Internal Revenue Service

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

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0047 Open to Public Inspection

A	FULLIE A	2004 calcidar year, or tax year beginning 006 1, 2004 and ending 000 30,	<u> 2005</u>	<u> </u>			
В	Check if applicable	Please C Name of organization D En	ployer	identification number			
Г	Addres	list of col	95-1	.647832			
	Name change						
	Initial return	Specific 3200 MOTOR AVE	310-	836-1223			
	Final		ounting me				
Ļ_	Amendereturn Applica	LOS ANGELES, CA 90034	Other (specify				
L	pending	must attach a completed Schedule & (Form 990 or 990-F7)					
	Mahaita	H(a) Is this a group return :▶WWW.VISTADELMAR.ORG H(b) If "Yes," enter number					
		: ► WWW. VISTADELMAR. ORG H(b) If "Yes," enter number ation type (check only one) ► X 501(c) (3) ◄ (Insert no) 4947(a)(1) or 527 H(c) Are all affiliates include		N/A Yes No			
		ore I if the organization's gross receipts are normally not more than \$25,000. The (If "No," attach a list.)					
		tion need not file a return with the IRS, but if the organization received a Form 990 Package ganization covered by					
	n the ma	ail, it should file a return without financial data. Some states require a complete return.	nber ►				
_			-	ation is not required to attach			
_		ceipts: Add lines 6b, 8b, 9b, and 10b to line 12 40, 266, 697. Sch B (Form 990, 99	0-EZ, or	990-PF).			
Pa		Revenue, Expenses, and Changes in Net Assets or Fund Balances					
	1	Contributions, gifts, grants, and similar amounts received: Direct public support 1a 5,301,888.					
	a	Indirect public support 1b 103,193					
	C	Government contributions (grants) 10 10 10	1				
	ď	Total (add lines 1a through 1c) (cash \$ 5,389,956. noncash \$ 15,125.)	1d	5,405,081.			
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	28,510,019.			
	3	Membership dues and assessments	3				
	4	Interest on savings and temporary cash investments	4	759,470.			
	5	Dividends and interest from securities	5	467,927.			
	6 a	Gross rents SEE STATEMENT 3 6a 13,800.	1				
	b	Less rental expenses [6b] Net rental income or (loss) (subtract line 6b from line 6a)	6c	13,800.			
_	7	Other investment income (describe SEE STATEMENT 1)	7	358.			
Revenue		Gross amount from sales of assets other (A) Securities (B) Other					
eve		than inventory 3 , 891 , 327 . 8a					
Œ	b	Less cost or other basis and sales expenses 3,772,269. 8b]				
	C	Gain or (loss) (attach schedule) 119,058. 8c	.	440.050			
	d	Net gain or (loss) (combine line 8c, columns (A) and (B)) STMT 4	8d	119,058.			
	9	Special events and activities (attach schedule) If any amount is from gaming , check here Gross revenue (not including \$ 982,441. of contributions					
	• ا	reported on line 1a) 9a 590,529.					
	Ь	Less direct expenses other than fundraising expenses 9b 590,529.					
	C	Net income or (loss) from special events (subtract line 9b from line 9a) SEE STATEMENT 5	9c	0.			
	10 a	Gross sales of inventory, less returns and allowances					
	Ь	· · · · · · · · · · · · · · · · · · ·]				
	C	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c	620 106			
	11	Other revenue (from Part VII, line 103)	11	628,186.			
	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11) Program services (from line 44, column (B))	12	30,073,630.			
ses	14	Managementaped general/(from line 44, dolumn (C))	14	3,319,828.			
Expenses	15	Fundralsing (Iran line 44, belenn (D))	15	987,244.			
Ë	16	Payments to affiliates (attach schedulen	16				
	17	Party expanses (17	34,380,702.			
ý	18	Exeess or (deficit) for the year (subtract line 17 from line 12)	18	1,523,197.			
Net ssets	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	62,295,362.			
-š	20 21	Other charges in translets or fund balances (attach explanation) SEE STATEMENT 6 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	20	917,450. 64,736,009.			
4230	1	I MA For Privacy Act and Pananyork Reduction Act Natice see the congrete instructions		Form 990 (2004)			

1

2004.09000 VISTA DEL MAR CHILD AND FAM 4309_

Part II Functional Expenses and	rganiza '4) oro	itions must complete colum anizations and section 4947	n (A) Columns (B), (C), an	d (D) are required for section e trusts but optional for othe	n 501(c)(3) Page 2 ers
Do not include amounts reported on line	, 7, Oig	(A) Total	(B) Program	(C) Management	(D) Fundraising
6b, 8b, 9b, 10b, or 16 of Part I		(17) 10121	services	and general	(2) randidising
22 Grants and allocations (attach schedule) (cash \$ 71,181 • noncash \$	22	71,181.	71,181,	STATEMENT 8	
23 Specific assistance to individuals (attach schedule	-1-	, = , = 0	, _ , _ ,		
24 Benefits paid to or for members (attach schedule)	24				
25 Compensation of officers, directors, etc	25	427,033.	386,193.	32,482.	8,358.
26 Other salaries and wages	26	17,550,589.	15,872,121.	1,334,972.	343,496.
27 Pension plan contributions	27	1,449,676.	1,259,903.	169,430.	20,343.
28 Other employee benefits	28		2,525,160.		
29 Payroll taxes	29	1,578,893.	1,372,204.	184,533.	22,156.
30 Professional fundraising fees	30				
31 Accounting fees	31	37,800.		37,800.	
32 Legal fees	32	140,443.		140,443.	
33 Supplies	33	525,877.	432,374.	•	33,097.
34 Telephone	34	176,044.	83,947.		6,790.
35 Postage and shipping	35	54,719.	26,093.	26,516.	2,110.
36 Occupancy	36	1,261,909.		85,808.	
37 Equipment rental and maintenance	37	143,694.	118,144.	16,506.	
38 Printing and publications	38	197,856.		25,991.	
39 Travel	39	854,030.		8,255.	
40 Conferences, conventions, and meetings	40	76,423.		7,438.	
41 Interest	41	46,588.		46,588. 229,613.	
42 Depreciation, depletion, etc (attach schedule)	42	587,616.	330,003.	229,013.	
43 Other expenses not covered above (itemize)	43a				
a	43b				
C C	43c				
d	43d				
see Statement 7	43e	6,294,818.	5,444,823.	488,159.	361,836.
Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-1	5 44		30,073,630.		
Joint Costs. Check ▶ ☐ If you are following SOP			···		
Are any joint costs from a combined educational campa	iign an	d fundraising solicitation re	ported in (B) Program serv	ces? ►	Yes X No
		•	(ii) the amount allegated to	_	
If "Yes," enter (i) the aggregate amount of these joint co			(ii) the amount anocated to	Program services \$	
(III) the amount allocated to Management and general	sts \$, and	(iv) the amount allocated to		······································
(III) the amount allocated to Management and general Part III Statement of Program Serv	sts \$ ice #	, and			
(III) the amount allocated to Management and general Part III Statement of Program Serv What is the organization's primary exempt purpose?	ice A	, and Accomplishments	(iv) the amount allocated to	Fundraising \$	
(III) the amount allocated to Management and general Part III Statement of Program Serv What is the organization's primary exempt purpose? TO PROVIDE VARIOUS SERVI	sts \$ ice A	, and Accomplishments FOR AT-RISK	(IV) the amount allocated to	Fundraising \$ CHILDREN -	Program Service Expenses
(III) the amount allocated to Management and general Part III Statement of Program Serv What is the organization's primary exempt purpose? TO PROVIDE VARIOUS SERVI All organizations must describe their exempt purpose achievements that are not measurable (Section 501(c)(3) and (4) or the service of the ser	ice A	, and Accomplishments FOR AT-RISK clear and concise manner State	AND ABUSED the number of clients served, pu	Fundraising \$ CHILDREN . blications issued, etc Discuss	Program Service Expenses (Required for 501(c)(3) and (4) orgs , and 4947(a)(1)
(III) the amount allocated to Management and general Part III Statement of Program Serv What is the organization's primary exempt purpose? TO PROVIDE VARIOUS SERVI All organizations must describe their exempt purpose achievements that are not measurable (Section 501(c)(3) and (4) allocations to others)	ice A	, and Accomplishments FOR AT-RISK clear and concise manner State	AND ABUSED the number of clients served, pu	Fundraising \$ CHILDREN . blications issued, etc Discuss	Program Service Expenses (Required for 501(c)(3) and
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Part IV Balance Sheets

Note:		re required, attached schedules and amounts wild be for end-of-year amounts only	ithin the description column	(A) Beginning of year		(B) End of year
	45	Cash - non-interest-bearing		782,267.	45	1,586,963.
	46	Savings and temporary cash investments		782,267. 1,052,515.	46	1,586,963. 1,442,339.
	47 a	Accounts receivable Less allowance for doubtful accounts	47a 8,969,168. 47b 193,799.	9,673,738.	47c	8,775,369
Assets	48 a	Pledges receivable Less allowance for doubtful accounts	48a 1,674,462. 48b 240,316.	1,956,120.	48c	1,434,146
	49 50	Grants receivable Receivables from officers, directors, trustees, and key employees			49 50	
	51 a		51a 51b		51c	
	52 53 54	Inventories for sale or use Prepaid expenses and deferred charges Investments - securities STMT 9	Cost X FMV	1,662,438. 39,350,348.	52 53 54	1,342,773 38,919,059
	55 a	Investments - land, buildings, and equipment basis	55a 6,525.	33733073100		3073137033
	b 56	Less accumulated depreciation Investments - other	55b	6,525.	55c 56	6,525
		Land, buildings, and equipment basis Less accumulated depreciation	57a 19,350,604. 57b 8,971,948.	10,365,964.	57c	10,378,656 6,097,300
	58		EST AGREEMENTS)	4,079,298. 68,929,213.	58	
	59 60	Total assets (add lines 45 through 58) (must equal li Accounts payable and accrued expenses	ine /4)	1,168,955.	59 60	69,983,130, 714,193
	61	Grants payable			61	
·^	62	Deferred revenue		62		
ĕ	63	Loans from officers, directors, trustees, and key emp		63		
Liabilities		Tax-exempt bond liabilities		64a		
בֿ	65	Mortgages and other notes payable Other liabilities (describe ► S	EE STATEMENT 10)	5,464,896.	64b 65	4,532,928
	66	Total liabilities (add lines 60 through 65)	¬	6,633,851.	66	5,247,121
	Organ	nizations that follow SFAS 117, check here 🕨 🔯 69 and lines 73 and 74	and complete lines 67 through			
ses	67	Unrestricted		54,004,877.	67	55,197,075
and	68	Temporarily restricted		6,288,411.	68	7,536,860
Ба	69	Permanently restricted	[2,002,074.	69	2,002,074
ם בי	Organ	rizations that do not follow SFAS 117, check here 🕨	and complete lines			
r F		70 through 74				
is c	70	Capital stock, trust principal, or current funds		· · ·	70	
sse	71	Paid-in or capital surplus, or land, building, and equi			71	
Net Assets or Fund Balances	72	Retained earnings, endowment, accumulated income	Г		72	
<u>e</u>	73	Total net assets or fund balances (add lines 67 thro column (A) must equal line 19, column (B) must equ	- :	62,295,362.	73	64,736,009
2						

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments

423021 01-13-05

Part IV-A Reconciliation of Revenue per Audited	Part IV-B Reconciliation of Expenses per Audited
Financial Statements with Revenue per Return	Financial Statements with Expenses per Return
a Total revenue, gains, and other support per audited financial statements	a Total expenses and losses per audited financial statements
	audited financial statements b Amounts included on line a but not on
b Amounts included on line a but not on line 12, Form 990	line 17, Form 990
(1) Net unrealized gains	(1) Donated services and use of facilities \$ 162,795.
on investments \$ 917,450.	(2) Prior year adjustments
(2) Donated services	reported on line 20,
and use of facilities \$ 162,795.	Form 990 \$
(3) Recoveries of prior	(3) Losses reported on
year grants \$(4) Other (specify)	line 20, Form 990 \$(4) Other (specify)
STMT 11 \$ 590,529.	STMT 12 \$ 590,529.
Add amounts on lines (1) through (4) c Line a minus line b b 1,670,774. c 35,903,899.	Add amounts on lines (1) through (4) b 753,324. c Line a minus line b c 34,380,702.
d Amounts included on line 12, Form	d Amounts included on line 17, Form
990 but not on line a:	990 but not on line a
(1) Investment expenses	(1) Investment expenses not included on
not included on line 6b, Form 990 \$	line 6b, Form 990 \$
(2) Other (specify)	(2) Other (specify)
\$\$	<u> </u>
Add amounts on lines (1) and (2)	Add amounts on lines (1) and (2)
e Total revenue per line 12, Form 990	e Total expenses per line 17, Form 990
(line c plus line d) Part V List of Officers, Directors, Trustees, and Key I	(line c plus line d) e 34,380,702.
Fait V List of Officers, Directors, Trustees, and Key I	(B) Title and average hours (C) Compensation (D) Contributions to (E) Expense
(A) Name and address	per week devoted to position (If not paid, enter plans & deferred compensation other allowances
ELIAS LEFFERMAN	CEO/PRESIDENT
3200 MOTOR AVE.	
LOS ANGELES, CA 90034	37.50 178,889. 32,907. 0. SVP OF OPERATIONS
AMY JAFFE 3200 MOTOR AVE.	SVP OF OPERATIONS
LOS ANGELES, CA 90034	37.50 128,544. 18,688. 0.
MICHELLE MCDONALD	CFO
3200 MOTOR AVE.	
LOS ANGELES, CA 90034	37.50 119,600. 15,727. 0.
SEE STATEMENT B	BOARD OF DIRECTORS
	0 0. 0. 0.
75 Did any officer, director, trustee, or key employee receive aggregate compensat	on of more than \$100,000 from your organization and all related
organizations, of which more than \$10,000 was provided by the related organizations	ations? If "Yes," attach schedule Yes X No
423031 01-13-05	Form 990 (2004)

423031 01-13-05

Form	990 (2004) VISTA DEL MAR CHILD AND FAMILY SERVICES 95-1647	<u>832</u>		Page 5
Pa	rt VI Other Information		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77	<u> </u>	X
	If "Yes," attach a conformed copy of the changes			
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	78b		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year?	79		X
	If "Yes," attach a statement			
80 a				
•••	governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		X
b	If "Yes," enter the name of the organization			
	and check whether it is exempt or nonexempt			
81 a	Enter direct or indirect political expenditures. See line 81 instructions. 81a 0			
b	Did the organization file Form 1120-POL for this year?	81b	1	Х
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than	0.0		
02 4	fair rental value?	82a	Х	
	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an	ULA		
b	expense in Part II (See instructions in Part III) [826] 162,795.			
02 -	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	х	1
83 a		83b	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?			X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A	84b	1	
05	27/2	85a	<u> </u>	
85	27/2		 	 -
b	bid the organization make only in medec leadying expensions of 4-jobs of medec	85b		ļ
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax			
	owed for the prior year Dues, assessments, and similar amounts from members 85c N/A			
C	27 / 2			
ď	37 / 3			
8	37 / 3			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A	85g	1	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues	ŀ		ļ
	allocable to nondeductible lobbying and political expenditures for the following tax year? N/A	85h	ļ	<u> </u>
86	501(c)(7) organizations. Enter a Initiation fees and capital contributions included on line 12 86a N/A			
þ	Gross receipts, included on line 12, for public use of club facilities 86b N/A			
87	501(c)(12) organizations. Enter a Gross income from members or shareholders 87a N/A			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them) 87b N/A			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership,		•	
	or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3?			
	If "Yes," complete Part IX	88		X
89 a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under			
	section 4911 ▶ 0 . , section 4912 ▶ , section 4955 ▶ 0 .			
þ	501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit			1
	transaction during the year or did it become aware of an excess benefit transaction from a prior year?			
	If "Yes," attach a statement explaining each transaction	89b	L	<u>X</u>
C	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under			•
	sections 4912, 4955, and 4958			0.
đ	Enter Amount of tax on line 89c, above, reimbursed by the organization			0.
90 a	List the states with which a copy of this return is filed CALIFORNIA			
b	Number of employees employed in the pay period that includes March 12, 2004	2	127	<u>529</u>
91	The books are in care of ► L. MICHELLE MCDONALD, CFO Telephone no ► 310-83	<u>6-1</u>	<u> 223</u>	
	Located at ► 3200 MOTOR AVE, LOS ANGELES, CA ZIP+4 ► 9	003	4	
			_	
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here		▶[
	and enter the amount of tax-exempt interest received or accrued during the tax year	N/		
423041 01-13-	05	For	m 990	(2004)

Part VII	Analysis of Income-P	roducing A	ctivities	(See page 33 of the inst	ructions.)		
	r gross amounts unless otherwis	se		ted business income		ded by section 512 513 or 514	(E)
indicated	. g . 		(A)	(B)	(C) Exclu-	(D)	Related or exempt
	m service revenue:		Business code	Amount	sion	Amount	function income
	ENT SERVICE FEE	g Ì			- 0000		1,832,786.
							-/00-/.00
b							
°	-						
d		}					
e							
f Medica	re/Medicaid payments						06 655 000
g Fees an	nd contracts from government agen	cies	-				26,677,233.
94 Membe	ership dues and assessments				i		
95 Interest	t on savings and temporary cash inv	estments/			14		
96 Dividen	nds and interest from securities				14	467,927.	
97 Net ren	tal income or (loss) from real estate	.				,	
	nanced property			—··			
	ot-financed property				16	13,800.	
		roport.			- -	25,000	
	tal income or (loss) from personal p	roperty			14	358.	<u> </u>
	nvestment income				1 4	330.	
100 Gain or	(loss) from sales of assets				1 4 4	110 050	
other th	nan inventory				18	119,058.	
101 Net inc	ome or (loss) from special events						
102 Gross p	profit or (loss) from sales of invento	ry					
103 Other re	evenue:						
a MIS	SCELLANEOUS			ĺ	01	225,077. 403,109.	
ь WOF	KERS' COMP ADJU	STMENT			01	403,109.	
c							
d							
` —		 					
104 Subtate	al (add columns (B), (D), and (E))		_).	1,988,799.	28,510,019.
	add line 104, columns (B), (D), and	(E))		l			30,498,818.
	add fille 104, coldfills (B), (D), and 105 plus line 1d, Part I, should e		int on line 1	2 Part I			30/130/0200
Note. Line	Relationship of Activi	tios to the	Accomp	ishment of Ever	nnt Du	rnoses (See nage 34 of the	instructions)
Line No	Explain how each activity for which				itea impor	tantly to the accomplishment of	of the organization's
V	exempt purposes (other than by pr				<u> </u>	GEDUTOEG DED	DODATO THE MILE
93	ALL PROGRAM FEES	ARE RE	CEIAED	AS A RESUL	T OF	SERVICES PER	FORMED IN THE
	PROCESS OF CARRY			RGANIZATIO	1'S P	RIMARY TAX EX	EMPT PURPOSES
	AS STATED IN STA	TEMENT	<u>A.</u>				.,
Part IX	Information Regardin	g Taxable	Subsidia	ries and Disrega	rded E	ntities (See page 34 of the	instructions.)
Name ad	(A)	(B) Percentage of		(C) Nature of activities		(D) Total income	(E) End-of-year
	dress, and EIN of corporation, irship, or disregarded entity	wnership interes	st	NATULE OF ACTIVITIES		Total income	assets
	in the first control of the fi		%	 -			
	N/A		%				
	11/11		%	 			
			%				
<u> </u>	Information Regarding			tod with Boroon	al Ban	ofit Contracts (See page	a 34 of the instructions \
Part X							Yes X No
	e organization, during the year, rece						
	e organization, during the year, pay				t contract	,	Yes X No
Note: If "Y	es" to (b), file Form 8870 and Fo	orm 4720 (see	instructions	s)			
Please	Under penalties perjury, I declare that I correct, and complete Declaration of prep	have examined this arer (other than off	s return, includii icer) is based or	ng accompanying schedules n all information of which pre	and stateme parer has an	ents, and to the best of my knowled by knowledge	ge and belief it is true,
Sign	X/m Test			X5/12/06 L	Elia	.S Lefterman, Kr	esident/CEO
Here	Signature of officer			Date	Type or p	print name and title	
	Preparer's				Date	Check if self-	Preparer's SSN or PTIN
	signature	4)			employed >	P00401346
Dranarar'al	·	ASSON &	JANKS	LLP		EIN ▶ 95-	1777440
Use Only	CICHTIA A			, 16TH FLO	OR	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	+++++
423161	address, and			24-3929		Phone no L	310) 873-1600
01-13-05	ZIP+4 LOS AING	, C				Travaleno.	Form 990 (2004)

SCHEDULE A

(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.) ▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB No 1545-0047

Name of the organization

Department of the Treasury

Internal Revenue Service

Employer identification number 1647022

VISTA DEL MAR CHILD AND E	FAMILY SERVICE	ES	95 1647	832
Part 1 Compensation of the Five Highest Paid Emplo (See page 1 of the instructions List each one If there are none, enter	-	ficers, Directo	rs, and Trus	stees
(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 & deferred compensation	(e) Expense account and other allowances
GIA CRECELIUS 3200 MOTOR AVE., LOS ANGELES, CA	PSYCHIATRIST			
90034	37.5	166,394.	9,961	. 0.
JEFFERY J. CATANIA 3200 MOTOR AVE., LOS ANGELES, CA	VP OF DEVELOR			
90034	37.5	122,241.	13,074	0.
SUSAN SCHMIDT-LACKNER 3200 MOTOR AVE., LOS ANGELES, CA	MED DIRECTOR			
90034	37.5	112,788.	11,999	0.
DONNA BAKER	DIR. OF EDUC	Ą		
3200 MOTOR AVE., LOS ANGELES, CA 90034	37.5	104,311.	10,895	0.
NANCY TALLERINO 3200 MOTOR AVE., LOS ANGELES, CA	VP OF OUTPAT	ַ		
90034	37.5	98,896.	16,452	0.
Total number of other employees paid over \$50,000	74			
Part II Compensation of the Five Highest Paid Indepe			al Services	
(a) Name and address of each independent contractor paid more th	an \$50,000	(b) Type of s	ervice	(c) Compensation
VICTOR CORONA				
4101 MARCASEL AVE., LOS ANGELES, CA 9		SENERAL CONTRACTOR		279,245.
JB_COUNSELING_&_CONSULTING				
11222 S. LA CIENEGA BLVD., SUITE 545	, LENNOX, CAC	COUNSELING	,	166,660.
JERRY ZASLAW				
1311 N. BALDWIN AVE., ARCADIA, CA 910	06 F	FORMER CEO		135,162.
CARLOS MARTINEZ				
13277 WINGO ST., ARLETA, CA 91331	C	GARDNER-LA	BORER	118,386.
BRENDA RAPPAPORT		T TNTC	OCTAT	
1317 OZONE AVE., SANTA MONICA, CA 904		CLINICAL S VORKER	OCIAL	78,400.
Total number of others receiving over \$50,000 for professional services	5			

Sche	dule A (F	orm 990 or 990-EZ) 2004 VISTA DEL MAR CHILD AND FAMILY SERVICES 95-164	783	2 [age 2
Pa	rt III	Statements About Activities (See page 2 of the instructions)		Yes	No
(oublic op obbying or line i o	re year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence inion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the activities \$ 7,500. (Must equal amounts on line 38, Part VI-A, INE I	1	х	
(Organizat	tions that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking			
•	Yes," mu	st complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities			
	•	e year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors,			
	•	directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such			
		affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes,"			
		detailed statement explaining the transactions.)	2a	1	Х
as	sale, exci	hange, or leasing of property?			A
bl	ending o	of money or other extension of credit?	2b	ļ	Х
c F	urnishin	g of goods, services, or facilities?	2¢		Х
		3 • • • • • • • • • • • • • • • • • • •			
d F	Payment	of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE PART V, FORM 990	2đ	Х	
e T	ransfer (of any part of its income or assets?	2e		Х
3 a [o you m	nake grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how SEE STATEMENT 13	_	v	
у	ou deter	mine that recipients quality to receive payments)	3a	X	
	-	ave a section 403(b) annuity plan for your employees?	3b	X	
		naintain any separate account for participating donors where donors have the right to provide advice e or distribution of funds?	4a		х
		rovide credit counseling, debt management, credit repair, or debt negotiation services?	4b		X
	rt IV	Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions)			
	rganızatı	on is not a private foundation because it is (Please check only ONE applicable box)			
5	\mathbb{H}	A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)			
b -	\vdash	A school Section 170(b)(1)(A)(ii) (Also complete Part V)			
,	H	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii) A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v)			
9	H	A reductal, state, or local government or governmental unit. Section 170(b)(1)(A)(v) A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii). Enter the hospital's name, city,			
3	ш	and state			
10		An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv)			
-		(Also complete the Support Schedule in Part IV-A)			
11a	X	An organization that normally receives a substantial part of its support from a governmental unit or from the general public			
		Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)			
11b		A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)			
12		An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross			
		receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of			
		its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired			
		by the organization after June 30, 1975 See section 509(a)(2) (Also complete the Support Schedule in Part IV-A)			
13		An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described.	oed in		
		(1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))			·
		Provide the following information about the supported organizations (See page 5 of the instructions)			
		(a) Name(s) of supported organization(s)		e num om abo	
				-	•
14		An organization organized and operated to test for public safety Section 509(a)(4) (See page 5 of the instructions)			
423111 12-03-0	04	Schedule A (Form 9	90 or	990-EZ	2004

			Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing	29		
20	instrument, or in a resolution of its governing body? Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues,	_29_		
30	and other written communications with the public dealing with student admissions, programs, and scholarships?	30		ĺ
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of	- 55		
31	solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known			
	to all parts of the general community it serves?	31	1	ĺ
	If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)			
		_		
32	Does the organization maintain the following	_		
а		32a	<u> </u>	
þ	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student			ŀ
	admissions, programs, and scholarships?	32c		
d		32d	-	
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)	_		
33	Does the organization discriminate by race in any way with respect to	_		
а	Students' rights or privileges?	33a		
b	Admissions policies?	33b	ļ	-
C	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
е	Educational policies?	33e		
1	Use of facilities?	33f		
g	Athletic programs?	33g		-
h		33h		
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)			
		_		
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended?	34b	ļ	ļ
	If you answered "Yes" to either 34a or b, please explain using an attached statement			İ
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50,			1
	1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35	l	

Schedule A (Form 990 or 990-EZ) 2004

spenditures Ints paid or incurred) Interest lobbying) Illowing table - Interest lobbying in the second incompany in the secon	3 3 3 4	7	(a) Affiliated group totals N/A	(b) To be completed for ALL electing organizations
ssroots lobbying) direct lobbying) llowing table - nontaxable amount is -	3 3	7		electing organizations
direct lobbying) flowing table - nontaxable amount is -	3 3	7	N/A	
direct lobbying) flowing table - nontaxable amount is -	3 3	7		
llowing table - nontaxable amount is -	3	3		
nontaxable amount is -	3			
nontaxable amount is -	<u> </u>			
nontaxable amount is -	1) <u> </u>		
nontaxable amount is -				
int on line 40) l	1		I
5% of the excess over \$500,000		.		
0% of the excess over \$1,000,000	} 4	 	······································	
% of the excess over \$1,500,000				
	. ا	. [
a line OC	4:			+-
n line 36	4.			
n line 38	4	+		
44, you must file Form 4720				
veraging Period Under	Sectio	า 501	(h)	
e a section 501(h) election do not h		•		
4	Averaging Period Under de a section 501(h) election do not l	Averaging Period Under Section de a section 501(h) election do not have to cor	Averaging Period Under Section 501 de a section 501(h) election do not have to complete a	Averaging Period Under Section 501(h) de a section 501(h) election do not have to complete all of the five columns tructions for lines 45 through 50 on page 11 of the instructions)

	Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or liscal year beginning In)	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total	
45 Lobbying nontaxable amount					C	
46 Lobbying ceiling amount (150% of line 45(e))					(
7 Total lobbying expenditures					(
8 Grassroots nontaxable amount					(
9 Grassroots ceiling amount (150% of line 48(e))					(
O Grassroots lobbying expenditures				_	(

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions)

During the year, did the organization attempt to influence national, state or local legislation, including any attemp	ot to
influence public opinion on a legislative matter or referendum, through the use of	

- a Volunteers
- b Paid staff or management (Include compensation in expenses reported on lines c through h.)
- c Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- Grants to other organizations for lobbying purposes
- Direct contact with legislators, their staffs, government officials, or a legislative body
- Railies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i Total lobbying expenditures (Add lines c through h.)

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Yes	No	Amount
	Х	
	Х	
	Х	
	Х	
	Х	
X		7,500.
	Х	
	X	<u></u>
		7,500.
·	SEE	STATEMENT 15

423141 11-24-04

Schedule A (Form 990 or 990-EZ) 2004

Schedule A (Form 990 or 990-EZ) 2004

423151 11-24-04

· Form 3868

(Rev December 2004)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return

OMB No. 1545-1709

• If yo	ou are filing for an Automatic 3-Month Extension, complete only Part I and check this box	► X
If yo	ou are filing for an Additional (not automatic) 3-Month Extension, complete only Part II (on page 2 of this fo	orm)
Do no	t complete Part II unless you have already been granted an automatic 3-month extension on a previously file	d Form 8868
Par	Automatic 3-Month Extension of Time - Only submit original (no copies needed)	
Form	990-T corporations requesting an automatic 6-month extension - check this box and complete Part I only	▶ □
	er corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file incom s. Partnerships, REMICs, and trusts must use Form 8736 to request an extension of time to file Form 1065, 106	
oelow extens	onic Filing (e-file). Form 8868 can be filed electronically if you want a 3-month automatic extension of time to (6 months for corporate Form 990-T filers). However, you cannot file it electronically if you want the additional sion, instead you must submit the fully completed signed page 2 (Part II) of Form 8868. For more details on the ww.irs gov/efile.	(not automatic) 3-month
Гуре	Name of Exempt Organization	Employer identification number
print	VISTA DEL MAR CHILD AND FAMILY SERVICES	95-1647832
File by t due dati filing yo	hor Number, street, and room or suite no. If a P.O. box, see instructions or 3200 MOTOR AVE	
etum S nstructi		
Chec	type of return to be filed (file a separate application for each return):	
X 	Form 990 Form 990-T (corporation) Form 472 Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 522 Form 990-EZ Form 990-T (trust other than above) Form 606 Form 990-PF Form 1041-A Form 887	27 59
Tel	e books are in the care of L. MICHELLE MCDONALD ephone No 310-836-1223 FAX No. ne organization does not have an office or place of business in the United States, check this box nis is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this If it is for part of the group, check this box and attach a list with the names and EINs of all in	
1		JARY 15, 2006
2	If this tax year is for less than 12 months, check reason: Initial return Final return	Change in accounting period
	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	\$
	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	\$
	Balance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required, deposit with F coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	TD \$ N/A
Cauti	on. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8	3879-EO for payment instructions.
LHA	For Privacy Act and Paperwork Reduction Act Notice, see instructions.	Form 8868 (Rev. 12-2004)
-11/	. OF FIREDY ACT BITO F BECHANIK FIELDOLIOTI ACT HOLICE, SEE HISTIDELIOTIS.	7 07111 0000 (Nev 12 2007)

Form	8868 (Rev 12-2004) ·			Page 2
	you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II and che	ck this box	<u> </u>	▶ X
	: Only complete Part II if you have already been granted an automatic 3-month extension on a previ			
	you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).			
Pa	Additional (not automatic) 3-Month Extension of Time - Must file O	riginal a	nd One Co	py.
Туре	Name of Exempt Organization		Employer id	entification number
print			95-16	347832
File by	the Number street and room or suite no. If a P.O. box, see instructions		For IRS use	
	ate for 3200 MOTOR AVE			
filing the return Instruc	See City, town or post office, state, and ZIP code. For a foreign address, see instructions.			, ,
	Form 990-BL Form 990-PF Form 990-T (trust other than above) Form 4	_	Form 522	
STO	P: Do not complete Part II if you were not already granted an automatic 3-month extension on	a previous	sly filed Form	8868.
• Th	ne books are in the care of ▶ L. MICHELLE MCDONALD, CFO			
	elephone No. ▶ 310-836-1223 FAX No. ▶			_
	the organization does not have an office or place of business in the United States, check this box			▶ □
• if	this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	if this	s is for the wi	nole group, check this
box	107 15 000C	EINs of all r	members the	extension is for.
4	For calendar year . or other tax year beginning JUL 1, 2004 and		JUN 30,	2005
5 6	For calendar year, or other tax year beginning			In accounting period
7	State in detail why you need the extension		Onange	s in accounting penod
•	ADDITIONAL TIME IS NECESSARY TO GATHER INFORMATION	N NEE	DED TO	FILE A
	COMPLETE AND ACCURATE TAX RETURN.			
8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less an nonrefundable credits. See instructions	ру	\$	
ь	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estim	ated		
_	tax payments made. Include any prior year overpayment allowed as a credit and any amount paid			
	previously with Form 8868		<u> </u>	
С	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, de coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	eposit with	FTD \$	N/A
	Signature and Verification			
	r penalties of perjury, I declare that I have examined this form, including accompanying schedules and statement rue, correct, a <u>nd complete, a</u> nd that I a <u>m authorized to prepare this form</u>	ts, and to the	best of my kno	owledge and belief,
Signa	ture ▶ CPA		Date 🕨	2/11/06
	Notice to Applicant - To Be Completed by the	IRS		•
	We have approved this application. Please attach this form to the organization's return.			
L	We have not approved this application. However, we have granted a 10-day grace period from the			
	date of the organization's return (including any prior extensions). This grace period is considered to		extension of	time for elections
	otherwise required to be made on a timely return. Please attach this form to the organization's return.		request for a	n autonoion of timo to
L	We have not approved this application. After considering the reasons stated in item 7, we cannot file. We are not granting a 10-day grace period	grant your	request for a	ii extension of time to
	We cannot consider this application because it was filed after the extended due date of the return Other	n for which	an extension	was requested.
	Ву		_ 	·
Direct	lor		Date	

FORM 990	OTHER INVESTMENT INCOME	STATEMENT 1
DESCRIPTION		AMOUNT
GAS/OIL ROYALTIES DONATED PARTNERSHIP - MINER	RAL	84. 274.
TOTAL TO FORM 990, PART I,	LINE 7	358.
	FOOTNOTES	STATEMENT 2

FORM 990, PART IV, LINE 57

PROPERTY & EQUIPMENT AT JUNE 30, 2005 CONSIST OF OF THE FOLLOWING:

BUILDING AND IMPROVEMENTS	13,953,386.
LAND AND IMPROVEMENTS	1,822,297.
FURNITURE AND EQUIPMENT	1,071,954.
OTHER	813,713.
BUILDINGS - CIP	695,055.
LAND AND IMPROVEMENTS	564,291.
VEHICLES	429,908.
TOTAL	19,350,604.
ACCUMULATED DEPRECIATION	<8,971,948.>
PROPERTY & EQUIPMENT (NET)	10,378,656.

FORM 990	RENTA	L INCOM	ie ———				STATEMENT	
KIND AND LOCATION OF PROPERT	Ϋ́					VITY MBER	GROSS RENTAL INC	OME
COMMERICAL PROPERTY						1	13,8	300.
TOTAL TO FORM 990, PART I, I	LINE 6A					=	13,8	300.
FORM 990 GAIN (LOSS)	FROM PUB	LICLY 1	RADED	SECURI	TIES	5	STATEMENT	4
DESCRIPTION		OSS PRICE		ST OR R BASIS		KPENSE F SALE	NET GAI OR (LOS	
GAIN/LOSS ON SECURITIES	3,89	1,327.	3,7	72,269.		0.	119,0	58.
TO FORM 990, PART I, LINE 8	3,89	1,327.	3,7	72,269.		0.	119,0	58.
FORM 990 SPE	CIAL EVE	NTS AND) ACTI	VITIES			STATEMENT	5
	GROSS RECEIPTS	CONTRI		GROSS REVENU		DIREC		1E
SPORTS SWEEPSTAKE GOLF TOURNAMENT ASSOCIATES "HAIRSPRAY"	509,847. 333,245.	•	758. 075.			276,08 162,17		0.
THEATER OTHER 2004-05 EVENTS	271,836. 458,042.	•	830. 778.	71,0 81,2		71,00 81,26		0 . 0 .
TO FM 990, PART I, LINE 9 1,	572,970.	982,	441.	590,5	29.	590,52	9.	0.
FORM 990 OTHER CHANGE	S IN NET	ASSETS	OR F	UND BAL	ANCI	ES	STATEMENT	6
DESCRIPTION							AMOUNT	
UNREALIZED GAIN ON INVESTMEN CHANGE IN ANNUITIES PAYABLE	IT					_	120,2 484,9	
CHANGE IN THE VALUE OF SPLIT	' INTERES'	r AGREE	MENT			.	312,2	
TOTAL TO FORM 990, PART I, L	INE 20						917,4	50

FORM 990		OTHER I	EXPENSES	<u> </u>	STATEMENT
DECORTRACA	·	A)		(C) MANAGEMENT	(D)
DESCRIPTION	TO	TAL	SERVICES	AND GENERAL	FUNDRAISING
CONTRACT &					
PROFESSIONAL					
SERVICES	1,9	04,508.	1,441,898.	123,914.	338,696
DIRECT SERVICES		87,316.	2,700,972.	22,787.	563 , 557.
FOOD & PROVISIONS		40,934.	815,314.	16,181.	9,439
LIABILITY INSURANCE		44,341.	444,241.	0.	100.
MISCELLANEOUS EXP		54,200.	27,273.	26,354.	573
BAD DEBT EXP		38,923.		298,923.	40,000.
IN-KIND MATERIAL		15,125.	15,125.		
SPECIAL EVENTS					
DIRECT EXPENSE	<5	90,529.>			<590 , 529
TOTAL TO FM 990, LN 43	6,2	94,818.	5,444,823.	488,159.	361,836.
FORM 990	CASH (GRANTS AND	ALLOCATIONS		STATEMENT 8
CLASSIFICATION DONEE'S	S NAME	DONE	E'S ADDRESS	DONEE'S RELATIONSH	IP AMOUNT
SCHOLARSHIP SEE STA	ATEMENT	D	···	UNRELATED	71,181.
TOTAL INCLUDED ON FORM	990, P	ART II, LIN	NE 22		71,181.
FORM 990	NON-0	GOVERNMENT	SECURITIES	 	STATEMENT 9
SECURITY DESCRIPTION CO	OST/FMV	CORPORATE STOCKS	E CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	TOTAL NON-GOV'T SECURITIES
CORDORAME CHOCKS	TOMY?	21 425 502			21 425 502
CORPORATE BONDS	FMV	21,435,502			21,435,502. 16,991,822.
CORPORATE BONDS	FMV		16,991,822	457,251	•
MUTUAL FUNDS	FMV			457,251	45/,251
CASH SURRENDER VALUE OF LIFE INSURANCE	FMV			34,484	. 34,484.
TO FORM 990, LINE 54, (COL B	21 435 502		. 491,735	. 38,919,059.
10 10tal 990, BINE 94, (COH D		= =====================================	= ======	= =====================================

FORM 990	OTHER LIABILITIES	STATEMENT	10
DESCRIPTION		AMOUNT	
GIFT ANNUITY PAYAB	LE	1,543,1	48.
ACCRUED VACATION		948,3	
ACCRUED PAYROLL		243,1	
CONTRACT RESERVE -		573,0	
ACCRUED WORKERS' COTHER ACCURED EXPE		898,6 211,4	
DEFERRED REVENUE	NSES	115,0	
TOTAL TO FORM 990,	PART IV, LINE 65, COLUMN B	4,532,9	28.
FORM 990	OTHER REVENUE NOT INCLUDED ON FORM 990	STATEMENT	11
DESCRIPTION		AMOUNT	
SPECIAL EVENTS DIR	ECT COSTS	590,5	29.
TOTAL TO FORM 990,	PART IV-A	590,5	29.
FORM 990	OTHER EXPENSES NOT INCLUDED ON FORM 990	STATEMENT	12
DESCRIPTION		AMOUNT	
SPECIAL EVENTS DIR	ECT COSTS	590,5	29.
TOTAL TO FORM 990,	PART IV-B	590,5	29.
			
SCHEDULE A EXPL	ANATION OF QUALIFICATIONS TO RECEIVE PAYMENTS PART III, LINE 3	STATEMENT	13

SEE STATEMENT C

SCHEDULE A	OTHER INC	OME	ST	STATEMENT 14		
DESCRIPTION	2003 AMOUNT	2002 AMOUNT	2001 AMOUNT	2000 AMOUNT		
OTHER INCOME	322,014.	178,009.	275,363.	141,014.		
TOTAL TO SCHEDULE A, LINE 22	322,014.	178,009.	275,363.	141,014.		

SCHEDULE A STATEMENT OF LOBBYING ACTIVITIES - PART VI-B STATEMENT 15

CONTRIBUTIONS PAID TO CALIFORNIA ALLIANCE FOR THE BENEFIT OF MENTAL HEALTH BALLOT INITIATIVE ON PROP 63.

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EIN: 95-1647832

For Fiscal Year Ended 6/30/05 2004 Form 990, Page 2, Part III

Vista Del Mar Child and Family Services (Vista Del Mar) is a multi-service child and welfare/behavioral health agency licensed by the California State Department of Social Services. Vista Del Mar provides scholastic and vocational training, as well as counseling and residential services for at-risk and abused children. Additionally,

adoptions.

Effective July 1, 1997, Julia Ann Singer, Reiss-Davis, and Home-SAFE (entities under Vista Del Mar's common control) merged into Vista Del Mar.

Vista Del Mar operates services for the placement of children in foster homes and

Julia Ann Singer Preschool Psychiatric Center, also known as Julia Ann Singer Preschool Center and Julia Ann Singer Center (the Center), is an outpatient treatment facility serving emotionally disturbed, developmentally delayed, and learning disabled children and their families. The Center is also involved in many other types of programs, such as providing child abuse treatment, behavioral and learning modification, teacher classroom training, and educational conferences.

Reiss-Davis Child Study Center (Reiss-Davis) provides diagnostic evaluation and treatment to emotionally disturbed children and their families who are unable to afford these services in the private sector. Reiss-Davis also provides research in the field of mental health and training programs for graduate students in child psychology.

Home-SAFE Child Care, Inc. (Home-SAFE) provides child care, parent education, and counseling services to low-income families. Home-SAFE is also involved in programs to coordinate delivery care systems for high-risk infants and their families, and to provide services for child abuse and neglect prevention and intervention.

Family Service of Santa Monica, which merged with Vista Del Mar on December 27, 2000, provides a broad range of support services to youngsters and families through the Santa Monica Bay and West Los Angeles region including counseling, school age parent and infant development, school based services, an early intervention program, and group workshops

VISTA DEL MAR CHILD AND FAMILY SERVICES EIN: 95-1647832 For Fiscal Year Ended 06/30/05 2004 Form 990, Page 4, Part V

BradTabach-Bank3200 Motor Avenue Los Angeles. CA 90034Chairman. Board of DirectorsAS NEEDED0RickWolf3200 Motor Avenue Los Angeles CA 90034Chairman. FinanceAS NEEDED0JoelMogy3200 Motor Avenue Los Angeles. CA 90034TreasurerAS NEEDED0LynKonheim3200 Motor Avenue Los Angeles, CA 90034Assistant TreasurerAS NEEDED0	
Los Angeles CA 90034	
Los Angeles. CA 90034 Lyn Konheim Los Angeles, CA 90034 AS NEEDED O AS NEEDED O AS NEEDED O AS NEEDED O	
Lyn Konheim Los Angeles, CA 90034 Assistant Treasurer AS NEEDED 0	
2200 Mater Avenue	
Margot Bamberger 3200 Motor Avenue Los Angeles. CA 90034 Secretary AS NEEDED 0	
Sydney Julien 3200 Motor Avenue Los Angeles CA 90034 Assistant Secretary AS NEEDED 0	
Ruth Shuken 3200 Motor Avenue Los Angeles CA 90034 Vice Chairman AS NEEDED 0	
Carol Katzman 3200 Motor Avenue Vice Chairman AS NEEDED 0	
Sari Eshman 3200 Motor Avenue Vice Chairman AS NEEDED 0	
Barbara Blackman 3200 Motor Avenue Los Angeles CA 90034 Vice Chairman AS NEEDED 0	
Mark Slavkin 3200 Motor Avenue Los Angeles. CA 90034 Vice Chairman AS NEEDED 0	
Bruce Kates 3200 Motor Avenue Immediate Past Chairman of the Los Angeles. CA 90034 Board AS NEEDED 0	
Donald Alschuler 3200 Motor Avenue Los Angeles, CA 90034 Director AS NEEDED 0	
Leslie Askanas 3200 Motor Avenue Los Angeles. CA 90034 Director AS NEEDED 0	
Terry Bell 3200 Motor Avenue Los Angeles, CA 90034 Director AS NEEDED 0	
Harold Berkowitz 3200 Motor Avenue Los Angeles, CA 90034 Director AS NEEDED 0	
Paul Blackman 3200 Motor Avenue Los Angeles. CA 90034 Director AS NEEDED 0	
Herbert Bloch 3200 Motor Avenue Los Angeles. CA 90034 Director AS NEEDED 0	
Eli Blumenfeld 3200 Motor Avenue Los Angeles CA 90034 Director AS NEEDED 0	
Marc Dauber 3200 Motor Avenue Los Angeles. CA 90034 Director AS NEEDED 0	
Betty Deutsch 3200 Motor Avenue Los Angeles CA 90034 Director AS NEEDED 0	
Helene Feuerstein 3200 Motor Avenue Los Angeles CA 90034 Director AS NEEDED 0	
Chester Firestein 3200 Motor Avenue Los Angeles CA 90034 Director AS NEEDED 0	
LucilleFuhrman3200 Motor Avenue Los Angeles. CA 90034DirectorAS NEEDED0	

NAME		ADDRESS	TITL	Æ	HOURS PER WEEK	COMPENSATION
Jeri	Gaile	3200 Motor Avenue Los Angeles. CA 90034	Director		AS NEEDED	0
Ira	Goldberg	3200 Motor Avenue Los Angeles. CA 90034	Director		AS NEEDED	0
Heidi	Haddad	3200 Motor Avenue Los Angeles, CA 90034	Director		AS NEEDED	0
Howard	Hansen	3200 Motor Avenue Los Angeles. CA 90034	Director		AS NEEDED	0
Lois	Harwin	3200 Motor Avenue Los Angeles, CA 90034	Director		AS NEEDED	0
Marcia	Hoffer	3200 Motor Avenue Los Angeles. CA 90034	Director		AS NEEDED	0
Bruce	Kırshbaum	3200 Motor Avenue Los Angeles. CA 90034	Director		AS NEEDED	0
Fay	Kozberg	3200 Motor Avenue Los Angeles. CA 90034	Director		AS NEEDED	0
lohn	Lear	3200 Motor Avenue Los Angeles. CA 90034	Director		AS NEEDED	0
Jean	Leserman	3200 Motor Avenue Los Angeles. CA 90034	Director		AS NEEDED	0
Arthur	Malın. M D	3200 Motor Avenue Los Angeles. CA 90034	Director		AS NEEDED	0
Julie	Miller	3200 Motor Avenue Los Angeles. CA 90034	Director		AS NEEDED	0
Kevin	Murray, Senator	3200 Motor Avenue Los Angeles. CA 90034	Director		AS NEEDED	0
Deedy	Oberman	3200 Motor Avenue Los Angeles, CA 90034	Director		AS NEEDED	0
Alfred	Osborne, Ph D	3200 Motor Avenue Los Angeles. CA 90034	Director		AS NEEDED	0
Pamela	Pacht	3200 Motor Avenue Los Angeles, CA 90034	Director		AS NEEDED	0
Cheryl	Paller	3200 Motor Avenue Los Angeles, CA 90034	Director		AS NEEDED	0
Stacy	Phillips	3200 Motor Avenue Los Angeles, CA 90034	Director		AS NEEDED	0
Gayle	Rodgers	3200 Motor Avenue Los Angeles, CA 90034	Director		AS NEEDED	0
Luis	Rodriguez	3200 Motor Avenue Los Angeles. CA 90034	Director		AS NEEDED	0
Steve	Romick	3200 Motor Avenue Los Angeles. CA 90034	Director		AS NEEDED	0
Stuart	Rubin	3200 Motor Avenue Los Angeles. CA 90034	Director		AS NEEDED	0
Peekie	Schaefer	3200 Motor Avenue Los Angeles CA 90034	Director		AS NEEDED	0
Don	Schwarz	3200 Motor Avenue Los Angeles, CA 90034	Director		AS NEEDED	0
Marj	Schwarz	3200 Motor Avenue Los Angeles CA 90034	Director		AS NEEDED	0
Larry	Schwimmer	3200 Motor Avenue Los Angeles CA 90034	Director		AS NEEDED	0

NAME		ADDRESS	TITLE	HOURS PER WEEK	COMPENSATION
Suzanne	Sidy	3200 Motor Avenue Los Angeles. CA 90034	Director	AS NEEDED	0
Betty	Sigoloff	3200 Motor Avenue Los Angeles, CA 90034	Director	AS NEEDED	0
Dana	Sigoloff	3200 Motor Avenue Los Angeles, CA 90034	Director	AS NEEDED	0
Julie	Smooke	3200 Motor Avenue Los Angeles. CA 90034	Director	AS NEEDED	0
Mitchell	Stein	3200 Motor Avenue Los Angeles. CA 90034	Director	AS NECDED	0
Philip	Stein	3200 Motor Avenue Los Angeles. CA 90034	Director	AS NEEDED	0
Freda	Teller	3200 Motor Avenue Los Angeles. CA 90034	Director	AS NEEDED	0
Gene	Viglione	3200 Motor Avenue Los Angeles. CA 90034	Director	AS NEEDED	0
Antonio	Villaraigosa. Mayor	3200 Motor Avenue Los Angeles. CA 90034	Directoi	AS NEEDED	0
Jams Black	Warner	3200 Motor Avenue Los Angeles, CA 90034	Director	AS NEEDED	0
Sylvia	Weisz	3200 Motor Avenue Los Angeles. CA 90034	Director	AS NEEDED	0
Donald	Wolf	3200 Motor Avenue Los Angeles. CA 90034	Director	AS NEEDED	0
Elame	Wolf	3200 Motor Avenue Los Angeles, CA 90034	Director	AS NEEDED	0
Suzanne	Yudelson	3200 Motor Avenue Los Angeles. CA 90034	Director	AS NEEDED	0
Walter	Zıfkın	3200 Motor Avenue Los Angeles, CA 90034	Director	AS NEEDED	0

EIN: 95-1647832

For Fiscal Year Ended 6/30/05 -

2004 Form 990, Schedule A, Part III, Line 3a

VISTA DEL MAR CHILD AND FAMILY SERVICES SCHOLARSHIP PROGRAM OUTLINE 10/99

I. GOAL

The main goal of the scholarship program is to provide alumni of the residential division financial assistance and guidance for successful post high school education. The scholarship program may provide assistance to residents who, as recommended by the residents treatment team, could benefit by off campus instruction. The scholarship program may provide financial assistance to youth in other divisions i.e. foster care and day treatment, but only if the youth, at one time, was a resident of the residential divisions.

II. REQUIREMENT GUIDELINES

A. RESIDENTS

In order to be considered for financial assistance a resident must have a demonstrated need that can not be met through on campus resources. They must also demonstrate financial need.

B. ALUMNI

Alumni must be between the ages of 17 and 29. He/She must be enrolled in a minimum of six semester units or corresponding quarter units or training time. In order to be considered for financial assistance alumni must also demonstrate financial need.

III. APPLICATION

A. RESIDENTS

A one page application titled "Resident Scholarship Application" must be submitted to the Scholarship Program Coordinator.

B. ALUMNI

Alumni must complete and submit an application titled "Vista Del Mar Child and Family Services Scholarship Application"

IV. APPLICATION REVIEW

The Scholarship Program Coordinator reviews all applications. Applications are reviewed for completeness and to the extent possible, accuracy. As part of the review, the coordinator may require additional information and or clarification of certain entries. The applicant will be contacted by telephone or letter.

EIN: 95-1647832

For Fiscal Year Ended 6/30/05 -

2004 Form 990, Schedule A, Part III, Line 3a

V. APPLICATION RECOMMENDATION

After a complete review of the application it is the responsibility of the Scholarship Program Coordinator to provide the Director of Residential Services with a recommendation. The recommendation will be to either approve or deny the request. It must contain a complete review and assessment of all information. In making a recommendation the coordinator must take all known factors into consideration. Some of these factors are as follows.

gard of the same and

- · Qualification or disqualification of applicant by other funding sources
- Applicant's income/ expense ratios
- Applicant's stated deficit
- Program average income/expense ratio
- Program average deficit
- Applicant's income from work
- Applicant's GPA in prior units
- · Applicant's stated goal and time to completion
- Program yearly award limit

VI. NOTIFICATION OF APPLICANT

The Scholarship Program Coordinator will notify, by letter, all applicants as to the decision to approved or disapproved their request. If disapproved, reasons will be detailed. If approved, conditions of the award will be detailed including award amount and term.

VII. PROGRAM MANAGEMENT

- A. The Scholarship Program Coordinator is responsible to insure that all recipients are entitled to continue funding. The following are some methods used to accomplish the objective.
 - · Verification of current enrollment
 - Verification of grades
 - Verification of GPA
 - Tracking of awarded checks
 - Scholarships on probation
 - Scholarships on hold
 - Tracking of recipients award term
- B. The Scholarship Program Coordinator must insure that the total yearly awards are maintained at a level not to exceed programs' maximum limit. Two methods used to meet this requirement are quarterly status reports sent to the Director of Residential Services and reports sent to the scholarship committee.

EIN: 95-1647832

For Fiscal Year Ended 6/30/05

2004 Form 990, Schedule A, Part III, Line 3a

C. The Scholarship Program Coordinator assists recipients in making career, employment, educational objectives, and housing decisions in an attempt to help insure that each recipient attains their educational/vocational objective. Total wellness is emphasized.

D. Award end notification- Within three months of the scheduled end of an award, recipients will receive a letter reminding them of the award ending date. Recipients may be approved for an extension of up to four months of the extension. This will result in the recipient having the opportunity to complete their current educational vocational objective.

EIN: 95-1647832

For Fiscal Year Ended 6/30/05

2004 Form 990, Schedule A, Part III, Line 3a

SCIIOLARSHIP PROGRAM (Addendum to Program Guidelines 9-3-02)

EXISTING PROGRAM:

Funds available to residents for the following:

While in Care:

- Special Off-Campus classes such as music, vocal, gymnastics.
- Summer camp
- Driver's Training
- Jr. College tuition, books, fees, and supplies

After Discharge:

- College
- Vocational Training Program

Funds available to foster care youth for College, Jr. College and Vocational Training on a case-by-case basis. (Youth graduated from foster care to Independent Living successfully and had been in care more than 12 months; or, child had spent 3 or more years in Vista Del Mar foster care between ages 10-18 and successfully returned home.)

CHANGES IN EFFECT 9-5-02:

Add Driver's Education funds for residents. Add Day Treatment funding as follows:

- Client must be at least 18 and not over 24.
- Client must have been receiving care as a

Day Treatment client for a minimum of 12 months.

- Client must have successfully completed the program within 2 years of graduation from high school.
- Funds must be for College or Vocational Training programs.
- Funding limited to 40 months for a B.A. program and 18 months for a Vocational Training program.
- Funding to be limited to 60% of determined unmet needs or \$160 a month, whichever is less. Maximum semester costs reimbursement set at \$270 per term.

For Fiscal Year Ended 06/30/05 2004 Form 990, Part II, Line 22

DATE	NAME	RELATIONSHIP	AMOUNT
4/26/2005	DIANN ALANIZ	UNRELATED	300
5/12/2005	DIANN ALANIZ	UNRELATED	150
8/24/2004	MICHAEL ALPERT	UNRELATED	256
8/24/2004	MICHAEL ALPERT	UNRELATED	256
11/11/2004	MICHAEL ALPERT	UNRELATED	509
4/21/2005	MICHAEL ALPERT	UNRELATED	442
5/23/2005	MICHAEL ALPERT	UNRELATED	342
7/15/2004	JENNA ALPERT	UNRELATED	220
8/13/2004	JENNA ALPERT	UNRELATED	220
9/13/2004	JENNA ALPERT	UNRELATED	220
10/21/2004	JENNA ALPERT	UNRELATED	220
11/19/2004	JENNA ALPERT	UNRELATED	220
12/10/2004	JENNA ALPERT	UNRELATED	220
1/13/2005	JENNA ALPERT	UNRELATED	220
2/18/2005	JENNA ALPERT	UNRELATED	220
3/11/2005	JENNA ALPERT	UNRELATED	220
4/14/2005	JENNA ALPERT	UNRELATED	220
5/12/2005	JENNA ALPERT	UNRELATED	220
7/15/2004	HARRY AVERS	UNRELATED	350
8/13/2004	HARRY AVERS	UNRELATED	250
9/13/2004	HARRY AVERS	UNRELATED	250
10/21/2004	HARRY AVERS	UNRELATED	250
11/19/2004	HARRY AVERS	UNRELATED	250
12/10/2004	HARRY AVERS	UNRELATED	250
1/13/2005	HARRY AVERS	UNRELATED	250
2/18/2005	HARRY AVERS	UNRELATED	250
3/11/2005	HARRY AVERS	UNRELATED	250
4/14/2005	HARRY AVERS	UNRELATED	250
5/12/2005	HARRY AVERS	UNRELATED	300
8/24/2004	ERIK J BEREZOWSKY	UNRELATED	175
8/24/2004	ERIK J BEREZOWSKY	UNRELATED	175
9/13/2004	ERIK J BEREZOWSKY	UNRELATED	175
10/21/2004	ERIK J BEREZOWSKY	UNRELATED	175
11/19/2004	ERIK J BEREZOWSKY	UNRELATED	175
12/10/2004	ERIK J BEREZOWSKY	UNRELATED	175
1/13/2005	ERIK J BEREZOWSKY	UNRELATED	175
9/28/2004	TATIANA BLANC	UNRELATED	250
10/21/2004	TATIANA BLANC	UNRELATED	125
11/19/2004	TATIANA BLANC	UNRELATED	125
12/10/2004	TATIANA BLANC	UNRELATED	125
1/13/2005	TATIANA BLANC TATIANA BLANC	UNRELATED UNRELATED	125 270
2/18/2005 3/11/2005	TATIANA BLANÇ	UNRELATED	125
4/14/2005	TATIANA BLANC	UNRELATED	125
5/12/2005	TATIANA BLANC	UNRELATED	125
8/12/2004	ROBERT BRAZIL	UNRELATED	350
8/13/2004	ROBERT BRAZIL	UNRELATED	235
9/13/2004	ROBERT BRAZIL	UNRELATED	235
10/21/2004	ROBERT BRAZIL	UNRELATED	235
11/19/2004	ROBERT BRAZIL	UNRELATED	235
12/10/2004	ROBERT BRAZIL	UNRELATED	235
1/13/2005	ROBERT BRAZIL	UNRELATED	235
2/18/2005	ROBERT BRAZIL	UNRELATED	235
3/11/2005	ROBERT BRAZIL	UNRELATED	270
4/14/2005	ROBERT BRAZIL	UNRELATED	270
5/12/2005	ROBERT BRAZIL	UNRELATED	270
12/9/2004	TIM CASHEN	UNRELATED	240

1

For Fiscal Year Ended 06/30/05 2004 Form 990, Part II, Line 22

DATE	NAME	RELATIONSHIP	AMOUNT
1/13/2005	TIM CASHEN	UNRELATED	240
2/18/2005	TIM CASHEN	UNRELATED	240
3/11/2005	TIM CASHEN	UNRELATED	240
4/14/2005	TIM CASHEN	UNRELATED	240
1/27/2005	JOSH CUPP	UNRELATED	240
2/18/2005	JOSH CUPP	UNRELATED	240
2/18/2005	JOSH CUPP	UNRELATED	240
3/11/2005	JOSH CUPP	UNRELATED	240
4/14/2005	JOSH CUPP	UNRELATED	240
5/12/2005	JOSH CUPP	UNRELATED	240
8/13/2004	ALEXANDRA DAVIS	UNRELATED	230
9/13/2004	ALEXANDRA DAVIS	UNRELATED	230
10/21/2004	ALEXANDRA DAVIS	UNRELATED	230
11/19/2004	ALEXANDRA DAVIS	UNRELATED	230
12/10/2004	ALEXANDRA DAVIS	UNRELATED	230
1/13/2005	ALEXANDRA DAVIS	UNRELATED	230
2/18/2005	ALEXANDRA DAVIS	UNRELATED	230
3/11/2005	ALEXANDRA DAVIS	UNRELATED	230
4/14/2005	ALEXANDRA DAVIS	UNRELATED	230
5/12/2005	ALEXANDRA DAVIS	UNRELATED	230
4/26/2005	RYAN FRANSEN	UNRELATED	375
5/12/2005	RYAN FRANSEN	UNRELATED	125
8/30/2004	LAUREN GREENE	UNRELATED	500
2/18/2005	LAUREN GREENE	UNRELATED	500
9/30/2004	JOSEPH GROSS	UNRELATED	501
3/1/2005	JOSEPH GROSS	UNRELATED	500
8/26/2004	JENNIFER HAASE	UNRELATED	150
9/13/2004	JENNIFER HAASE	UNRELATED	150
10/21/2004	JENNIFER HAASE	UNRELATED	150
11/19/2004	JENNIFER HAASE	UNRELATED	150
12/6/2004	JENNIFER HAASE	UNRELATED	300
12/10/2004	JENNIFER HAASE	UNRELATED	300
1/13/2005	JENNIFER HAASE	UNRELATED	300
2/18/2005	JENNIFER HAASE	UNRELATED	600
4/14/2005	JENNIFER HAASE	UNRELATED	300
5/12/2005	JENNIFER HAASE	UNRELATED	300
5/31/2005	JENNIFER HAASE	UNRELATED	600
10/5/2004	ALAN HANDL	UNRELATED	500
1/4/2005	ALAN HANDL	UNRELATED	500
1/3/2005	ALAN HANDL	UNRELATED	500
12/9/2004	GREG HARNESS	UNRELATED	240
1/13/2005	GREG HARNESS	UNRELATED	240
2/18/2005	GREG HARNESS	UNRELATED	240
3/11/2005	GREG HARNESS	UNRELATED	240
4/14/2005	GREG HARNESS	UNRELATED	240
10/5/2004	DARYN HOUSTON	UNRELATED	500
1/24/2005	DARYN HOUSTON	UNRELATED	357
2/18/2005	DARYN HOUSTON	UNRELATED	500
7/15/2004	MICHELLYNN JOSEPH	UNRELATED	230
8/13/2004	MICHELLYNN JOSEPH	UNRELATED	230
9/13/2004	MICHELLYNN JOSEPH	UNRELATED	230
10/21/2004	MICHELLYNN JOSEPH	UNRELATED	230
11/19/2004	MICHELLYNN JOSEPH	UNRELATED	230
12/10/2004	MICHELLYNN JOSEPH	UNRELATED	230
1/13/2005	MICHELLYNN JOSEPH	UNRELATED	230
2/18/2005	MICHELLYNN JOSEPH	UNRELATED	230
3/11/2005	MICHELLYNN JOSEPH	UNRELATED	230

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DATE	NAME	RELATIONSHIP	AMOUNT
8/13/2004	DANA KAPLAN	UNRELATED	265
9/13/2004	DANA KAPLAN	UNRELATED	265
10/21/2004	DANA KAPLAN	UNRELATED	265
11/19/2004	DANA KAPLAN	UNRELATED	265
12/10/2004	DANA KAPLAN	UNRELATED	265
1/13/2005	DANA KAPLAN	UNRELATED	265
2/18/2005	DANA KAPLAN	UNRELATED	265
3/11/2005	DANA KAPLAN	UNRELATED	265
4/14/2005	DANA KAPLAN	UNRELATED	265
5/12/2005	DANA KAPLAN	UNRELATED	265
8/13/2004	BETH KEHR	UNRELATED	225
9/13/2004	BETH KEHR	UNRELATED	225
10/21/2004	BETH KEHR	UNRELATED	225
11/19/2004	BETH KEHR	UNRELATED	225
12/10/2004	BETH KEHR	UNRELATED	225
1/13/2005	BETH KEHR	UNRELATED	225
2/18/2005	BETH KEHR	UNRELATED	225
3/11/2005	BETH KEHR	UNRELATED	225
	BETH KEHR	UNRELATED	225
4/14/2005 5/12/2005	BETH KEHR	UNRELATED	225
5/3/2005	AIMEE KINSER	UNRELATED	500
8/30/2004	LOUIS KRAVITZ	UNRELATED	250
9/13/2004	LOUIS KRAVITZ	UNRELATED	250
9/30/2004	LOUIS KRAVITZ	UNRELATED	50
10/21/2004	LOUIS KRAVITZ	UNRELATED	300
11/19/2004	LOUIS KRAVITZ	UNRELATED	300
12/10/2004	LOUIS KRAVITZ	UNRELATED	300
1/13/2005	LOUIS KRAVITZ	UNRELATED	300
2/18/2005	LOUIS KRAVITZ	UNRELATED	300
3/11/2005	LOUIS KRAVITZ	UNRELATED	300
4/14/2005	LOUIS KRAVITZ	UNRELATED	300
5/12/2005	LOUIS KRAVITZ	UNRELATED	300
8/13/2004	JOSEPH KURTZ	UNRELATED	300
9/13/2004	JOSEPH KURTZ	UNRELATED	300
10/21/2004	JOSEPH KURTZ	UNRELATED	300
11/19/2004	JOSEPH KURTZ	UNRELATED	300
12/10/2004	JOSEPH KURTZ	UNRELATED	300
1/13/2005	JOSEPH KURTZ	UNRELATED	300
2/18/2005	JOSEPH KURTZ	UNRELATED	300
3/11/2005	JOSEPH KURTZ	UNRELATED	300
4/14/2005	JOSEPH KURTZ	UNRELATED	300
5/12/2005	JOSEPH KURTZ	UNRELATED	300
8/13/2004	AMANDA LOVETT	UNRELATED	125
9/13/2004	AMANDA LOVETT	UNRELATED	125
9/28/2004	AMANDA LOVETT	UNRELATED	445
10/21/2004	AMANDA LOVETT	UNRELATED	125
11/19/2004	AMANDA LOVETT	UNRELATED	125
12/10/2004	AMANDA LOVETT	UNRELATED	125
1/13/2005	AMANDA LOVETT	UNRELATED	125
2/18/2005	AMANDA LOVETT	UNRELATED	125
3/11/2005	AMANDA LOVETT	UNRELATED	125
4/14/2005	AMANDA LOVETT	UNRELATED	125
5/12/2005	AMANDA LOVETT	UNRELATED	125
3/1/2005	YOMARY MALAVE	UNRELATED	250
4/7/2005	YOMARY MALAVE	UNRELATED	250
4/7/2005	YOMARY MALAVE	UNRELATED	125
4/14/2005	YOMARY MALAVE	UNRELATED	125

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DATE	NAME	RELATIONSHIP	AMOUNT
5/12/2005	YOMARY MALAVE	UNRELATED	125
8/17/2004	JORDAN MAYER	UNRELATED	500
2/18/2005	JORDAN MAYER	UNRELATED	500
8/13/2004	ANDREW MELCHER	UNRELATED	225
9/13/2004	ANDREW MELCHER	UNRELATED	260
10/21/2004	ANDREW MELCHER	UNRELATED	260
7/15/2004	VICTORIA OLIVARES	UNRELATED	130
3/8/2005	RANI RAM	UNRELATED	225
3/11/2005	RANI RAM	UNRELATED	225
4/14/2005	RANI RAM	UNRELATED	225
5/12/2005	RANI RAM	UNRELATED	225
8/17/2004	CATHERINE RANDOLPH	UNRELATED	200
9/13/2004	CATHERINE RANDOLPH	UNRELATED	200
10/21/2004	CATHERINE RANDOLPH	UNRELATED	200
11/19/2004	CATHERINE RANDOLPH	UNRELATED	200
12/10/2004	CATHERINE RANDOLPH	UNRELATED	200
1/13/2005	CATHERINE RANDOLPH	UNRELATED	200
7/15/2004	DANIEL REISENFELD	UNRELATED	280
8/13/2004	DANIEL REISENFELD	UNRELATED	280
9/13/2004	DANIEL REISENFELD	UNRELATED	280
10/21/2004	DANIEL REISENFELD	UNRELATED	280
11/19/2004	DANIEL REISENFELD	UNRELATED	280
12/10/2004	DANIEL REISENFELD	UNRELATED	280
1/13/2005	DANIEL REISENFELD	UNRELATED	280
2/18/2005	DANIEL REISENFELD	UNRELATED	280
3/11/2005	DANIEL REISENFELD	UNRELATED	280
4/14/2005	DANIEL REISENFELD	UNRELATED	280
5/12/2005	DANIEL REISENFELD	UNRELATED	280
3/24/2005	YURI RODRIGUEZ	UNRELATED	50
8/13/2004	CHAD SHERIDAN	UNRELATED	240
9/13/2004	CHAD SHERIDAN	UNRELATED	240
10/21/2004	CHAD SHERIDAN	UNRELATED	240
11/19/2004	CHAD SHERIDAN	UNRELATED	240
12/10/2004	CHAD SHERIDAN	UNRELATED	240
1/13/2005 2/18/2005	CHAD SHERIDAN	UNRELATED UNRELATED	240 240
3/11/2005	CHAD SHERIDAN CHAD SHERIDAN	UNRELATED	240
4/14/2005	CHAD SHERIDAN	UNRELATED	240
5/12/2005	CHAD SHERIDAN	UNRELATED	240
8/13/2004	SIMON SHLOSBERG	UNRELATED	325
12/16/2004	SIMON SHLOSBERG	UNRELATED	325
1/13/2005	SIMON SHLOSBERG	UNRELATED	325
3/3/2005	SIMON SHLOSBERG	UNRELATED	300
3/11/2005	SIMON SHLOSBERG	UNRELATED	325
4/14/2005	SIMON SHLOSBERG	UNRELATED	325
5/12/2005	SIMON SHLOSBERG	UNRELATED	325
8/13/2004	RACHEL SINGER	UNRELATED	200
9/13/2004	RACHEL SINGER	UNRELATED	200
10/21/2004	RACHEL SINGER	UNRELATED	200
11/19/2004	RACHEL SINGER	UNRELATED	200
12/10/2004	RACHEL SINGER	UNRELATED	200
1/13/2005	RACHEL SINGER	UNRELATED	200
2/18/2005	RACHEL SINGER	UNRELATED	200
3/11/2005	RACHEL SINGER	UNRELATED	200
4/14/2005	RACHEL SINGER	UNRELATED	200
7/15/2004	ANYA SIPIVY	UNRELATED	200
7/20/2004	TELESPHORE SLOAN	UNRELATED	350

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DATE	NAME	RELATIONSHIP	AMOUNT
8/13/2004	TELESPHORE SLOAN	UNRELATED	230
9/13/2004	TELESPHORE SLOAN	UNRELATED	230
10/21/2004	TELESPHORE SLOAN	UNRELATED	230
7/15/2004	RENITA SWEED	UNRELATED	240
8/13/2004	RENITA SWEED	UNRELATED	240
9/13/2004	RENITA SWEED	UNRELATED	240
10/21/2004	RENITA SWEED	UNRELATED	240
11/19/2004	RENITA SWEED	UNRELATED	240
12/10/2004	RENITA SWEED	UNRELATED	240
12/16/2004	RENITA SWEED	UNRELATED	400
3/29/2005	RENITA SWEED	UNRELATED	240
4/14/2005	RENITA SWEED	UNRELATED	240
5/12/2005	RENITA SWEED	UNRELATED	240
8/13/2004	CHRIS SWEENY	UNRELATED	260
9/13/2004	CHRIS SWEENY	UNRELATED	260
10/21/2004	CHRIS SWEENY	UNRELATED	260
11/19/2004	CHRIS SWEENY	UNRELATED	260
12/10/2004	CHRIS SWEENY	UNRELATED	260
1/13/2005	CHRIS SWEENY	UNRELATED	260
2/18/2005	CHRIS SWEENY	UNRELATED	260
3/11/2005	CHRIS SWEENY	UNRELATED	260
4/14/2005	CHRIS SWEENY	UNRELATED	260
5/12/2005	CHRIS SWEENY	UNRELATED	260
8/13/2004	JOSHUA SWEENY	UNRELATED	225
9/13/2004	JOSHUA SWEENY	UNRELATED	225
10/21/2004	JOSHUA SWEENY	UNRELATED	225
11/19/2004	JOSHUA SWEENY	UNRELATED	225
12/10/2004	JOSHUA SWEENY	UNRELATED	225
1/13/2005	JOSHUA SWEENY	UNRELATED	225
9/2/2004	KATHERINE TOLLIVER	UNRELATED	225
9/13/2004	KATHERINE TOLLIVER	UNRELATED	225
10/21/2004	KATHERINE TOLLIVER	UNRELATED	225
11/19/2004	KATHERINE TOLLIVER	UNRELATED	225
12/10/2004	KATHERINE TOLLIVER	UNRELATED	225
1/13/2005	KATHERINE TOLLIVER	UNRELATED	225
2/18/2005	KATHERINE TOLLIVER	UNRELATED	225
3/11/2005	KATHERINE TOLLIVER	UNRELATED	225
4/14/2005	KATHERINE TOLLIVER	UNRELATED	225
5/12/2005	KATHERINE TOLLIVER	UNRELATED	225
7/15/2004	MICHELLE TURITZ	UNRELATED	240
8/13/2004	MICHELLE TURITZ	UNRELATED	240
9/13/2004	MICHELLE TURITZ	UNRELATED	240
10/21/2004	MICHELLE TURITZ	UNRELATED	240
11/19/2004	MICHELLE TURITZ	UNRELATED	240
12/10/2004	MICHELLE TURITZ	UNRELATED	240
1/13/2005	MICHELLE TURITZ	UNRELATED	240
2/18/2005	MICHELLE TURITZ	UNRELATED	240
3/11/2005	MICHELLE TURITZ	UNRELATED	240
4/14/2005	MICHELLE TURITZ	UNRELATED	240
5/12/2005	MICHELLE TURITZ	UNRELATED	240
2/18/2005	DIANE WALPER	UNRELATED	240
3/11/2005	DIANE WALPER	UNRELATED	480
4/14/2005	DIANE WALPER	UNRELATED	240
5/12/2005	DIANE WALPER	UNRELATED	240
	TOTAL SCHOLARSHIP		\$ 71,181

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Contracting Agency	Contact Person	Mailing Address	Phone Number
LA County DCFS - Level 12	Eddie Otta	425 Shatto Place, Room 205 Los Angeles, CA 90020	(213) 351-5557
LA County DCFS - CTF	Burt Villarroel	425 Shatto Place, Room 205 Los Angeles, CA 90020	(213) 351-5830
LA County DCFS - FFA	Felicia Carreker	425 Shatto Place, Room 205 Los Angeles, CA 90020	(213) 351-3255
LA County DCFS - Wraparound	Mike Rauso	501 Shatto Place, Room 300 Los Angeles, CA 90020	(213) 738-2730
US Dept of Agriculture CA State of Dept of Ed National School Lunch Agency	Oby Okoye	Nutrition Svcs Division 1430 N Street, Suite 1500 Sacramento, CA 95814-5901	(916) 323-2483
US Dept of Education Workability	Robert Snowden, ED D	Special Education Division-Grants 1430 N Street, Suite 2401 Sacramento, CA 95814-5901	(916) 323-3309
LAUSD Contract	Eileen B Skone-Rees Coordinator	333 S Beaudry Ave., 17th Floor Los Angeles, CA 90017	(213) 241-3373
CA State Dept of Education Childcare Program	Alicia Hetman	Contracts Office 1430 N Street, Suite 2213 Sacramento, CA 95814-5901	(916) 323-2133
US Dept of Health & Human Svcs. Early Head Start	Susan Honciano	Administration for Children & Families Region IX 50 United Nations Plaza San Francisco, CA 94102	(415) 437-8065
City of Los Angeles LA Bridges	Susan Rabinovitz	Associate Director Division of Adolescent Medicine Childrens Hospital, Los Angeles PO Box 54700 - M/S #2 Los Angeles, CA 90054-0700	(323) 669-2503
DCFS - Child Abuse Prevention, Intervention, and Treatment (CAPIT)	Janice Williams	425 Shatto Place, Rm 205 Los Angeles, CA 90020	(213) 351-3236
DCFS - Korean Youth and Community Center (KYCC)	Susan Lee & Carmen Cedillo	Korean Youth and Community Center 680 S Wilton Place Los Angeles, CA 9005-000	(213) 365-7400
LA County Dept of Mental Health	Esther Ramirez	550 S Vermont Ave. 4th Floor	(213) 738-4046
City of Santa Monica	Julie Taren	Los Angeles, CA 90020 Human Services Division 1685 Main St PO Box 2200	(310) 458-8701
Shasta County of California	Dawn Duckett	Santa Monica, CA 90407 2640 Breslauer Way P O Box 496048 Redding, CA 96049-6048	(530) 225-3682