(d) 2013	
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 XV Supplementary 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

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 <i>Paid during the year</i> See Additional Data Table				
Total			3a	476,401
b <i>Approved for future payment</i>				
Total			3b	

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
f _____					
g Fees and contracts from government agencies					
2 Membership dues and assessments. . . .					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities. . . .					
5 Net rental income or (loss) from real estate					
a Debt-financed property.					
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					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a _____					
b _____					
c _____					
d _____					
e _____					
12 Subtotal Add columns (b), (d), and (e). . .					
13 Total. Add line 12, columns (b), (d), and (e).					

(See worksheet in line 13 instructions to verify calculations)

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

[illegible]

Part XVII

- | | Yes | No |
|-------|-----|----|
| 1a(1) | | No |
| 1a(2) | | No |
| 1b(1) | | No |
| 1b(2) | | No |
| 1b(3) | | No |
| 1b(4) | | No |
| 1b(5) | | No |
| 1b(6) | | No |
| 1c | | No |

[illegible]

- 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

Print/Type preparer's name MARC L EDWARDS	Preparer's Signature	Date	Check if self-employed <input checked="" type="checkbox"/>	PTIN P01330814
Firm's name ▶ EDWARDS & LIPTZ				Firm's EIN ▶
Firm's address ▶ 18321 VENTURA BLVD STE 320 TARZANA, CA 913564252				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	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
JOSEPH M BARRETT	PAST PRESIDENT 0 00	0		
633 W FIFTH STREET STE 3300 LOS ANGELES, CA 90071				
PEJMAN BEN-COHEN	DIRECTOR EMRTS 0 00	0		
8827 West Olympic Boulevard LOS ANGELES, CA 90211				
SCOTT J CORWIN	PRESIDENT 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				
AIMEE KIRBY	PAST PRESIDENT 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				
TWILA WHITE	Director 0 00	0		
6033 W CENTURY BLVD STE 810 LOS ANGELES, CA 90045				
SPENCER LUCAS	Director 0 00	0		
11111 SANTA MONICA BLVD 700 LOS ANGELES, CA 90025				
MICHAEL ALDER	President-ELECT 0 00	0		
1875 Century Park East 1500 LOS ANGELES, CA 90067				
MINH T NGUYEN	PAST PRESIDENT 0 00	0		
111 W OCEAN BLVD 19TH FL LONG BEACH, CA 90802				
ROBERT T SIMON	PAST PRESIDENT 0 00	0		
34 HERMOSA AVENUE HERMOSA BEACH, CA 90254				
BRUCE TRANEY	FOUNDING PRES 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 EMRTS 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	Vice President 0 00	0		
11755 Wilshire BLVD STE 1170 LOS ANGELES, CA 90025				
STEVEN VARTAZARIAN	Director 0 00	0		
15250 Ventura BlvD STE 505 SHERMAN OAKS, CA 91403				
ALYSSA SCHABLOSKI	Secretary 0 00	0		
4219 COLDWATER CANYON BLVD STUDIO CITY, CA 91604				
GERALD MARCUS	Treasurer 0 00	0		
24025 Park Sorrento Suite 430 CALABASAS, CA 91302				
MAURO FIORE	Director 0 00	0		
136 East Lemon Avenue MONROVIA, CA 91016				
THOMAS FEHER	Director 0 00	0		
34 Hermosa Avenue HERMOSA BEACH, CA 90254				
RYAN CLARKSON	Director 0 00	0		
448 South Hill St STE 701 LOS ANGELES, CA 90013				
SARAH POPELKA	DIR OPERATIONS 0 00	2,257		
11766 WILSHIRE BLVD STE 1160 LOS ANGELES, CA 90025				
LAUREN WOOD	Director 0 00	0		
300 E ESPLANDE DR STE 1180 OXNARD, CA 93036				
KARINA LALLANDE	Director 0 00	0		
903 State Street Suite 213 SANTA BARBARA, CA 93031				
GENE SULLIVAN	Director 0 00	0		
120 SEPULVEDA BLVD MANHATTAN BEACH, CA 90266				
DANIEL KRAMER	Secretary 0 00	0		
1801 CENTURY PARK EAST 1100 LOS ANGELES, CA 90067				
KRIS AUMAIS	Director 0 00	0		
1126 WILSHIRE BLVD LOS ANGELES, CA 90017				
BOBBY SAADIAN	Director 0 00	0		
3005 WILSHIRE BLVD 12TH FL LOS ANGELES, CA 90010				
ANDY ELLIS	Director 0 00	0		
883 NORTH DOUGLAS ST EL SEGUNDO, CA 90245				

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)				
a Paid during the year				
OPCC 1751 CLOVERFILED BLVD SANTA MONICA, CA 90404	NONE	EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	10,000
TEAM PRIME TIME PO BOX 241496 LOS ANGELES, CA 90024	NONE	EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	7,500
VISTA DEL MAR CHILD FAMILY SERVICES 3200 MOTOR AVENUE LOS ANGELES, CA 90034	NONE	EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	15,000
TOBERMAN NEIGHBORHOOD CENTER 131 NORTH GRAND AVENUE SAN PEDRO, CA 90731	NONE	EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	10,000
CLARE FOUNDATION INC 909 PICO BLVD SANTA MONICA, CA 90405	NONE	EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	10,000
IMAGINE LA 5455 WILSHIRE BLVD STE 1001 LOS ANGELES, CA 90036	NONE	EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	10,000
VENICE COMMUNITY HOUSING CORP 720 ROSE AVENUE VENICE, CA 90291	NONE	EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	10,000
KIWANIS CLUB KESCA 11127 ORCAS AVENUE SYLMAR, CA 91342	NONE	EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	15,000
YOUTH MENTORING CONNECTION 1818 S WESTERN AVE STE 505 LOS ANGELES, CA 90006	NONE	EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	15,000
ADVANCEMENT PROJECT 1910 W Sunset Blvd Suite 500 LOS ANGELES, CA 90026	NONE	EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	10,000
Alliance College Ready Public Schoo 601 South Figueroa Street 4th FL LOS ANGELES, CA 90017	NONE	EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	10,000
AVIVA Family Children's Services 7120 FRANKLIN AVENUE LOS ANGELES, CA 90029	NONE	EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	7,500
CASA Los Angeles 201 Centre Plaza Drive Suite 1100 MONTEREY PARK, CA 91754	NONE	EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	6,000
Clothes The Deal 9525 Imperial Highway DOWNEY, CA 90242	NONE	EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	5,000
Downtown Women's Center 442 South San Pedro Street LOS ANGELES, CA 90013	NONE	EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	10,000
Total ► 3a				476,401

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)				
a Paid during the year				
LOS ANGELES MISSION 303 E 5th St LOS ANGELES, CA 90013	NONE	EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	15,000
ST ANNE's 155 N OCCIDENTAL BLVD LOS ANGELES, CA 90026	NONE	EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	11,000
THE RAPE FOUNDATION 1223 Wilshire Blvd No 410 LOS ANGELES, CA 90403	NONE	EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	15,000
US VETS INC 800 W 6TH STREET SUITE 1505 LOS ANGELES, CA 90017	NONE	EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	10,000
VENICE FAMILY CLINIC 604 ROSE AVENUE VENICE, CA 90291	NONE	EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	15,000
THE FIRST TEE OF LOS ANGELES 244 S SAN PEDRO ST STE 200 LOS ANGELES, CA 90012	NONE	EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	2,500
OUR HOUSE GREIF SUPPORT CENTER 1663 SAWTELLE BLVD STE 300 LOS ANGELES, CA 90025	NONE	EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	7,500
MARCH OF DIMES 700 N BRAND BLVD STE 950 GLENDALE, CA 91203	NONE	EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	10,000
INNER CITY LAW CENTER 1309 E 7TH STREET LOS ANGELES, CA 90021	NONE	EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	10,000
Athletes Versus Cancer 10945 Le Conte Ave Suite 3132 LOS ANGELES, CA 90095	NONE	EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	10,000
BLIND CHILDREN'S CENTER 4120 Marathon Street LOS ANGELES, CA 90029	NONE	EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	10,000
CHILD ADVOCACY CENTER POMONA 363 S PARK AVENUE POMONA, CA 91766	NONE	EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	5,000
EXCEPTIONAL CHILDREN'S FOUNDATION 8740 WASHINGTON BLVD CULVER CITY, CA 90232	NONE	EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	5,000
JEWISH FAMILY SERVICES OF LA 3580 WILSHIRE BLVD STE 700 LOS ANGELES, CA 90010	NONE	EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	13,000
Pediatric Cancer Research Foundatio 9272 Jeronimo Road Suite 122 IRVINE, CA 92618	NONE	EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	10,000
Total ► 3a				476,401

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)				
a Paid during the year				
SOUTH CENTRAL SCHOLARS 29000 South Western Avenue Ste 207 Rancho Palos Verdes, CA 90275	NONE	EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	5,000
ABILITY FIRST 1300 E GREEN STREET PASADENA, CA 91106	NONE	EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	5,000
CITY HEARTS PO BOX 1314 TOPANGA, CA 90290		EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	7,500
EL NIDO FAMILY CENTERS 10200 Sepulveda BLVD Suite 350 MISSION HILLS, CA 91345		EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	10,000
FIRST PLACE FOR YOUTH 426 17TH STREET OAKLAND, CA 94612		EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	10,000
LA LGBT CENTER 1625 N SCHRADER BLVD LOS ANGELES, CA 90028		EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	10,000
MATT LEINART FOUNDATION 17280 NEWHOPE STREET FOUNTAIN VALLEY, CA 92708		EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	2,500
PLAY IT FORWARD 17328 VENTURA BLVD STE 378 ENCINO, CA 91316		EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	2,500
SOCAL TRYKERS 3117 SILVA STREET LAKEWOOD, CA 90712		EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	2,500
THE GIVING SPIRIT 11693 SAN VINCENTE BLVD STE 113 LOS ANGELES, CA 90049		EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	5,000
THE HARMONY PROJECT 817 VINE STREET 212 LOS ANGELES, CA 90038		EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	20,000
WESTSIDE CHILDREN'S CENTER 12120 WAGNER STREET CULVER CITY, CA 90230		EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	10,000
Youth Sports Program 11766 WILSHIRE BLVD LOS ANGELES, CA 90025		EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	41,401
Scholarship Program 11766 WILSHIRE BLVD LOS ANGELES, CA 90025		EOF	TO ADVANCE RECIPIENT'S CHARITABLE PURPOSE	45,000
Total ►				476,401
3a				

TY 2016 Legal Fees Schedule

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

EIN: 20-5658982

Software ID: 16000303

Software Version: 2016v3.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL & PROFESSIONAL FEES	4,083	0	0	0

TY 2016 Other Expenses Schedule

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

EIN: 20-5658982

Software ID: 16000303

Software Version: 2016v3.0

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
2016 Turkey Giveaway	49,029			
ADVERTISING	26,573			
ASSOCIATION MANAGEMENT SOFTWARE	-895			
BANK CHARGES	173			
CAALA CONVENTION	23,692			
Casino Night 2016	301,219			
Casino Night 2017	95,392			
COMPUTER AND INTERNET	677			
CREDIT CARD	845			
CREDIT CARD PROCESSING FEES	16,814			

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Golf Tournament 2016	116,105			
INSURANCE	4,416			
OFFICE EXPENSE	15,454			
Partner Charity Promotion Gifts	99,100			
PAYROLL	19			
POSTAGE & DELIVERY	247			
STORAGE SPACE	8,755			
SUPPLIES	559			
WEBSITE	4,779			

**TY 2016 Substantial Contributors
Schedule**

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

EIN: 20-5658982

Software ID: 16000303

Software Version: 2016v3.0

Name	Address
SEE SCH B --	ALL CONTRIBUTORS ARE SUBSTANTIAL LOS ANGELES, CA 90025

TY 2016 Taxes Schedule

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

EIN: 20-5658982

Software ID: 16000303

Software Version: 2016v3.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OTHER	160			

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990	OMB No 1545-0047 2016
	Name of the organization LOS ANGELES TRIAL LAWYERS CHARITIES A CA NONPROFIT PUBLIC BENEFIT CORP	Employer identification number 20-5658982

Organization type (check one)

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

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 33¹/₃% 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).

Name of organization LOS ANGELES TRIAL LAWYERS CHARITIES A CA NONPROFIT PUBLIC BENEFIT CORP	Employer identification number 20-5658982
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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)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)

20-5658982

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization LOS ANGELES TRIAL LAWYERS CHARITIES A CA NONPROFIT PUBLIC BENEFIT CORP	Employer identification number 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
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	

Additional Data

Software ID: 16000303
Software Version: 2016v3.0
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
<u>1</u>	DAVID DERUBERTIS	\$ 53,050	Person <input checked="" type="checkbox"/>
	4219 Coldwater Canyon Avenue		Payroll <input type="checkbox"/>
	STUDIO CITY, CA91604		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>2</u>	MINH NGUYEN	\$ 23,100	Person <input checked="" type="checkbox"/>
	111 West Ocean BLVD 19th FL		Payroll <input type="checkbox"/>
	LONG BEACH, CA90802		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>3</u>	SCOTT J CORWIN	\$ 23,807	Person <input checked="" type="checkbox"/>
	11766 WILSHIRE BLVD STE 1160		Payroll <input type="checkbox"/>
	LOS ANGELES, CA90025		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>4</u>	MICHAEL ALDER	\$ 45,050	Person <input checked="" type="checkbox"/>
	1875 Century Park East 15th F		Payroll <input type="checkbox"/>
	LOS ANGELES, CA90067		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>5</u>	ROBERT SIMON	\$ 52,240	Person <input checked="" type="checkbox"/>
	34 Hermosa Avenue		Payroll <input type="checkbox"/>
	HERMOSA BEACH, CA90254		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>6</u>	Patrick C Farber & Associates	\$ 9,500	Person <input checked="" type="checkbox"/>
	1851 East First Street Suite		Payroll <input type="checkbox"/>
	SANTA ANA, CA90275		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>7</u>	ARASH Homampour	\$ 12,175	Person <input checked="" type="checkbox"/>
	15303 VENTURA BLVD STE 1000		Payroll <input type="checkbox"/>
	SHERMAN OAKS, CA91403		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>8</u>	GARY DORDICK	\$ 5,000	Person <input checked="" type="checkbox"/>
	509 South Beverly Drive		Payroll <input type="checkbox"/>
	BEVERLY HILLS, CA90212		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>9</u>	CONAL DOYLE	\$ 10,000	Person <input checked="" type="checkbox"/>
	9401 Wilshire Blvd Ste 608		Payroll <input type="checkbox"/>
	BEVERLY HILLS, CA90212		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>10</u>	MAURO FIORE	\$ 8,950	Person <input checked="" type="checkbox"/>
	136 East Lemon Avenue		Payroll <input type="checkbox"/>
	MONROVIA, CA91016		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>11</u>	LISA MAKI	\$ 11,350	Person <input checked="" type="checkbox"/>
	523 WEST 6TH ST STE 450		Payroll <input type="checkbox"/>
	LOS ANGELES, CA90014		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>12</u>	GERALD MARCUS	\$ 33,910	Person <input checked="" type="checkbox"/>
	24025 Park Sorrento Suite 430		Payroll <input type="checkbox"/>
	CALABASAS, CA91302		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>13</u>	ADAM SHEA	\$ 10,000	Person <input checked="" type="checkbox"/>
	11111 SANTA MONICA BLVD 700		Payroll <input type="checkbox"/>
	LOS ANGELES, CA90025		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>14</u>	MICHAEL WAKS	\$ 11,425	Person <input checked="" type="checkbox"/>
	300 East San Antonio Drive		Payroll <input type="checkbox"/>
	LONG BEACH, CA90807		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>15</u>	BOBBY SADIAN	\$ 27,300	Person <input checked="" type="checkbox"/>
	3055 Wilshire BLVD 12th FL		Payroll <input type="checkbox"/>
	LOS ANGELES, CA90010		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>16</u>	RICARDO Echeverria	\$ 25,000	Person <input checked="" type="checkbox"/>
	600 South Indian Hill BLVD		Payroll <input type="checkbox"/>
	CLAREMONT, CA91711		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>17</u>	KEVIN BOYLE	\$ 5,750	Person <input checked="" type="checkbox"/>
	11111 SANTA MONICA BLVD 700		Payroll <input type="checkbox"/>
	LOS ANGELES, CA90025		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>18</u>	THOMAS GIRARDI	\$ 10,000	Person <input checked="" type="checkbox"/>
	1126 Wilshire Boulevard		Payroll <input type="checkbox"/>
	LOS ANGELES, CA90017		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>19</u>	ALAN GURVEY	\$ 10,000	Person <input checked="" type="checkbox"/>
	5900 SEPULVEDA BLVD STE 500		Payroll <input type="checkbox"/>
	VAN NUYS, CA91411		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>20</u>	MICHAEL MARZBAN	\$ 14,250	Person <input checked="" type="checkbox"/>
	16000 VENTURA BLVD STE 700		Payroll <input type="checkbox"/>
	ENCINO, CA91436		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>21</u>	BRIAN PANISH	\$ 9,250	Person <input checked="" type="checkbox"/>
	11111 SANTA MONICA BLVD 700		Payroll <input type="checkbox"/>
	LOS ANGELES, CA90025		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>22</u>	DAVID RING	\$ 25,000	Person <input checked="" type="checkbox"/>
	10900 WILSHIRE BLVD STE 920		Payroll <input type="checkbox"/>
	LOS ANGELES, CA90024		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>23</u>	ALEXANDER POLSKY	\$ 5,000	Person <input checked="" type="checkbox"/>
	500 N STATE COLLEGE BLVD 14TH		Payroll <input type="checkbox"/>
	ORANGE, CA92868		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>24</u>	ROBERT Ounjian	\$ 50,145	Person <input checked="" type="checkbox"/>
	8827 West Olympic Boulevard		Payroll <input type="checkbox"/>
	LOS ANGELES, CA90211		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	ANDREW ELLIS	\$ 25,000	Person <input checked="" type="checkbox"/>
	883 N DOUGLAS STREET		Payroll <input type="checkbox"/>
	EL SEGUNDO, CA90245		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
26	CHRISTOPHER DOLAN	\$ 5,000	Person <input checked="" type="checkbox"/>
	1438 MARKET ST		Payroll <input type="checkbox"/>
	SAN FRANCISCO, CA94102		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
27	CHRISTOPHER RUSSELL	\$ 10,000	Person <input checked="" type="checkbox"/>
	1401 DOVE ST 310		Payroll <input type="checkbox"/>
	NEWPORT BEACH, CA92660		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
28	DAVID BROWN	\$ 5,573	Person <input checked="" type="checkbox"/>
	23326 Hawthorne Blvd STE 380		Payroll <input type="checkbox"/>
	TORRANCE, CA90505		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
29	GENE SULLIVAN	\$ 13,950	Person <input checked="" type="checkbox"/>
	120 S SEPULVEDA BLVD		Payroll <input type="checkbox"/>
	MANHATTAN BEACH, CA90266		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
30	GENIE HARRISON	\$ 5,500	Person <input checked="" type="checkbox"/>
	523 W 6TH ST 450		Payroll <input type="checkbox"/>
	LOS ANGELES, CA90014		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>31</u>	HARRY PLOTKIN	\$ 10,000	Person <input checked="" type="checkbox"/>
	212 MADELINE DR		Payroll <input type="checkbox"/>
	MONROVIA, CA91016		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>32</u>	HOWARD KORNBERG	\$ 10,000	Person <input checked="" type="checkbox"/>
	10880 WILSHIRE BLVD 1840		Payroll <input type="checkbox"/>
	LOS ANGELES, CA90024		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>33</u>	KARINA LALLANDE	\$ 9,700	Person <input checked="" type="checkbox"/>
	111 W OCEAN BLVD 19		Payroll <input type="checkbox"/>
	LONG BEACH, CA90802		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>34</u>	LAWRENCE LALLANDE	\$ 8,150	Person <input checked="" type="checkbox"/>
	111 W OCEAN BLVD 19		Payroll <input type="checkbox"/>
	LONG BEACH, CA90802		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>35</u>	LEN BLONDER EPS	\$ 13,000	Person <input checked="" type="checkbox"/>
	9841 Airport BLVD STE 1040		Payroll <input type="checkbox"/>
	LOS ANGELES, CA90045		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>36</u>	MIKE ARIAS	\$ 11,678	Person <input checked="" type="checkbox"/>
	6201 CENTER DRIVE W STE 1400		Payroll <input type="checkbox"/>
	LOS ANGELES, CA90045		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
37	NICHOLAS ROWLEY	\$ 69,500	Person <input checked="" type="checkbox"/>
	8827 W OLYMPIC BLVD		Payroll <input type="checkbox"/>
	BEVERLY HILLS, CA90211		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
38	PAUL KIESEL	\$ 10,000	Person <input checked="" type="checkbox"/>
	8648 WILSHIRE BLVD		Payroll <input type="checkbox"/>
	BEVERLY HILLS, CA90211		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
39	USA Express Harry Kazakian	\$ 7,500	Person <input checked="" type="checkbox"/>
	21031 VENTURA BLVD 920		Payroll <input type="checkbox"/>
	WOODLAND HILLS, CA91364		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
40	ADAM BERMAN	\$ 5,000	Person <input checked="" type="checkbox"/>
	3109 Renee Court		Payroll <input type="checkbox"/>
	SIMI VALLEY, CA93065		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
41	AIMEE KIRBY	\$ 5,100	Person <input checked="" type="checkbox"/>
	1438 Market Street		Payroll <input type="checkbox"/>
	SAN FRANCISCO, CA94102		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
42	ARI RESNICK	\$ 10,000	Person <input checked="" type="checkbox"/>
	17525 Ventura Blvd Suite 200		Payroll <input type="checkbox"/>
	ENCINO, CA91316		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
43	BARRY RYAN	\$ 10,000	Person <input checked="" type="checkbox"/>
	610 Opperman Drive C2S353		Payroll <input type="checkbox"/>
	EAGAN, MN 55123		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
44	BOB SHEPARD	\$ 6,000	Person <input checked="" type="checkbox"/>
	2008 Libbie AvenueSuite 200		Payroll <input type="checkbox"/>
	RICHMOND, VA 23226		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
45	CHRISTOPHER AUMAIS	\$ 10,000	Person <input checked="" type="checkbox"/>
	1126 Wilshire Boulevard		Payroll <input type="checkbox"/>
	LOS ANGELES, CA 90017		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
46	COURTNEY ROWLEY	\$ 25,000	Person <input checked="" type="checkbox"/>
	8827 West Olympic Boulevard		Payroll <input type="checkbox"/>
	LOS ANGELES, CA 90211		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
47	CRAIG MILLER	\$ 5,000	Person <input checked="" type="checkbox"/>
	11620 WILSHIRE BLVD STE 520		Payroll <input type="checkbox"/>
	LOS ANGELES, CA 90025		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
48	CURTIS HOLDSWORTH	\$ 10,000	Person <input checked="" type="checkbox"/>
	650 TOWN CENTER DR STE 1850		Payroll <input type="checkbox"/>
	COSTA MESA, CA 92626		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
49	DAN JOHNSON	\$ 5,000	Person <input checked="" type="checkbox"/>
	1875 Century Park East 1500		Payroll <input type="checkbox"/>
	LOS ANGELES, CA90067		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
50	DAVID REINARD	\$ 5,170	Person <input checked="" type="checkbox"/>
	3020 OLD RANCH PKWY STE 300		Payroll <input type="checkbox"/>
	SEAL BEACH, CA90740		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
51	DON CUSICK	\$ 5,000	Person <input checked="" type="checkbox"/>
	1040 Avenida Acaso		Payroll <input type="checkbox"/>
	CAMARILLO, CA93012		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
52	DOUGLAS SILVERSTEIN	\$ 5,000	Person <input checked="" type="checkbox"/>
	9255 Sunset Boulevard Ste 411		Payroll <input type="checkbox"/>
	LOS ANGELES, CA90069		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
53	Edmondel dabe EL DABE	\$ 5,000	Person <input checked="" type="checkbox"/>
	1300 South Olive St Ste 1300		Payroll <input type="checkbox"/>
	LOS ANGELES, CA90015		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
54	ERIC KINGSLEY	\$ 6,000	Person <input checked="" type="checkbox"/>
	16133 VENTURA BLVD STE 1200		Payroll <input type="checkbox"/>
	ENCINO, CA91436		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
55	FARRIS TARAZI	\$ 10,000	Person <input checked="" type="checkbox"/>
	343 E PALMDALE BLVD STE 5B		Payroll <input type="checkbox"/>
	PALMDALE, CA93350		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
56	JEFFREY TRIGILIO	\$ 6,750	Person <input checked="" type="checkbox"/>
	30699 RUSSELL RANCH RD 175		Payroll <input type="checkbox"/>
	WESTLAKE VILLAGE, CA91362		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
57	JERI KUSAR	\$ 5,000	Person <input checked="" type="checkbox"/>
	111 W OCEAN BLVD STE 1200		Payroll <input type="checkbox"/>
	LONG BEACH, CA90820		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
58	JOHN CARPENTER	\$ 50,000	Person <input checked="" type="checkbox"/>
	8827 West Olympic Boulevard		Payroll <input type="checkbox"/>
	LOS ANGELES, CA90211		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
59	JOHN EMRANI	\$ 5,000	Person <input checked="" type="checkbox"/>
	714 W OLYMPIC BLVD STE 710		Payroll <input type="checkbox"/>
	LOS ANGELES, CA90015		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
60	JULIA ROZENBERG	\$ 14,000	Person <input checked="" type="checkbox"/>
	11 BROADWAY STE 1000		Payroll <input type="checkbox"/>
	NEW YORK, NY10004		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>61</u>	KARINA SOUZA	\$ 5,000	Person <input checked="" type="checkbox"/>
	736 FOURTH ST		Payroll <input type="checkbox"/>
	HERMOSA BEACH, CA90254		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>62</u>	LANTZ BELL	\$ 10,000	Person <input checked="" type="checkbox"/>
	14 Corporate Plaza		Payroll <input type="checkbox"/>
	NEWPORT BEACH, CA92660		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>63</u>	LAUREN WOOD	\$ 5,600	Person <input checked="" type="checkbox"/>
	300 E ESPLANADE DR 300		Payroll <input type="checkbox"/>
	OXNARD, CA93036		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>64</u>	LEIF LUNBERG	\$ 5,000	Person <input checked="" type="checkbox"/>
	200 Providence Road Suite 100		Payroll <input type="checkbox"/>
	CHARLOTTE, NC28207		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>65</u>	MANNY VALDEZ	\$ 9,500	Person <input checked="" type="checkbox"/>
	660 S FIGUEROA ST STE 1290		Payroll <input type="checkbox"/>
	LOS ANGELES, CA90017		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>66</u>	MANUEL VALDEZ	\$ 9,500	Person <input checked="" type="checkbox"/>
	402 West BroadwaySuite 1720		Payroll <input type="checkbox"/>
	SAN DIEGO, CA92101		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
67	MARYANN WALKER	\$ 10,000	Person <input checked="" type="checkbox"/>
	1010 S Cabrillo		Payroll <input type="checkbox"/>
	SAN PEDRO, CA90731		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
68	MATT PERNICE	\$ 5,000	Person <input checked="" type="checkbox"/>
	1214 Highland Ave		Payroll <input type="checkbox"/>
	Manhattan Beach, CA90266		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
69	MATTHEW BERNSTEIN	\$ 5,450	Person <input checked="" type="checkbox"/>
	22554 VENTURA BLVD 130		Payroll <input type="checkbox"/>
	WOODLAND HILLS, CA91364		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
70	MICHELLE MAYER	\$ 5,000	Person <input checked="" type="checkbox"/>
	6537 Topanga Canyon BLVD		Payroll <input type="checkbox"/>
	WOODLAND HILLS, CA91303		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
71	NICHOLAS LOLOEE	\$ 26,750	Person <input checked="" type="checkbox"/>
	2601 Airport Drive Suite 380		Payroll <input type="checkbox"/>
	TORRANCE, CA90505		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
72	PAUL ZUCKERMAN	\$ 25,000	Person <input checked="" type="checkbox"/>
	8827 West Olympic Boulevard		Payroll <input type="checkbox"/>
	LOS ANGELES, CA90211		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>73</u>	PEJMAN BEN-COHEN	\$ 25,000	Person <input checked="" type="checkbox"/>
	8827 West Olympic Boulevard		Payroll <input type="checkbox"/>
	LOS ANGELES, CA90211		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>74</u>	REZA Torkzadeh	\$ 6,400	Person <input checked="" type="checkbox"/>
	11601 Wilshire BLVD 5th FL		Payroll <input type="checkbox"/>
	LOS ANGELES, CA90025		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>75</u>	RIC PEREZ	\$ 5,000	Person <input checked="" type="checkbox"/>
	575 Madison Avenue Suite 1006		Payroll <input type="checkbox"/>
	NEW YORK, NY10022		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>76</u>	ROSEMARIE Chiusano Drohan	\$ 15,750	Person <input checked="" type="checkbox"/>
	11601 Wilshire BLVD STE 2040		Payroll <input type="checkbox"/>
	LOS ANGELES, CA90025		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>77</u>	RYAN CLARKSON	\$ 11,265	Person <input checked="" type="checkbox"/>
	9255 W SUNSET BLVD STE 804		Payroll <input type="checkbox"/>
	LOS ANGELES, CA90069		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>78</u>	RYAN SABA	\$ 7,000	Person <input checked="" type="checkbox"/>
	9350 Wilshire BLVD Suite 250		Payroll <input type="checkbox"/>
	BEVERLY HILLS, CA90212		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>79</u>	SIAMAK VAZARI	\$ 5,550	Person <input checked="" type="checkbox"/>
	9454 Wilshire Blvd Suite 830		Payroll <input type="checkbox"/>
	BEVERLY HILLS, CA90212		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>80</u>	STEPHEN GLASS	\$ 50,000	Person <input checked="" type="checkbox"/>
	8827 West Olympic Boulevard		Payroll <input type="checkbox"/>
	LOS ANGELES, CA90211		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>81</u>	TIGRAN Martinian	\$ 5,000	Person <input checked="" type="checkbox"/>
	2801 Cahuenga Blvd West		Payroll <input type="checkbox"/>
	LOS ANGELES, CA90068		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>82</u>	TRACI KAAS	\$ 12,275	Person <input checked="" type="checkbox"/>
	9210 Irvine Center Drive		Payroll <input type="checkbox"/>
	IRVINE, CA92618		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>83</u>	VALENTINO MARCIANO	\$ 25,000	Person <input checked="" type="checkbox"/>
	25422 TRABUCO RD STE 105-623		Payroll <input type="checkbox"/>
	LAKE FOREST, CA92630		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>84</u>	VICTOR GEORGE	\$ 5,000	Person <input checked="" type="checkbox"/>
	20355 HAWTHORNE BLVD 1ST FL		Payroll <input type="checkbox"/>
	TORRANCE, CA90503		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)