Form 990

Department of the Treasury
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

2003

Open to Public Inspection

A For the 2003 calendar year, or tax year beginning 07/01 , 2003, and ending 06/30/2004

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

Please use IRS label or print or type. See Specific Instructions.

C Name of organization: COVENANT HOUSE CALIFORNIA

Number and street (or P O box if mail is not delivered to street address): 1325 NORTH WESTERN AVE. Room/suite:

City or town, state or country, and ZIP + 4: HOLLYWOOD, CA 90027

D Employer identification number: 13-3391210

E Telephone number: (323)461-3131

F Accounting method: Cash [ ] Accrual [X] Other (specify) ▶

- **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).**

H and I are not applicable to section 527 organizations

H(a) Is this a group return for affiliates? Yes [ ] No [X]

H(b) If "Yes," enter number of affiliates ▶ N/A

H(c) Are all affiliates included? N/A Yes [ ] No [ ] (If "No," attach a list See instructions)

H(d) Is this a separate return filed by an organization covered by a group ruling? Yes [ ] No [X]

I Group Exemption Number ▶

G Website: ▶ WWW.COVENANTHOUSECA.ORG

J Organization type (check only one) ▶ [X] 501(c) (3) ◀ (insert no) [ ] 4947(a)(1) or [ ] 527

K Check here ▶ [ ] if the organization's gross receipts are normally not more than $25,000 The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data **Some states require a complete return.**

M Check ▶ [ ] if the organization is **not** required to attach Sch B (Form 990, 990-EZ, or 990-PF)

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 11,413,521.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 18 of the instructions)

Revenue

1	Contributions, gifts, grants, and similar amounts received				
a	Direct public support	1a	6,406,996.		
b	Indirect public support	1b	31,000.		
c	Government contributions (grants)	1c	1,417,322.		
d	Total (add lines 1a through 1c) (cash $ 7,806,950. noncash $ 48,368.)			1d	7,855,318.
2	Program service revenue including government fees and contracts (from Part VII, line 93)			2	12,930.
3	Membership dues and assessments			3	
4	Interest on savings and temporary cash investments STMT 1			4	185,094.
5	Dividends and interest from securities STMT 2			5	128,900.
6 a	Gross rents	6a			
b	Less rental expenses	6b			
c	Net rental income or (loss) (subtract line 6b from line 6a)			6c	
7	Other investment income (describe ▶)			7	

		(A) Securities		(B) Other		
8 a	Gross amount from sales of assets other than inventory	3,095,014.	8a			
b	Less cost or other basis and sales expenses	3,130,919.	8b			
c	Gain or (loss) (attach schedule) SEE STMT	-35,905.	8c			
d	Net gain or (loss) (combine line 8c, columns (A) and (B))				8d	-35,905.

9	Special events and activities (attach schedule) If any amount is from **gaming**, check here ▶ [ ]				
a	Gross revenue (not including $ 324,621. of STMT 3 contributions reported on line 1a) STMT 4	9a	136,083.		
b	Less direct expenses other than fundraising expenses	9b	136,083.		
c	Net income or (loss) from special events (subtract line 9b from line 9a)			9c	NONE
10 a	Gross sales of inventory, less returns and allowances	10a			
b	Less cost of goods sold	10b			
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)			10c	
11	Other revenue (from Part VII, line 103)			11	182.
12	**Total revenue** (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)			12	8,146,519.

Expenses

13	Program services (from line 44, column (B))	13	7,283,624.
14	Management and general (from line 44, column (C))	14	325,818.
15	Fundraising (from line 44, column (D))	15	1,788,667.
16	Payments to affiliates (attach schedule)	16	
17	**Total expenses** (add lines 16 and 44, column (A))	17	9,398,109.

Net Assets

18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	-1,251,590.
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	15,352,667.
20	Other changes in net assets or fund balances (attach explanation) STMT 5	20	227,134.
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	14,328,211.

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JSA 3E1010 2 000

SCANNED NOV 15 '04

T01347 2020 10906-001

Part II Statement of Functional Expenses All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See page 22 of the instructions)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash $ noncash $)	22				
23 Specific assistance to individuals (attach schedule)	23	371,678.	371,678.	STMT 6	
24 Benefits paid to or for members (attach schedule)	24				
25 Compensation of officers, directors, etc.	25	235,777.	133,244.	43,943.	58,590.
26 Other salaries and wages	26	4,029,439.	3,884,454.	57,619.	87,366.
27 Pension plan contributions	27	225,955.	214,657.	6,779.	4,519.
28 Other employee benefits	28	324,628.	305,893.	5,948.	12,787.
29 Payroll taxes	29	766,799.	739,334.	11,182.	16,283.
30 Professional fundraising fees	30	99,290.	NONE	NONE	99,290.
31 Accounting fees	31	31,000.	NONE	31,000.	NONE
32 Legal fees	32				
33 Supplies	33	84,686.	81,301.	2,201.	1,184.
34 Telephone	34	142,109.	99,064.	1,920.	41,125.
35 Postage and shipping	35	752,506.	20,168.	587.	731,751.
36 Occupancy	36	402,463.	395,098.	289.	7,076.
37 Equipment rental and maintenance	37	154,257.	147,133.	4,468.	2,656.
38 Printing and publications	38	616,868.	3,737.	196.	612,935.
39 Travel	39	92,691.	86,610.	1,508.	4,573.
40 Conferences, conventions, and meetings	40	34,529.	19,335.	2,750.	12,444.
41 Interest	41				
42 Depreciation, depletion, etc (attach schedule) STMT 7	42	308,146.	303,865.	1,618.	2,663.
43 Other expenses not covered above (itemize) STMT 8	43a	725,288.	478,053.	153,810.	93,425.
b	43b				
c	43c				
d	43d				
e	43e				
44 **Total functional expenses** (add lines 22 through 43) *Organizations completing columns (B)-(D), carry these totals to lines 13-15*	44	9,398,109.	7,283,624.	325,818.	1,788,667.

Joint Costs. Check ▶ [ ] if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in **(B)** Program services? ▶ [X] Yes [ ] No

If "Yes," enter **(i)** the aggregate amount of these joint costs $ ______ , **(ii)** the amount allocated to Program services $ ______ ,

(iii) the amount allocated to Management and general $ ______ , and **(iv)** the amount allocated to Fundraising $ ______

Part III Statement of Program Service Accomplishments (See page 25 of the instructions.)

What is the organization's primary exempt purpose? ▶ SERVICES TO HOMELESS YOUTHS

All organizations must describe their exempt purpose achievements in a clear and concise manner State the number of clients served, publications issued, etc Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others)

	Program Service Expenses (Required for 501(c)(3) and (4) orgs , and 4947(a)(1) trusts, but optional for others)
a STMT 9 (Grants and allocations $)	2,912,506.
b (Grants and allocations $)	1,926,101.
c (Grants and allocations $)	1,304,417.
d (Grants and allocations $)	571,505.
e Other program services (attach schedule) STMT 10 (Grants and allocations $)	569,095.
f **Total of Program Service Expenses** (should equal line 44, column (B), Program services) ▶	7,283,624.

Part IV Balance Sheets (See page 25 of the instructions.)

	Note: *Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.*			(A) Beginning of year		(B) End of year
Assets	45 Cash - non-interest-bearing			14,075.	45	15,325.
	46 Savings and temporary cash investments			3,183,440.	46	5,937,922.
	47a Accounts receivable	47a				
	b Less: allowance for doubtful accounts	47b			47c	
	48a Pledges receivable	48a	620,913.			
	b Less: allowance for doubtful accounts	48b	87,000.	594,545.	48c	533,913.
	49 Grants receivable			366,007.	49	208,663.
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)				50	
	51a Other notes and loans receivable (attach schedule)	51a				
	b Less: allowance for doubtful accounts	51b			51c	
	52 Inventories for sale or use				52	
	53 Prepaid expenses and deferred charges			192,289.	53	215,736.
	54 Investments - securities (attach schedule) STMT 11 ▶ ☐ Cost ☒ FMV			6,148,554.	54	2,787,087.
	55a Investments - land, buildings, and equipment: basis	55a				
	b Less: accumulated depreciation (attach schedule)	55b			55c	
	56 Investments - other (attach schedule)				56	
	57a Land, buildings, and equipment: basis	57a	8,750,590.			
	b Less. accumulated depreciation (attach schedule) SEE STATEMENT 7	57b	3,614,469.	5,374,614.	57c	5,136,121.
	58 Other assets (describe ▶ STMT 12)			25,741.	58	35,920.
	59 **Total assets** (add lines 45 through 58) (must equal line 74)			15,899,265.	59	14,870,687.
Liabilities	60 Accounts payable and accrued expenses			512,570.	60	494,190.
	61 Grants payable				61	
	62 Deferred revenue				62	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)				63	
	64a Tax-exempt bond liabilities (attach schedule)				64a	
	b Mortgages and other notes payable (attach schedule)				64b	
	65 Other liabilities (describe ▶ STMT 13)			34,028.	65	48,286.
	66 **Total liabilities** (add lines 60 through 65)			546,598.	66	542,476.
Net Assets or Fund Balances	**Organizations that follow SFAS 117, check here ▶** ☒ and complete lines 67 through 69 and lines 73 and 74					
	67 Unrestricted			14,890,197.	67	13,958,109.
	68 Temporarily restricted			462,470.	68	370,102.
	69 Permanently restricted				69	
	Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 70 through 74.					
	70 Capital stock, trust principal, or current funds				70	
	71 Paid-in or capital surplus, or land, building, and equipment fund				71	
	72 Retained earnings, endowment, accumulated income, or other funds				72	
	73 **Total net assets or fund balances** (add lines 67 through 69 **or** lines 70 through 72; column (A) **must** equal line 19; column (B) **must** equal line 21)			15,352,667.	73	14,328,211.
	74 **Total liabilities and net assets / fund balances** (add lines 66 and 73)			15,899,265.	74	14,870,687.

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.

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See page 27 of the instructions.)

a	Total revenue, gains, and other support per audited financial statements	a	8,395,939.
b	Amounts included on line a but not on line 12, Form 990:		
(1)	Net unrealized gains on investments $ 227,134.		
(2)	Donated services and use of facilities $ 22,286.		
(3)	Recoveries of prior year grants $		
(4)	Other (specify) $		
	Add amounts on lines (1) through (4)	b	249,420.
c	Line a minus line b	c	8,146,519.
d	Amounts included on line 12, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 $		
(2)	Other (specify) $		
	Add amounts on lines (1) and (2)	d	
e	Total revenue per line 12, Form 990 (line c plus line d)	e	8,146,519.

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total expenses and losses per audited financial statements	a	9,420,395.
b	Amounts included on line a but not on line 17, Form 990:		
(1)	Donated services and use of facilities $ 22,286.		
(2)	Prior year adjustments reported on line 20, Form 990 $		
(3)	Losses reported on line 20, Form 990 $		
(4)	Other (specify) $		
	Add amounts on lines (1) through (4)	b	22,286.
c	Line a minus line b	c	9,398,109.
d	Amounts included on line 17, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 $		
(2)	Other (specify) $		
	Add amounts on lines (1) and (2)	d	
e	Total expenses per line 17, Form 990 (line c plus line d)	e	9,398,109.

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see page 27 of the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
SEE STATEMENT 17		235,777.	18,862.	NONE

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than $100,000 from your organization and all related organizations, of which more than $10,000 was provided by the related organizations? ▶ [ ] Yes [X] No
If "Yes," attach schedule - see page 28 of the instructions

Part VI Other Information (See page 28 of the instructions.)

			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? If "Yes," attach a conformed copy of the changes	77		X
78a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	78a		X
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	78b	N/A	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc , to any other exempt or nonexempt organization?	80a	X	
b	If "Yes," enter the name of the organization ▶ STMT 18 and check whether it is [X] exempt **or** [ ] nonexempt.			
81a	Enter direct and indirect political expenditures See line 81 instructions. 81a NONE			
b	Did the organization file **Form 1120-POL** for this year?	81b	N/A	
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X	
b	If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III) 82b 22,286.			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A	
85	*501(c)(4), (5), or (6) organizations* **a** Were substantially all dues nondeductible by members?	85a	N/A	
b	Did the organization make only in-house lobbying expenditures of $2,000 or less?	85b	N/A	
	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			
c	Dues, assessments, and similar amounts from members 85c N/A			
d	Section 162(e) lobbying and political expenditures 85d N/A			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A			
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?	85g	N/A	
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 allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A	
86	*501(c)(7) orgs* Enter **a** Initiation fees and capital contributions included on line 12 86a N/A			
b	Gross receipts, included on line 12, for public use of club facilities 86b N/A			
87	*501(c)(12) orgs.* 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
89a	*501(c)(3) organizations.* Enter Amount of tax imposed on the organization during the year under section 4911 ▶ NONE , section 4912 ▶ NONE , section 4955 ▶ NONE			
b	*501(c)(3) and 501(c)(4) orgs* Did the organization engage in any section 4958 excess benefit 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		X
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ NONE			
d	Enter Amount of tax on line 89c, above, reimbursed by the organization ▶ NONE			
90a	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, 2003 (See instructions)	90b	130	
91	The books are in care of ▶ LUZ BUAN Telephone no ▶ 323-461-3131 Located at ▶ 1325 N. WESTERN AVE., HOLLYWOOD, CA ZIP + 4 ▶ 90027			
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 ▶ 92 N/A			

Part VII Analysis of Income-Producing Activities (See page 33 of the instructions.)

Note: *Enter gross amounts unless otherwise indicated*	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a TRANSITIONAL					
b LIVING PROGRAM					12,930.
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	185,094.	
96 Dividends and interest from securities			14	128,900.	
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	-35,905.	
101 Net income or (loss) from special events			01	NONE	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue a					
b OTHER REVENUE			01	182.	
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				278,271.	12,930.

105 **Total** (add line 104, columns (B), (D), and (E)) . . . ▶ 291,201.

Note: *Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.*

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 34 of the instructions.)

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
	N/A

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note: *If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)*

Please Sign

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

▶ Signature of officer | Date 10-28-04

[redacted] ECUTIVE DIRECTOR

Date 10-26-04 | Check if self- | Preparer's SSN or PTIN (See Gen Inst W)

[redacted]

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

2003

Name of the organization: COVENANT HOUSE CALIFORNIA

Employer identification number: 13-3391210

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than $50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
JAMES BAILEY 1325 N.WESTERN AVENUE HOLLYWOOD, CALIFORNIA 90027	DIR. CRISIS SHELTER 40	56,374.	3,946.	NONE
THERESA BROMS 1325 N.WESTERN AVENUE HOLLYWOOD, CALIFORNIA 90027	DIR. HEALTH SERVICES 40	71,112.	4,978.	NONE
JOHN GARCIA 1325 N.WESTERN AVENUE HOLLYWOOD, CALIFORNIA 90027	DIR. OF HUMAN RES. 40	80,175.	5,610.	NONE
MIRANDA YATES 1325 N.WESTERN AVENUE HOLLYWOOD, CALIFORNIA 90027	DIR TRAN. LIVING PRG 40	65,400.	4,575.	NONE
LUZ BUAN 1325 N.WESTERN AVENUE HOLLYWOOD, CALIFORNIA 90027	CONTROLLER 40	89,559.	6,260.	NONE
Total number of other employees paid over $50,000 . . . . ▶	2			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than $50,000	(b) Type of service	(c) Compensation
CHILDRENS HOSPITAL OF LOS ANGELES P.O. BOX 54700, #2, L.A., CA 90054	PHYSICIANS SVCS/MED	63,338.
Total number of others receiving over $50,000 for professional services . . . . ▶ NONE		

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Schedule A (Form 990 or 990-EZ) 2003

JSA

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Part III Statements About Activities (See page 2 of the instructions.)

			Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ $ NONE (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B)	1		X
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? *(If the answer to any question is "Yes," attach a detailed statement explaining the transactions)*			
a	Sale, exchange, or leasing of property?	2a		X
b	Lending of money or other extension of credit?	2b		X
c	Furnishing of goods, services, or facilities?	2c		X
d	Payment of compensation (or payment or reimbursement of expenses if more than $1,000)? FORM 990, PART V	2d	X	
e	Transfer of any part of its income or assets?	2e		X
3a	Do you make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments)	3a		X
b	Do you have a section 403(b) annuity plan for your employees?	3b	X	
4	Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	4		X

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)

The organization is not a private foundation because it is (Please check only **ONE** applicable box.)

5 ☐ A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)

6 ☐ A school Section 170(b)(1)(A)(ii) (Also complete Part V)

7 ☐ A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)

8 ☐ A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)

9 ☐ A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) **Enter the hospital's name, city, 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 ☒ 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 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)	**(b)** Line number from above

14 ☐ An organization organized and operated to test for public safety Section 509(a)(4) (See page 6 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) ***Use cash method of accounting.***

Note: *You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.*

Calendar year (or fiscal year beginning in) ▶	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)	7,792,840.	8,167,623.	7,803,621.	8,170,752.	31,934,836.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc , purpose	108,130.	118,630.	89,023.	320,050.	635,833.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	303,938.	228,204.	397,848.	56,590.	986,580.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets	STMT 19 123.	4,851.	741.	1,757.	7,472.
23 Total of lines 15 through 22	8,205,031.	8,519,308.	8,291,233.	8,549,149.	33,564,721.
24 Line 23 minus line 17	8,096,901.	8,400,678.	8,202,210.	8,229,099.	32,928,888.
25 Enter 1% of line 23	82,050.	85,193.	82,912.	85,491.	

26 **Organizations described on lines 10 or 11:** a Enter 2% of amount in column (e), line 24 ▶ 26a 658,578.

b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1999 through 2002 exceeded the amount shown in line 26a **Do not file this list with your return.** Enter the total of all these excess amounts ▶ 26b 396,442.

c Total support for section 509(a)(1) test Enter line 24, column (e) ▶ 26c 32928888.

d Add Amounts from column (e) for lines 18 986,580. 19 ______ 22 7,472. 26b 396,442. ▶ 26d 1,390,494.

e Public support (line 26c minus line 26d total) ▶ 26e 31538394.

f **Public support percentage (line 26e (numerator) divided by line 26c (denominator))** ▶ 26f 95.7773 %

27 **Organizations described on line 12: a** For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person" **Do not file this list with your return.** Enter the sum of such amounts for each year

(2002) ______ (2001) ______ (2000) NOT APPLICABLE (1999) ______

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the **larger** of **(1)** the amount on line 25 for the year or **(2)** $5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals) **Do not file this list with your return.** After computing the difference between the amount received and the larger amount described in **(1)** or **(2)**, enter the sum of these differences (the excess amounts) for each year

(2002) ______ (2001) ______ (2000) ______ (1999) ______

c Add Amounts from column (e) for lines 15 ______ 16 ______ 17 ______ 20 ______ 21 ______ ▶ 27c

d Add Line 27a total ______ and line 27b total ______ ▶ 27d

e Public support (line 27c total minus line 27d total) ▶ 27e

f Total support for section 509(a)(2) test Enter amount from line 23, column (e) ▶ 27f

g **Public support percentage (line 27e (numerator) divided by line 27f (denominator))** ▶ 27g %

h **Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))** ▶ 27h %

28 **Unusual Grants:** For an organization described in line 10, 11, or 12 that received any unusual grants during 1999 through 2002, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant **Do not file this list with your return.** Do not include these grants in line 15

Part V **Private School Questionnaire** (See page 7 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV) NOT APPLICABLE

			Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of 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		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following:			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	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 admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	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:			
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement.)			
34a	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		
	If you answered "Yes" to either 34a or b, please explain using an attached statement.			
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, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Part VI-A **Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions.)
(To be completed **ONLY** by an eligible organization that filed Form 5768) NOT APPLICABLE

Check ▶ **a** [ ] if the organization belongs to an affiliated group Check ▶ **b** [ ] if you checked **"a"** and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount Enter the amount from the following table -			
If the amount on line 40 is - / **The lobbying nontaxable amount is -**			
Not over $500,000 ... 20% of the amount on line 40			
Over $500,000 but not over $1,000,000 ... $100,000 plus 15% of the excess over $500,000			
Over $1,000,000 but not over $1,500,000 ... $175,000 plus 10% of the excess over $1,000,000	41		
Over $1,500,000 but not over $17,000,000 ... $225,000 plus 5% of the excess over $1,500,000			
Over $17,000,000 ... $1,000,000			
42 Grassroots nontaxable amount (enter 25% of line 41)	42		
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44		

Caution: *If there is an amount on either line 43 or line 44, you must file Form 4720.*

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below
See the instructions for lines 45 through 50 on page 11 of the instructions)

	Lobbying Expenditures During 4-Year Averaging Period				
Calendar year (or fiscal year beginning in) ▶	**(a)** 2003	**(b)** 2002	**(c)** 2001	**(d)** 2000	**(e)** Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 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 12 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
a Volunteers		X	
b Paid staff or management (Include compensation in expenses reported on lines **c** through **h**.)		X	
c Media advertisements		X	
d Mailings to members, legislators, or the public		X	
e Publications, or published or broadcast statements		X	
f Grants to other organizations for lobbying purposes		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		X	
i Total lobbying expenditures (Add lines **c** through **h**.)			NONE

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

Part VII **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations** (See page 12 of the instructions.)

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

		Yes	No
a Transfers from the reporting organization to a noncharitable exempt organization of:			
(i) Cash	51a(i)		X
(ii) Other assets	a(ii)		X
b Other transactions:			
(i) Sales or exchanges of assets with a noncharitable exempt organization	b(i)		X
(ii) Purchases of assets from a noncharitable exempt organization	b(ii)		X
(iii) Rental of facilities, equipment, or other assets	b(iii)		X
(iv) Reimbursement arrangements	b(iv)		X
(v) Loans or loan guarantees	b(v)		X
(vi) Performance of services or membership or fundraising solicitations	b(vi)		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	c		X

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

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

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ▶ ☐ Yes ☒ No

b If "Yes," complete the following schedule:

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

FORM 990, PART I - INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS

DESCRIPTION	AMOUNT
CASH INVESTMENTS INTEREST	185,094.
TOTAL	185,094.

FORM 990, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

DESCRIPTION	AMOUNT
DIVIDENDS & INTEREST FROM SECURITIES	128,900.
TOTAL	128,900.

STATEMENT 2

Schedule D Detail of Short-term Capital Gains and Losses

Description	Date Acquired	Date Sold	Gross Sales Price	Cost or Other Basis	Short-term Gain/Loss
POST-MAY 5TH CAPITAL GAINS (LOSSES)					
REITS - VORNADO REALTY	02/09/2004	04/28/2004	330,009.	323,684.	6,325.
25 SHS KIMCO REALTY STOCK	11/30/2003	12/14/2003	1,013.	1,071.	-58.
27 SHS PROCTOR & GAMBLE STOCK	12/10/2003	12/15/2003	2,612.	2,606.	6.
21 SHS CITIGROUP STOCKS	12/22/2003	12/26/2003	1,011.	996.	15.
15 SHS 3M CORPORATION	12/27/2003	01/02/2004	1,263.	1,269.	-6.
46 SHS ALTRIA P. MORRIS	12/31/2003	01/06/2004	2,502.	2,484.	18.
100 SHS BAC STOCK	12/30/2003	01/06/2004	7,900.	8,025.	-125.
78 SHS ESSEX PROPERTIES	12/16/2003	02/26/2004	4,847.	4,847.	
TOTAL POST-MAY 5TH CAPITAL GAINS (LOSSES)			351,157.	344,982.	6,175.
CAPITAL GAINS (LOSSES) FROM SECURITIES					
REITS - VORNADO REALTY	02/09/2004	04/28/2004	330,009.	323,684.	6,325.
25 SHS KIMCO REALTY STOCK	11/30/2003	12/14/2003	1,013.	1,071.	-58.
27 SHS PROCTOR & GAMBLE STOCK	12/10/2003	12/15/2003	2,612.	2,606.	6.
21 SHS CITIGROUP STOCKS	12/22/2003	12/26/2003	1,011.	996.	15.
15 SHS 3M CORPORATION	12/27/2003	01/02/2004	1,263.	1,269.	-6.
46 SHS ALTRIA P. MORRIS	12/31/2003	01/06/2004	2,502.	2,484.	18.
100 SHS BAC STOCK	12/30/2003	01/06/2004	7,900.	8,025.	-125.
78 SHS ESSEX PROPERTIES	12/16/2003	02/26/2004	4,847.	4,847.	
TOTAL CAPITAL GAINS (LOSSES) FROM SECURITIES			351,157.	344,982.	6,175.
Totals			351,157.	344,982.	6,175.

Schedule D Detail of Long-term Capital Gains and Losses

Description	Date Acquired	Date Sold	Gross Sales Price	Cost or Other Basis	Long-term Gain/Loss
POST-MAY 5TH CAPITAL GAINS (LOSSES)					
PRIME INCOME TRUST	03/31/2000	06/18/2004	1,825,381.	2,000,000.	-174,619.
REITS - SIMON PROPERTY	08/22/2002	04/28/2004	918,476.	785,937.	132,539.
TOTAL POST-MAY 5TH CAPITAL GAINS (LOSSES)			2,743,857.	2,785,937.	-42,080.
CAPITAL GAINS (LOSSES) FROM SECURITIES					
PRIME INCOME TRUST	03/31/2000	06/18/2004	1,825,381.	2,000,000.	-174,619.
REITS - SIMON PROPERTY	08/22/2002	04/28/2004	918,476.	785,937.	132,539.
TOTAL CAPITAL GAINS (LOSSES) FROM SECURITIES			2,743,857.	2,785,937.	-42,080.
Totals			2,743,857.	2,785,937.	-42,080.

FORM 990, PART I - SPECIAL FUNDRAISING EVENTS AND ACTIVITIES

DESCRIPTION	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
ANNUAL DINNER GALA - 5/7/2004	136,083.	136,083.	NONE
VARIOUS EVENTS-FASHIONSCAPE AND YOUNG PROFES. EVENTS	NONE	NONE	NONE
TOTALS	136,083.	136,083.	NONE

FORM 990, PART I - OTHER INCREASES IN FUND BALANCES

DESCRIPTION	AMOUNT
UNREALIZED GAIN ON INVESTMENTS	227,134.
TOTAL	227,134.

FORM 990, PART II - SPECIFIC ASSISTANCE TO INDIVIDUALS

DESCRIPTION	PROGRAM SERVICES
FOOD, MEDICAL, CLOTHING, AND SHELTER	371,678.
TOTALS	371,678.

COVENANT HOUSE CALIFORNIA
FEIN: 13-3391210
FYE: 6/30/2004

DESCRIPTION OF ASSET	COST BASIS AT 7/1/2003	ADDITIONS	DISPOSALS	COST BASIS AT 6/30/2004
BUILDINGS	7,194,255			7,194,255
LEASEHOLD IMPROVEMENTS	387,009			387,009
FIXED EQUIPMENT-COMPUTER	486,327	4,231		490,558
FURNITURE & FIXTURES	505,552	35,242		540,794
AUTOMOTIVE	107,794	30,180		137,974
	0			0
TOTAL COST BASIS	8,680,937	69,653	0	8,750,590

	ACCUMULATED DEPRECIATION AT 7/1/2003	ADDITIONS	DISPOSALS	ACCUMULATED DEPRECIATION AT 6/30/2004
BUILDINGS	2,005,710	252,069		2,257,779
LEASEHOLD IMPROVEMENTS	252,619	26,878		279,497
FIXED EQUIPMENT-COMPUTER	473,922	7,260		481,182
FURNITURE & FIXTURES	485,405	13,456		498,861
AUTOMOTIVE	88,667	8,483		97,150
	0			0
TOTAL ACCUMULATED	3,306,323	308,146	0	3,614,469
NET BOOK VALUE	5,374,614			5,136,121

FORM 990, PART II - OTHER EXPENSES

DESCRIPTION	TOTAL	PROGRAM SERVICES	MANAGEMENT AND GENERAL	FUNDRAISING
MEDICAL PROFESSIONAL FEES	107,217.	107,217.	NONE	NONE
CONSULTING FEES, OTHER THAN FUNDRAISING	18,900.	18,900.	NONE	NONE
TEMPORARY LABOR/HELP	31,291.	31,261.	30.	NONE
OTHER PURCHASED SERVICES	177,589.	111,143.	1,816.	64,630.
DUES, LICENSES, AND PERMITS	17,413.	16,785.	292.	336.
STAFF RECRUITEMENT	29,031.	27,234.	NONE	1,797.
INSURANCE	109,472.	105,636.	3,836.	NONE
MTA TOKENS AND MERCHANDISE	27,070.	26,331.	739.	NONE
WITHDRAWN PLEDGES	25,989.	NONE	NONE	25,989.
MISCELLANEOUS	35,406.	33,546.	1,187.	673.
BANK CHARGES	145,910.	NONE	145,910.	NONE
TOTALS	725,288.	478,053.	153,810.	93,425.

FORM 990, PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

DESCRIPTION	EXPENSES
SHELTER AND CRISIS CARE - THE ORGANIZATION PROVIDES CRISIS CARE, SHELTER, FOOD, CLOTHING, AND COUNSELING TO ABANDONED AND RUNAWAY YOUTHS IN THE LOS ANGELES AREA.	2,912,506.
COMMUNITY SERVICE CENTER - PROVIDES COMPREHENSIVE SERVICES TO YOUTHS WHO LEFT COVENANT HOUSE CRISIS CENTER, AND OTHER YOUTHS IN THE COMMUNITY WHO NEED SUPPORT TO MAINTAIN THEMSELVES IN STABLE LIVING SITUATIONS. SERVICES PROVIDED INCLUDE SUBSTANCE ABUSE COUNSELING AND EMPLOYMENT SKILLS TRAINING.	1,926,101.
RIGHTS OF PASSAGE - PROVIDES TRANSITIONAL HOME SERVICES FOR UP TO 18 MONTHS FOR YOUTHS, WHICH INCLUDES EDUCATION, JOB PLACEMENT, AND HOUSING.	1,304,417.
MEDICAL SERVICES - PROVIDES ON-SITE EMERGENCY MEDICAL SERVICES TO BOTH SHELTER AND OUTREACH YOUTHS INCLUDING EXAMS, PHARMACY SERVICES, HEALTH EDUCATION, AND COUNSELING.	571,505.
TOTAL	6,714,529.

FORM 990, PART III - OTHER PROGRAM SERVICES

DESCRIPTION	GRANTS AND ALLOCATIONS	EXPENSES
OUTREACH - COVENANT HOUSE VANS CRUISE CITY STREETS EVERY NIGHT SEARCHING OUT YOUTHS AND PROVIDING THEM WITH FOOD, A TRAINED COUNSELOR AND A SAFE RIDE TO THE SHELTER.		444,518.
PUBLIC EDUCATION - INFORMS AND EDUCATES THE PUBLIC ON HOW TO IDENTIFY POTENTIAL RUNAWAY AND THROWAWAY ADOLESCENTS, THE PUBLIC AND PRIVATE RESOURCES AVAILABLE TO HELP SUCH ADOLESCENTS BEFORE THEY LEAVE HOME, AND THE PUBLIC SUPPORT SERVICES AVAILABLE TO HELP THESE FAMILIES TO IMPROVE THEIR HOME ENVIRONMENT.		124,577.
TOTALS		569,095.

FORM 990, PART IV - INVESTMENTS - SECURITIES

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE
MUTUAL FUNDS	2,384,374.	218,522.
COMMON STOCKS	1,066,610.	6,674.
CORPORATE DEBT SECURITIES	663,700.	818,934.
US GOVERNMENT SECURITIES	2,033,870.	1,742,957.
TOTALS	6,148,554.	2,787,087.

FORM 990, PART IV - OTHER ASSETS

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE
OTHER ASSETS	10,252.	NONE
TRAVEL ADVANCES	726.	1,535.
DUE FROM PARENT	14,763.	24,385.
OTHER RECEIVABLES	NONE	10,000.
TOTALS	25,741.	35,920.

FORM 990, PART IV - OTHER LIABILITIES

DESCRIPTION		BEGINNING BOOK VALUE	ENDING BOOK VALUE
OTHER LIABILITIES		34,028.	48,286.
	TOTALS	34,028.	48,286.

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
ANDREW BEYER 1325 N. WESTERN AVENUE HOLLYWOOD, CA 90027	DIRECTOR 5 HR/MONTH	NONE	NONE	NONE
KAREN CORMAN 1325 N. WESTERN AVENUE HOLLYWOOD, CA 90027	DIRECTOR 5 HR/MONTH	NONE	NONE	NONE
WENDY BRIDGES 1325 N. WESTERN AVENUE HOLLYWOOD, CA 90027	DIRECTOR 5 HR/MONTH	NONE	NONE	NONE
CATHERINE BURKE 1325 N. WESTERN AVENUE HOLLYWOOD, CA 90027	DIRECTOR 5 HR/MONTH	NONE	NONE	NONE
LERON GUBLER 1325 N. WESTERN AVENUE HOLLYWOOD, CA 90027	DIRECTOR 5 HR/MONTH	NONE	NONE	NONE
SR JOANNE LAVIOLETTE 1325 N. WESTERN AVENUE HOLLYWOOD, CA 90027	DIRECTOR 5 HR/MONTH	NONE	NONE	NONE
ELIZABETH CALLENDER 1325 N. WESTERN AVENUE HOLLYWOOD, CA 90027	DIRECTOR 5 HR/MONTH	NONE	NONE	NONE
SISTER MARY ROSE MCGEADY, D.C. 1325 N. WESTERN AVENUE HOLLYWOOD, CA 90027	PRESIDENT 5 HR/MONTH	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
GEORGE LOZANO 1325 N. WESTERN AVENUE HOLLYWOOD, CA 90027	EXECUTIVE DIRECTOR 40 HR/WEEK	146,475.	11,718.	NONE
WILLIAM WILSON 1325 N. WESTERN AVENUE HOLLYWOOD, CA 90027	ASSOCIATE EXEC.DIR 40 HR/WEEK	89,302.	7,144.	NONE
PRISCILLA MOORE 1325 N. WESTERN AVENUE HOLLYWOOD, CA 90027	DIRECTOR 5 HR/MONTH	NONE	NONE	NONE
CHRISTOPHER CHOO 1325 N. WESTERN AVENUE HOLLYWOOD, CA 90027	DIRECTOR 5 HR/MONTH	NONE	NONE	NONE
DAVID COX 1325 N. WESTERN AVENUE HOLLYWOOD, CA 90027	DIRECTOR 5 HR/MONTH	NONE	NONE	NONE
LERON GUBLER 1325 N. WESTERN AVENUE HOLLYWOOD, CA 90027	DIRECTOR 5 HR/MONTH	NONE	NONE	NONE
ADRIENNE MATROS, PH.D. 1325 N. WESTERN AVENUE HOLLYWOOD, CA 90027	DIRECTOR 5 HR/MONTH	NONE	NONE	NONE
PATRICIA SERIO 1325 N. WESTERN AVENUE HOLLYWOOD, CA 90027	DIRECTOR 5 HR/MONTH	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
SHARI LYNN DAVIS 1325 N. WESTERN AVENUE HOLLYWOOD, CA 90027	CHAIR 5 HR/MONTH	NONE	NONE	NONE
DOUGLAS HOLTE 1325 N. WESTERN AVENUE HOLLYWOOD, CA 90027	DIRECTOR 5 HR/MONTH	NONE	NONE	NONE
CHRISTOPHER H. PASKASCH 1325 N. WESTERN AVENUE HOLLYWOOD, CA 90027	TREASURER 5 HR/MONTH	NONE	NONE	NONE
ELIZABETH SHATNER 1325 N. WESTERN AVENUE HOLLYWOOD, CA 90027	DIRECTOR 5 HR/MONTH	NONE	NONE	NONE
TERRY THOREN 1325 N. WESTERN AVENUE HOLLYWOOD, CA 90027	DIRECTOR 5 HR/MONTH	NONE	NONE	NONE
PATRICIA MALONEY 1325 N. WESTERN AVENUE HOLLYWOOD, CA 90027	DIRECTOR 5 HR/MONTH	NONE	NONE	NONE
VALERIE MENDEZ 1325 N. WESTERN AVENUE HOLLYWOOD, CA 90027	DIRECTOR 5 HR/MONTH	NONE	NONE	NONE
JOE MARCHICA 1325 N. WESTERN AVENUE HOLLYWOOD, CA 90027	DIRECTOR 5 HR/MONTH	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
MICKEY SEGAL 1325 N. WESTERN AVENUE HOLLYWOOD, CA 90027	DIRECTOR 5 HR/MONTH	NONE	NONE	NONE
JAMES LEONETTI 1325 N. WESTERN AVENUE HOLLYWOOD, CA 90027	DIRECTOR 5 HR/MONTH	NONE	NONE	NONE
TOM VILLANTE 1325 N. WESTERN AVENUE HOLLYWOOD, CA 90027	DIRECTOR 5 HR/MONTH	NONE	NONE	NONE
	GRAND TOTALS	235,777.	18,862.	NONE

FORM 990, PART VI - NAMES OF RELATED ORGANIZATIONS
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COVENANT HOUSE, INC	EXEMPT

SCHEDULE A, PART IV-A - OTHER INCOME

DESCRIPTION	2002	2001	2000	1999	TOTAL
MEDICAL REIMBURSEMENTS	NONE	4,851.	741.	1,757.	7,349.
OTHER REVENUE	123.	NONE	NONE	NONE	123.
TOTALS	123.	4,851.	741.	1,757.	7,472.