

2010

California Exempt Organization Annual Information Return

199

Calendar Year 2010 or fiscal year beginning month JULY day 1 year 2010, and ending month JUNE day 30 year 2011.

A First Return Filed? [X] No [] Yes B Type of organization Exempt under Section 23701 d (insert letter) IRC Section 4947(a)(1) trust []

CORP # 1940430

Corporation/Organization Name CALIFORNIA HEAD START ASSOCIATION Address 1107 9TH ST., NO. 810

FEIN 77-0412315

City SACRAMENTO State CA ZIP Code 95814

C Amended Return? [] Yes [X] No D Are you a subordinate/affiliate in a group exemption? [] Yes [X] No

(a) Is this a group filing for affiliates? [] Yes [] No (b) If "Yes," enter the number of affiliates (c) Are all affiliates included? [] Yes [] No

(d) Is this a separate return filed by an organization covered by a group ruling? [] Yes [] No (e) Federal Group Exemption Number (f) Is a roster of subordinates attached? [] Yes [] No

E Final return? [] Dissolved [] Surrendered (Withdrawn) [] Merged/Reorganized (attach explanation)

F Check the box if the organization filed the following federal forms or schedule: (1) [] 990T (2) [] 990PF (3) [] (Schedule H) 990

G If organization is exempt under R&TC Section 23701d and is exclusively religious, educational, or charitable, and is supported primarily (50% or more) by public contributions, check box. See General Instruction F. No filing fee is required. []

H Accounting method used (1) [] Cash (2) [X] Accrual (3) [] Other

I If exempt under R&TC Section 23701d, has the organization during the year: (1) participated in any political campaign or (2) attempted to influence legislation or any ballot measure, or (3) made an election under R&TC Section 23704.5 (relating to lobbying by public charities)? If "Yes," complete and attach form FTB 3509, Political or Legislative Activities by Section 23701d Organizations [] Yes [X] No

J Did the organization have any changes in its activities, governing instrument, articles of incorporation, or bylaws that have not been reported to the Franchise Tax Board? If "Yes," complete an explanation and attach copies of revised documents [] Yes [X] No

K Is the organization exempt under R&TC Section 23701g? [] Yes [X] No If "Yes," enter amount of gross receipts from nonmember sources \$

L Is the organization under audit by the IRS or has the IRS audited in a prior year? [] Yes [X] No

M Is the organization a Limited Liability Company? [] Yes [X] No

N Did the organization file Form 100 or Form 109 to report taxable income? [] Yes [X] No

Part I Complete Part I unless not required to file this form. See General Instructions B and C.

Table with 15 rows for Receipts and Revenues, Expenses, and Filing Fee. Includes columns for line number, description, and amount.

Sign Here 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 taxpayer) is based on all information of which preparer has any knowledge.

Part II Organizations with gross receipts of more than \$25,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information. See Specific Line Instructions.

028951 12-16-10

Receipts from Other Sources	1	Gross sales or receipts from all business activities. See instructions	•	1	00
	2	Interest	•	2	00
	3	Dividends	•	3	00
	4	Gross rents	•	4	00
	5	Gross royalties	•	5	00
	6	Gross amount received from sale of assets (See instructions)	•	6	00
	7	Other income	•	7	622,442.00
	8	Total gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1		8	622,442.00
Expenses and Disbursements	9	Contributions, gifts, grants, and similar amounts paid	•	9	00
	10	Disbursements to or for members	•	10	00
	11	Compensation of officers, directors, and trustees	•	11	85,000.00
	12	Other salaries and wages	•	12	162,838.00
	13	Interest	•	13	18.00
	14	Taxes	•	14	19,712.00
	15	Rents	•	15	44,048.00
	16	Depreciation and depletion (See instructions)	•	16	00
	17	Other	•	17	515,523.00
	18	Total expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9		18	827,139.00

Schedule L Balance Sheets		Beginning of taxable year		End of taxable year	
		(a)	(b)	(c)	(d)
Assets					
1	Cash		240,254.	•	295,809.
2	Net accounts receivable		9,037.	•	3,995.
3	Net notes receivable			•	
4	Inventories			•	
5	Federal and state government obligations			•	
6	Investments in other bonds			•	
7	Investments in stock			•	
8	Mortgage loans (number of loans _____)			•	
9	Other investments			•	
10	a Depreciable assets	13,247.		15,417.	
	b Less accumulated depreciation	(960.)	12,287. (5,945.)		9,472.
11	Land			•	
12	Other assets STMT 5		32,525.	•	32,416.
13	Total assets		294,103.		341,692.
Liabilities and net worth					
14	Accounts payable		33,409.	•	30,583.
15	Contributions, gifts, or grants payable			•	
16	Bonds and notes payable			•	
17	Mortgages payable			•	
18	Other liabilities STMT 6		36,875.		93,002.
19	Capital stock or principle fund			•	
20	Paid-in or capital surplus. Attach reconciliation			•	
21	Retained earnings or income fund		223,819.	•	218,107.
22	Total liabilities and net worth		294,103.		341,692.

Schedule M-1 Reconciliation of income per books with income per return			
Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$25,000			
1	Net income per books	•	-5,712.
2	Federal income tax	•	
3	Excess of capital losses over capital gains	•	
4	Income not recorded on books this year	•	
5	Expenses recorded on books this year not deducted in this return	•	
6	Total. Add line 1 through line 5		-5,712.
7	Income recorded on books this year not included in this return	•	
8	Deductions in this return not charged against book income this year	•	
9	Total. Add line 7 and line 8		
10	Net income per return. Subtract line 9 from line 6		-5,712.

FORM 199 CASH CONTRIBUTIONS OF \$5000 OR MORE INCLUDED ON PART I, LINE 3 STATEMENT 1

CONTRIBUTOR'S NAME	CONTRIBUTOR'S ADDRESS	DATE OF GIFT	AMOUNT
DAVID AND LUCILE PACKARD FOUNDATION	300 SECOND ST. LOS ALTOS, CA, 94022		40,000.
TOTAL INCLUDED ON LINE 3			40,000.

FORM 199 OTHER INCOME STATEMENT 2

DESCRIPTION	AMOUNT
CONFERENCES & SEMINARS	546,836.
SPONSORSHIPS & ADVERTISING	70,251.
CONSULTING & OTHER	5,355.
TOTAL TO FORM 199, PART II, LINE 7	622,442.

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FORM 199 COMPENSATION OF OFFICERS, DIRECTORS AND TRUSTEES STATEMENT 3

NAME AND ADDRESS	TITLE AND AVERAGE HRS WORKED/WK	COMPENSATION
KATHLEEN WERNERT 1107 9TH ST. , NO. 810 SACRAMENTO, CA 95814	PRESIDENT 0.00	0.
BRENDA POTEETE 1107 9TH ST. , NO. 810 SACRAMENTO, CA 95814	VICE PRESIDENT 0.00	0.
PAMM SHAW 1107 9TH ST. , NO. 810 SACRAMENTO, CA 95814	SECRETARY 0.00	0.
WASSY TESFA 1107 9TH ST. , NO. 810 SACRAMENTO, CA 95814	TREASURER 0.00	0.
DAMON CARSON 1107 9TH ST. , NO. 810 SACRAMENTO, CA 95814	CLUSTER I REP 0.00	0.
KEESHA WOODS 1107 9TH ST. , NO. 810 SACRAMENTO, CA 95814	CLUSTER II REP 0.00	0.
RAYMOND HERNANDEZ 1107 9TH ST. , NO. 810 SACRAMENTO, CA 95814	CLUSTER III REP 0.00	0.
ALICIA RAMIREZ 1107 9TH ST. , NO. 810 SACRAMENTO, CA 95814	CLUSTER IV REP 0.00	0.
ESTER RUBIO 1107 9TH ST. , NO. 810 SACRAMENTO, CA 95814	CLUSTER V REP 0.00	0.
ESTER RUBIO 1107 9TH ST. , NO. 810 SACRAMENTO, CA 95814	CLUSTER V REP 0.00	0.
NAOMI Q MIZUMOTO 1107 9TH ST. , NO. 810 SACRAMENTO, CA 95814	CLUSTER VI REP 0.00	0.

SIDDIQ KILKENNY 1107 9TH ST. , NO. 810 SACRAMENTO, CA 95814	CLUSTER VII REP 0.00	0.
CARLA CLARK 1107 9TH ST. , NO. 810 SACRAMENTO, CA 95814	CLUSTER VIII REP 0.00	0.
DENYSE CARDOZA 1107 9TH ST. , NO. 810 SACRAMENTO, CA 95814	CLUSTER IX REP 0.00	0.
DEBORAH CLIPPER 1107 9TH ST. , NO. 810 SACRAMENTO, CA 95814	MIGRANT HEAD START REP 0.00	0.
KAREN GONZALES 1107 9TH ST. , NO. 810 SACRAMENTO, CA 95814	STAFF REP 0.00	0.
JENNY PETTIT 1107 9TH ST. , NO. 810 SACRAMENTO, CA 95814	STAFF REP 0.00	0.
KEVIN SMITH 1107 9TH ST. , NO. 810 SACRAMENTO, CA 95814	STAFF REP 0.00	0.
KEVA WAUGH 1107 9TH ST. , NO. 810 SACRAMENTO, CA 95814	PARENT REP 0.00	0.
SOPHIA WAUGH 1107 9TH ST. , NO. 810 SACRAMENTO, CA 95814	FRIEND REP 0.00	0.
TOTAL TO FORM 199, PART II, LINE 11		0.

FORM 199	OTHER EXPENSES	STATEMENT	4
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DESCRIPTION	AMOUNT
PAYMENTS TO AFFILIATES	4,540.
OTHER EMPLOYEE BENEFITS	42,662.
MANAGEMENT FEES	20,375.
ACCOUNTING FEES	13,188.
OTHER PROFESSIONAL FEES	14,775.
ADVERTISING AND PROMOTION	715.
OFFICE EXPENSES	36,109.
INFORMATION TECHNOLOGY	1,037.

TRAVEL	20,364.
CONFERENCES AND CONVENTIONS	355,572.
INSURANCE	6,186.
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TOTAL TO FORM 199, PART II, LINE 17	515,523.
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FORM 199	OTHER ASSETS	STATEMENT	5
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DESCRIPTION	BEG. OF YEAR	END OF YEAR
PLEDGES AND GRANTS RECEIVABLE	23,689.	17,454.
PREPAID EXPENSES AND DEFERRED CHARGES	8,836.	14,962.
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TOTAL TO FORM 199, SCHEDULE L, LINE 12	32,525.	32,416.
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FORM 199	OTHER LIABILITIES	STATEMENT	6
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DESCRIPTION	BEG. OF YEAR	END OF YEAR
DEFERRED LEASE INCENTIVE	6,279.	9,468.
DEFERRED REVENUE	30,596.	83,534.
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TOTAL TO FORM 199, SCHEDULE L, LINE 18	36,875.	93,002.
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FORM 199	FUND BALANCES	STATEMENT	7
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DESCRIPTION	BEG. OF YEAR	END OF YEAR
UNRESTRICTED ASSETS	223,819.	218,107.
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TOTAL TO FORM 199, SCHEDULE L, LINE 21	223,819.	218,107.
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