

Return of Organization Exempt From Income Tax

2005

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

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

A For the 2005 calendar year, or tax year beginning **JUL 1, 2005** and ending **JUN 30, 2006**

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 826 VALENCIA		D Employer identification number 04-3694151		
		Number and street (or P.O. box if mail is not delivered to street address) 826 VALENCIA STREET		Room/suite	E Telephone number 415-642-5778	
		City or town, state or country, and ZIP + 4 SAN FRANCISCO, CA 94110		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: **N/A**

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: **N/A**

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

G Website: **WWW.826VALENCIA.ORG**

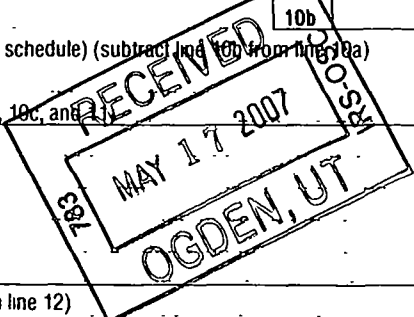
J Organization type (check only one): 501(c)(3) (insert no) 4947(a)(1) or 527

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 chooses to file a return, be sure to file a complete return. Some states require a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12: **1,214,395.**

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 b Indirect public support c Government contributions (grants) d Total (add lines 1a through 1c) (cash \$ 681,065. noncash \$ 20,074.) 2 Program service revenue including government fees and contracts (from Part VII, line 93) 3 Membership dues and assessments 4 Interest on savings and temporary cash investments 5 Dividends and interest from securities 6 a Gross rents b Less: rental expenses c Net rental income or (loss) (subtract line 6b from line 6a) 7 Other investment income (describe _____) 8 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) (attach schedule) d Net gain or (loss) (combine line 8c, columns (A) and (B)) STMT 1 9 Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/> a Gross revenue (not including \$ 43,739. of contributions reported on line 1a) b Less: direct expenses other than fundraising expenses c Net income or (loss) from special events (subtract line 9b from line 9a) 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a) STMT 3 11 Other revenue (from Part VII, line 103) 12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	1a	701,139.			
	1b				
	1c				
	1d			701,139.	
	2			90,377.	
	3				
	4			16,141.	
	5				
	6a				
	6b				
	6c				
	7				
8a	(A) Securities		(B) Other		
	129,841.	8a			
	132,793.	8b			
	<2,952.>	8c			
8d			<2,952.>		
9a		48,966.			
9b		15,041.			
9c			33,925.		
10a		227,931.			
10b		173,508.			
10c			54,423.		
11					
12			893,053.		
13			558,427.		
14			68,948.		
15			88,350.		
16					
17			715,725.		
18			177,328.		
19			783,790.		
20			147,299.		
21			1,108,417.		



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.

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 \$ <u>70,500.</u> noncash \$ <u>0.</u>) If this amount includes foreign grants, check here <input type="checkbox"/>	22	70,500.	70,500.	STATEMENT 6	
23 Specific assistance to individuals (attach schedule)	23				
24 Benefits paid to or for members (attach schedule)	24				
25 Compensation of officers, directors, etc. **	25	85,449.	64,087.	10,682.	10,680.
26 Other salaries and wages	26	241,843.	195,763.	6,413.	39,667.
27 Pension plan contributions	27				
28 Other employee benefits	28	22,128.	16,818.	1,106.	4,204.
29 Payroll taxes	29	29,894.	22,719.	1,495.	5,680.
30 Professional fundraising fees	30				
31 Accounting fees	31	27,751.		27,751.	
32 Legal fees	32				
33 Supplies	33	19,281.	15,425.	2,892.	964.
34 Telephone	34	5,926.	4,148.	593.	1,185.
35 Postage and shipping	35	2,103.	736.	526.	841.
36 Occupancy	36	62,044.	49,636.	6,204.	6,204.
37 Equipment rental and maintenance	37	8,158.	6,526.	816.	816.
38 Printing and publications	38	12,121.	9,697.	1,212.	1,212.
39 Travel	39				
40 Conferences, conventions, and meetings	40	35,504.	35,504.		
41 Interest	41				
42 Depreciation, depletion, etc. (attach schedule)	42	12,520.	7,512.	2,504.	2,504.
43 Other expenses not covered above (itemize):					
a INSURANCE	43a	5,405.	4,054.	1,351.	
b CONTRACTED LABOR	43b	6,460.	6,460.		
c MAINTENANCE/REPAIRS	43c	5,243.	5,243.		
d OTHER EXPENSES	43d	34,981.	18,931.	4,703.	11,347.
e OUTREACH	43e	6,092.	3,046.		3,046.
f LAB	43f	8,327.	8,327.		
g APPRECIATION	43g	13,995.	13,295.	700.	
44 Total functional expenses. Add lines 22 through 43 (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	715,725.	558,427.	68,948.	88,350.

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 \$ N/A ; (ii) the amount allocated to Program services \$ N/A ;
 (iii) the amount allocated to Management and general \$ N/A ; and (iv) the amount allocated to Fundraising \$ N/A

** SEE STATEMENT 5

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

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.

What is the organization's primary exempt purpose? ► SEE STATEMENT 10	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
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.)	
a SEE STATEMENT 7	
(Grants and allocations \$ 70,500.) If this amount includes foreign grants, check here ► <input type="checkbox"/>	558,427.
b SEE STATEMENT 8	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
c SEE STATEMENT 9	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
d	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
e Other program services (attach schedule)	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services) ►	558,427.

Part IV Balance Sheets (See 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	61,983.	45	11,772.	
	46 Savings and temporary cash investments	30,077.	46	411,180.	
	47 a Accounts receivable	47a 36,721.			
	b Less: allowance for doubtful accounts	47b	47c	36,721.	
	48 a Pledges receivable	48a			
	b Less: allowance for doubtful accounts	48b	48c		
	49 Grants receivable	292,186.	49	291,174.	
	50 Receivables from officers, directors, trustees, and key employees		50		
	51 a Other notes and loans receivable	51a 57,000.			
	b Less: allowance for doubtful accounts	51b	51c	57,000.	
	52 Inventories for sale or use	92,212.	52	78,750.	
	53 Prepaid expenses and deferred charges	5,498.	53	16,395.	
	54 Investments - securities	STMT 12 STMT 13 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	129,509.	54	93,682.
	55 a Investments - land, buildings, and equipment: basis	55a			
b Less: accumulated depreciation	55b	55c			
56 Investments - other	SEE STATEMENT 14	155,152.	56	159,050.	
57 a Land, buildings, and equipment basis	57a 108,930.				
b Less: accumulated depreciation	57b 56,931.	40,919.	57c	51,999.	
58 Other assets (describe ▶)			58		
59 Total assets (must equal line 74) Add lines 45 through 58		859,813.	59	1,207,723.	
Liabilities	60 Accounts payable and accrued expenses	76,023.	60	35,909.	
	61 Grants payable		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 ▶ SCHOLARSHIP PAYABLE)			65	63,397.	
66 Total liabilities. Add lines 60 through 65)		76,023.	66	99,306.	
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	491,604.	67	784,319.	
	68 Temporarily restricted	292,186.	68	324,098.	
	69 Permanently restricted		69		
	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)		783,790.	73	1,108,417.	
74 Total liabilities and net assets/fund balances. Add lines 66 and 73		859,813.	74	1,207,723.	

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

a	Total revenue, gains, and other support per audited financial statements		a	N/A
b	Amounts included on line a but not on Part I, line 12:			
1	Net unrealized gains on investments	b1		
2	Donated services and use of facilities	b2		
3	Recoveries of prior year grants	b3		
4	Other (specify):	b4		
	Add lines b1 through b4		b	
c	Subtract line b from line a		c	
d	Amounts included on Part I, line 12, but not on line a :			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify):	d2		
	Add lines d1 and d2		d	
e	Total revenue (Part I, line 12) Add lines c and d		e	

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

a	Total expenses and losses per audited financial statements		a	N/A
b	Amounts included on line a but not on Part I, line 17:			
1	Donated services and use of facilities	b1		
2	Prior year adjustments reported on Part I, line 20	b2		
3	Losses reported on Part I, line 20	b3		
4	Other (specify):	b4		
	Add lines b1 through b4		b	
c	Subtract line b from line a		c	
d	Amounts included on Part I, line 17, but not on line a :			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify):	d2		
	Add lines d1 and d2		d	
e	Total expenses (Part I, line 17) Add lines c and d		e	

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See 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 plans	(E) Expense account and other allowances
NINIVE CALEGARI C/O 826 VALENCIA STREET SAN FRANCISCO, CA 94110	PRESIDENT/EXEC. DIR. 40.00	82,917.	2,532.	0.
JENNIFER BUNSHOFT C/O 826 VALENCIA STREET SAN FRANCISCO, CA 94110	VICE PRESIDENT 4.00	0.	0.	0.
VENDELA VIDA C/O 826 VALENCIA STREET SAN FRANCISCO, CA 94110	SECRETARY 1.00	0.	0.	0.
RICHARD WOLFGRAM C/O 826 VALENCIA STREET SAN FRANCISCO, CA 94110	TREASURER 1.00	0.	0.	0.
BARBARA BERSCHE C/O 826 VALENCIA STREET SAN FRANCISCO, CA 94110	TRUSTEE 1.00	0.	0.	0.
DAVE EGGERS C/O 826 VALENCIA STREET SAN FRANCISCO, CA 94110	TRUSTEE 1.00	0.	0.	0.
ALEXANDRA QUINN C/O 826 VALENCIA STREET SAN FRANCISCO, CA 94110	TRUSTEE 1.00	0.	0.	0.

Part VI Other Information (continued)	Yes	No
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	64,125.
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	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? 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	N/A
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) 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 ▶ CA		
b Number of employees employed in the pay period that includes March 12, 2005	90b	13
91 a The books are in care of ▶ THE ORGANIZATION Telephone no. ▶ 415-642-5778 Located at ▶ 826 VALENCIA STREET, SAN FRANCISCO, CA ZIP + 4 ▶ 94110		
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶ N/A See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	91b	X
c At any time during the calendar year, did the organization maintain an office outside of the United States? If "Yes," enter the name of the foreign country ▶ N/A	91c	X
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 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	
93 Program service revenue:					
a PROGRAM FEES					90,377.
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	16,141.	
96 Dividends and interest from securities					
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	<2,952.>	
101 Net income or (loss) from special events			01	33,925.	
102 Gross profit or (loss) from sales of inventory	453220	7,222.	05	47,201.	
103 Other revenue:					
a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		7,222.		94,315.	90,377.
105 Total (add line 104, columns (B), (D), and (E))					191,914.

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 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).
93	ADULTS WHO DO NOT QUALIFY FOR THE ORGANIZATION'S FREE STUDENT PROGRAMS PAY A FEE TO ATTEND WORKSHOPS TAUGHT BY ACCOMPLISHED AUTHORS IN THE COMMUNITY. WORKSHOPS PROMOTE THE ORGANIZATION'S MISSION OF EDUCATION AND PROMOTION OF WRITING.

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

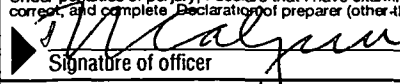
(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			


Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See 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).

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.

Please Sign Here:  Signature of officer Date: 5.3.07 NINIVE CALEGARI, EXECUTIVE DIR

Paid Preparer's Use Only:  Preparer's signature Date: 5/2/07 Check if self-employed: Preparer's SSN or PTIN: _____

Firm's name (or yours if self-employed), address, and ZIP + 4: ARMANINO MCKENNA LLP
12667 ALCOSTA BOULEVARD, SUITE 500
SAN RAMON, CA 94583-4427

EIN: _____ Phone no.: (925) 790-2600

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 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

2005

Name of the organization **826 VALENCIA** Employer identification number **04 3694151**

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
LEIGH LEHMAN 826 VALENCIA STREET, SAN FRANCISCO, CA	DEV DIR 40.00	57,561.	3,579.	0.
ERIN NEELEY 826 VALENCIA STREET, SAN FRANCISCO, CA	PROG DIR 40.00	50,366.	2,882.	0.

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

Part II-A 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	

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of other contractors receiving over \$50,000 for other services ▶	0	

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? SEE STATEMENT 17	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-A, 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.) SEE STATEMENT 16	X	
	b Do you have a section 403(b) annuity plan for your employees?	X	
	c During the year, did the organization receive a contribution of qualified real property interest under section 170(h)?		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) sections 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). Check the box that describes the type of supporting organization: ► Type 1 Type 2 Type 3

Provide the following information about the supported organizations. (See page 6 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) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	732,433.	485,652.	289,214.		1,507,299.
16 Membership fees received			0.		
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	280,883.	183,098.	71,077.		535,058.
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	5,165.	203.	68.		5,436.
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					
23 Total of lines 15 through 22	1,018,481.	668,953.	360,359.	0.	2,047,793.
24 Line 23 minus line 17	737,598.	485,855.	289,282.		1,512,735.
25 Enter 1% of line 23	10,185.	6,690.	3,604.		
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 30,255.
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 2001 through 2004 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 370,183.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 1,512,735.
d Add: Amounts from column (e) for lines: 18 5,436. 19 22 370,183.					26d 375,619.
e Public support (line 26c minus line 26d total)					26e 1,137,116.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 75.1695%
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					
(2004) (2003) (2002) (2001)					
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 11b, 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					
(2004) (2003) (2002) (2001)					
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 2001 through 2004, 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.					NONE

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.)		

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? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)	32d	

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? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)	33h	

34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b	
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	

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)
SALE/MATURITIES OF INVESTMENTS	129,841.	132,793.	0.	<2,952.>
TO FORM 990, PART I, LINE 8	129,841.	132,793.	0.	<2,952.>

FORM 990 SPECIAL EVENTS AND ACTIVITIES STATEMENT 2

DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
COMEDY NIGHT	40,025.	20,012.	20,013.	7,731.	12,282.
PIXAR SCREEN	42,000.	21,000.	21,000.	1,279.	19,721.
AUCTION AND ART SALE	5,658.	0.	5,658.	3,969.	1,689.
OTHER	5,022.	2,727.	2,295.	2,062.	233.
TO FM 990, PART I, LINE 9	92,705.	43,739.	48,966.	15,041.	33,925.

FORM 990

INCOME AND COST OF GOODS SOLD
INCLUDED ON PART I, LINE 10

STATEMENT 3

INCOME

1. GROSS RECEIPTS	227,931	
2. RETURNS AND ALLOWANCES		
3. LINE 1 LESS LINE 2		227,931
4. COST OF GOODS SOLD (LINE 13)	173,508	
5. GROSS PROFIT (LINE 3 LESS LINE 4)		54,423

COST OF GOODS SOLD

6. INVENTORY AT BEGINNING OF YEAR	92,212	
7. MERCHANDISE PURCHASED	114,396	
8. COST OF LABOR		
9. MATERIALS AND SUPPLIES		
10. OTHER COSTS	45,650	
11. ADD LINES 6 THROUGH 10		252,258
12. INVENTORY AT END OF YEAR	78,750	
13. COST OF GOODS SOLD (LINE 11 LESS LINE 12)		173,508

FORM 990	OTHER CHANGES IN NET ASSETS OR FUND BALANCES	STATEMENT	4
DESCRIPTION		AMOUNT	
UNREALIZED GAIN(LOSS) ON INVESTMENTS		<2,701.>	
PRIOR PERIOD ADJUSTMENT - NON UBI		150,000.	
TOTAL TO FORM 990, PART I, LINE 20		147,299.	

FORM 990

OFFICER COMPENSATION ALLOCATION
PART II, LINE 25

STATEMENT 5

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
NINIVE CALEGARI	82,917.	2,532.		85,449.
A. PROGRAM SERVICES	62,188.	1,899.		64,087.
B. MANAGEMENT AND GENERAL	10,365.	317.		10,682.
C. FUNDRAISING	10,364.	316.		10,680.
TOTAL PROGRAM SERVICES				64,087.
TOTAL MANAGEMENT AND GENERAL				10,682.
TOTAL FUNDRAISING				10,680.
TOTAL OFFICER, ETC., COMPENSATION INCLUDED ON PARTS V-A AND V-B				85,449.

FORM 990

CASH GRANTS AND ALLOCATIONS

STATEMENT 6

CLASSIFICATION	DONEE'S NAME	DONEE'S ADDRESS	DONEE'S RELATIONSHIP	AMOUNT
SCHOLARSHIPS AND TEACHER OF THE MONTH	VARIOUS		NONE	45,500.
GENERAL SUPPORT	826 NEW YORK	372 FIFTH AVENUE, BROOKLYN, NY 11215	AFFILIATE	5,000.
GENERAL SUPPORT	826 LOS ANGELES	SPARC BUILDING, 685 VENICE BLVD, 2ND FL, VENICE, CA	AFFILIATE	5,000.
GENERAL SUPPORT	826 CHICAGO	1331 NORTH MILWAUKEE AVE, CHICAGO, IL 60622	AFFILIATE	5,000.
GENERAL SUPPORT	826 SEATTLE	8414 GREENWOOD AVENUE, SEATTLE, WA 98103	AFFILIATE	5,000.

GENERAL
SUPPORT

826 MICHIGAN

2245 SOUTH STATE AFFILIATE
STREET, ANN ARBOR,
MI 48104

5,000.

TOTAL INCLUDED ON FORM 990, PART II, LINE 22

70,500.

FORM 990

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

STATEMENT

7

DESCRIPTION OF PROGRAM SERVICE ONE

OUR SERVICES ARE STRUCTURED AROUND THE UNDERSTANDING THAT GREAT LEAPS IN LEARNING CAN HAPPEN WITH ONE-ON-ONE ATTENTION AND THAT STRONG WRITING SKILLS ARE FUNDAMENTAL TO FUTURE SUCCESS. WITH THIS IN MIND, WE PROVIDE DROP-IN TUTORING, FIELD TRIPS, WRITING WORKSHOPS, IN-SCHOOLS TUTORING, HELP FOR ENGLISH LANGUAGE LEARNERS, AND ASSISTANCE WITH STUDENT PUBLICATIONS. ALL OF OUR PROGRAMS ARE CHALLENGING AND ENJOYABLE AND ULTIMATELY STRENGTHEN EACH STUDENT'S POWER TO EXPRESS IDEAS EFFECTIVELY, CREATIVELY, CONFIDENTLY AND IN HIS OR HER INDIVIDUAL VOICE.

TO FORM 990, PART III, LINE A

GRANTS

EXPENSES

70,500.

558,427.

DESCRIPTION OF PROGRAM SERVICE TWO

826 VALENCIA ALSO PUBLISHES STUDENT WORK IN A VARIETY OF FORMS AS PART OF OUR COMMITMENT TO PROJECT-BASED LEARNING. WE PRODUCE TWO STUDENT-RUN NEWSPAPERS WITH ASSISTANCE FROM PROFESSIONAL JOURNALISTS WHO SERVE AS MENTORS TO THE STUDENT WRITERS AND EDITORS. WE ALSO COLLECT STUDENT WRITING FROM ALL OF OUR DIFFERENT PROGRAMS, AS WELL AS FROM AN OPEN CALL FOR SUBMISSIONS, AND PUBLISH THEM AT LEAST TWICE A YEAR IN A PROFESSIONALLY EDITED AND PUBLISHED BOOK. IN ADDITION, EACH YEAR WE INVITE AN INFLUENTIAL AND WELL-KNOWN MENTOR TO PARTNER WITH A LOCAL SCHOOL TO SPONSOR A PROFESSIONALLY-PUBLISHED ANTHOLOGY OF STUDENT WORK ON A TOPIC INSPIRED BY OUR COLLABORATING TEACHERS' FAVORITE LESSON PLANS. FINALLY, WE PRODUCE HUNDREDS OF SMALLER CHAPBOOKS, 'ZINES, AND OTHER COLLECTIONS OF WRITINGS EACH YEAR THROUGH OUR IN-SCHOOLS, FIELD TRIP, AND WORKSHOP PROGRAMS.

GRANTS

EXPENSES

TO FORM 990, PART III, LINE B

FORM 990	NON-GOVERNMENT SECURITIES	STATEMENT 12
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SECURITY DESCRIPTION	COST/FMV	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	TOTAL NON-GOV'T SECURITIES
CORPORATE BONDS	FMV		69,815.		69,815.
TOTAL TO FORM 990, LINE 54, COL B			69,815.		69,815.

FORM 990	GOVERNMENT SECURITIES	STATEMENT 13
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DESCRIPTION	COST/FMV	U.S. GOVERNMENT	STATE AND LOCAL GOV'T	TOTAL GOV'T SECURITIES
GOVERNMENT BONDS	FMV	23,867.		23,867.
TOTAL TO FORM 990, LINE 54, COL B		23,867.		23,867.

FORM 990	OTHER INVESTMENTS	STATEMENT 14
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DESCRIPTION	VALUATION METHOD	AMOUNT
MONEY MARKET FUNDS	MARKET VALUE	159,050.
TOTAL TO FORM 990, PART IV, LINE 56, COLUMN B		159,050.

FORM 990

EXPLANATION OF RELATIONSHIP
PART V-A, LINE 75B

STATEMENT 15

INDIVIDUAL'S NAME

TITLE OR ROLE

VENDELA VIDA

SECRETARY

INDIVIDUAL'S NAME

TITLE OR ROLE

DAVE EGGERS

TRUSTEE

EXPLANATION OF RELATIONSHIP

MARRIED

SCHEDULE A

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

STATEMENT 16

SCHOLARSHIPS ARE GRANTED TO GRADUATING SENIORS WHO LIVE IN THE BAY AREA AND HAVE EXTRACURRICULAR INTEREST IN THE WRITTEN WORD. THE RECIPIENTS MUST ALSO DEMONSTRATE FINANCIAL NEED AND INTENT TO ENROLL IN AN INSTITUTION OF HIGHER LEARNING, WHICH COULD BE A 2- OR 4- YEAR COLLEGE OR VOCATION SCHOOL. THE SCHOLARSHIPS ARE ONE-TIME GRANTS OF \$10,000. DIFFERENT STUDENTS ARE AWARDED THE GRANT EACH YEAR.

SCHEDULE A

EXPLANATION OF TRANSACTIONS
PART III, LINE 2A

STATEMENT 17

826 VALENCIA OBTAINS THE USE OF ITS SPACE PURSUANT TO A SUBLEASE ARRANGEMENT ENTERED INTO WITH MCSWEENEY'S PUBLISHING, LLC (MCSWEENEY'S). MR. DAVE EGGERS AND MS. BARBARA BERSCHE ARE BOARD MEMBERS OF 826 VALENCIA. MR. EGGERS IS A MAJORITY OWNER OF MCSWEENEY'S. MS. BERSCHE IS THE PRESIDENT OF MCSWEENEY'S. IN ORDER TO OBTAIN THE LANDLORD'S CONSENT TO THE SUBLEASE ARRANGEMENT, MCSWEENEY'S GUARANTEED 826 VALENCIA'S PAYMENT OF THE RENT. 826 VALENCIA ALSO RECEIVES DONATIONS OF BOOKS FROM MCSWEENEY'S.