

Return of Organization Exempt From Income Tax

2017

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

- Do not enter social security numbers on this form as it may be made public.
- Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2017 calendar year, or tax year beginning _____, **and ending** _____

B Check if applicable: Address change Name change Initial return Final return/terminated Amended return Application pending

C Name of organization: **I Love A Clean San Diego County, Inc.**
 Doing business as: **I Love A Clean San Diego**
 Number and street (or P.O. box if mail is not delivered to street address): **2508 Historic Decatur Road** Room/suite: **150**
 City or town: **San Diego** State: **CA** ZIP code: **92106**
 Foreign country name: _____ Foreign province/state/county: _____ Foreign postal code: _____

D Employer identification number: **95-2566791**

E Telephone number: **(619) 291-0103**

G Gross receipts \$: **1,479,036**

F Name and address of principal officer: **Pauline Martinson 2508 Historic Decatur Rd Ste 150, SD, CA 92106**

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. (see instructions)

I Tax-exempt status: 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527

J Website: **www.cleansd.org**

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: **1954** **M** State of legal domicile: **CA**

H(c) Group exemption number ▶ _____

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: I Love A Clean San Diego leads and inspires our community to actively conserve and enhance the environment through example, outreach, and local involvement.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	13
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	13
	5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5	35
	6 Total number of volunteers (estimate if necessary)	6	31,563
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	115
b Net unrelated business taxable income from Form 990-T, line 34	7b	-2,809	
Revenue	8 Contributions and grants (Part VIII, line 1h)	338,502	385,932
	9 Program service revenue (Part VIII, line 2g)	994,519	1,068,407
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,182	7,593
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	10,128	8,126
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,345,331	1,470,058
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	0	0
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	731,163	822,170
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 199,046		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	537,252	561,476
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	1,268,415	1,383,646	
19 Revenue less expenses. Subtract line 18 from line 12	76,916	86,412	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year: 850,881	End of Year: 917,590
	21 Total liabilities (Part X, line 26)	146,202	126,499
	22 Net assets or fund balances. Subtract line 21 from line 20	704,679	791,091

Part II Signature Block

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

Sign Here

Signature of officer: _____ Date: _____
 Type or print name and title: _____

Paid Preparer Use Only

Print/Type preparer's name: **Leonard C Sonnenberg** Preparer's signature: *[Signature]* Date: **4/24/2018** Check if self-employed PTIN: **P00287581**
 Firm's name ▶ **Sonnenberg & Co. CPAs** Firm's EIN ▶ **95-3749711**
 Firm's address ▶ **5190 Governor Dr, #201, San Diego, CA 92122** Phone no. **858-457-5252**

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: Through outreach, community involvement and example, I Love A Clean San Diego leads and educates our community to actively conserve and enhance the environment. ILACSD works to improve the quality of life for all San Diegans by providing environmental preservation opportunities and education through a variety of channels. continues on Schedule O.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 554,728 including grants of \$) (Revenue \$ 479,852) Community Beautification: ILACSD restored and enhanced outdoor areas through 260 events in 2017, with support from close to 32,000 volunteers. A majority of cleanups occurred in inland areas, such as creek beds, canyons, parks and urban areas. Countywide cleanups Creek to Bay and Coastal Cleanup Day repair environmental damage to outdoor areas across San Diego County where thousands of volunteers donate a few hours of their time while having fun and making a difference during these two events. Aside from removing debris, volunteers often engage in a variety of other beautification activities that include graffiti removal, storm drain stenciling, invasive plant removal and park maintenance. ILACSD is also the San Diego County coordinator of the statewide Adopt-A-Beach program.

4b (Code:) (Expenses \$ 295,334 including grants of \$) (Revenue \$ 407,366) Environmental Education: I Love A Clean San Diego's environmental education features classroom presentations and hands-on learning for children and teens, as well as a full slate of adult education activities designed for local businesses, individuals and families. ILACSD creates awareness about the environment that turns otherwise unaware children into environmental stewards for life. In 2017 alone, ILACSD provided 737 environmental education presentations to approximately 33,000 youth and adults throughout San Diego County. ILACSD is trusted to implement comprehensive environmental programs on behalf of more than a dozen local jurisdictions, focused primarily on youth education.

4c (Code:) (Expenses \$ 163,250 including grants of \$) (Revenue \$ 181,189) Recycling Outreach: I Love A Clean San Diego operates a call center and online database which offer useful information about waste disposal and recycling. The organization provides referrals to San Diego County residents who have questions about how or where to recycle, repair, donate, or properly recycle or dispose of hazardous items. These resources divert countless amounts of waste from San Diego's landfills and reduces incidents of illegal dumping. ILACSD fielded more than 12,000 requests for recycling information in 2017 from WasteFreeSD.org and 1-800-237-BLUE. Additionally, ILACSD provides recycling outreach and infrastructure at community events, educating the public about a variety of topics, including used motor oil recycling, and conducts site visits to used motor oil certified collection centers to ensure compliance.

4d Other program services. (Describe in Schedule O.) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)

4e Total program service expenses 1,013,312

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		X
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H.</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i>		X
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I.</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II.</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI.</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

Table with columns for question number, question text, and Yes/No response boxes. Includes sections for backup withholding, employee reporting, unrelated business income, foreign accounts, prohibited tax shelter transactions, deductible contributions, and 501(c)(7), (12), and (29) organizations.

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

Section A. Governing Body and Management

Table with columns for line numbers (1a, 1b, 2-9), Yes, and No. Contains questions about voting members, family relationships, and governance decisions.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with columns for line numbers (10a-16b), Yes, and No. Contains questions about local chapters, conflict of interest policies, whistleblower policies, and compensation review.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed -> CA
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records:
Ann Hirsch, Director of Finance (619) 291-0103
2508 Historic Decatur Rd Ste 150, San Diego, CA 92106

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII.

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a	0			
	b	Membership dues	1b	0			
	c	Fundraising events	1c	10,900			
	d	Related organizations	1d	0			
	e	Government grants (contributions)	1e	0			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	375,032			
	g	Noncash contributions included in lines 1a-1f: \$		194,837			
	h	Total. Add lines 1a-1f ▶		385,932			
	Program Service Revenue			Business Code			
2a		Community Beautification	900099	479,852	479,852		
b		Environmental Education	900099	407,366	407,366		
c		Recycling Outreach	900099	181,189	181,189		
d			0			
e			0			
f		All other program service revenue		0			
g		Total. Add lines 2a-2f ▶		1,068,407			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) ▶		7,593		7,593	
	4	Income from investment of tax-exempt bond proceeds ▶		0			
	5	Royalties ▶		0			
	6a			(i) Real	(ii) Personal		
		b	Gross rents				
		b	Less: rental expenses				
		c	Rental income or (loss)	0	0		
	d	Net rental income or (loss) ▶		0			
	7a			(i) Securities	(ii) Other		
		b	Gross amount from sales of assets other than inventory	0	0		
		b	Less: cost or other basis and sales expenses	0	0		
		c	Gain or (loss)	0	0		
	d	Net gain or (loss) ▶		0			
	8a	Gross income from fundraising events (not including \$ 10,900 of contributions reported on line 1c). See Part IV, line 18	a	13,841			
	b	Less: direct expenses	b	5,830			
c	Net income or (loss) from fundraising events ▶		8,011		8,011		
9a	Gross income from gaming activities. See Part IV, line 19	a	0				
b	Less: direct expenses	b	0				
c	Net income or (loss) from gaming activities ▶		0				
10a	Gross sales of inventory, less returns and allowances	a	3,263				
b	Less: cost of goods sold	b	3,148				
c	Net income or (loss) from sales of inventory ▶		115		115		
Miscellaneous Revenue		Business Code					
11a		0				
b		0				
c		0				
d	All other revenue		0				
e	Total. Add lines 11a-11d ▶		0				
12	Total revenue. See instructions ▶		1,470,058	1,068,407	115	15,604	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX.

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations domestic governments. See Part IV, line 21	0			
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	104,940	75,977	10,966	17,997
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	601,230	435,290	62,829	103,111
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0			
9	Other employee benefits	55,136	39,918	5,762	9,456
10	Payroll taxes	60,864	44,066	6,360	10,438
11	Fees for services (non-employees):				
a	Management	0			
b	Legal	0			
c	Accounting	5,650		5,650	
d	Lobbying	0			
e	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	0			
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	81,499	68,768	3,374	9,357
12	Advertising and promotion	48,591	43,314	190	5,087
13	Office expenses	3,233	1,208	1,398	627
14	Information technology	29,725	19,534	4,738	5,453
15	Royalties	0			
16	Occupancy	70,309	42,185	21,093	7,031
17	Travel	32,186	28,425	1,006	2,755
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	9,144	1,879	5,265	2,000
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	17,630	8,815	7,052	1,763
23	Insurance	15,410	4,623	9,246	1,541
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a	Direct Expenses - Cleanups	32,550	32,550		
b	Direct Expenses - Presentations & Outreach	11,277	11,277		
c	Equipment	26,039	17,689	5,464	2,886
d	Outside Services	51,237	35,731	11,950	3,556
e	All other expenses	126,996	102,063	8,945	15,988
25	Total functional expenses. Add lines 1 through 24e	1,383,646	1,013,312	171,288	199,046
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X.

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	365,087	1	233,953
	2 Savings and temporary cash investments	327,258	2	329,142
	3 Pledges and grants receivable, net	0	3	0
	4 Accounts receivable, net	88,089	4	184,928
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0	6	
	7 Notes and loans receivable, net	0	7	0
	8 Inventories for sale or use	5,460	8	6,598
	9 Prepaid expenses and deferred charges	14,799	9	16,529
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	138,450		
	b Less: accumulated depreciation	75,650		
	11 Investments—publicly traded securities	0	11	83,640
	12 Investments—other securities. See Part IV, line 11	0	12	0
	13 Investments—program-related. See Part IV, line 11	0	13	0
	14 Intangible assets	0	14	0
	15 Other assets. See Part IV, line 11	0	15	0
16 Total assets. Add lines 1 through 15 (must equal line 34)	850,881	16	917,590	
Liabilities	17 Accounts payable and accrued expenses	95,764	17	126,499
	18 Grants payable	0	18	
	19 Deferred revenue	50,438	19	
	20 Tax-exempt bond liabilities	0	20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0	22	
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	0	25	0
	26 Total liabilities. Add lines 17 through 25	146,202	26	126,499
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	664,169	27	734,108
	28 Temporarily restricted net assets	40,510	28	56,983
	29 Permanently restricted net assets	0	29	
	Organizations that do not follow SFAS 117 (ASC958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds	0	30	
	31 Paid-in or capital surplus, or land, building, or equipment fund	0	31	
	32 Retained earnings, endowment, accumulated income, or other funds	0	32	
33 Total net assets or fund balances	704,679	33	791,091	
34 Total liabilities and net assets/fund balances	850,881	34	917,590	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,470,058
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,383,646
3	Revenue less expenses. Subtract line 2 from line 1	3	86,412
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	704,679
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	791,091

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		