Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

6

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service

Open to Public Inspection

OMB No. 1545-0047

Α	For th	e 2016 calendar year, or tax year beginning JUL 1, 2016 and e	ending J	UN 30, 2017		
В	Check if applicab	C Name of organization PERFORMING ARTS CENTER OF		D Employer identific	cation number	
	Addre					
	Name chan	Doing business as		95-221	7011	
	Initial returr	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	r	
	Final return	135 NORTH GRAND AVENUE		(213)	972-7211	
	termi ated			G Gross receipts \$	61,581,604.	
	Amer returr	ded LOS ANGELES, CA 90012		H(a) Is this a group re	eturn	
	Appli	F Name and address of principal officer: RACHED MOCKE		for subordinates	? Yes X No	
	pend	SAME AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No	
I	Tax-ex	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) ol	r 527	If "No," attach a	list. (see instructions)	
J	Websi	te: WWW.MUSICCENTER.ORG		H(c) Group exemption	n number 🕨	
		forganization: X Corporation Trust Association Other	L Year	of formation: 1961 N	State of legal domicile; CA	
Р	art I	Summary				
ø	1	Briefly describe the organization's mission or most significant activities: SEE SCH	EDULE O			
Governance						
ern	2	Check this box if the organization discontinued its operations or dispose				
90	3	Number of voting members of the governing body (Part VI, line 1a)			44	
જ	4	Number of independent voting members of the governing body (Part VI, line 1b) $$			43	
ties		Total number of individuals employed in calendar year 2016 (Part V, line 2a)			1292	
Activities	6	Total number of volunteers (estimate if necessary)		6	564	
Ac		Total unrelated business revenue from Part VIII, column (C), line 12			15,176.	
_	b	Net unrelated business taxable income from Form 990-T, line 34	······		12,758.	
		0 17 17 17 17 17 17 17 17 17 17 17 17 17	-	Prior Year	Current Year	
ne	8	Contributions and grants (Part VIII, line 1h)		9,766,317. 37,422,808.	15,826,262.	
Revenue	9	Program service revenue (Part VIII, line 2g)		3,723,120.	40,708,265.	
Be	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		2,520,413.	1,239,645. 2,678,218.	
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		53,432,658.	60,452,390.	
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3)		920,882.	837,836.	
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.	
'n	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		24,738,486.	27,686,271.	
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		67,308.	65,833.	
per	b	Total fundraising expenses (Part IX, column (D), line 25)		, , , , , ,		
ŭ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		25,269,796.	27,947,089.	
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		50,996,472.	56,537,029.	
	19	Revenue less expenses. Subtract line 18 from line 12		2,436,186.	3,915,361.	
Or Sec	3	·	Ве	ginning of Current Year	End of Year	
sets	20	Total assets (Part X, line 16)		87,594,551.	95,649,674.	
L Ass	21	Total liabilities (Part X, line 26)		44,093,417.	41,368,784.	
Net Assets or	22	Net assets or fund balances. Subtract line 21 from line 20		43,501,134.	54,280,890.	
Р	art II					
		alties of perjury, I declare that I have examined this return, including accompanying schedules			y knowledge and belief, it is	
true	e, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of whi	ich preparer	has any knowledge.		
		Cignoture of officer		Data		
Sig	yn	Signature of officer		Date		
He	re	RACHEL MOORE, PRESIDENT AND CEO Type or print name and title				
				Date Check	PTIN	
Do:	id	Print/Type preparer's name Preparer's signature TOP WITH TABLE TO THE PROPERTY OF THE PROPER		f (10 (10		
Pai		LIOR TEMKIN LIOR TEMKIN	0 ک	5/10/18 self-employe		
	parer e Only	Firm's name SINGERLEWAK LLP	Firm's EIN > 95-2302617			
051	Unity	Firm's address 10960 WILSHIRE BLVD. STE 700 LOS ANGELES, CA 90024-3783		Dhono no /21	0) 477-3924	
N/a	ıv tha l	RS discuss this return with the preparer shown above? (see instructions)		LUINIE IIO. (31	X Yes No	
IVIC	ויי נוו כ ו	no alboado uno retarri witir une preparer oriewir abeve: (See Iliotructiono)			163 140	

Form **990** (2016)

49,863,520.

Total program service expenses

		-	Yes	N
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	╙
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	L
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		1
1	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
;	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			T
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		l
,	Did the organization receive or hold a conservation easement, including easements to preserve open space,	٣		t
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
		\vdash		╁
3	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Х	
	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			Π
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		
)	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			t
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		
	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			H
_	as applicable.			l
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	١ ا	37	
	Part VI	11a	X	╀
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			l
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	L
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		L
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			T
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
) a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	Н		t
·u		12a	Х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	IZa	21	╁
D				
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		L
}	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Ļ
a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		L
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			l
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			l
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		L
,	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			Γ
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		
;	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			T
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		
	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	- <u>`</u> -		t
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	47	х	
		17	- 21	+
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	ا ــر ا	77	
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	\vdash
)	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		

o∩a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	Yes	No X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
1	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
2	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
3	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
4a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a	Х	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Х
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		Х
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Х
Ба	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		2
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			ĺ
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			ĺ
	Schedule L, Part I	25b		2
6	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			ĺ
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		_ 2
7	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		2
3	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		2
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		_ 2
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			١.
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		
)	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	⊢
)	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			١.
	contributions? If "Yes," complete Schedule M	30		2
1	Did the organization liquidate, terminate, or dissolve and cease operations?			١.
	If "Yes," complete Schedule N, Part I	31		2
2	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			١.
	Schedule N, Part II	32		
3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			١,
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		2
4	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		37	ĺ
_	Part V, line 1	34	X	⊢
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	⊢
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			Ι,
•	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		2
3	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			١,
,	If "Yes," complete Schedule R, Part V, line 2	36		2
7	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	27		١,
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		
8	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	20	Х	
	Note. All Form 990 filers are required to complete Schedule O	38	990	_

| Part V | Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		Ш
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	5		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	3		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 129	2		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Х	
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b	Х	
4a	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)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	, , , , , , , , , , , , , , , , , , , ,	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	١		
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		v	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	70	x	
A	If "Yes," indicate the number of Forms 8282 filed during the year 7d 1	7c	Α .	
a		7e		Х
e •	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f	<u> </u>	X
f g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
9 h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	79 7h		\vdash
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	/		
Ū	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	_		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans	4		
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<u> </u>	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	. 000	(0010)
		rorm	1 990	(ZU Ib)

Form 990 (2016) LOS ANGELES COUNTY

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

1a b 2	ction A. Governing Body and Management			
1a b 2				
b 2			Yes	No
b 2	Enter the number of voting members of the governing body at the end of the tax year 1a 44			
2	If there are material differences in voting rights among members of the governing body, or if the governing			
2	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
•	officer, director, trustee, or key employee?	2	х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a				
	more members of the governing body?	7a		х
b				
-	persons other than the governing body?	7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а		8a	х	
b		8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		х
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a		12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
	Did the organization have a written document retention and destruction policy?	4.4	1	
14		14	Х	
14 15	Did the process for determining compensation of the following persons include a review and approval by independent	14	_	
	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	14	_	
		14 15a	_	
15 a	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		Х	
15 a	persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	15a	X	
15 a b	persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	15a	X	
15 a b	persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	15a	X	X
15 a b	persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	15a 15b	X	X
15 a b	persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	15a 15b	X	X
15 a b 16a b	persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	15a 15b	X	х
15 a b 16a b	persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	15a 15b	X	х
15 a b 16a b	persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	15a 15b	X	х
15 a b 16a b	persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Extion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) and section 501(c)(3)s only) are successive to the states with the states with which a copy of this Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are successive to the states with the states with which a copy of this Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are successive to the states with the states with which a copy of this Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are successive to the states with the states with the states with the states with which a copy of this Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are successive to the states with	15a 15b 16a	X X X	X
15 a b 16a b Sec 17	persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Etion C. Disclosure List the states with which a copy of this Form 990 is required to be filed CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a for public inspection. Indicate how you made these available. Check all that apply.	15a 15b 16a	X X X	X
15 a b 16a b Sec 17	persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Etion C. Disclosure List the states with which a copy of this Form 990 is required to be filed CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) afor public inspection. Indicate how you made these available. Check all that apply. X Other (explain in Schedule O)	15a 15b 16a 16b	x x x	X
15 a b 16a b Sec 17	persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Etion C. Disclosure List the states with which a copy of this Form 990 is required to be filed CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a for public inspection. Indicate how you made these available. Check all that apply.	15a 15b 16a 16b	x x x	X
15 a b 16a b Sec 17 18	persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Extion C. Disclosure List the states with which a copy of this Form 990 is required to be filed CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) afor public inspection. Indicate how you made these available. Check all that apply. X Own website X Another's website X Upon request X Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and statements available to the public during the tax year.	15a 15b 16a 16b	x x x	X
15 a b 16a b Sec 17 18	persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Extion C. Disclosure List the states with which a copy of this Form 990 is required to be filed CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are for public inspection. Indicate how you made these available. Check all that apply. X Own website X Another's website X Upon request X Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records:	15a 15b 16a 16b	x x x	X
15 a b 16a b Sec 17 18	persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Extion C. Disclosure List the states with which a copy of this Form 990 is required to be filed CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) afor public inspection. Indicate how you made these available. Check all that apply. X Own website X Another's website X Upon request X Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and statements available to the public during the tax year.	15a 15b 16a 16b	x x x	X

LOS ANGELES COUNTY

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)	(D)	T		14					/=\	(F)
(A)	(B)			Pos	C)	,		(D)	(E)	(F)
Name and Title	Average			check	more	than		Reportable	Reportable	Estimated
	hours per			ess pe				compensation	compensation	amount of
	week	-					Ė	from the	from related organizations	other
	(list any hours for	direct						organization	(W-2/1099-MISC)	compensation from the
	related	3e or 0	stee			ısate		(W-2/1099-MISC)	(** 2/ 1033 141100)	organization
	organizations	trust	al tru		yee	mbel				and related
	below	Individual trustee or director	Institutional trustee	l a	Key employee	Highest compensated employee	Je.			organizations
	line)	Indiv	Instil	Officer	Key 6	High emp	Former			
(1) ROBERT J. ABERNETHY	1.00									
OFFICER - VICE CHAIR		Х		Х				0.	0.	0.
(2) WILLIAM H. AHMANSON	1.00									
DIRECTOR		Х						0.	0.	0.
(3) WALLIS ANNENBERG	1.00									
DIRECTOR		Х						0.	0.	0.
(4) JILL BALDUF	1.00									
DIRECTOR		Х						0.	0.	0.
(5) DARRELL BROWN	1.00									
DIRECTOR		Х						0.	0.	0.
(6) KIMAADA BROWN	1.00									
DIRECTOR		Х						0.	0.	0.
(7) DANNIELLE CAMPOS	1.00									
DIRECTOR		Х						0.	0.	0.
(8) GREG GEYER	1.00									
DIRECTOR		Х						0.	0.	0.
(9) LISA GILFORD	1.00									
DIRECTOR		Х						0.	0.	0.
(10) DAVID GINDLER	1.00									
DIRECTOR		Х						0.	0.	0.
(11) KIKI GINDLER	1.00									
DIRECTOR		Х						0.	0.	0.
(12) BRINDELL GOTTLIEB	1.00									
DIRECTOR		Х						0.	0.	0.
(13) MARIA ROSARIO JACKSON	1.00									
DIRECTOR		Х						0.	0.	0.
(14) GLENN KAINO	1.00									
DIRECTOR		Х						0.	0.	0.
(15) ARTHUR D. KRAUS	1.00									
DIRECTOR		Х		L				0.	0.	0.
(16) CARY LEFTON	1.00									
DIRECTOR		Х	L	L	L	L	L	0.	0.	0.
(17) DAVID LIPPMAN	1.00									
DIRECTOR		Х						0.	0.	0.
620007 11 11 16									· · · · · · · · · · · · · · · · · · ·	Form 990 (2016)

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Form 990 (2016) LOS ANGELES (COUNTY								95-2217011	Page 8
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	Position (do not check more than one				one	Reportable	Reportable	Estimated	
	hours per	box	, unle	ss pe	rson	is bot or/trus	h an	compensation	compensation	amount of
	week (list any	_	Jei aii	luau	II ecit	Ji/ ii us	100)	from	from related	other
	hours for	lirecto						the organization	organizations (W-2/1099-MISC)	compensation from the
	related	se or c	stee			satec		(W-2/1099-MISC)	(***2/1099***********************************	organization
	organizations	Individual trustee or director	Institutional trustee		yee	mper		(** =/ *********************************		and related
	below	idual	tution	-e	Key employee	est co loyee	Jer.			organizations
	line)	Indi	Insti	Officer	Key 6	Highest compensated employee	Former			
(18) NIGEL LYTHGOE	1.00									
DIRECTOR		Х						0.	0.	0.
(19) RICHARD LYNN MARTINEZ	1.00									
DIRECTOR		Х						0.	0.	0.
(20) BOWEN "BUZZ" MCCOY	1.00									
DIRECTOR		Х						0.	0.	0.
(21) MATTIE MCFADDEN-LAWSON	1.00									
DIRECTOR		Х						0.	0.	0.
(22) DIANE G. MEDINA	1.00									
DIRECTOR		Х						0.	0.	0.
(23) ELIZABETH MICHELSON	1.00									
DIRECTOR		Х						0.	0.	0.
(24) DARRELL MILLER	1.00									
DIRECTOR		Х						0.	0.	0.
(25) CINDY MISCIKOWSKI	1.00									
DIRECTOR		Х						0.	0.	0.
(26) SHELBY NOTKIN	1.00									
DIRECTOR		Х						0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								2,604,277.	0.	427,329.
d Total (add lines 1b and 1c)								2,604,277.	0.	427,329.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

5 X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
ABM ONSITE SERVICES-WEST INC.		
P.O. BOX 745799, LOS ANGELES, CA 90074	HOUSEKEEPING	1,495,415.
SODEXO, INC. & AFFILIATES		
P.O. BOX 43283, LOS ANGELES, CA 90088	HOUSEKEEPING	1,468,607.
THE PATINA GROUP, 1150 SOUTH OLIVE STREET,		
SUITE TG25, LOS ANGELES, CA 90015	CATERING	1,276,143.
AIR CONDITIONING SOLUTIONS INC.		
2223 EL SOL AVE, ALTADENA, CA 91001	MAINTENANCE	601,734.
COMPLETE ELECTRICAL SERVICES INC.		
5610 BRAELOCH ST, ACTON, CA 93510	MAINTENANCE	473,901.
2 Total number of independent contractors (including but not limited to	those listed above) who received more than	
\$100,000 of compensation from the organization	59	
	·	

SEE PART VII, SECTION A CONTINUATION SHEETS

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Form 990 LOS ANGELES COUNTY 95-2217011

Form 990 LOS ANGELES COUNTY 95-2217011										
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A) (B) (C) (D) (E) (F)										
Name and title	Average	erage Position						Reportable	Reportable	Estimated
	hours	(cl	heck	c all	that	арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	١.) y ee		the	organizations	compensation
	(list any	rector				em plo		organization	(W-2/1099-MISC)	from the
	hours for	or di	ee			ated		(W-2/1099-MISC)		organization
	related	nstee	trust		e e	suadı				and related
	organizations below	ual tr	ional		yoldı	tcon	١.			organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) MICHAEL PAGANO	1.00			Ė						
OFFICER - VICE CHAIR		х		х				0.	0.	0.
(28) KAREN KAY PLATT	1.00									
OFFICER - SECRETARY		х		х				0.	0.	0.
(29) RORY PULLENS	1.00									
DIRECTOR		Х						0.	0.	0.
(30) MAX RAMBERG	1.00									
DIRECTOR		Х						0.	0.	0.
(31) JAY RASULO	1.00									
DIRECTOR		Х						0.	0.	0.
(32) JOSEPH RICE	1.00									
DIRECTOR		Х						0.	0.	0.
(33) RICHARD K. ROEDER	1.00									
DIRECTOR		Х		_				0.	0.	0.
(34) JONI J. SMITH	1.00									
DIRECTOR		Х	_	_				0.	0.	0.
(35) CATHARINE SOROS	1.00	١,,							0	
DIRECTOR (36) LISA SPECHT	1.00	Х		\vdash				0.	0.	0.
OFFICER - CHAIR	1.00	X		x				0.	0.	0.
(37) MARC I. STERN	1.00	^	\vdash	^		\vdash		0.	0.	0.
DIRECTOR	1.00	x						0.	0.	0.
(38) CARY H. THOMPSON	1.00		\vdash	\vdash		\vdash		0.	• •	••
DIRECTOR	1.00	x						0.	0.	0.
(39) WALTER F. ULLOA	1.00		\vdash	\vdash					- •	
DIRECTOR		х						0.	0.	0.
(40) TIMOTHY WAHL	1.00									
DIRECTOR		х						0.	0.	0.
(41) SUSAN WEGLEITNER	1.00									
OFFICER - TREASURER		х		х				0.	0.	0.
(42) ALYCE WILLIAMSON	1.00									
DIRECTOR		х						0.	0.	0.
(43) JAY WINTROB	1.00									
DIRECTOR		Х						0.	0.	0.
(44) RACHEL S. MOORE	35.00									
PRESIDENT		Х		Х				733,714.	0.	46,857.
(45) HOWARD SHERMAN	35.00									
EXECECUTIVE VP, COO				Х		$ldsymbol{ld}}}}}}$		385,328.	0.	58,648.
(46) LISA WHITNEY	35.00									
SR. VP FINANCE, CFO				Х				252,469.	0.	37,772.
Total to Part VII, Section A, line 1c										

LOS ANGELES COUNTY Form 990

95-2217011 Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (A) (B) (C) (D) (F) (E) Name and title Position Reportable Reportable Estimated Average (check all that apply) compensation compensation amount of hours per from from related other week the organizations compensation Highest compensated employee (W-2/1099-MISC) (list any Individual trustee or director organization from the (W-2/1099-MISC) hours for organization Institutional trustee related and related Key employee organizations organizations below Officer line) (47) VALENTINE GELMAN 35.00 SR. VP DEVELOPMENT Х 226,651. 0 30,172. (48) KEITH MCTAGUE 50.00 DIR. BUILDING SERVICES Х 188,561. 0 41,429. (49) ROBERT A. RUBY 43.00 HEAD OF PROPERTY 0 X 167,723 43,739. (50) STANLEY RAY STEELMON 47.00 HEAD OF PROPERTY 0 Х 165,690. 42,420. (51) EMMET D. KAISER 48.00 HEAD OF CARPENTRY 163,613 Х 0 41,223. (52) JAMES H. BERGER 39.00 HEAD OF ELECTRIC Х 0 163,027 42,615. (53) SHAWN L. ANDERSON 43.00 HEAD OF CARPENTRY 157,501. Х 0 42,454. 2,604,277 427,329. Total to Part VII, Section A, line 1c

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Form 990 (2016) LOS ANGELES Part VIII Statement of Revenue

		Check if Schedule O conta	ains a resp	onse	or note to any line	e in this Part VIII	(D)	(0)	
						(A) Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1	а					
Gra	b	Membership dues	<u>1</u>	b					
s, (Am	С	Fundraising events	<u>1</u>	С	59,270.				
Giff	d	Related organizations	1	d					
imi	е	Government grants (contributi	ons) 1	е	2,391,744.				
tio S	f	All other contributions, gifts, grant	s, and						
ibu The		similar amounts not included abov	/e 1	f	13,375,248.				
doc	g	Noncash contributions included in lines	1a-1f: \$		888,010.				
g E	h	Total. Add lines 1a-1f				15,826,262.			
					Business Code				
ce	2 a	REIMB. BY LA COUNTY			900099	24,396,512.	24,396,512.		
Program Service Revenue	b	REIMB. BY SUBLICENSEES			900099	5,834,785.	5,834,785.		
Se nu	С	EDUCATION, PROGRAMMING			900099	5,169,996.	5,169,996.		
ran lev	d	THEATER RENTS			900099	2,984,635.	2,984,635.		
igo.	е	FACILITY FEES			900099	2,289,489.	2,289,489.		
ď	f	All other program service rever	nue		900099	32,848.	17,848.	15,000.	
	g	Total. Add lines 2a-2f				40,708,265.			
	3	Investment income (including	dividends,	, intere	st, and				
		other similar amounts)			▶ [1,231,204.			1,231,204.
	4	Income from investment of tax	k-exempt b	ond p	roceeds 🕨	5,998.			5,998.
	5	Royalties				159.			159.
			(i) Rea		(ii) Personal				
	6 a	Gross rents	648	,909.	18,430.				
	b	Less: rental expenses		0.	0.				
	С	Rental income or (loss)	648	,909.	18,430.				
	d	Net rental income or (loss)				667,339.	667,339.		
	7 a	Gross amount from sales of	(i) Secur	$\overline{}$	(ii) Other				
		assets other than inventory	889	,703.	750.				
	b	Less: cost or other basis							
		and sales expenses	888	,010.	0.				
	С	Gain or (loss)	1,	,693.	750.				
		Net gain or (loss)				2,443.			2,443.
Other Revenue	8 a		,270. of	not					
Re		contributions reported on line	1c). See						
er		Part IV, line 18			130,320.				
₽		Less: direct expenses		_	241,204.				
		Net income or (loss) from fund	-	1		-110,884.			-110,884.
	9 a	Gross income from gaming ac							
		Part IV, line 19							
		Less: direct expenses							
		Net income or (loss) from gam		es					
	10 a	Gross sales of inventory, less i							
	_	and allowances							
		Less: cost of goods sold		_					
	С	Net income or (loss) from sales							
	4.	Miscellaneous Revenue	e		Business Code	1 000 000	1 000 070		
	11 a				900099	1,962,976.	1,962,976.		
	b	CONCESSIONS INCOME EDOM DARBUNEDOUT		—	900099	128,491.	128,491.	176	
	C	INCOME FROM PARTNERSHI		—	900099	176.	10 202	176.	10 500
	d				900099	29,961.	19,392.		10,569.
		Total. Add lines 11a-11d				2,121,604.	42 471 462	15 176	1 120 400
	12	Total revenue. See instructions.				60,452,390.	43,471,463.	15,176.	1,139,489.

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Part IX | Statement of Functional Expenses

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

0000	on 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respon				
	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	729,936.	729,936.		
2	Grants and other assistance to domestic	405.000	405.000		
	individuals. See Part IV, line 22	107,900.	107,900.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
4	individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors,				
3	trustees, and key employees	2,066,882.	421,320.	1,347,238.	298,324.
6	Compensation not included above, to disqualified	2,000,002.	121,520.	1,017,200.	250,521.
Ū	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	20,014,771.	17,694,235.	1,075,004.	1,245,532.
8	Pension plan accruals and contributions (include	, ,	, ,		
	section 401(k) and 403(b) employer contributions)	1,259,840.	1,176,369.	31,500.	51,971.
9	Other employee benefits	2,554,920.	2,311,752.	115,911.	127,257.
10	Payroll taxes	1,789,858.	1,560,451.	120,379.	109,028.
11	Fees for services (non-employees):				
а	Management				
b	Legal	375,720.	129,857.	245,863.	
С	Accounting	109,039.		109,039.	
	Lobbying				
е	Professional fundraising services. See Part IV, line 17	65,833.			65,833.
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	1 144 000	005 043	000 105	05.454
	column (A) amount, list line 11g expenses on Sch O.)	1,144,822.	825,243.	222,105.	97,474. 45,246.
12	Advertising and promotion	767,922. 1,333,325.	716,776. 760,444.	5,900. 264,305.	308,576.
13	Office expenses	103,253.	62,327.	19,451.	21,475.
14 15	Information technology	103,233.	02,327.	15, 151.	21,473.
16	Royalties Cocupancy	600.	600.		
17	Travel	281,292.	230,242.	36,096.	14,954.
18	Payments of travel or entertainment expenses	, -	, -	, -	, -
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	101,775.	55,296.	31,356.	15,123.
20	Interest	1,172,918.	1,170,978.	1,524.	416.
21	Payments to affiliates				<u> </u>
22	Depreciation, depletion, and amortization	1,467,940.	1,398,278.	57,558.	12,104.
23	Insurance	1,093,608.	1,006,844.	86,764.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line				
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	MAINTENANCE	9,912,541.	9,850,901.	56,519.	5,121.
b	CAPITAL EQUIPMENT PURCH	3,173,756.	3,173,756.		•
С	PRODUCTION - ARTIST FEE	2,720,350.	2,714,075.		6,275.
d	PRODUCTION RELATED EXPE	1,351,742.	1,350,812.		930.
е	All other expenses	2,836,486.	2,415,128.	63,743.	357,615.
25	Total functional expenses. Add lines 1 through 24e	56,537,029.	49,863,520.	3,890,255.	2,783,254.
26	Joint costs . Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				F 000 (004.0)

Form **990** (2016)

	990 (95-2	217011 Page 11
Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			<u></u>
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	17,71	8. 1	25,134.
	2	Savings and temporary cash investments		2. 2	9,149,564.
	3	Pledges and grants receivable, net		6. 3	18,721,231.
	4	Accounts receivable, net		3 . 4	2,031,549.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined ur			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contrib	uting		
		employers and sponsoring organizations of section 501(c)(9) voluntary			
S		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		3 . 7	13,121.
ğ	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9 . 9	931,311.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 2,757	,334.		
	b	Less: accumulated depreciation 10b 2,435	,054. 516,44	2 . 10c	322,280.
	11	Investments - publicly traded securities	4,238,13	0 . 11	4,289,617.
	12	Investments - other securities. See Part IV, line 11		6 . 12	26,598,110.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		2. 15	33,567,757.
	16	Total assets. Add lines 1 through 15 (must equal line 34)		1. 16	95,649,674.
	17	Accounts payable and accrued expenses	1	4. 17	3,883,562.
	18	Grants payable		18	
	19	Deferred revenue		3 . 19	6,217,520.
	20	Tax-exempt bond liabilities		0 . 20	24,387,515.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
S	22	Loans and other payables to current and former officers, directors, trustee			
ij		key employees, highest compensated employees, and disqualified person			
Liabilities		Complete Part II of Schedule L		22	
=	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of	f		
		Schedule D	1,367,80	0 . 25	6,880,187.
	26	Total liabilities. Add lines 17 through 25		7 . 26	41,368,784.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ 🗓 a	ind		
S		complete lines 27 through 29, and lines 33 and 34.			
ü	27	Unrestricted net assets	-6,172,84	2. 27	-2,629,913.
3ala	28	Temporarily restricted net assets		5 . 28	20,278,760.
Net Assets or Fund Balances	29	Permanently restricted net assets	24 225 00	1. 29	36,632,043.
Fun		Organizations that do not follow SFAS 117 (ASC 958), check here ▶			
ō		and complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
ASS	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
et /	32	Retained earnings, endowment, accumulated income, or other funds		32	
Z	33	Total net assets or fund balances	43,501,13	4. 33	54,280,890.

Form **990** (2016)

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Total liabilities and net assets/fund balances

LOS ANGELES COUNTY

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				Х
1	Total revenue (must equal Part VIII, column (A), line 12)	1	60	,452	,390.
2	Total expenses (must equal Part IX, column (A), line 25)	2	56	,537	,029.
3	Revenue less expenses. Subtract line 2 from line 1	3	3	,915	,361.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	43	,501	,134.
5	Net unrealized gains (losses) on investments	5	3	,141	,981.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9	3	,722	,414.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	54	,280	,890.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				Х
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2016)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

PERFORMING ARTS CENTER OF

Employer identification number

D-	ad I		GELES COUNTI					5-221/011
	rt I	Reason for Public (
he	organ	ization is not a private found	ation because it is: (For lines 1 through 12, or	heck only	one box.)		
1		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).						
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)						
3		A hospital or a cooperative	hospital service orga	anization described in s e	ection 170)(b)(1)(A)(i	ii).	
4		A medical research organiz	ation operated in co	njunction with a hospital	described	d in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,
		city, and state:	•					,
5		An organization operated for	or the benefit of a co	llege or university owner	d or opera	ted by a d	overnmental unit descri	hed in
•		section 170(b)(1)(A)(iv). (C		logo or armyorally owner	и ог орога	tod by a g	overnmental and accom	50 0 111
_					4-	70/1-1/41/41	6.3	
6		A federal, state, or local gov	ū				• •	
7	Х	An organization that norma	•	intial part of its support f	rom a gov	ernmental	unit or from the genera	public described in
		section 170(b)(1)(A)(vi). (Co						
8	\square	A community trust describe	ed in section 170(b)((1)(A)(vi). (Complete Par	t II.)			
9		An agricultural research org	anization described	in section 170(b)(1)(A)(ix) operate	ed in conju	inction with a land-grant	college
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, city	ر, and state of the colleو	ge or
		university:						
10		An organization that norma	lly receives: (1) more	than 33 1/3% of its sup	port from	contributi	ons, membership fees, a	and gross receipts from
		activities related to its exer	npt functions - subjec	ct to certain exceptions,	and (2) no	more tha	n 33 1/3% of its suppor	t from gross investment
		income and unrelated busin	ness taxable income	(less section 511 tax) from	om busine	sses acqu	ired by the organization	after June 30, 1975.
		See section 509(a)(2). (Cor		,		·	, ,	·
11		An organization organized a	•	ively to test for public sa	fetv. See	section 50)9(a)(4).	
12		An organization organized a	•	•	•			e purposes of one or
-		more publicly supported or	· ·	•	-		•	
		lines 12a through 12d that	~					SHOOK THO BOX III
_		Type I. A supporting orga	* *			-	· · · · ·	, aivina
а			· ·			•		
		the supported organization			a majority (or trie dire	ctors or trustees of the	supporting
		organization. You must c						
b		☐ Type II. A supporting org	•					•
		control or management o			ame perso	ons that co	ontrol or manage the su	oported
		organization(s). You mus	t complete Part IV,	Sections A and C.				
С		Type III functionally inte	grated. A supporting	g organization operated	in connec	tion with,	and functionally integrat	ed with,
	_	its supported organization	n(s) (see instructions	s). You must complete I	Part IV, Se	ections A,	D, and E.	
d			/ integrated. A supp	orting organization oper	ated in co	nnection v	vith its supported organ	ization(s)
		that is not functionally int	egrated. The organiz	zation generally must sat	isfy a dist	ribution re	quirement and an attent	tiveness
		requirement (see instruct	ions). You must con	nplete Part IV, Sections	A and D,	and Part	V.	
е		Check this box if the orga	anization received a	written determination fro	m the IRS	that it is a	a Type I, Type II, Type III	
		functionally integrated, or	Type III non-functio	nally integrated support	ing organiz	zation.		
f	Ente	er the number of supported o	organizations					
g	Provide the following information about the supported organization(s).							
		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	inization listed	(v) Amount of monetary	(vi) Amount of other
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)
				above (see instructions)				
ota	ıl							1

Schedule A (Form 990 or 990-EZ) 2016 LOS ANGELES COUNTY

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	10,122,703.	11,014,689.	13,287,599.	9,766,317.	15,826,262.	60,017,570.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge	5,448,343.	5,599,677.	5,467,245.	4,915,661.	5,081,736.	26,512,662.
4	Total. Add lines 1 through 3	15,571,046.	16,614,366.	18,754,844.	14,681,978.	20,907,998.	86,530,232.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						3,000,679.
6	Public support. Subtract line 5 from line 4.						83,529,553.
	ction B. Total Support		•				
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4	15,571,046.	16,614,366.	18,754,844.	14,681,978.	20,907,998.	86,530,232.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	1,752,539.	2,057,740.	1,987,596.	4,319,497.	1,904,700.	12,022,072.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on	30,000.	30,000.	30,000.	30,000.	15,000.	135,000.
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	1,783,496.	1,777,980.	2,033,571.	2,031,392.	2,121,604.	9,748,043.
11	Total support. Add lines 7 through 10						108,435,347.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	191,825,229.
	First five years. If the Form 990 is for					n 501(c)(3)	
	organization, check this box and stop	here					
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2016 (I	line 6, column (f) di	vided by line 11, c	olumn (f))		14	77.03 %
15	Public support percentage from 2015	Schedule A, Part	II, line 14			15	77.67 %
16a	33 1/3% support test - 2016. If the o	organization did no	t check the box or	line 13, and line 1	4 is 33 1/3% or m	nore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization				▶ X
b	33 1/3% support test - 2015. If the o	organization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	ifies as a publicly s	supported organiza	tion			▶□
17a	10% -facts-and-circumstances tes	t - 2016. If the org	anization did not c	heck a box on line	13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	is box and stop h e	ere. Explain in Par	t VI how the organ	ization
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances tes						
	more, and if the organization meets the	ne "facts-and-circu	mstances" test, ch	eck this box and	stop here. Explain	in Part VI how the	
	organization meets the "facts-and-circ	cumstances" test.	The organization q	ualifies as a public	ly supported orga	anization	▶ □
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	ı, 16b, 17a, or 17b	, check this box a	nd see instruction	s

Schedule A (Form 990 or 990-EZ) 2016

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	ualify under the tests listed b Public Support	elow, please com	plete Part II.)				
	(or fiscal year beginning in)	(a) 2012	(b) 2013	(a) 2014	(4) 2015	(a) 2016	(f) Total
-	ants, contributions, and	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
, 0	ship fees received. (Do not						
	any "unusual grants.")						
					-	-	
	ceipts from admissions, ndise sold or services per-						
	or facilities furnished in						
	vity that is related to the						
•	tion's tax-exempt purpose						
	ceipts from activities that an unrelated trade or bus-						
	day agotion F10						
	der section 513				-	-	
	nues levied for the organ-						
	benefit and either paid to						
-	nded on its behalf				-	-	
	e of services or facilities						
	d by a governmental unit to nization without charge						
	dd lines 1 through 5						
	s included on lines 1, 2, and						
	ed from disqualified persons cluded on lines 2 and 3 received						
	than disqualified persons that						
	greater of \$5,000 or 1% of the						
	line 13 for the year						
	s 7a and 7b						
	upport. (Subtract line 7c from line 6.) Total Support						
	(or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
-	s from line 6	(a) 2012	(b) 2013	(6) 2014	(u) 2013	(e) 2010	(i) iotai
	come from interest,						
dividend	s, payments received on						
securitie	s loans, rents, royalties ome from similar sources						
	business taxable income						
	ion 511 taxes) from businesses						
	after June 30, 1975						
	s 10a and 10b						
	me from unrelated business						_
activities	not included in line 10b,						
	or not the business is carried on						
	come. Do not include gain						
or loss fr	om the sale of capital						
	Explain in Part VI.) · · · · · · · · · · · · · · · · · · ·						
-	e years. If the Form 990 is for	the organization'	s first second this	rd fourth or fifth t	ax vear as a sectic	n 501(c)(3) organiz	ration
		•				. , . ,	L
	Computation of Publi						
	upport percentage for 2016 (I			column (f))		15	%
	upport percentage from 2015					16	%
	Computation of Inves					, ,	
17 Investme	ent income percentage for 20	16 (line 10c, colur	mn (f) divided by li	ne 13, column (f))		17	%
	ent income percentage from 2					18	%
	support tests - 2016. If the						
	an 33 1/3%, check this box a						
	support tests - 2015. If the						
	not more than 33 1/3%, che						
	foundation. If the organizatio						

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Schedule A (Form 990 or 990-EZ) 2016

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

_		Yes	No
	1		
	2		
	За		
	3b		
	3c		
	4a		
	4b		
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L	6		
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	9a		
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	50		
	10a		
	10b		
m 99	0 or 99	0-EZ	2016

PERFORMING ARTS CENTER OF

Pai	t IV Supporting Organizations (continued)			
	(continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
_	below, the governing body of a supported organization?	11a		
h	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations	110		
	tion of type i capporting organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		163	140
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	4		
_	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		i
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).			
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions)	
2	Activities Test. <i>Answer (a) and (b) below.</i>	, a o ti o i i o	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		103	140
а	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	how the organization was responsive to those supported organizations, and how the organization determined	0-		
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Га	Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orgar	nizations			
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust on	Nov. 20, 1970 (explain in	Part VI.) See instructions. A		
	other Type III non-functionally integrated supporting organizations must complete Sections A through E.					
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)		
1	Net short-term capital gain	1				
2	Recoveries of prior-year distributions	2				
3	Other gross income (see instructions)	3				
4	Add lines 1 through 3	4				
5	Depreciation and depletion	5				
6	Portion of operating expenses paid or incurred for production or					
	collection of gross income or for management, conservation, or					
	maintenance of property held for production of income (see instructions)	6				
7	Other expenses (see instructions)	7				
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8				
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)		
1	Aggregate fair market value of all non-exempt-use assets (see					
	instructions for short tax year or assets held for part of year):					
а	Average monthly value of securities	1a				
b	Average monthly cash balances	1b				
С	Fair market value of other non-exempt-use assets	1c				
d	Total (add lines 1a, 1b, and 1c)	1d				
е	Discount claimed for blockage or other					
	factors (explain in detail in Part VI):					
2	Acquisition indebtedness applicable to non-exempt-use assets	2				
3	Subtract line 2 from line 1d	3				
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,					
	see instructions)	4				
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
6	Multiply line 5 by .035	6				
7	Recoveries of prior-year distributions	7				
8	Minimum Asset Amount (add line 7 to line 6)	8				
Sect	ion C - Distributable Amount			Current Year		
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1				
2	Enter 85% of line 1	2				
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3				
4	Enter greater of line 2 or line 3	4				
5	Income tax imposed in prior year	5				
6	Distributable Amount. Subtract line 5 from line 4, unless subject to					
	emergency temporary reduction (see instructions)	6				
7	Check here if the current year is the organization's first as a non-functional	ly integrate	ed Type III supporting org	anization (see		
	instructions).	. 0		,		

Schedule A (Form 990 or 990-EZ) 2016

Par	I ype III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations _(continued)	
Secti	on D - Distributions		,	Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	ns	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the	ne organization is responsive	9	
	(provide details in Part VI). See instructions			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
		(i)	(ii)	(iii)
		Excess Distributions	Underdistributions	Distributable
secti	on E - Distribution Allocations (see instructions)		Pre-2016	Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reason-			
	able cause required- explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2016:			
а				
b				
С	From 2013			
d	From 2014			
е	From 2015			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2016. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions			
7	Excess distributions carryover to 2017. Add lines 3j			
	and 4c			
8	Breakdown of line 7:			
а				
	Excess from 2013			
	Excess from 2014			
d	Excess from 2015			
е	Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12;

Part VI

Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.) SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME: OTHER INCOME 2012 AMOUNT: \$ 31,558. 2013 AMOUNT: \$ 27,742. 2014 AMOUNT: \$ 16,381. 2015 AMOUNT: \$ 21,303. 2016 AMOUNT: \$ 30,137. RESTAURANT & CATERING 2012 AMOUNT: \$ 1,704,793. 2013 AMOUNT: \$ 1,706,994. 2014 AMOUNT: \$ 1,916,944. 2015 AMOUNT: \$ 1,898,547. 2016 AMOUNT: \$ 1,962,976. CONCESSIONS 2012 AMOUNT: \$ 47,145. 43,244. 2013 AMOUNT: \$ 2014 AMOUNT: \$ 100,246. 2015 AMOUNT: \$ 111,542. 2016 AMOUNT: \$ 128,491.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public

Inspection

OMB No. 1545-0047

Name of the organization

PERFORMING ARTS CENTER OF

LOS ANGELES COUNTY

Employer identification number 95-2217011

Pai	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin		2 2000
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advise	ed funds
	are the organization's property, subject to the organization's	-	
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?		Yes N
Pai	t II Conservation Easements. Complete if the org		
1	Purpose(s) of conservation easements held by the organizati	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of a histo	orically important land area
	Protection of natural habitat	Preservation of a certi	fied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Ye
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 8/17/06, and not on a historic structu	ıre
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel		
	year		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cons	servation easements during the year
			
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservat	tion easements during the year
	> \$		
8	Does each conservation easement reported on line 2(d) above	•	
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservati	-	
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes t	the organization's accounting for
Pai	t III Organizations Maintaining Collections or	f Art Historical Transuras or Of	thor Similar Assats
Fai	Complete if the organization answered "Yes" on Form		ther Sillinal Assets.
			cont and balance about works of ort
ıa	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public exh	· ·	rice of public service, provide, in Part XII
h	the text of the footnote to its financial statements that descri		and balance about works of art. historic
b	If the organization elected, as permitted under SFAS 116 (AS treasures, or other similar assets held for public exhibition, ed		
	,	ducation, or research in furtherance of put	one service, provide the following amoun
	relating to these items:		▶ ¢
	(i) Revenue included on Form 990, Part VIII, line 1		
2	(ii) Assets included in Form 990, Part X		•
~	the following amounts required to be reported under SFAS 1	•	i gaiii, provide
а	Revenue included on Form 990, Part VIII, line 1		> \$
	Assets included in Form 990, Part X		
U	, soots moradou in ricitii ood, rait /		F Ψ

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Schedule D (Form 990) 2016

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

a Loan or exchange programs checked lath stapply: a Rubbic exhibition	Par	t III	Organizations Maintaining C	ollections of A	rt, Hist	orical Tr	easures, o	r Other	' Simila	ar Asse	ts (conti	nued)	
a	3	Usin	g the organization's acquisition, accessi	on, and other record	ls, check	any of the	following that	are a sig	nificant ι	use of its	collectio	n iten	าร
b Scholarly research e		(ched	ck all that apply):										
Proservation for future generations	а	Х	Public exhibition	d	L L								
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds atther than to be maintained as part of the organization's collection? For the organization and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or received an amount to Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. b Beginning balance C Both the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Brat V Brat W Brat West*, explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Part V Brat Device T Brat XIII. Balance G Grants or scholarships C Net investment earnings, gains, and losses G Rants or scholarships G Other expenditures for facilities and programs G Administrative expenses G Rot of year balance P Provide the estimated percentage of the current year end balance (line 1g, column (ai) held as: Beard of year balance O Temporally restricted endowment ►	b		Scholarly research	е		Other							
Description	С		Preservation for future generations										
To be sold for raise funds rather than to be maintained as part of the organization's collection?	4	Prov	ide a description of the organization's co	ollections and explain	n how th	ey further t	he organizatio	n's exem	pt purpo	se in Par	t XIII.		
Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X. line 21. In a Is the organization an agent, trustee, custodial or other intermediary for contributions or other assets not included on Form 990, Part X? In a Is the organization an agent, trustee, custodial or other intermediary for contributions or other assets not included on Form 990, Part XIII and complete the following table: Beginning balance	5										7	_	_
The proposed an amount on Form 990, Part X, line 21. The serior part 2 The proposed and amount on Form 990, Part X The proposed and amount on Form 990, Part X The proposed and amount on Form 990, Part X The proposed and amount on Form 990, Part X The proposed and Part XIII and complete the following table: Comparison The proposed and Part XIII and complete the following table:										L			_ No_
1	Pai	t IV	•		ete if the	organizatio	n answered "\	Yes" on F	orm 990	, Part IV,	line 9, o	r	
on Form 990, Part X? or Beginning balance c Beginning balance d Additions during the year e Distributions during the year f Ending balance d Eding balance f Ending balance f Ending balance d Eding balance f Ending balance f End ownert Funds. Complete if the organization answered "Yes" on Form 990, Part XIII III Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part XIII III Beginning of year balance f End of year balance f End of year balance g End of year balance f End of year balance g End of year balance f End of year balance g End of year balance f End of year balance g End of year ba													
b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount	1a				-						٦.,		٦
c Beginning balance d Additions during the year e Distributions during the year 1 Endings balance 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 3 Per Ly Seyblain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII											」Yes		⊔ No
c Beginning balance d Additions during the year e Distributions during the year 1 tel 1 tel 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 3 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 4 Describe in the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV. line 10. 1 Beginning of year balance 2 Describing of year balance 3 Courtibutions 4 Contributions 5 Oktinibutions 6 Oktinibutions 7 Oktinibutions 7 Oktinibutions 8 Oktinibutions 9 Okt	b	It "Y€	es," explain the arrangement in Part XIII	and complete the fo	llowing ta	able:							
d Additions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Ves No b (f "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Findowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1b Contributions c Net investment earnings, gains, and losses d Grants or scholarships d Grants or scholarships d Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related	_	Dani	aning balance						1 40		Amour	ıτ	
e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back to Contributions C Net investment earnings, gains, and losses d Grants or scholarships e Other expeditures for facilities and programs f Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment 96 b Permanent endowment 96 c Temporarily restricted endowment 96 b Permanent endowment 96 c Temporarily restricted endowment 97 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (iii) related organizations (iii) related organizations (iii) related organizations D Escription of property (a) Cost or other basis (investment) D Escription of property (a) Cost or other basis (investment) D Escription of property (a) Cost or other basis (investment) D Escription of property (a) Cost or other basis (investment) D Escription of property (b) Proves on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. C Leasehold improvements C Leasehold improvements D Escription of property (a) Cost or other basis (investment) D Escription of property (b) Cost or other basis (investment) D Escription of property (c) Column (d) must equal Form 990, Part X, column (B), line 10c. 152, 277, 1,26. 157, 209. 152, 293, 281. 152, 280.													
f Ending balance	u												
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Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.			-						у:		_ 163		
1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back).				
1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % 5 Temporarily restricted endowment ▶ % 6 Temporarily restricted endowment ▶ % 1 The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations (iii) related organizations 5 If "Yes" on line 3a(i), are the related organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Describe in Part XIII the intended uses of the organization's endowment funds. Describe in Part XIII the intended uses of the organization's endowment funds. Describe in Part XIII the intended uses of the organization's endowment funds. Describe in Part XIII the intended uses of the organization's endowment funds. Describe in Part XIII the intended uses of the organization's endowment funds. Describe in Part XIII the intended uses of the organization's endowment funds. Describe in Part XIII the intended uses of the organization's endowment funds. Describe in Part XIII the intended uses of the organization's endowment funds. Describe in Part XIII the intended uses of the organization's endowment funds. Describe in Part XIII the intended uses of the organization's endowment funds. Describe in Part XIII the intended uses of the organizatio										ears back	(e) Fou	r vears	back
b Contributions	1a	Begi	nning of vear balance	(a) cancert year	(2)::	.c. year	(2)	(4	.,		(0)	. ,	
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g End of year balance	f	Adm	ı										
a Board designated or quasi-endowment ▶			I										
b Permanent endowment ▶	2	Prov	ide the estimated percentage of the curr	rent year end balanc	e (line 1g	g, column (a	a)) held as:						
Temporarily restricted endowment The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations (iii) related organizations (iv) Inerelated organizations (iv) Inerelated organizations (iv) Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value depreciation 1a Land b Buildings c Leasehold improvements d Equipment 2,571,126, 2,277,845, 293,281. e Other Other (b) Inerelated administered for the organization of the organization that are held and administered for the organization Action (ii) related organization (iii) related organizations (iii) related organization	а	Boar	d designated or quasi-endowment		_%								
The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i)	b	Perm	nanent endowment 🕨	%									
Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements d Equipment e Other Other Other Other 186, 208. 157, 209. 232, 280.	С	Temp	porarily restricted endowment 🕨	%									
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. 1a		The	percentages on lines 2a, 2b, and 2c sho	uld equal 100%.									
(ii) unrelated organizations (iii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements d Equipment e Other Other Other 186, 208. 157, 209. 322, 280.	3a	Are t	here endowment funds not in the posse	ssion of the organiza	ation that	t are held a	nd administer	ed for the	e organiz	ation			
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A Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment c Other Other 186,208. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 322,280.													<u> </u>
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land b Buildings C Leasehold improvements C J. 277, 845. 293, 281. E Other 186, 208. 157, 209. 28, 999. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 322, 280.											3b		
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) 1a Land b Buildings c Leasehold improvements d Equipment e Other Other 186,208. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (d) Book value (d) Book value 2, 571,126. 2, 277,845. 293,281. 293,281.	_				wment f	unds.							
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tal Land basis (investment) basis (other) depreciation b Buildings C Leasehold improvements D Leasehold i										-1	(-I) D	1	
b Buildings C Leasehold improvements C Leasehold improvements <th></th> <th></th> <th>Description of property</th> <th>1 ' '</th> <th></th> <th></th> <th></th> <th>. ,</th> <th></th> <th>a </th> <th>(a) Boo</th> <th>ık valu</th> <th>ie</th>			Description of property	1 ' '				. ,		a	(a) Boo	ık valu	ie
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d Equipment 2,571,126. 2,277,845. 293,281. e Other 186,208. 157,209. 28,999. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ▶ 322,280.	b	Build	lings										
e Other 186,208. 157,209. 28,999. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ▶ 322,280.	С	Leas	ehold improvements										
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)	d	Equip	pment			2	· · ·		2,277,	845.			
									157,	209.			
	Total	. Add	lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, colum	nn (B), line 1	0c.)						

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Page 3

i	Part VII	Investments - Other Securities.
	rait vii	investments - Other Securities.

Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) UNITIZED FUND OF INVESTMENTS OPERATED		
(B) BY MUSIC CENTER FOUNDATION	26,598,110.	END-OF-YEAR MARKET VALUE
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	26,598,110.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total, (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) BENEFICIAL INTEREST IN TRUST	29,819,133.
(2) CONTRACT ACQUISITION COSTS	3,748,624.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	33,567,757.

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1) Federal in	come taxes	
(2) DUE TO	RESIDENT COMPANIES	656,492
(3) DEPOSIT	S	406,113
(4) CAPITAL	LEASE OBLIGATIONS	111,841
(5) BOND IN	TEREST PAYABLE	99,624
(6) LIABILI	TY FOR PENSION BENEFITS	5,606,117
(7)		
(8)		
(9)		
Total. (Column (b)) must equal Form 990, Part X, col. (B) line 25.)	6,880,187

^{2.} Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

Schedule D (Form 990) 2016

LOS ANGELES COUNTY

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities 2 Donated services and use of facilities 2 COther losses COther (Describe in Part XIII.) e Add lines 2a through 2d 2 Subtract line 2e from line 1 3 Sof, 537, 0 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4 Dother (Describe in Part XIII.) c Add lines 4a and 4b 4c	Part 2	Reconciliation of Revenue per Audited Financial Stat		Revenue per P	Return.	
2 A Not unresiduated on line 1 but not on Form 990, Part VIII, line 12: a Not unresiduated gains (losses) on investments b Donated services and use of facilities c Recoveries of prior year grants d Other (Describe in Part XIII) 2 A J, 805, 383, e Add lines 2a through 2d 3 60, 452, 2 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) 5 60, 452, 2 4 Amounts included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) 5 60, 452, 2 6 Add lines 4 and 4b 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part IV, line 12) 6 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part IV, line 12) 1 Total revenue. Add lines 4 and 4b 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part IV, line 12) 1 Total exponses and losses per audited financial statements Complete if the organization answered Yes' on Form 990, Part IV, line 12. 1 Total exponses and losses per audited financial statements C Part XIII Reconciliation of Expenses per Audited Financial Statements C Part XIII Reconciliation of Expenses per Audited Financial Statements C Part XIII Reconciliation of Expenses per Audited Financial Statements C Part XIII Reconciliation of Expenses per Audited Financial Statements C Part XIII Reconciliation of Expenses per Audited Financial Statements C Part XIII Reconciliation of Expenses per Audited Financial Statements C Part XIII Reconciliation of Expenses per Audited Financial Statements C Part XIII Reconciliation of Expenses per Audited Financial Statements C Part XIII Reconciliation of Expenses per Audited Financial Statements C Part XIII Reconciliation of Expenses per Audited Financial Statements C Part XIII Reconciliation of Expenses per Audited Financial Statements C Part XIII Reconciliation of Expenses per Audited Financial Statements C Part XIII Reconciliation of Expenses per Audited Financial Statements C Part XIII Reconciliation Reconciliation Reconc		•			1.1	70 401 216
a Net unrealized gains (losses) on investments					1	/0,481,316.
b Donated services and use of facilities			ا ء ا	2 141 001		
C Recoveries of prior year grants 2c 2d 1,805,385.					-	
d Other (Describe in Part XIII)				3,001,730.	1	
e Add lines 2a through 2d 3				1 805 385	-	
3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) 5 Total revenue. Add lines 3 and 4e. (This must equal Form 990, Part I, line 12) Part XIII Reconcilitation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part II, line 12a. 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 22a 3 Camounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities c Other (Describe in Part XIII) b Add lines 2a through 2d 2 S, 081, 736. b Other (Cescribe in Part XIII) c Add lines 2a through 2d 2 S, 081, 736. b Other (Cescribe in Part XIII) c Add lines 2a through 2d 2 S, 081, 736. b Other (Cescribe in Part XIII) c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part II, line 7b 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part IX, line 12, line 7b 4 Amounts included on Form 990, Part IX, line 25, part IX, line 27 part IX, line 27 part IX, line 28 part IX, line 28 part IX, line 28 part IX, line 34 part IX, line 35 part IX, line 36 part IX, line 37 part IX, line 38 part IX, line 38 part IX, line 38 part IX, line 39 par				, ,	1 .	10 029 102
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total revenue. Add lines 3 and 4e. (This must equal Form 990, Part I, line 12) 5 5 60, 452, 3 Part XIII Reconcilitation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IV, line 25: 2 Donated services and use of facilities 2 Do Index expressions and expressions and additional included on Form 990, Part IV, line 25: 2 Do Index 1 and 2 b. Part V, line 4; Part X, line 2; Part XI, lines 2 d and 4b, and Part XII, lines 3 and 4c. (This must equal Form 990, Part II, line 1 and 4; Part IV, line 1 band 2 b; Part X, line 2; Part XI, lines 2 d and 4b; and Part XII, lines 3 and 4c, (This must equal Form 990, Part IV, line 1 and 4; Part IV, line 4; Part X, line 2; Part XI, lines 2 d and 4b; and Part XII, lines 3 and 4c, Chis and 4 and 4 and 4 b; and Part XII, lines 3 and 4c, Chis and 4 and					-	
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b Other (Describe in Part XIII.) c Add lines 4a and 4b 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.) Fart XII. Reconcilitation of Expenses per Audited Financial Statements With Expenses per Return. Complete If the organization answered "Ves" on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other Ossese c C Other Ossese d Other (Describe in Part XIII.) 2 Amounts included on Form 990, Part IX, line 25: a Investment expenses not included on Form 990, Part IX, line 25: a Investment expenses on Included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part IX, line 7b b Other (Describe in Part XIII.) c Add lines 4a and 4b 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5 Total expenses. Add lines 3 and 4b. Also complete this part to provide any additional information. PART III, LINE 1A: IN CONFORMITY WITH THE FRACTICE FOLLOWED BY MANY CULTURAL INSTITUTIONS, ART OBJECTS PURCHASED BY OR DONATED TO PACLAC ARE NOT INCLUDED IN THE STATEMENTS OF PINANCIAL POSITION, PACLAC'S COLLECTION CONSISTS OF ART OBJECTS THAT ARE ON EXHIBITION, EACH OF THE ITEMS IS CATALOGUED, PRESERVED AND CARRED FOR, AND ACTIVITIES VERIFYING THEIR EXISTENCE AND ASSESSING THEIR CONDITION ARE PERFORMED REGULARLY, PURCHASED COLLECTION ITEMS ARE RECORDED AS DECREASES IN UNRESTRICTED NET ASSETS IN THE YEAR IN WHICH THE ITEMS ARE ACQUIRED OR IN TEMPORARILY RESTRICTED NET ASSETS IF THE ASSETS USED TO PURCHASE THE ITEMS ARE RESTRICTED BY DONORS; CONTRIBUTED			4a			
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State Total revenue. Add lines 3 and 4e. (This must equal Form 990, Part I, line 12.)					4c	176.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total expenses and loses per audited financial statements						60,452,390.
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b Prior year adjustments c Other losses d Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) c Add lines 4 and 4b 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part III, lines 18) 5 Total expenses. Add lines 3 and 4d. (This must equal Form 990, Part III, lines 18) 5 Total expenses. Add lines 3 and 4d. (This must equal Form 990, Part I, line 18) 6 Total expenses. Add lines 3 and 4d. (This must equal Form 990, Part III, lines 18) 7 Total expenses. Add lines 3 and 4d. (This must equal Form 990, Part III, lines 18) 7 Total expenses. Add lines 3 and 4d. (This must equal Form 990, Part III, lines 18) 7 Total expenses. Add lines 3 and 4d. (This must equal Form 990, Part III, lines 18) 7 Total expenses. Add lines 3 and 4d. (This must equal Form 990, Part III, lines 18) 7 Total expenses. Add lines 3 and 4d. (This must equal Form 990, Part III, lines 18) 7 Total expenses. Add lines 3 and 4d. (This must equal Form 990, Part III, lines 18) 7 Total expenses. Add lines 3 and 4d. (This must equal Form 990, Part III, lines 18) 7 Total expenses. Add lines 3 and 4d. (This must equal Form 990, Part III, lines 18) 7 Total expenses. Add lines 3 and 4d. (This must equal Form 990, Part III, lines 18) 7 Total expenses. Add lines 3 and 4d. (This must equal Form 990, Part III, lines 18) 7 Total expenses. Add lines 3 and 4d. (This must equal Form 990, Part III, lines 18) 7 Total expenses. Add lines 3 and 4d. (This must equal Form 990, Part III, lines 18) 7 Total expenses. Add lines 3 and 4d. (This must equal Form 990, Part III, lines 18) 7 Total expenses. Add lines 3 and 4d. (This must equal Form 990, Part III, lines 18) 8 Total expenses 4d. (In lines			2a	5,081,736.		
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PERFORMING ARTS CENTER OF

95-2217011

ITEMS IN COLLECTION INCLUDE: PAINTINGS, PRINTS, SCULPTURES, FURNITURE,

MUSICAL ITEMS AND TEXTILES.

PART X, LINE 2:

THE PERFORMING ARTS CENTER IS A CALIFORNIA NONPROFIT PUBLIC BENEFIT

CORPORATION AND IS GENERALLY EXEMPT FROM FEDERAL AND STATE INCOME TAXES

UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND SECTION 23701(D)

OF THE REVENUE AND TAXATION CODE OF CALIFORNIA. ACCORDINGLY, NO PROVISION

FOR INCOME TAXES IS INCLUDED IN THE ACCOMPANYING FINANCIAL STATEMENTS.

PACLAC HAS ADOPTED FINANCIAL ACCOUNTING STANDARDS BOARD ("FASB")

ACCOUNTING STANDARDS CODIFICATION ("ASC") TOPIC NO. 740, "INCOME TAXES"

("ASC 740"), FORMERLY FASB INTERPRETATION NO. 48, "ACCOUNTING FOR

UNCERTAINTY IN INCOME TAXES, " AN INTERPRETATION OF FASB STATEMENT NO. 109.

ASC 740 CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES. ASC 740

PRESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE FOR THE

FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF A TAX POSITION TAKEN OR

EXPECTED TO BE TAKEN IN A TAX RETURN. ASC 740 REQUIRES THAT AN

ORGANIZATION RECOGNIZE IN THE FINANCIAL STATEMENTS THE IMPACT OF THE TAX

POSITION IF THAT POSITION WILL MORE LIKELY THAN NOT BE SUSTAINED ON AUDIT.

BASED ON THE TECHNICAL MERITS OF THE POSITION. AS OF AND FOR THE YEAR

ENDED JUNE 30, 2017 AND 2016, PACLAC HAD NO MATERIAL

UNRECOGNIZED/DERECOGNIZED TAX BENEFITS OR TAX PENALTIES OR INTEREST.

THE FEDERAL INCOME TAX RETURNS OF PACLAC STILL OPEN AND SUBJECT TO IRS

EXAMINATION ARE FOR THE 2014 THROUGH 2017 TAX YEARS. THE STATE OF

CALIFORNIA INCOME TAX RETURNS STILL OPEN AND SUBJECT TO EXAMINATION ARE

ALSO FOR THE 2013 THROUGH 2017 TAX YEARS.

Schedule D (Form 990) 2016

SCHEDULE G

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

► Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

PERFORMING ARTS CENTER OF

LOS ANGELES COUNTY

Employer identification number

95-2217011

Part I Fundraising Activities required to complete this part	• Complete if the organization answert.	ered "Y	es" or	n Form 990, Part IV,	line 17. Form 990-EZ	filers are not
 Indicate whether the organization rai a X Mail solicitations b X Internet and email solicitations c X Phone solicitations d X In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, F b If "Yes," list the 10 highest paid indicompensated at least \$5,000 by the 	e X Solicitat f X Solicitat g X Special or oral agreement with any individual Part VII) or entity in connection with p viduals or entities (fundraisers) pursu	tion of tion of fundra (includerofess	non-g gover ising o ding o	overnment grants nment grants events fficers, directors, true undraising services?	stees, or X Yes	□ No e
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have co or con contribu	trol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
THEATER DIRECT INC 4213		Yes	No			
WEST BURBANK BLVD., BURBANK,	TELEMARKETING		Х	161,508.	65,833.	227,341.
「otal			•	161,508.	65,833.	227,341.
3 List all states in which the organization or licensing.	on is registered or licensed to solicit	contrib	utions	s or has been notified	d it is exempt from re	egistration
CA						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990 or 990-EZ) 2016

SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990 or 990-EZ) 2016 LOS ANGELES COUNTY 95 - 2217011Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000

		of fundraising event contributions and gr			<u> </u>	ots greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
					NONE	(add col. (a) through
			SUMMER SOIREE			col. (c))
æ			(event type)	(event type)	(total number)	. "
Revenue			100 500			100 500
Be	1	Gross receipts	189,590.			189,590.
	•	Lassa Cantaile, tions	50 270			59 270
	2	Less: Contributions	59,270.			59,270.
	3	Gross income (line 1 minus line 2)	130,320.			130,320.
	Ŭ	Gross moome (interminas intez)				
	4	Cash prizes				
	5	Noncash prizes				
ses						
pen	6	Rent/facility costs	112,228.			112,228.
Direct Expenses						
rec	7	Food and beverages	73,726.			73,726.
莅	_		14 540			14 540
		Entertainment Other direct expanses				14,549. 40,701.
	9 10	Other direct expenses				241,204.
		Net income summary. Subtract line 10 from li			_	-110,884.
Pa	rt I	II Gaming. Complete if the organization				, -
		\$15,000 on Form 990-EZ, line 6a.				
Ф			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue			(a) Birigo	bingo/progressive bingo	(b) Other gaming	col. (a) through col. (c))
Rev						
	1	Gross revenue				
	_					
ses	2	Cash prizes				
ben	2	Noncash prizes				
Ä	Ü	Noncasti prizes				
Direct Expenses	4	Rent/facility costs				
⊡						
	5	Other direct expenses				
			Yes %	Yes %	Yes %	
	6	Volunteer labor	└── No	└── No	└── No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)		>	
	_	Net consists a language of the set line 7	Strange Born of the London (all)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (a)		<u></u>	
9	Ent	ter the state(s) in which the organization condu	icte gaming activities:			
		the organization licensed to conduct gaming a	_	states?		Yes No
		No," explain:				100 110
~)d				
10a	We	ere any of the organization's gaming licenses re	evoked, suspended, or to	erminated during the tax	year?	Yes No
b	lf "	Yes," explain:				

632082 09-12-16

Schedule G (Form 990 or 990-EZ) 2016

PERFORMING ARTS CENTER OF

Sched	dule G (Form 990 or 990-EZ) 2016 LOS ANGELES COUNTY 95	5-2217011	Page 3
11 [Does the organization conduct gaming activities with nonmembers?	Yes	No
	s the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	o administer charitable gaming?	Yes	☐ No
	ndicate the percentage of gaming activity conducted in:		
		120	04
	The organization's facility		<u>%</u>
	An outside facility		<u>%</u>
14 E	Enter the name and address of the person who prepares the organization's gaming/special events books and records	:	
١	Name		
A	Address		
15 a [Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
b l	f "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amoun	t	
	of gaming revenue retained by the third party \$		
	f "Yes," enter name and address of the third party:		
	, ,		
N	Name		
F	Address		
16 (Gaming manager information:		
١	Name		
(Gaming manager compensation \$		
	Description of services provided		
			-
	Director/officer Employee Independent contractor		
	Director/officer Employee independent contractor		
4- 1			
	Mandatory distributions:		
a l	s the organization required under state law to make charitable distributions from the gaming proceeds to		
r	etain the state gaming license?	Yes	└── No
b E	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in t	the	
	organization's own exempt activities during the tax year 🕨 \$		
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Par	t III, lines 9, 9b,	10b, 15b,
	15c, 16, and 17b, as applicable. Also provide any additional information. See instructions		
	•	,	
SCHE	DULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:		
(T) 1	NAME OF FUNDRAISER: THEATER DIRECT INC.		
(1)	WIND OF FORDINISHE. THEMTER BIRDET INC.		
/T\ :	ADDDECC OF FINIDATORD, 4912 WECK DIDDANY DIVID DIDDANY CA 01505		
(1) 2	ADDRESS OF FUNDRAISER: 4213 WEST BURBANK BLVD., BURBANK, CA 91505		

PERFORMING ARTS CENTER OF

Schedule G	i (Form 990 or 990-EZ)	LOS ANGELES COUNTY	95-2217011	Page 4
Part IV	(Form 990 or 990-EZ) Supplemental Info	rmation (continued)		
			Schedule G (Form 990) or 000 E7

632084 04-01-16

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

Department of the Treasury Internal Revenue Service

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization PERFORMING AR LOS ANGELES C							Employer identification number 95-2217011
Part I General Information on Grants						l	J3 ZZ17011
 Does the organization maintain records criteria used to award the grants or ass Describe in Part IV the organization's presented. 	istance?						tion X Yes No
Part II Grants and Other Assistance to	•				anization answered "	Yes" on Form 990, Part	t IV, line 21, for any
recipient that received more than 1 (a) Name and address of organization or government	\$5,000. Part II cai	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
LOS ANGELES MASTER CHORALE 135 NORTH GRAND AVE. LOS ANGELES, CA 90012	95-2315682	501(C) 3	94,535.	0.	CASH GRANTS	N/A	GENERAL OPERATING ASSISTANCE AND GRANT
LOS ANGELES OPERA COMPANY 135 NORTH GRAND AVE. LOS ANGELES, CA 90012	95-2096402	501(C) 3	187,319.	0.	CASH GRANTS	N/A	GENERAL OPERATING ASSISTANCE
LOS ANGELES PHILHARMONIC ASSOCIATION - 151 SOUTH GRAND AVE. - LOS ANGELES, CA 90012	95-1696734	501(C) 3	187,319.	0.	CASH GRANTS	N/A	GENERAL OPERATING ASSISTANCE
CENTER THEATRE GROUP 135 NORTH GRAND AVE. LOS ANGELES, CA 90012	95-2466183	501(C) 3	260,763.	0.	CASH GRANTS	N/A	GENERAL OPERATING ASSISTANCE AND GRANT
 2 Enter total number of section 501(c)(3) a 3 Enter total number of other organization 							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2016)

PERFORMING ARTS CENTER	OF					
Schedule I (Form 990) (2016) LOS ANGELES COUNTY					95-2217011	Page 2
Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed.	s. Complete if the	organization answe	ered "Yes" on Form 9	990, Part IV, line 22.		
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash	assistance
SPOTLIGHT AWARDS - AWARDS AND SCHOLARSHIPS FOR						
HIGH SCHOOL PERFORMING AND VISUAL ARTISTS.	139	107,900.	0.	CASH AWARDS		
Part IV Supplemental Information. Provide the information red	uired in Part I, lin	e 2; Part III, column	(b); and any other a	I dditional information.		
PART I, LINE 2:						
WE REGULARLY REVIEW THE FINANCIAL STATEMENTS OF OU	R RESIDENT COM	MPANIES.				

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. PERFORMING ARTS CENTER OF

LOS ANGELES COUNTY

95-2217011

Employer identification number

Pa	art I Questions Regarding Compensation			
	·		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments X Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as, maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Х	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	Х	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee X Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		Х
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9	1	I

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2016

95-2217011

LOS ANGELES COUNTY

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred benefits		(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Deficition	(15)(1)*(10)	reported as deferred on prior Form 990	
(1) RACHEL S. MOORE	(i)	584,731.	120,000.	28,983.	28,871.	17,986.	780,571.	0.	
PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) HOWARD SHERMAN	(i)	311,434.	50,000.	23,894.	50,128.	8,520.	443,976.	0.	
EXECECUTIVE VP, COO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) LISA WHITNEY	(i)	228,073.	0.	24,396.	26,702.	11,070.	290,241.	0.	
SR. VP FINANCE, CFO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(4) VALENTINE GELMAN	(i)	198,584.	10,000.	18,067.	8,250.	21,922.	256,823.	0.	
SR. VP DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.	
(5) KEITH MCTAGUE	(i)	188,561.	0.	0.	0.	41,429.	229,990.	0.	
DIR. BUILDING SERVICES	(ii)	0.	0.	0.	0.	0.	0.	0.	
(6) ROBERT A. RUBY	(i)	157,323.	0.	10,400.	0.	43,739.	211,462.	0.	
HEAD OF PROPERTY	(ii)	0.	0.	0.	0.	0.	0.	0.	
(7) STANLEY RAY STEELMON	(i)	142,445.	0.	23,245.	0.	42,420.	208,110.	0.	
HEAD OF PROPERTY	(ii)	0.	0.	0.	0.	0.	0.	0.	
(8) EMMET D. KAISER	(i)	163,613.	0.	0.	0.	41,223.	204,836.	0.	
HEAD OF CARPENTRY	(ii)	0.	0.	0.	0.	0.	0.	0.	
(9) JAMES H. BERGER	(i)	145,027.	0.	18,000.	0.	42,615.	205,642.	0.	
HEAD OF ELECTRIC	(ii)	0.	0.	0.	0.	0.	0.	0.	
(10) SHAWN L. ANDERSON	(i)	146,357.	0.	11,144.	0.	42,454.	199,955.	0.	
HEAD OF CARPENTRY	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

Page 3

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE K (Form 990)

Department of the Treasury Internal Revenue Service **Supplemental Information on Tax-Exempt Bonds**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

► Attach to Form 990. Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

2016
Open to Public Inspection

Name of the organization

PERFORMING ARTS CENTER OF LOS ANGELES COUNTY

Employer identification number 95-2217011

Part I Bond Issues									5-221				
(a) Issuer name	(b) Issuer EIN	(c) CUSIP#	(d) Date issued	d (e) Issu	ıe price	(f) Descript	ion of purpose	(g) De	efeased	(h) On of is		(i) Po	
								Yes	No	Yes	No	Yes	No
CA INFRASTRUCTURE & ECONOMIC						RENOVATION C	F MARK TAPER						
A DEVELOPMENT BANK	63-0304653	13033WA37	05/23/07	28,4	473,809.	FORUM			Х		Х		Х
В													
									†				
С									$oxed{oxed}$				L
D													
Part II Proceeds	<u>'</u>	•	•										
			1	4		В	С				D		
1 Amount of bonds retired				3,230,000.									
2 Amount of bonds legally defeased									\bot				
3 Total proceeds of issue			2	9,465,374.					\bot				
4 Gross proceeds in reserve funds		1,713,320.					\bot						
5 Capitalized interest from proceeds				1,938,956.					\bot				
6 Proceeds in refunding escrows									\bot				
7 Issuance costs from proceeds				554,390.					\bot				
8 Credit enhancement from proceeds													
9 Working capital expenditures from proceed	eds												
10 Capital expenditures from proceeds			2	25,215,282.					\bot				
11 Other spent proceeds				85,621.					\bot				
12 Other unspent proceeds									\bot				
13 Year of substantial completion				2008					\bot				
			Yes	No	Yes	No	Yes	No	\bot	Yes	\perp	No	
14 Were the bonds issued as part of a currer				Х					\bot				
15 Were the bonds issued as part of an adva				Х					\bot				
16 Has the final allocation of proceeds been	made?								\bot				
17 Does the organization maintain adequate books and rec	ords to support the final allocat	ion of proceeds?	Х										
Part III Private Business Use			1				1						
				A		B	С		+		D		
1 Was the organization a partner in a partner	•		Yes	No	Yes	No	Yes	No	+	Yes	+	No	
which owned property financed by tax-ex	· ·			Х					+		+		
2 Are there any lease arrangements that ma													
bond-financed property?			Х						丄				

LOS ANGELES COUNTY

Par	t III Private Business Use (Continued)									
			A		E	3	(Ç	[)
За	Are there any management or service contracts that may result in private	Yes	No		Yes	No	Yes	No	Yes	No
	business use of bond-financed property?	X								
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside									
	counsel to review any management or service contracts relating to the financed property?	Х								
С	Are there any research agreements that may result in private business use of bond-financed property?		Х							
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside									
	counsel to review any research agreements relating to the financed property?									
4	Enter the percentage of financed property used in a private business use by									
	entities other than a section 501(c)(3) organization or a state or local government		1.00	%		%		%		%
5	Enter the percentage of financed property used in a private business use as a result of									
	unrelated trade or business activity carried on by your organization, another									
	section 501(c)(3) organization, or a state or local government		Ç	%		%		%		%
6	Total of lines 4 and 5		1.00	%		%		%		%
7	Does the bond issue meet the private security or payment test?		Х							
8a	Has there been a sale or disposition of any of the bond-financed property to a non-									
	governmental person other than a 501(c)(3) organization since the bonds were issued?		Х							
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed							•		
	of		Ç	%		%		%		%
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections									
	1.141-12 and 1.145-2?									
9	Has the organization established written procedures to ensure that all nonqualified									
	bonds of the issue are remediated in accordance with the requirements under									
	Regulations sections 1.141-12 and 1.145-2?	X								
Par	t IV Arbitrage									
			A		Е	3	(0	[)
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No		Yes	No	Yes	No	Yes	No
	Penalty in Lieu of Arbitrage Rebate?		Х							
2	If "No" to line 1, did the following apply?		•							•
a	Rebate not due yet?		Х							
	Exception to rebate?	Х								
	No rebate due?	Х								
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was							•		
	performed									
3	Is the bond issue a variable rate issue?		Х							
4a	Has the organization or the governmental issuer entered into a qualified									
	hedge with respect to the bond issue?		Х							
b	Name of provider		•							
С	Term of hedge									
	Was the hedge superintegrated?									
е	Was the hedge terminated?									

Page 2

Part IV Arbitrage (Continued)	1	•	· .		1			
		A	<u> </u>	3 I	 	C 	 	D
- 1/	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?	SEE PART V	<u> </u>						
b Name of provider	SEE PARI	v 1					 	
c Term of GIC	X	1					 	
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	X					 	 	
6 Were any gross proceeds invested beyond an available temporary period?	^					 	 	-
7 Has the organization established written procedures to monitor the requirements of	•							
section 148?	X							
Part V Procedures To Undertake Corrective Action			.		1			
	+	Α	<u> </u>	3 I	 	<u>C</u>	 	D
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of								
federal tax requirements are timely identified and corrected through the voluntary								
closing agreement program if self-remediation isn't available under applicable								
regulations?	Х							
Part VI Supplemental Information. Provide additional information for responses to question	ns on Schedul	le K. See insti	ructions					
PART I & PART II:								
DIFFERENCE BETWEEN AMOUNT REPORTED ON PART I COLUMN (E) AND PART II								
LINE 3 IS DUE TO INTEREST EARNINGS ON BOND PROCEEDS.								
PART III, LINE 7:								
AS PROVIDED IN TREASURY REGULATION SECTION 1.141-4(C)(2)(I)(B), THE								
AMOUNT OF PRIVATE PAYMENTS TAKEN INTO ACCOUNT UNDER THE PRIVATE PAYMENT								
TEST MAY NOT EXCEED THE AMOUNT OF PRIVATE BUSINESS USE AND/OR UNRELATED								
TRADE OR BUSINESS USE. ACCORDINGLY, THE AMOUNT OF PRIVATE PAYMENTS FOR								
THE REPORTING PERIOD DOES NOT EXCEED THE AMOUNT STATES IN PART III,								
LINE 6. THE ORGANIZATION HAS NOT UNDERTAKEN AN ANALYSIS OF THE PRIVATE								
SECURITY TEST WITH RESPECT TO THE BONDS, AS THE LEVEL OF PRIVATE								
BUSINESS USE AND/OR UNRELATED TRADE OR BUSINESS REPORTED IN PART III,								
LINE 6, IS NOT IN EXCESS OF AMOUNTS PERMITTED UNDER SECTION 145 OF THE								
CODE.								
PART IV, LINE 2C:								
THE TENTH YEAR REBATE COMPUTATION WAS PERFORMED AS OF MAY 23, 2017.								
PART IV LINE 5B:								
TRINITY FDG CO & DEPFA BANK	_							
	_							
PART IV, LINE 5C:								
1.10 AND 1.30 YEAR								

SCHEDULE M (Form 990)

Noncash Contributions

Employer identification number

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Part I

Name of the organization

Types of Property

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

PERFORMING ARTS CENTER OF

Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

LOS ANGELES COUNTY 95-2217011

(a) (b) (c) (d) Check if Number of Noncash contribution Method of determining contributions or amounts reported on applicable noncash contribution amounts items contributed Form 990, Part VIII, line 1a Art - Works of art Art - Historical treasures Art - Fractional interests 3 Books and publications 4 5 Clothing and household goods Cars and other vehicles 6 Boats and planes 7 Intellectual property 8 888,010.AVG. ON DATE DONATED Securities - Publicly traded 9 10 Securities - Closely held stock Securities - Partnership, LLC, or trust interests Securities - Miscellaneous 12 13 Qualified conservation contribution -Historic structures Qualified conservation contribution - Other 14 Real estate - Residential 15 Real estate - Commercial 16 Real estate - Other 17 18 Collectibles Food inventory 19 Drugs and medical supplies 20 21 Taxidermy Historical artifacts 22 23 Scientific specimens Archeological artifacts 24 25 Other 26 Other 27 Other 28 Other Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for Х exempt purposes for the entire holding period? 30a **b** If "Yes." describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? Х 31 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash X contributions? 32a **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, 33 describe in Part II. For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) (2016)

SCHEDULE 0

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. PERFORMING ARTS CENTER OF LOS ANGELES COUNTY

Employer identification number

95 - 2217011

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:	
THE MUSIC CENTER STRIVES TO DEEPEN THE CULTURAL LIFE OF EVERY RESIDENT	
OF LOS ANGELES COUNTY AND CONTINUE CREATING AN INCREASINGLY RELEVANT,	
MULTIDISCIPLINARY PERFORMING ARTS CENTER.	
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:	
THE MUSIC CENTER STRIVES TO DEEPEN THE CULTURAL LIFE OF EVERY RESIDENT	
OF LOS ANGELES COUNTY AND CONTINUE CREATING AN INCREASINGLY RELEVANT,	
MULTIDISCIPLINARY PERFORMING ARTS CENTER. WE CHAMPION THE ARTS IN LOS	
ANGELES FOR ALL PEOPLE. WE CONNECT THE PEOPLE OF LOS ANGELES WITH ONE	
ANOTHER AND WITH ART THAT CAN ENRICH THEIR LIVES. WE EMBRACE PATRONS,	
VISITORS AND COMMUNITY MEMBERS FROM ALL BACKGROUNDS. WE PROVIDE	
EXCEPTIONAL SERVICE TO OUR RESIDENT COMPANIES AND TO ALL WHO PRESENT OR	
EXPERIENCE THE ARTS AT THE MUSIC CENTER, AND WE FAITHFULLY STEWARD THE	
CAMPUS ENTRUSTED TO US BY THE COUNTY OF LOS ANGELES.	
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:	
STAGE AND THEATRE OPERATIONS. THAT INCLUDES RESPONSIBILITY FOR	
IMPROVEMENTS TO AND MAINTENANCE OF THE FACILITIES, SECURITY, GUEST	
SERVICES, PRODUCTION AND SCHEDULING AND EVENTS MANAGEMENT.	
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:	
FROM ITS EARLY DAYS, THE MUSIC CENTER HAS BEEN A PIONEER IN ARTS	
EDUCATION AND OFFERS A MULTI-FACETED PROGRAM FROM K-12. MILLIONS OF	
STUDENTS HAVE PARTICIPATED IN MUSIC CENTER ARTS EDUCATION PROGRAMS	
SINCE 1970. IN 2016-2017, THE MUSIC CENTER'S ARTS EDUCATION PROGRAMS	
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.	chedule O (Form 990 or 990-EZ) (2016)

632211 08-25-16

Name of the organization PERFORMING ARTS CENTER OF LOS ANGELES COUNTY	Employer identification number 95-2217011
SERVED MORE THAN 850 PUBLIC AND PRIVATE SCHOOLS AND 130,000 STUDENTS.	
THE MUSIC CENTER ALSO MANAGES AND PROGRAMS GRAND PARK (PARK) ON BEHALF	
OF THE COUNTY OF LOS ANGELES, WHICH OWNS THE PARK. THE 12-ACRE PARK	
EXTENDS FROM THE MUSIC CENTER CAMPUS TO LOS ANGELES' CITY HALL. THE	
PARK FEATURES MULTI-USE LAWNS, STAGES AND OPEN SPACES AVAILABLE FOR	
BOTH LEISURE AND CIVIC GATHERINGS. EACH YEAR, MORE THAN THREE MILLION	
PEOPLE VISIT THE PARK TO ENJOY ITS MANY AMENITIES. IN 2016-2017, WHICH	
IS THE PARK'S FIFTH YEAR OF OPERATIONS, THE MUSIC CENTER PRESENTED 251	
FREE EVENTS IN THE PARK, ATTRACTING MORE THAN 200,000 PARTICIPANTS. THE	
PARK HAS BECOME THE GO-TO CENTRAL GATHERING PLACE IN LOS ANGELES FOR	
MAJOR HOLIDAY CELEBRATIONS INCLUDING JULY 4TH AND NEW YEAR'S EVENT.	
MANY OF THE EVENTS PRODUCED BY THE MUSIC CENTER IN GRAND PARK WERE	
CURATED IN CONJUNCTION WITH THE PARK'S NUMEROUS COMMUNITY PARTNERS.	
FORM 990, PART VI, SECTION A, LINE 2:	
BOARD MEMBERS DAVID AND KIKI GINDLER ARE HUSBAND AND WIFE.	
FORM 990, PART VI, SECTION B, LINE 11B:	
THE BOARD HAS DELEGATED THE AUTHORITY TO THE AUDIT COMMITTEE TO REVIEW AND	
APPROVE THE FORM 990. ONCE APPROVED IT IS MADE AVAILABLE TO THE REMAINDER	
OF THE BOARD PRIOR TO THE FORM BEING ELECTRONICALLY FILED.	
FORM 990, PART VI, SECTION B, LINE 12C:	
ANNUAL DISCLOSURES ARE REQUIRED FOR OFFICERS, DIRECTORS, AND KEY EMPLOYEES.	
DISCLOSURES FOR DIRECTORS ARE SUMMARIZED AND REVIEWED BY THE CHAIRMAN OF	
THE BOARD. DISCLOSURES FOR OFFICERS AND KEY EMPLOYEES ARE REVIEWED BY THE	
CHIEF FINANCIAL OFFICER. IF A CONFLICT EXISTS AT THE DIRECTOR LEVEL, THE	
DIRECTOR IS PROHIBITED FROM PARTICIPATING IN THE BOARD'S DELIBERATIONS AND	
	Schedule O (Form 990 or 990-EZ) (2016)

Name of the organization PERFORMING ARTS CENTER OF		Employer identification number
LOS ANGELES COUNTY		95-2217011
DECISIONS IN THE TRANSACTION. IF POTENTIAL CONFLICTS ARISE AT THE OFF	FICER	
OR KEY EMPLOYEE LEVEL, THE TRANSACTION WOULD BE REVIEWED BY LEGAL COU	JNSEL	
AND THE RELEVANT BOARD COMMITTEE TO DETERMINE RESTRICTIONS.		
FORM 990, PART VI, SECTION B, LINE 15:		
PURSUANT TO THE BYLAWS, THE EXECUTIVE COMMITTEE IS AUTHORIZED TO DETE	ERMINE	
THE COMPENSATION OF THE PRESIDENT. AFTER A THOROUGH REVIEW OF HIS/HE	€R	
PERFORMANCE, COMPENSATION OF EXECUTIVES AT OTHER ARTS ORGANIZATIONS,	AND	
OTHER FACTORS, THE COMMITTEE APPROVES THE CEO'S COMPENSATION.		
THE CEO REVIEWS AND APPROVES THE COMPENSATION OF OFFICERS AND KEY		
EMPLOYEES.		
FORM 990, PART VI, SECTION C, LINE 19:		
ALL GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, INFORMATIONAL F	RETURNS	
AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.		
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:		
CHANGE IN VALUE OF BENEFICIAL INTERESTS 1,80	05,385.	
SFAS 158 COMPREHENSIVE INCOME RELATED TO PENSION OBLIGATION 1,91	17,205.	
INCOME/LOSS FROM PARTNERSHIP	-176.	
TOTAL TO FORM 990, PART XI, LINE 9 3,72	22,414.	
FORM 990, PART XII, LINE 2C:		
THE ORGANIZATION HAS AN AUDIT COMMITTEE THAT ASSUMES RESPONSIBILITY F	FOR	
THE OVERSIGHT OF THE AUDIT.		

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Department of the Treasury Internal Revenue Service

Name of the organization

PERFORMING ARTS O

LOS ANGELES COUNTY

Employer identification number 95-2217011

OMB No. 1545-0047

2016

Open to Public

Inspection

► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

PERFORMING ARTS CENTER OF

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (a) (b) (c) (d) (e) (f) Legal domicile (state or Name, address, and EIN (if applicable) Primary activity Total income End-of-year assets Direct controlling of disregarded entity entity foreign country) Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt Part II organizations during the tax year. (a) (b) (c) (d) (e) (f) **(g)** Section 512(b)(13) Name, address, and EIN Legal domicile (state or **Exempt Code** Public charity Direct controlling Primary activity controlled of related organization section status (if section entity entity? foreign country) 501(c)(3)) Yes No

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year. Part III

	1 3										
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile	Direct controlling	Predominant income	Share of total	Share of	Disprop	ortionate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General	Percentage
of related organization		(state or foreign	entity	(related, unrelated, excluded from tax under sections 512-514)	income	end-of-year assets	alloca	ations?	amount in box	partner	ownership
		country)		sections 512-514)		833013	Yes	No	K-1 (Form 1065)	Yes N	
-											
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Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	((i) ction
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership	512(l conti	b)(13) rolled tity?
		country)		ŕ				Yes	No
THE MUSIC CENTER OF LOS ANGELES COUNTY, INC.									
- 95-4859278, 135 NORTH GRAND AVENUE, LOS									
ANGELES, CA 90012	INACTIVE	CA	N/A	C CORP			100.00%		х
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Page 3

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Not	te: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No	
1	During the tax year, did the organization engage in any of the following transactions with one	e or more r	elated organizations listed	in Parts II-IV?				
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		X	
b	Gift, grant, or capital contribution to related organization(s)				1b		X	
С	Gift, grant, or capital contribution from related organization(s)				1c		Х	
d	Loans or loan guarantees to or for related organization(s)				1d		Х	
е	Loans or loan guarantees by related organization(s)				1e		X	
f	Dividends from related organization(s)				1f		Х	
	Sale of assets to related organization(s)				1g		Х	
h	Purchase of assets from related organization(s)				1h		Х	
i	Exchange of assets with related organization(s)				1i		Х	
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		Х	
_	•							
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		Х	
	Performance of services or membership or fundraising solicitations for related organization(s)				11		Х	
m	m Performance of services or membership or fundraising solicitations by related organization(s)							
n	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)							
	Sharing of paid employees with related organization(s)				10		Х	
р	Reimbursement paid to related organization(s) for expenses				1p		Х	
a	Reimbursement paid by related organization(s) for expenses				1q		Х	
-								
r	Other transfer of cash or property to related organization(s)				1r		Х	
	Other transfer of cash or property from related organization(s)				1s		Х	
	(a) (k	b) action	(c) Amount involved	(d) Method of determining amount invo	olved			
		e (a-s)	, uneant inverse					
(1)								
(2)								
(3)								
,								
(4)								
(5)								
. ,								
(6)		F 0						
22216	22 00 06 16	52		Schodulo P	(For	n aan	2016	

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a)	(b)	(c)	(d)	(e) Are a partners 501(c) orgs.)	(f)	(g)	(h)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related, unrelated, excluded from tax under sections 512-514)	partners	S Sec.	Share of	Share of	Disp	ropor-	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General	or Percentage
of entity		(state or foreign	excluded from tax under	orgs.)(3) .?	total	end-of-year	alloca	itions?	of Schedule K-1	partne	ownership
		country)	sections 512-514)	Yes I		income	assets	Yes	No	(Form 1065)	Yes N	О
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