

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.

A For the 2004 calendar year, or tax year beginning **JUL 1, 2004** and ending **JUN 30, 2005**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type See Specific Instructions	C Name of organization LOS ANGELES COUNTY HIGH SCHOOL FOR THE ARTS FOUNDATION		D Employer identification number 95-3938009
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite 5151 STATE UNIVERSITY DRIVE, LIBRARY NOR1034		E Telephone number 323-343-2554
		City or town, state or country, and ZIP + 4 LOS ANGELES, CA 90032-8745		F Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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

H(b) If "Yes," enter number of affiliates: _____

H(c) Are all affiliates included? **N/A** Yes No (If "No," attach a list.)

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

I Group Exemption Number: _____

G Website: **WWW.LAFN.ORG/ARTSHIGH**

J Organization type (check only one) 501(c) (3) (insert no) 4947(a)(1) or 527

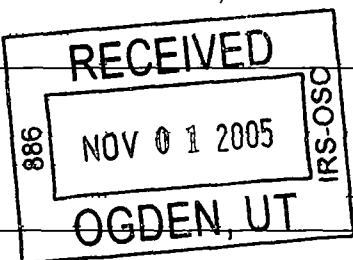
K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. **Some states require a complete return.**

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 **1,809,324.**

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

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

Revenue	1 Contributions, gifts, grants, and similar amounts received:				
	a Direct public support	1a	1,422,900.		
	b Indirect public support	1b			
	c Government contributions (grants)	1c			
	d Total (add lines 1a through 1c) (cash \$ <u>1,422,900.</u> noncash \$ _____)	1d		1,422,900.	
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2			
	3 Membership dues and assessments	3			
	4 Interest on savings and temporary cash investments	4		4,245.	
	5 Dividends and interest from securities	5		80,738.	
	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				
8 a Gross amount from sales of assets other than inventory	(A) Securities	8a	234,294.		
	(B) Other	8b	190,245.		
	Less: cost or other basis and sales expenses	8c	44,049.		
	d Net gain or (loss) (combine line 8c, columns (A) and (B)) STMT 1	8d		44,049.	
9 Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>	a Gross revenue (not including \$ <u>0.</u> of contributions reported on line 1a)	9a	61,795.		
	b Less: direct expenses other than fundraising expenses	9b	33,921.		
	c Net income or (loss) from special events (subtract line 9b from line 9a) SEE STATEMENT 2	9c		27,874.	
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		5,352.		
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12		1,585,158.		
Expenses	13 Program services (from line 44, column (B))	13		800,683.	
	14 Management and general (from line 44, column (C))	14		83,747.	
	15 Fundraising (from line 44, column (D))	15		94,798.	
	16 Payments to affiliates (attach schedule)	16			
	17 Total expenses (add lines 16 and 44, column (A))	17		979,228.	
18 Excess or (deficit) for the year (subtract line 17 from line 12)	18		605,930.		
Net Assets	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19		3,078,277.	
	20 Other changes in net assets or fund balances (attach explanation) SEE STATEMENT 3	20		95,456.	
	21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		3,779,663.	



NOV 15 2005
SCANNED

**LOS ANGELES COUNTY HIGH SCHOOL
FOR THE ARTS FOUNDATION**

95-3938009

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.

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I</i>		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ 31,500. noncash \$ _____)	31,500.	31,500.	STATEMENT 6	
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc.	100,000.	40,000.	15,000.	45,000.
26	Other salaries and wages	47,461.	20,882.	16,606.	9,973.
27	Pension plan contributions	22,720.	9,380.	4,870.	8,470.
28	Other employee benefits	14,416.	5,952.	3,089.	5,375.
29	Payroll taxes	10,967.	4,528.	2,351.	4,088.
30	Professional fundraising fees				
31	Accounting fees	13,777.	10,333.	689.	2,755.
32	Legal fees				
33	Supplies	21,108.	8,715.	4,524.	7,869.
34	Telephone	4,007.	1,654.	859.	1,494.
35	Postage and shipping	2,531.	633.	1,012.	886.
36	Occupancy				
37	Equipment rental and maintenance				
38	Printing and publications	1,459.	1,094.	146.	219.
39	Travel	926.	463.	463.	
40	Conferences, conventions, and meetings				
41	Interest				
42	Depreciation, depletion, etc (attach schedule)	2,948.	1,217.	632.	1,099.
43	Other expenses not covered above (itemize):				
a	_____				
b	_____				
c	_____				
d	_____				
e	SEE STATEMENT 4	705,408.	664,332.	33,506.	7,570.
44	<small>Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15</small>	979,228.	800,683.	83,747.	94,798.

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? 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

What is the organization's primary exempt purpose? **SEE STATEMENT 5**

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	ARTS TRAINING-UNDERWRITES ARTS TRAINING FOR STUDENTS IN THE PUBLIC HIGH SCHOOL OPERATED UNDER THE AUSPICES OF THE LOS ANGELES COUNTY OFFICE OF EDUCATION.	747,330.
	(Grants and allocations \$ _____)	
b	STUDENT SCHOLARSHIPS-SUPPORTS YOUNG ARTISTS IN THE PUBLIC SCHOOL SYSTEM.	53,353.
	(Grants and allocations \$ _____)	
c	_____	
	(Grants and allocations \$ _____)	
d	_____	
	(Grants and allocations \$ _____)	
e	Other program services (attach schedule)	(Grants and allocations \$ _____)
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)	800,683.

Part IV Balance Sheets

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		45	
	46 Savings and temporary cash investments	557,197.	46	929,843.
	47 a Accounts receivable	47a		
	b Less: allowance for doubtful accounts	47b	47c	
	48 a Pledges receivable	48a		
	b Less: allowance for doubtful accounts	48b	48c	
	49 Grants receivable	477,254.	49	225,750.
	50 Receivables from officers, directors, trustees, and key employees		50	
	51 a Other notes and loans receivable	51a		
	b Less: allowance for doubtful accounts	51b	51c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges	5,210.	53	6,062.
	54 Investments - securities STMT 7 STMT 8 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	2,062,312.	54	2,658,302.
	55 a Investments - land, buildings, and equipment: basis STMT 10	55a		
	b Less: accumulated depreciation	55b	55c	
56 Investments - other		56		
57 a Land, buildings, and equipment: basis	57a	19,816.		
b Less: accumulated depreciation STMT 9	57b	12,435.	57c	
58 Other assets (describe <input type="checkbox"/>)		5,448.	58	
59 Total assets (add lines 45 through 58) (must equal line 74)	3,107,421.	59	3,827,338.	
Liabilities	60 Accounts payable and accrued expenses	24,694.	60	47,675.
	61 Grants payable	4,450.	61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax-exempt bond liabilities		64a	
	b Mortgages and other notes payable		64b	
	65 Other liabilities (describe <input type="checkbox"/>)		65	
66 Total liabilities (add lines 60 through 65)	29,144.	66	47,675.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	1,105,032.	67	1,305,003.
	68 Temporarily restricted	412,071.	68	646,956.
	69 Permanently restricted	1,561,174.	69	1,827,704.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> 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)	3,078,277.	73	3,779,663.	
74 Total liabilities and net assets / fund balances (add lines 66 and 73)	3,107,421.	74	3,827,338.	

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.

**LOS ANGELES COUNTY HIGH SCHOOL
FOR THE ARTS FOUNDATION**

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Part 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? If "Yes," attach a conformed copy of the changes.	77	X
78 a	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? N/A	78b	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80 a	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 and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> 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	X
82 a	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 N/A		
83 a	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
84 a	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	X
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members? N/A	85a	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? 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.	85b	
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? N/A	85g	
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? N/A	85h	
86	501(c)(7) organizations. 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) 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 0. ; section 4955 0.		
b	501(c)(3) and 501(c)(4) organizations 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 ▶ 0.		
d	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 90b 3		
91	The books are in care of KATHLEEN ULINSKI Telephone no. 323-343-2554		
Located at ORGANIZATION ADDRESS ZIP + 4 90032			
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92 N/A		

**LOS ANGELES COUNTY HIGH SCHOOL
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Part VII Analysis of Income-Producing Activities (See page 33 of the instructions.)

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
Note: Enter gross amounts unless otherwise indicated.					
93 Program service revenue:					
a _____					
b _____					
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	4,245.	
96 Dividends and interest from securities			14	80,738.	
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	44,049.	
101 Net income or (loss) from special events			01	27,874.	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a <u>OTHER INCOME</u>			01	5,352.	
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0.		162,258.	0.
105 Total (add line 104, columns (B), (D), and (E))					162,258.

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).
▼	

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)

I am preparing this return and accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete information of which preparer has any knowledge.

Date: 1/1/05 **Brenda Barnes CFO**

Type of print name and title.

Date: 1/1/05 Check if self Preparer's SSN or PTIN

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

2004

Name of the organization **LOS ANGELES COUNTY HIGH SCHOOL
FOR THE ARTS FOUNDATION** Employer identification number **95 3938009**

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
NONE -----				

Total number of other employees paid over \$50,000 ▶	0			

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
NONE -----		

Total number of others receiving over \$50,000 for professional services ▶	0	

LOS ANGELES COUNTY HIGH SCHOOL

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 ► \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) 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.		X
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?		X
b	Lending of money or other extension of credit?		X
c	Furnishing of goods, services, or facilities?		X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE PART V, FORM 990	X	
e	Transfer of any part of its income or assets?		X
3 a	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.)	X	
b	Do you have a section 403(b) annuity plan for your employees?	X	
4 a	Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?		X
b	Do you provide credit counseling, debt management, credit repair, or debt negotiation services?		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 5 of the instructions.)

LOS ANGELES COUNTY HIGH SCHOOL

Schedule A (Form 990 or 990-EZ) 2004

FOR THE ARTS FOUNDATION

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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) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	730,480.	1,045,005.	1,438,940.	683,817.	3,898,242.
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	38,583.		61,991.	69,300.	169,874.
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	69,915.	39,454.	40,625.	167,293.	317,287.
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	3,311.	14,947.	SEE STATEMENT 13 11,061.		29,319.
23 Total of lines 15 through 22	842,289.	1,099,406.	1,552,617.	920,410.	4,414,722.
24 Line 23 minus line 17	803,706.	1,099,406.	1,490,626.	851,110.	4,244,848.
25 Enter 1% of line 23	8,423.	10,994.	15,526.	9,204.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 84,897.
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 2000 through 2003 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 1,313,642.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 4,244,848.
d Add: Amounts from column (e) for lines: 18 317,287. 19 _____ 22 29,319. 26b 1,313,642.					26d 1,660,248.
e Public support (line 26c minus line 26d total)					26e 2,584,600.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 60.8879%
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: N/A	(2003)	(2002)	(2001)	(2000)	
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: N/A	(2003)	(2002)	(2001)	(2000)	
c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					27c N/A
d Add: Line 27a total _____ and line 27b total _____					27d N/A
e Public support (line 27c total minus line 27d total)					27e N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)			27f N/A		
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h N/A %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, 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.

LOS ANGELES COUNTY HIGH SCHOOL

Part V Private School Questionnaire (See page 7 of the instructions.)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		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?		
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?		
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? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)		
<hr/> <hr/> <hr/>			
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement.)		
<hr/> <hr/> <hr/>			
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		
<hr/> <hr/> <hr/>			
34 a	Does the organization receive any financial aid or assistance from a governmental agency?		
b	Has the organization's right to such aid ever been revoked or suspended? 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		

2004 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 2

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
1	DESK AND FILE CABINET	031396SL		7.00	16	855.			855.	855.		0.
2	COMPUTER SYSTEM	121699SL		5.00	16	5,176.			5,176.	4,141.		1,035.
3	COMPUTER EQUIPMENT	110100SL		5.00	16	2,975.			2,975.	2,182.		595.
4	COMPUTER EQUIPMENT	080101SL		5.00	16	3,080.			3,080.	1,797.		616.
5	CAMERA	063003SL		5.00	16	2,218.			2,218.	444.		444.
6	FURNITURE	100703SL		7.00	16	631.			631.	68.		90.
7	COMPUTER EQUIPMENT	033005SL		5.00	16	1,531.			1,531.			77.
8	COMPUTER EQUIPMENT	051105SL		5.00	16	2,100.			2,100.			70.
9	COMPUTER EQUIPMENT	051805SL		5.00	16	1,250.			1,250.			21.
	* TOTAL 990 PAGE 2 DEPR					19,816.		0.	19,816.	9,487.	0.	2,948.

FORM 990 **GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES** **STATEMENT** **1**

DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)
INVESTMENT SECURITIES	234,294.	190,245.	0.	44,049.
TO FORM 990, PART I, LINE 8	234,294.	190,245.	0.	44,049.

FORM 990 **SPECIAL EVENTS AND ACTIVITIES** **STATEMENT** **2**

DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
SPECIAL EVENT INCOME	61,795.		61,795.	33,921.	27,874.
TO FM 990, PART I, LINE 9	61,795.		61,795.	33,921.	27,874.

FORM 990 **OTHER CHANGES IN NET ASSETS OR FUND BALANCES** **STATEMENT** **3**

DESCRIPTION	AMOUNT
NET UNREALIZED GAIN ON INVESTMENTS	95,456.
TOTAL TO FORM 990, PART I, LINE 20	95,456.

FORM 990 **OTHER EXPENSES** **STATEMENT** **4**

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
LACHSA PROGRAMMATIC SUPPORT INVESTMENT	651,609.	651,609.		
MANAGEMENT FEES	28,421.		28,421.	
INSURANCE	4,329.	2,165.	1,082.	1,082.
PUBLIC RELATIONS DUES AND SUBSCRIPTIONS	7,641.	5,731.	764.	1,146.
OUTSIDE SERVICES	2,695.	404.	943.	1,348.
MISCELLANEOUS	7,683.	3,172.	1,647.	2,864.
	3,030.	1,251.	649.	1,130.
TOTAL TO FM 990, LN 43	705,408.	664,332.	33,506.	7,570.

SCHOLARSHIP	PAUL GRAB	NONE	100.
SCHOLARSHIP	RUBEN GUEVARA	NONE	10,000.
TOTAL INCLUDED ON FORM 990, PART II, LINE 22			31,500.

FORM 990	NON-GOVERNMENT SECURITIES	STATEMENT	7
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SECURITY DESCRIPTION	COST/FMV	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	TOTAL NON-GOV'T SECURITIES
CORPORATE BONDS	FMV		150,729.		150,729.
MORTGAGE & ASSET BACKED SECURITIES	FMV			171,703.	171,703.
EQUITY SECURITIES	FMV	1,818,387.			1,818,387.
MUTUAL FUNDS	FMV			27,281.	27,281.
TO FORM 990, LINE 54, COL B		1,818,387.	150,729.	198,984.	2,168,100.

FORM 990	GOVERNMENT SECURITIES	STATEMENT	8
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DESCRIPTION	COST/FMV	U.S. GOVERNMENT	STATE AND LOCAL GOV'T	TOTAL GOV'T SECURITIES
U.S. GOVERNMENT BONDS	FMV	234,277.		234,277.
MUNICIPAL BONDS	FMV		25,905.	25,905.
TOTAL TO FORM 990, LINE 54, COL B		234,277.	25,905.	260,182.

FORM 990	DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT	STATEMENT	9
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DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
DESK AND FILE CABINET	855.	855.	0.
COMPUTER SYSTEM	5,176.	5,176.	0.
COMPUTER EQUIPMENT	2,975.	2,777.	198.
COMPUTER EQUIPMENT	3,080.	2,413.	667.
CAMERA	2,218.	888.	1,330.
FURNITURE	631.	158.	473.

COMPUTER EQUIPMENT	1,531.	77.	1,454.
COMPUTER EQUIPMENT	2,100.	70.	2,030.
COMPUTER EQUIPMENT	1,250.	21.	1,229.
TOTAL TO FORM 990, PART IV, LN 57	19,816.	12,435.	7,381.

FORM 990 OTHER SECURITIES STATEMENT 10

SECURITY DESCRIPTION	COST/FMV	OTHER SECURITIES
CERTIFICATES OF DEPOSIT	FMV	230,020.
TO FORM 990, LINE 54, COL B		230,020.

FORM 990 PART V - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES STATEMENT 11

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN-SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
CAROLINE AHMANSON	TRUSTEE EMERITUS 1	0.	0.	0.
MICHAEL ANTONOVICH	TRUSTEE EMERITUS 1	0.	0.	0.
SHEILA WEISMAN	CHAIR 1	0.	0.	0.
LINDSEY KOZBERG	SECRETARY 1	0.	0.	0.
BRENDA BARNES	CHIEF FINANCIAL OFFICER 1	0.	0.	0.
JAMES WINETT	DIRECTOR 1	0.	0.	0.

MICHAEL BLUMENFELD	DIRECTOR 1	0.	0.	0.
MARCIA WILSON HOBBS	PRESIDENT 1	0.	0.	0.
LAURIE KAMAN	DIRECTOR 1	0.	0.	0.
DELLA KOENIG	DIRECTOR 1	0.	0.	0.
CRAIG HUNEGS	DIRECTOR 1	0.	0.	0.
GAIL MATTHEWS	DIRECTOR 1	0.	0.	0.
DREW SKELLY	DIRECTOR 1	0.	0.	0.
KATHLEEN ULINSKI	EXECUTIVE DIRECTOR 40	100,000.	23,691.	0.
EDWARD KANTOR	DIRECTOR 1	0.	0.	0.
LEAH SUPERSTEIN	VICE-PRESIDENT-DEVELOPMENT 1	0.	0.	0.
HAL DAVID	DIRECTOR 1	0.	0.	0.
WALTER GRAUMAN	DIRECTOR 1	0.	0.	0.
DALE ROSENBLOOM	DIRECTOR 1	0.	0.	0.

PAUL GOTHOLD	DIRECTOR 1	0.	0.	0.
GWYN LURIE-FIRESTEIN	DIRECTOR 1	0.	0.	0.
CLIFFORD GILBERT-LURIE	VICE PRESIDENT 1	0.	0.	0.
TOTALS INCLUDED ON FORM 990, PART V		100,000.	23,691.	0.

SCHEDULE A EXPLANATION OF QUALIFICATIONS TO RECEIVE PAYMENTS STATEMENT 12
PART III, LINE 3

SCHOLARSHIP RECIPIENTS ARE SELECTED BY LOS ANGELES COUNTY HIGH SCHOOL FOR THE ARTS FACULTY OF EACH DEPARTMENT BASED ON MERIT AND, IF RELEVANT, FINANCIAL NEED.

SCHEDULE A	OTHER INCOME			STATEMENT 13
DESCRIPTION	2003 AMOUNT	2002 AMOUNT	2001 AMOUNT	2000 AMOUNT
OTHER INCOME	3,311.	14,947.	11,061.	0.
TOTAL TO SCHEDULE A, LINE 22	3,311.	14,947.	11,061.	0.