

Return of Organization Exempt From Income Tax

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

2009

Department of the Treasury Internal Revenue Service

Open to Public Inspection

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

Header section A-M containing organization details: STRIVE FOUNDATION, EIN 33-0411257, 9124 S MAIN STREET, LOS ANGELES CA 90003.

Part I Summary table with columns for Revenue and Expenses, and rows 1-22 detailing financial data for the current and prior years.

Part II Signature Block containing officer signature (JIM TETREAU, PRESIDENT), preparer signature (PAUL CARNEY), and firm information (PAUL CARNEY CPA).

May the IRS discuss this return with the preparer shown above? (see instructions) [X] Yes [] No

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission:

SEE ATTACHMENT #3

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 254,073 including grants of \$) (Revenue \$)

SEE ATTACHMENT #4

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services. (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ► \$ 254,073

Part IV Checklist of Required Schedules

Table with 3 main columns: Question, Yes, No. Rows 1-20 contain various organizational requirements and their status (Yes/No/X).

Part IV Checklist of Required Schedules (continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23	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		X
24a	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 25		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? N/A		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? N/A		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? N/A		
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III		X
28	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	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note: All Form 990 filers are required to complete Schedule O	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Table with columns for question number, question text, and Yes/No checkboxes. Rows include questions 1a through 12b regarding IRS filings, backup withholding, employee reporting, foreign accounts, prohibited transactions, and charitable trusts.

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.

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body (9); 1b Enter the number of voting members that are independent (7); 2 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? (X); 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? (X); 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? (X); 5 Did the organization become aware during the year of a material diversion of the organization's assets? (X); 6 Does the organization have members or stockholders? (X); 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? (X); 7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? (X); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? (X); b Each committee with authority to act on behalf of the governing body? (X); 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. (X)

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Does the organization have local chapters, branches, or affiliates? (X); 10b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? (N/A); 11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? (X); 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Does the organization have a written conflict of interest policy? If "No," go to line 13. (X); 12b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (N/A); 12c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done (N/A); 13 Does the organization have a written whistleblower policy? (X); 14 Does the organization have a written document retention and destruction policy? (X); 15 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: a The organization's CEO, Executive Director, or top management official? (X); b Other officers or key employees of the organization? (X); 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? (X); 16b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? (N/A)

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ► NONE
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
[X] Own website [] Another's website [X] Upon request
19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► SEE ATTACHMENT #5

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

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. Use Schedule J-2 if additional space is needed.

- 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. 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.

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

Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		INDIVIDUAL	DIRECTOR	INSTITUTIONAL	OFFICER	KEY EMPLOYEE	HIGHEST COMPENSATED EMPLOYEE			
DONALD ANDERSON, SR. DIRECTOR	0.50	X						0	0	0
AUSTIN DRAGON DIRECTOR	0.50	X						0	0	0
JANA NUNN CHAIRMAN	0.50	X						0	0	0
JORGE SANDOVAL DIRECTOR	0.50	X						0	0	0
CINDY TRAN DIRECTOR	0.50	X						0	0	0
GARY WILSON DIRECTOR	0.50	X						0	0	0
CHRISTA REIFF DIRECTOR	0.50	X						0	0	0
JIM TETREAU PRESIDENT	40.00	X			X	X		45,000	0	0
DON ANDERSON, JR. VICE-PRESIDENT	40.00	X			X	X	X	47,000	0	0

Part VIII		Statement of Revenue		(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514	
OTHER CONTRIBUTIONS SIMILAR AMOUNTS	1a Federated campaigns	1a						
	b Membership dues	1b	4676					
	c Fundraising events	1c						
	d Related organizations	1d						
	e Government grants (contributions)	1e						
	f All other contributions, gifts, grants, & similar amounts not included above	1f	308922					
	g Noncash contributions included in lines 1a-1f:		\$ 2400					
h Total. Add lines 1a-1f				313598				
PROGRAM SERVICE REVENUE			Business Code					
	2a							
	b							
	c							
	d							
	e							
	f All other program service revenue							
g Total. Add lines 2a-2f								
OTHER REVENUE	3 Investment income (including dividends, interest, and other similar amounts)			976				
	4 Income from investment of tax-exempt bond proceeds							
	5 Royalties							
	6a Gross Rents	(i) Real	(ii) Personal					
		b Less: rental expenses						
		c Rental income or (loss)						
	d Net rental income or (loss)							
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other					
				901				
		b Less: cost or other basis and sales expenses		865				
	c Gain or (loss)		36					
	d Net gain or (loss)			36				
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18.	a						
	b Less: direct expenses	b						
	c Net income or (loss) from fundraising events							
9a Gross income from gaming activities. See Part IV, line 19	a							
b Less: direct expenses	b							
c Net income or (loss) from gaming activities								
10a Gross sales of inventory, less returns and allowances	a							
b Less: cost of goods sold	b							
c Net income or (loss) from sales of inventory								
Miscellaneous Revenue		Business Code						
11a								
b								
c								
d All other revenue								
e Total. Add lines 11a-11d								
12 Total revenue. See instructions				314610				

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) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	92000	69500	22500	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	72716	71951	765	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	15607	13405	2202	
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	7500		7500	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	4409			4409
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses	2816		2816	
14 Information technology	4262		4262	
15 Royalties				
16 Occupancy	11814	6970	4844	
17 Travel	142		142	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	16094	12875	3219	
23 Insurance	19077	15262	3815	
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a PROGRAM SERVICE EXPENSE	35282	35282		
b INDEPENDENT INSTRUCTORS	20515	20515		
c REPAIRS	3898	3118	780	
d VEHICLE EXPENSES	3662	1831	1831	
e BIRDS	3581		3581	
f All other expenses #6.	7424	3364	4060	
25 Total functional expenses. Add lines 1 through 24f	320799	254073	62317	4409
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X		Balance Sheet		(A)		(B)	
				Beginning of year		End of year	
A S S E T S	1 Cash -- non-interest bearing			182,294	1	180,715	
	2 Savings and temporary cash investments				2		
	3 Pledges and grants receivable, net				3		
	4 Accounts receivable, net				4		
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L				5		
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L				6		
	7 Notes and loans receivable, net				7		
	8 Inventories for sale or use				8		
	9 Prepaid expenses and deferred charges				9		
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.	10a	784,248				
	b Less: accumulated depreciation	10b	120,880		673,444	10c	663,368
	11 Investments -- publicly traded securities					11	
	12 Investments -- other securities. See Part IV, line 11					12	7,276
	13 Investments -- program-related. See Part IV, line 11					13	
	14 Intangible assets				1,950	14	1,950
	15 Other assets. See Part IV, line 11					15	
16 Total assets. Add lines 1 through 15 (must equal line 34)				857,688	16	853,309	
L I A B I L I T I E S	17 Accounts payable and accrued expenses			705	17	1,835	
	18 Grants payable				18		
	19 Deferred revenue				19		
	20 Tax-exempt bond liabilities				20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D.				21		
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. 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. Complete Part X of Schedule D.					25	
	26 Total liabilities. Add lines 17 through 25				705	26	1,835
F U N D A S S E T S O R S	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27 Unrestricted net assets			847,345	27	851,474	
	28 Temporarily restricted net assets			9,638	28		
	29 Permanently restricted net assets				29		
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.						
	30 Capital stock or trust principal, or current funds				30		
	31 Paid-in or capital surplus, or land, building, or equipment fund				31		
	32 Retained earnings, endowment, accumulated income, or other funds				32		
	33 Total net assets or fund balances			856,983	33	851,474	
	34 Total liabilities and net assets/fund balances			857,688	34	853,309	

Part XI Financial Statements and Reporting

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
b Were the organization's financial statements audited by an independent accountant?	X	
c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		X
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits N/A		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2009

Department of the Treasury
Internal Revenue Service

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. ▶ See separate instructions.

Open to Public Inspection

Name of the organization STRIVE FOUNDATION	Employer identification number 33-0411257
--	---

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check 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.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions--subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I
 - b Type II
 - c Type III-Functionally integrated
 - d Type III-Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)		X
11g(ii)		X
11g(iii)		X

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

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

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	135366	290937	249405	282749	308922	1267379
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	31486	30899		5500	4676	72561
3 Gross receipts from activities that are not an unrelated trade or business under section 513				1015		1015
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	166852	321836	249405	289264	313598	1340955
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						1340955

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	166852	321836	249405	289264	313598	1340955
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	6751	4737	7359	3799	976	23622
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	6751	4737	7359	3799	976	23622
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	173603	326573	256764	293063	314574	1364577

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	98.27 %
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	98.31 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	1.73 %
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	2.00 %

19a 33 1/3 % support tests -- 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3 % support tests -- 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

▶ Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

2009**Name of the organization**

STRIVE FOUNDATION

Employer identification number

33-0411257

Organization type (check one):**Filers of:****Section:**

Form 990 or 990-EZ

 501(c)(3) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization

Form 990-PF

 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.**Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$ _____**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).**For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.****Schedule B (Form 990, 990-EZ, or 990-PF) (2009)**

Name of organization STRIVE FOUNDATION	Employer identification number 33-0411257
--	---

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	CITIGROUP 3800 CITIBANK DR. G-3-4 TAMPA, FL 33610	\$ 6,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	ELIZABETH GEORGE FOUNDATION P.O. BOX 1429 LANGLEY, WA 98260-1429	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	THE CAROL JAMES COLLINS FOUNDATION 6101 W CENTINELA AVE. STE. 100 CULVER CITY, CA 90230	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	THE WILLIAM C. BANNERMAN FOUNDATIO 9255 SUNSET BLVD. STE. 400 W HOLLYWOOD, CA 90069-3302	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5	CHARTWELL CHARITABLE FOUNDATION 1999 AVE. OF THE STARS STE. 3050 LOS ANGELES, CA 90067	\$ 20,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6	WEINGART FOUNDATION 1055 W SEVENTH ST. STE. 3050 LOS ANGELES, CA 90017	\$ 25,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization STRIVE FOUNDATION Employer identification number 33-0411257

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	BANK OF AMERICA FOUNDATION 100 N. TRYON ST. CHARLOTTE, NC 28255	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
8	WILSON-THORNHILL FOUNDATION 2700 LONE OAK PARKWAY DEPT. A 1040 EAGAN, MN 55121	\$ 75,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
9	RUTH/ALLEN ZIEGLER FOUNDATION 1723 CLOVERFIELD BLVD. SANTA MONICA, CA 90404	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
10	THOMAS & DOROTHY LEAVY FOUNDATION 10100 SANTA MONICA BLVD. STE. 610 LOS ANGELES, CA 90067	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
11	COMERICA BANK 2321 ROSECRANS 5TH FLOOR EL SEGUNDO, CA 90051	\$ 7,800	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
12	HENRY L GUENTHER FOUNDATION 2029 CENTURY PARK EAST #4392 LOS ANGELES, CA 90067	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization STRIVE FOUNDATION Employer identification number 33-0411257

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
13	THE GREEN FOUNDATION 3070 LOMBARDY RD. PASADENA, CA 91107	\$ 25,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
14	BOSTOCK FAMILY FOUNDATION P.O. BOX 1525 PENNINGTON, NJ 08534	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
15	MARC & EVA STERN FOUNDATION 865 S. FIGUEROA ST. STE. 1800 LOS ANGELES, CA 90017	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
16	S. MARK TAPER FOUNDATION 12011 SAN VICENTE BLVD. STE. 400 LOS ANGELES, CA 90049	\$ 30,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
17	THE BARNES FAMILY FOUNDATION 5037 STERN AVE. SHERMAN OAKS, CA 91423-1241	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
18	HUGH & HAZEL DARLING FOUNDATION 520 S. GRAND AVE. STE. 700 LOS ANGELES, CA 90071	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.**
▶ **Attach to Form 990. ▶ See separate instructions.**

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization
STRIVE FOUNDATION

Employer identification number
33-0411257

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

- 1 Purpose(s) of conservation easements held by the organization (check all that apply).
- | | |
|---|--|
| <input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure) | <input type="checkbox"/> Preservation of an historically important land area |
| <input type="checkbox"/> Protection of natural habitat | <input type="checkbox"/> Preservation of a certified historic structure |
| <input type="checkbox"/> Preservation of open space | |
- 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.
- | | Held at the End of the Tax Year |
|--|---------------------------------|
| a Total number of conservation easements | 2a |
| b Total acreage restricted by conservation easements | 2b |
| c Number of conservation easements on a certified historic structure included in (a) | 2c |
| d Number of conservation easements included in (c) acquired after 8/17/06 | 2d |
- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____
- 4 Number of states where property subject to conservation easement is located ▶ _____
- 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
- 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____
- 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____
- 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?
- 9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenues included in Form 990, Part VIII, line 1
- (ii) Assets included in Form 990, Part X
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:
- a Revenues included in Form 990, Part VIII, line 1
- b Assets included in Form 990, Part X

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

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 rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on 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? Yes No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

	Amount
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(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 year end balance held as:

- a Board designated or quasi-endowment _____ %
- b Permanent endowment _____ %
- c Term endowment _____ %

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

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Investments -- Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		104,450		104,450
b Buildings		617,504	67,032	550,472
c Leasehold improvements				
d Equipment		40,622	32,176	8,446
e Other		21,672	21,672	

Total. Add lines 1a through 1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).) 663,368

Part VII Investments -- Other Securities. 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
Financial derivatives		
Closely-held equity interests		
Other JEFFRIES 26 SH	365	COST
MICROSOFT 100 SH	2,048	COST
ARES 100 SH	708	COST
FIFTH ST 100 SH	831	COST
GE 100 SH	1,302	COST
PROSPECT 125 SH	1,068	COST
APOLLO 100 SH	954	COST
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	7,276	

Part VIII Investments -- Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount	
Federal income taxes		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)		

2. FIN 48 Footnote. In Part XIV, 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.

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	314,610
2	Total expenses (Form 990, Part IX, column (A), line 25)	320,799
3	Excess or (deficit) for the year. Subtract line 2 from line 1	-6,189
4	Net unrealized gains (losses) on investments	
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV.)	
9	Total adjustments (net). Add lines 4 through 8	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	-6,189

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements	314,610
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a	Net unrealized gains on investments	2a
b	Donated services and use of facilities	2b
c	Recoveries of prior year grants	2c
d	Other (Describe in Part XIV.)	2d
e	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	314,610
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	4a
b	Other (Describe in Part XIV.)	4b
c	Add lines 4a and 4b	4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	314,610

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return		
1	Total expenses and losses per audited financial statements	320,120
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	
a	Donated services and use of facilities	2a
b	Prior year adjustments	2b
c	Other losses	2c
d	Other (Describe in Part XIV.)	2d 15,415
e	Add lines 2a through 2d	2e 15,415
3	Subtract line 2e from line 1	304,705
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	4a
b	Other (Describe in Part XIV.)	4b 16,094
c	Add lines 4a and 4b	4c 16,094
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	320,799

Part XIV Supplemental Information
 Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

▶ Attach to Form 990.

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization

STRIVE FOUNDATION

Employer identification number

33-0411257

STRIVE POSTS ITS TAX & AUDITED FINANCIAL
STATEMENTS ON ITS WEBSITE.

PRINCIPAL OFFICER NAME AND ADDRESS

ATTACHMENT 1: FORM 990 PAGE 1, LINE F

OPEN TO PUBLIC INSPECTION For calendar year 2009, or tax period beginning _____, and ending _____.

Name of Organization STRIVE FOUNDATION Employer Identification Number 33-0411257

990, Page 1, Line F

Principal officer name JIM TETREAU
or
Business Name:

Street Address 9124 S MAIN ST

U.S. Address:

Zip code 90003 City LOS ANGELES State CA

or

Foreign Address

City

Province or State

Country

Postal code

PRIMARY EXEMPT PURPOSE

ATTACHMENT 2: FORM 990 PAGE 1, PART I

OPEN TO PUBLIC INSPECTION	For calendar year 2009 or tax period beginning _____, and ending _____.
Name of Organization STRIVE FOUNDATION	Employer Identification Number 33-0411257

Primary Purpose

TO PROVIDE EXEMPLARY ACADEMIC GUIDANCE TO CHILDREN, YOUTH & THEIR FAMILIES IN THE WATTS/LOS ANGELES COMMUNITY. STRIVE PROVIDES EDUCATION, SUPPORT & DEVELOPMENT IN READING, WRITING & ENGLISH LITERACY; MATH & COGNITIVE SKILLS; COMPUTER & INFORMATION LITERACY; CULINARY & ARTS; PROTEGE RESOURCES; DEVELOPMENT OF THE MORAL, CREATIVE & ENTREPRENEURIAL SPIRIT.

PRIMARY EXEMPT PURPOSE

ATTACHMENT 3: FORM 990 PAGE 2, PART III

OPEN TO PUBLIC INSPECTION	For calendar year 2009 or tax period beginning _____, and ending _____.
Name of Organization STRIVE FOUNDATION	Employer Identification Number 33-0411257

Primary Purpose

TO PROVIDE EXEMPLARY ACADEMIC GUIDANCE TO CHILDREN, YOUTH & THEIR FAMILIES IN THE WATTS/LOS ANGELES COMMUNITY. STRIVE PROVIDES EDUCATION, SUPPORT & DEVELOPMENT IN READING, WRITING & ENGLISH LITERACY; MATH & COGNITIVE SKILLS; COMPUTER & INFORMATION LITERACY; CULINARY & ARTS; PROTEGE RESOURCES; DEVELOPMENT OF THE MORAL, CREATIVE & ENTREPRENEURIAL SPIRIT.

PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENT

ATTACHMENT 4: FORM 990 PAGE 2, PART III

OPEN TO PUBLIC INSPECTION	For calendar year 2009, or tax period beginning	, and ending
------------------------------	---	--------------

Name of Organization STRIVE FOUNDATION	Employer Identification Number 33-0411257
---	--

Part III - Statement of Program Service Accomplishments

Code:	Expenses: 254,073	including Grants of:	Revenue:
-------	-------------------	----------------------	----------

Exempt Purpose Achievements

IN AN ACADEMY-PAR LEARNING ENVIRONMENT, & FROM A CHARACTER-IS-PARAMOUNT PERSPECTIVE, WE HELP OUR CHILDREN ACHIEVE READING, WRITING, ENGLISH LANGUAGE FLUENCY & MATH SKILLS PROFICIENCY IN THEIR GRADE LEVEL. OUR BOTTOM LINE MISSION IS TO PROVIDE A SANCTUARY OF INSTRUCTOR, GUIDANCE & PROTEGE RESOURCES THAT BETTER EQUIP OUR KIDS TO NAVIGATE THE THORNY ISSUES THAT THEY FACE EVERY DAY IN THIS COMMUNITY & BEYOND. THE SCHOOL SERVES APPROXIMATELY 120 STUDENTS DAILY.

BOOKS ARE IN CARE OF

ATTACHMENT 5: FORM 990 PAGE 6, PART VI, SECTION C, LINE 20

OPEN TO PUBLIC INSPECTION For calendar year 2009 or tax period beginning _____, and ending _____.

Name of Organization STRIVE FOUNDATION Employer Identification Number 33-0411257

Part VI - Line 91a

Individual Name DON ANDERSON, JR.
or
Business Name:

Street Address 9124 S. MAIN STREET

U.S. Address:

Zip code 90003 City LOS ANGELES State CA

or

Foreign Address

City

Province or State

Country

Postal code

Phone Number (323) 779-1064

Fax Number (323) 528-5691

SCHEDULE OF OTHER EXPENSES

ATTACHMENT 6: FORM 990 PAGE 10, LINE 24 - OTHER EXPENSES

OPEN TO PUBLIC
INSPECTION

For calendar year 2009 or tax period beginning , and ending .

Name of Organization

STRIVE FOUNDATION

Employer Identification Number

33-0411257

Other Expenses	(A) Total	(B) Program Services	(C) Management and General	(D) Fundraising
CONTRIBUTIONS	2,506		2,506	
EMPLOYMENT COSTS	1,930	1,930		
PAYROLL PROCESSING	1,672	1,434	238	
POSTAGE	977		977	
PRINTING	218		218	
DUES	50		50	
BANK CHARGES	41		41	
PERMITS	30		30	
Total	7,424	3,364	4,060	

Depreciation and Amortization (Including Information on Listed Property)

2009

Department of the Treasury
Internal Revenue Service (99)

▶ See separate instructions. ▶ Attach to your tax return.

Attachment
Sequence No. **67**

Name(s) shown on return STRIVE FOUNDATION	Business or activity to which this form relates FOR FORM 990	Identifying number 33-0411257
---	--	---

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount. See the instructions for a higher limit for certain businesses	1	\$250,000
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation (see instructions)	3	\$800,000
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	250,000
6 (a) Description of property	(b) Cost (busn. use only)	(c) Elected cost
7 Listed property. Enter the amount from line 29	7	
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9 Tentative deduction. Enter the smaller of line 5 or line 8	9	
10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	250,000
12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13 Carryover of disallowed deduction to 2010. Add lines 9 and 10, less line 12 ... ▶	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2009	17	14,077
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here	<input type="checkbox"/>	

Section B -- Assets Placed in Service During 2009 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depr. (business/investment use only -- see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property		3,113	05	HY	200 DB	623
c 7-year property SEE STATEMENT						318
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C -- Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21 Listed property. Enter amount from line 28	21	1,076
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations -- see instructions	22	16,094
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A -- Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support business/investment use claimed?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	24b If "Yes," is the evidence written?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Busn./ investment use percentage	(d) Cost or other basis	(e) Basis for depr. (busn./investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)							25	
26 Property used more than 50% in a qualified business use:								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use:								
2002 DODGE	10-24-2002	38.13%	21,672	8,264	S/L- MQ		1,076	
		%			S/L-			
		%			S/L-			
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1							28	1,076
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1								29

Section B -- Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

30 Total business/investment miles driven during the year (do not include commuting miles)	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
	4191											
31 Total commuting miles driven during the year	6800											
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32	10991											
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	X											
35 Was the vehicle used primarily by a more than 5% owner or related person?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	X											
36 Is another vehicle available for personal use?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	X											

Section C -- Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.)		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2009 tax year (see instructions):					
43 Amortization of costs that began before your 2009 tax year					43
44 Total. Add amounts in column (f). See the instructions for where to report					44

**7-YEAR ASSETS PLACED IN SERVICE DURING 2009
USING GENERAL DEPRECIATION SYSTEM**

STRIVE FOUNDATION
33-0411257

19c Asset Description	(b) Date in Service	(c) Basis	(d) Period	(e) Convention	(f) Method	(g) Depreciation
APPLIANCES	11-03-2009	1,662	7	HY	200 DB	237
KITCHEN FURNITURE	05-08-2009	564	7	HY	200 DB	81
Total						318

2009 Federal Depreciation Schedule

STRIVE FOUNDATION
33-0411257

11-09-2010

Description	Date	Method	Year	Cost	Land/ Other	§179	Spec Allow	Basis	Prior	Current
Form 990										
<u>Automobiles</u>										
2002 DODGE CARAVAN	10-24-02	S/LMQ	5	21,672	0	0	0	8,264	20,596	1,076
1 Asset			Subtotals:	21,672	0	0	0	8,264	20,596	1,076
<u>Improvements</u>										
BUILDING IMPROVEMENT	07-01-99	S/LMM	39	8,602	0	0	0	8,602	2,090	221
LICENSES	07-01-00	S/LMM	39	31,984	0	0	0	31,984	6,940	820
IMPRVMNTS BLDG 6 & 7	02-01-01	S/LMM	39	0	0	0	0	1	0	0
FLOOR TILES DONATED	04-25-01	200DBHY	10	0	0	0	0	1	0	0
HVAC UNITS	06-30-01	S/LMM	39	0	0	0	0	1	0	0
IMPRVMNTS BLDG 6 & 7	07-01-01	S/LMM	39	54,612	0	0	0	54,612	9,369	1,400
DRYWALL DONATED	06-01-02	S/LMM	39	0	0	0	0	1	0	0
AIR CONDITIONING IMP	07-01-02	S/LMM	39	17,821	0	0	0	17,821	2,952	457
DOORS, ROOF DONATED	07-01-03	200DBHY	7	3,525	0	0	0	3,525	2,709	544
IMPROVEMENTS	12-31-05	S/LMM	39	0	0	0	0	1	0	0
WINDOW IMPROVEMENTS	03-21-06	S/LMM	39	0	0	0	0	1	0	0
IMPROVEMNT 9116 MAIN	09-30-06	S/LMM	39	79,382	0	0	0	79,382	4,664	2,035
12 Assets			Subtotals:	195,926	0	0	0	195,932	28,724	5,477
<u>Computers</u>										
COMPUTERS DONATED	12-01-01	200DBHY	5	0	0	0	0	1	0	0
SOFTWARE	06-01-02	200DBMQ	3	750	0	0	0	750	750	0
COMPUTER & PERIPHRLS	07-01-02	200DBMQ	5	10,644	0	0	0	10,644	10,644	0
DONATED COMPUTERS	12-31-05	200DBHY	5	0	0	0	0	1	0	0
COMPUTER EQUIPMENT	05-23-09	200DBHY	5	3,113	0	0	0	3,113	0	623
5 Assets			Subtotals:	14,507	0	0	0	14,509	11,394	623
<u>Buildings</u>										
BLDG 9116 MAIN DONAT	07-01-94	S/LMM	39	0	0	0	0	0	0	0
BLDG 9124 MAIN DON	11-27-96	S/LMM	39	0	0	0	0	0	0	0
IMPROVEMENTS	07-01-04	S/LMM	39	5,300	0	0	0	5,300	2,874	136
IMPROVEMENTS CHALL	12-31-05	S/LMM	39	220,421	0	0	0	220,421	22,883	5,652
IMPROVMNT 9116 MAIN	01-01-06	S/LMM	39	1,000	0	0	0	1,000	26	26
SECURITY SYSTEM	07-19-06	S/LMM	39	7,895	0	0	0	7,895	412	202
ELECTRICAL IMPROVE	08-02-06	S/LMM	39	25,467	0	0	0	25,467	1,576	653
SECURITY GATES	01-04-07	S/LMM	39	1,500	0	0	0	1,500	74	38
BUILDING MATERIALS	01-15-07	S/LMM	39	1,190	0	0	0	1,190	61	31

* Asset disposed this year

-C Carryover basis in like-kind exchange transaction

-B Excess basis in like-kind exchange transaction

2009 Federal Depreciation Schedule

STRIVE FOUNDATION
33-0411257

11-09-2010

Description	Date	Method	Year	Cost	Land/ Other	§179	Spec Allow	Basis	Prior	Current
Form 990										
<u>Buildings</u>										
BUILDING MATERIALS	02-15-07	S/LMM	39	1,778	0	0	0	1,778	86	46
BUILDING MATERIALS	03-15-07	S/LMM	39	1,170	0	0	0	1,170	54	30
BUILDING MATERIALS	05-01-07	S/LMM	39	1,500	0	0	0	1,500	62	38
BUILDING IMPROVMENTS	07-01-07	S/LMM	39	728	0	0	0	728	30	17
IMPROVEMENTS	06-16-08	S/LMM	39	1,137	0	0	0	1,137	16	29
IMPROVEMENTS	10-02-08	S/LMM	39	560	0	0	0	560	3	14
DONATED IMPROVEMENTS	10-15-08	S/LMM	39	125	0	0	0	125	1	3
IMPROVEMENTS	10-18-08	S/LMM	39	1,257	0	0	0	1,257	7	32
17 Assets			Subtotals:	271,028	0	0	0	271,028	28,165	6,947
<u>Furniture & Fixtures</u>										
CLASSROOM DESKS	01-11-07	200DBHY	7	1,000	0	0	0	1,000	388	175
CLASSROOM DESKS	01-24-07	200DBHY	7	1,143	0	0	0	1,143	444	200
FURNITURE	02-01-07	200DBHY	7	108	0	0	0	108	42	19
CLASSROOM DESKS	02-03-07	200DBHY	7	1,000	0	0	0	1,000	388	175
FURNITURE	02-07-07	200DBHY	7	379	0	0	0	379	147	66
CLASSROOM DESKS	02-13-07	200DBHY	7	786	0	0	0	786	305	137
STOVES	03-20-07	200DBHY	7	747	0	0	0	747	290	131
STOVES	03-20-07	200DBHY	7	750	0	0	0	750	291	131
FURNITURE	04-13-07	200DBHY	7	215	0	0	0	215	84	38
FURNITURE	05-04-07	200DBHY	7	107	0	0	0	107	42	19
CASE-CHAIRS-OFFICE	07-01-07	200DBHY	7	388	0	0	0	388	151	68
OFFICE FURNITURE	12-24-07	200DBHY	7	223	0	0	0	223	87	39
KITCHEN FURNITURE	05-08-09	200DBHY	7	564	0	0	0	564	0	81
13 Assets			Subtotals:	7,410	0	0	0	7,410	2,659	1,279
<u>Equipment & Machinery</u>										
KITCHEN UTENSILS DON	07-01-99	200DBHY	7	0	0	0	0	1	0	0
KITCHEN EQUIPMT DON	07-01-00	200DBHY	5	0	0	0	0	1	0	0
KITCHEN EQUIPMNT DON	07-01-00	200DBHY	5	0	0	0	0	1	0	0
KITCHEN EQUIPMNT DON	06-30-01	200DBHY	7	0	0	0	0	1	0	0
KITCHEN EQUIPMENT	06-14-06	200DBMQ	7	0	0	0	0	1	0	0
APPLIANCES	09-30-06	200DBMQ	7	2,141	0	0	0	2,141	1,205	267
APPLIANCES	12-01-06	200DBMQ	7	325	0	0	0	325	183	41
LEARNING EQUIPMENT	03-11-08	200DBHY	7	550	0	275	0	275	40	67
CAMERA EQUIPMENT	07-11-08	200DBHY	5	502	0	251	0	251	50	80
APPLIANCES	11-03-09	200DBHY	7	1,662	0	0	0	1,662	0	237

* Asset disposed this year

-C Carryover basis in like-kind exchange transaction

-B Excess basis in like-kind exchange transaction

2009 Federal Depreciation Schedule

STRIVE FOUNDATION
33-0411257

11-09-2010

Description	Date	Method Year	Cost	Land/ Other	§179	Spec Allow	Basis	Prior	Current
10 Assets		Subtotals:	5,180	0	526	0	4,659	1,478	692
58 Assets		Totals:	515,723	0	526	0	501,802	93,016	16,094
58 Assets		Grand Totals:	515,723	0	526	0	501,802	93,016	16,094

* Asset disposed this year

-C Carryover basis in like-kind exchange transaction

-B Excess basis in like-kind exchange transaction

2009 AMT Depreciation Schedule

STRIVE FOUNDATION
33-0411257

11-09-2010

Description	Date	Method	Year	Basis	Prior	AMT	Regular	Adjust	
Form 990									
Automobiles									
2002 DODGE CARAVAN	10-24-02	S/LMQ	5	8,264	17,185	1,076	1,076	0	
1 Asset				Subtotals:	8,264	17,185	1,076	1,076	0
Improvements									
BUILDING IMPROVEMENT	07-01-99	S/LMM	39	8,602	2,090	221	221	0	
LICENSES	07-01-00	S/LMM	39	31,984	6,940	820	820	0	
IMPRVMNTS BLDG 6 & 7	02-01-01	S/LMM	40	1	0	0	0	0	
FLOOR TILES DONATED	04-25-01	150DBHY	10	1	0	0	0	0	
HVAC UNITS	06-30-01	S/LMM	40	1	0	0	0	0	
IMPRVMNTS BLDG 6 & 7	07-01-01	S/LMM	39	54,612	9,369	1,400	1,400	0	
DRYWALL DONATED	06-01-02	S/LMM	40	1	0	0	0	0	
AIR CONDITIONING IMP	07-01-02	S/LMM	39	17,821	2,952	457	457	0	
DOORS, ROOF	07-01-03	150DBHY	10	3,525	2,425	231	544	313	
DONATED IMPROVEMENTS	12-31-05	S/LMM	39	1	0	0	0	0	
WINDOW IMPROVEMENTS	03-21-06	S/LMM	40	0	0	0	0	0	
IMPROVEMNT 9116 MAIN	09-30-06	S/LMM	39	79,382	4,170	2,035	2,035	0	
12 Assets				Subtotals:	195,931	27,946	5,164	5,477	313
Computers									
COMPUTERS DONATED	12-01-01	150DBHY	5	1	0	0	0	0	
SOFTWARE	06-01-02	150DBMQ	3	750	750	0	0	0	
COMPUTER & PERIPHRLS	07-01-02	150DBMQ	5	10,644	10,644	0	0	0	
DONATED COMPUTERS	12-31-05	150DBHY	5	0	0	0	0	0	
COMPUTER EQUIPMENT	05-23-09	150DBHY	5	3,113	0	467	623	156	
5 Assets				Subtotals:	14,508	11,394	467	623	156
Buildings									
BLDG 9116 MAIN DONAT	07-01-94	S/LMM	40	0	0	0	0	0	
BLDG 9124 MAIN DON	11-27-96	S/LMM	40	0	0	0	0	0	
IMPROVEMENTS	07-01-04	S/LMM	39	5,300	2,874	136	136	0	
IMPROVEMENTS CHALL	12-31-05	S/LMM	39	220,421	22,601	5,652	5,652	0	
IMPROVMNT 9116 MAIN	01-01-06	S/LMM	40	1,000	25	25	26	1	
SECURITY SYSTEM	07-19-06	S/LMM	39	7,895	412	202	202	0	
ELECTRICAL IMPROVE	08-02-06	S/LMM	40	25,467	1,539	637	653	16	
SECURITY GATES	01-04-07	S/LMM	40	1,500	74	38	38	0	
BUILDING MATERIALS	01-15-07	S/LMM	40	1,190	60	30	31	1	
BUILDING MATERIALS	02-15-07	S/LMM	39	1,778	86	46	46	0	
BUILDING MATERIALS	03-15-07	S/LMM	39	1,170	54	30	30	0	
BUILDING MATERIALS	05-01-07	S/LMM	39	1,500	62	38	38	0	
BUILDING IMPROVMNTS	07-01-07	S/LMM	40	728	30	16	17	1	
IMPROVEMENTS	06-16-08	S/LMM	39	1,137	16	29	29	0	
IMPROVEMENTS DONATED	10-02-08	S/LMM	39	560	3	14	14	0	
IMPROVEMENTS DONATED	10-15-08	S/LMM	39	125	1	3	3	0	
IMPROVEMENTS	10-18-08	S/LMM	39	1,257	7	32	32	0	
17 Assets				Subtotals:	271,028	27,844	6,928	6,947	19
Furniture & Fixtures									
CLASSROOM DESKS	01-11-07	150DBHY	7	1,000	298	150	175	25	
CLASSROOM DESKS	01-24-07	150DBHY	10	1,143	370	165	200	35	
FURNITURE	02-01-07	150DBHY	7	108	33	16	19	3	
CLASSROOM DESKS	02-03-07	150DBHY	7	1,000	298	150	175	25	
FURNITURE	02-07-07	150DBHY	7	379	113	57	66	9	
CLASSROOM DESKS	02-13-07	150DBHY	10	786	254	113	137	24	
STOVES	03-20-07	150DBHY	7	747	228	112	131	19	
STOVES	03-20-07	150DBHY	7	750	228	113	131	18	
FURNITURE	04-13-07	150DBHY	7	215	66	32	38	6	
FURNITURE	05-04-07	150DBHY	7	107	32	16	19	3	
CASE-CHAIRS-OFFICE	07-01-07	150DBHY	10	388	126	56	68	12	

* Asset disposed this year

-C Carryover basis in like-kind exchange transaction

-B Excess basis in like-kind exchange transaction

2009 AMT Depreciation Schedule

STRIVE FOUNDATION
33-0411257

11-09-2010

Description	Date	Method	Year	Basis	Prior	AMT	Regular	Adjust
Form 990								
Furniture & Fixtures								
OFFICE FURNITURE	12-24-07	150DBHY	7	223	71	34	39	5
KITCHEN FURNITURE	05-08-09	150DBHY	7	564	0	60	81	21
13 Assets	Subtotals:			7,410	2,117	1,074	1,279	205
Equipment & Machinery								
KITCHEN UTENSILS DON	07-01-99	150DBHY	10	0	0	0	0	0
KITCHEN EQUIPMT DON	07-01-00	150DBHY	5	0	0	0	0	0
KITCHEN EQUIPMNT DON	07-01-00	150DBHY	5	0	0	0	0	0
KITCHEN EQUIPMNT DON	06-30-01	150DBHY	10	0	0	0	0	0
KITCHEN EQUIPMENT	06-14-06	150DBMQ	10	0	0	0	0	0
APPLIANCES	09-30-06	150DBMQ	7	2,141	1,187	263	267	4
APPLIANCES	12-01-06	150DBMQ	10	325	177	41	41	0
LEARNING EQUIPMENT	03-11-08	150DBHY	7	275	59	53	67	14
CAMERA EQUIPMENT	07-11-08	150DBHY	5	251	50	64	80	16
APPLIANCES	11-03-09	150DBHY	7	1,662	0	178	237	59
10 Assets	Subtotals:			4,654	1,473	599	692	93
58 Assets	Totals:			501,795	87,959	15,308	16,094	786
58 Assets	Grand Totals:			501,795	87,959	15,308	16,094	786

* Asset disposed this year

~C Carryover basis in like-kind exchange transaction

~B Excess basis in like-kind exchange transaction

2009 AUTO EXPENSE WORKSHEET

STRIVE FOUNDATION
33-0411257

Keep for Your Records

VEHICLE INFORMATION

- | | | |
|--|------------------------------|--|
| 1. Vehicle description | 1. <u>2002 DODGE CARAVAN</u> | |
| 2. Carried to form or schedule | 2. <u>FORM 990</u> | |
| 3. Date vehicle was placed in service | 3. <u>10-24-2002</u> | |
| 4. Odometer beginning mileage _____ ending mileage _____ | | |

CALCULATION OF BUSINESS USE PERCENTAGES

- | | |
|--|--------------------|
| 5. Total business mileage driven during the year | 5. <u>4,191</u> |
| 6. Total commuting mileage driven during the year | 6. <u>6,800</u> |
| 7. Total other personal mileage driven during the year | 7. _____ |
| 8. Total mileage driven during the year | 8. <u>10,991</u> |
| 9. Business use percentage (Line 5 divided by Line 8) | *9. <u>38.13 %</u> |

CALCULATION OF THE ACTUAL EXPENSE METHOD

	Input			Deduction Allowed
10. Parking fees and tolls			10.	_____
11. Gasoline and oil	<u>1,718</u>	x Line 9	11.	<u>655</u>
12. Repairs	<u>1,944</u>	x Line 9	12.	<u>741</u>
13. Licensing fees	_____	x Line 9	13.	_____
14. Registration fees	_____	x Line 9	14.	_____
15. Insurance	_____	x Line 9	15.	_____
16. Other expenses	_____	x Line 9	16.	_____
17. Total automobile expenses (Line 10 through 16) (carries to auto expense line of form on Line 2)			17.	<u>1,396</u>
18. Property tax (carries to taxes line of form on Line 2)	_____	x Line 9	18.	_____
19. Interest expense (carries to interest expense line of form on Line 2)	_____	x Line 9	19.	_____
20. Lease payments	_____	x Line 9	20.	_____
21. Inclusion amount	_____	x Line 9	21.	_____
22. Total lease expense (Line 20 less Line 21) (carries to lease expense line of form on Line 2)			22.	_____
23. Section 179 expense deduction			*23.	_____
24. Special depreciation allowance			**24.	_____
25. Current depreciation expense			**25.	<u>1,076</u>
26. Total depreciation expense (Lines 23 through 25) (carries to depreciation expense line of form on Line 2)			26.	<u>1,076</u>
27. Value of employer-provided vehicle	_____	x Line 9	27.	_____
28. Total expenses using Actual Expense Method (total of Lines 17, 18, 19, 22, 26, and 27)			28.	<u>2,472</u>

* Not subject to business use percentage.

** Already adjusted for business use percentage.

2009 DETAIL STATEMENTS

STRIVE FOUNDATION
33-0411257

STATEMENT #1 - INVESTMENT INCOME TOTAL REV (990 EO PG 9 LINE 3)

BANK OF AMERICA INTEREST.....	487
MERRILL LYBCH DIVIDENDS.....	489
TOTAL CARRIED TO 990 EO PG 9 LINE 3.....	976

STATEMENT #2 - OCCUPANCY (990 EO PG 10 LINE 16)

PROPERTY TAXES.....	955
SECURITY.....	425
TAX & LICENSE.....	187
TELEPHONE.....	2,915
UTILITIES.....	7,332
TOTAL CARRIED TO 990 EO PG 10 LINE 16.....	11,814

STATEMENT #3 - PROGRAM OCCUPANCY (990 EO PG 10 LINE 16B)

PROPERTY TAXES.....	765
SECURITY.....	340
UTILITIES.....	5,865
TOTAL CARRIED TO 990 EO PG 10 LINE 16B.....	6,970

STATEMENT #4 - MANAGMENT OCCUPANCY (990 EO PG 10 LINE 16C)

PROPERTY TAXES.....	191
SECURITY.....	85
TAX & LICENSE.....	187
TELEPHONE.....	2,915
UTILITIES.....	1,466
TOTAL CARRIED TO 990 EO PG 10 LINE 16C.....	4,844

STATEMENT #5 - NON-INTEREST BEARING BEG YR (990-EO PG 11 LINE 1A)

CASH IN BANK UNRESTRICTED.....	172,656
CASH IN BANK RESTRICTED.....	9,638
TOTAL CARRIED TO 990-EO PG 11 LINE 1A.....	182,294

STATEMENT #6 - BEG YR INTANGIBLE ASSETS (990-EO PG 11 LINE 14A)

START UP FEES.....	1,950
TOTAL CARRIED TO 990-EO PG 11 LINE 14A.....	1,950

2009 DETAIL STATEMENTS

STRIVE FOUNDATION
33-0411257

PAGE 2

STATEMENT #7 - END YR INTANGIBLE ASSETS (990-EO PG 11 LINE 14B)

START UP FEES.....	1,950	
TOTAL CARRIED TO 990-EO PG 11 LINE 14B.....		1,950

STATEMENT #8 - AMOUNT INCLUDED ON FORM 990 (SCH D PG 4 LINE 2D)

BOOK DEPRECIATION.....	15,415	
TOTAL CARRIED TO SCH D PG 4 LINE 2D.....		15,415

STATEMENT #9 - OTHER (SCH D PG 4 LINE 4B)

TAX DEPRECIATION.....	16,094	
TOTAL CARRIED TO SCH D PG 4 LINE 4B.....		16,094

TWF
TAXABLE YEAR **2009** **California Exempt Organization**
Annual Information Return

FORM
199

Calendar Year 2009 or fiscal year beginning month _____ day _____ year _____, and ending month _____ day _____ year _____.

A First Return Filed? Yes No **B** Type of organization Exempt under Section 23701 D (insert letter) **C** IRC Section 4947 (a)(1) trust **CORP #**
1700910

Corporation/Organization Name **STRIVE FOUNDATION** **FEIN**
33-0411257

Address
9124 S MAIN STREET

City **LOS ANGELES** State **CA** ZIP Code **90003**

C Amended Return? Yes No check box. See General Instruction F. No filing fee is required
D Are you a subordinate/affiliate in a group exemption? Yes No **H** Accounting method used (1) Cash (2) Accrual (3) Other
(a) Is this a group filing for affiliates? See General Instruction L Yes No **I** If exempt under R&TC Section 23701d, has the organization during the year: (1) participated in any political campaign or (2) attempted to influence legislation or any ballot measure, or (3) made an election under R&TC Section 23704.5 (relating to lobbying by public charities)? If "Yes," complete and attach form FTB 3509, Political or Legislative Activities by Section 23701d Organizations Yes No
(b) If "Yes," enter the number of affiliates _____
(c) Are all affiliates included? Yes No (If "No," attach a list. See Instructions.)
(d) Is this a separate return filed by an organization covered by a group ruling? Yes No **J** Did the organization have any changes in its activities, governing instrument, articles of incorporation, or bylaws that have not been reported to the Franchise Tax Board? If "Yes," complete an explanation and attach copies of revised documents Yes No
(e) Federal Group Exemption Number _____
(f) Is a roster of subordinates attached? Yes No **K** Is this organization exempt under R&TC Section 23701g? Yes No If "Yes," enter amt. of gross recpt. from nonmember sources \$ _____
E Final return? Dissolved Surrendered (Withdrawn) Merged/Reorganized (attach explanation) If a box is checked, enter date _____
F Check the box if the organization filed the following federal forms or schedule: (1) 990T (2) 990PF (3) (Schedule H) 990
G If organization is exempt under R&TC Section 23701d and is exclusively religious, educational, or charitable, and is supported primarily (50% or more) by public contributions, Yes No **L** Is the organization under audit by the IRS or has the IRS audited in a prior year? Yes No **M** Is the organization a Limited Liability Company? Yes No **N** Did the organization file Form 100 or Form 109 to report taxable Income? Yes No

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

Receipts and Revenues	1 Gross sales or receipts from other sources. From Side 2, Part II, line 8	1	1,012
	2 Gross dues and assessments from members and affiliates	2	4,676
	3 Gross contributions, gifts, grants, and similar amounts received	3	308,922
	4 Total gross receipts for filing requirement test. Add line 1 through line 3. This line must be completed. If the result is less than \$25,000, see General Instruction C	4	314,610
	5 Cost of goods sold	5	
	6 Cost or other basis, and sales expenses of assets sold	6	
	7 Total costs. Add line 5 and line 6	7	
	8 Total gross income. Subtract line 7 from line 4	8	314,610
Ex-penses	9 Total expenses and disbursements. From Side 2, Part II, line 18	9	320,799
	10 Excess of receipts over expenses and disbursements. Subtract line 9 from line 8	10	-6,189
Filing Fee	11 Filing fee \$10 or \$25. See General Instruction F	11	
	12 Total payments	12	
	13 Penalties and Interest. See General Instruction J	13	
	14 Use tax. See General Instruction K	14	
	15 Balance due. Add line 11, line 13, and line 14. Then subtract line 12 from the result	15	0

Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer	Title PRESIDENT	Date	Telephone (626) 779-1064
Preparer's signature	Date 11-09-2010	Check if self-employed <input checked="" type="checkbox"/>	Preparer's SSN/PTIN P00326648
Firm's name (or yours, if self-employed) and address PAUL CARNEY CPA 148 E FOOTHILL BLVD STE 100 ARCADIA CA 91006			FEIN 626) 358-4205

May the FTB discuss this return with the preparer shown above? See instructions Yes No

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

Receipts from Other Sources	1	Gross sales or receipts from all business activities. See instructions	●	1	
	2	Interest	●	2	976
	3	Dividends	●	3	
	4	Gross rents	●	4	
	5	Gross royalties	●	5	
	6	Gross amount received from sale of assets (See Instructions)	●	6	36
	7	Other income. Attach schedule	●	7	
	8	Total gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1		8	1,012
Expenses and Disbursements	9	Contributions, gifts, grants, and similar amounts paid. Attach schedule	●	9	2,506
	10	Disbursements to or for members	●	10	
	11	Compensation of officers, directors, and trustees. Attach schedule	●	11	92,000
	12	Other salaries and wages	●	12	72,716
	13	Interest	●	13	
	14	Taxes	●	14	14,621
	15	Rents	●	15	
	16	Depreciation and depletion (See Instructions)	●	16	16,094
	17	Other. Attach schedule	●	17	122,862
	18	Total expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9		18	320,799

Schedule L Balance Sheets	Beginning of taxable year			End of taxable year
	(a)	(b)	(c)	(d)
Assets				
1 Cash		182,294		● 180,715
2 Net accounts receivable				●
3 Net notes receivable. Attach schedule				●
4 Inventories				●
5 Federal and state government obligations				●
6 Investments in other bonds. Attach schedule				●
7 Investments in stock. Attach schedule				● 7,276
8 Mortgage loans (number of loans _____)				●
9 Other investments. Attach schedule				●
10 a Depreciable assets	674,459		679,798	
b Less accumulated depreciation	(105,465)	568,994	(120,880)	558,918
11 Land		104,450		● 104,450
12 Other assets. Attach schedule		1,950		● 1,950
13 Total assets		857,688		853,309
Liabilities and net worth				
14 Accounts payable		705		● 1,835
15 Contributions, gifts, or grants payable				●
16 Bonds and notes payable. Attach schedule				●
17 Mortgages payable				●
18 Other liabilities. Attach schedule				
19 Capital stock or principle fund				●
20 Paid-in or capital surplus. Attach reconciliation				●
21 Retained earnings or income fund		856,983		● 851,474
22 Total liabilities and net worth		857,688		853,309

Schedule M-1 Reconciliation of income per books with income per return			
1	Net income per books	● -5,509	
2	Federal income tax	●	
3	Excess of capital losses over capital gains	●	
4	Income not recorded on books this year. Attach schedule	●	
5	Expenses recorded on books this year not deducted in this return. Attach schedule	● 15,415	
6	Total.		
	Add line 1 through line 5	9,906	
7	Income recorded on books this year not included in this return. Attach schedule	●	
8	Deductions in this return not charged against book income this year. Attach schedule	●	16,094
9	Total. Add line 7 and line 8		16,094
10	Net income per return.		
	Subtract line 9 from line 6		-6,188

2009 California Depreciation Schedule

STRIVE FOUNDATION
33-0411257

11-09-2010

Description	Date	Method	Year	Cost	Land/ Other	§179	Spec Allow	Basis	Prior	Current
Form 990										
<u>Automobiles</u>										
2002 DODGE CARAVAN	10-24-02	S/LMQ	5	21,672	0	0	0	8,264	20,596	1,076
1 Asset			Subtotals:	21,672	0	0	0	8,264	20,596	1,076
<u>Improvements</u>										
BUILDING IMPROVEMENT	07-01-99	S/LMM	39	8,602	0	0	0	8,602	2,090	221
LICENSES	07-01-00	S/LMM	39	31,984	0	0	0	31,984	6,940	820
IMPRVMNTS BLDG 6 & 7	02-01-01	S/LMM	39	1	0	0	0	1	1,724	0
FLOOR TILES DONATED	04-25-01	200DBHY	10	1	0	0	0	1	0	0
HVAC UNITS	06-30-01	S/LMM	39	1	0	0	0	1	0	0
IMPRVMNTS BLDG 6 & 7	07-01-01	S/LMM	39	54,612	0	0	0	54,612	9,369	1,400
DRYWALL DONATED	06-01-02	S/LMM	39	1	0	0	0	1	0	0
AIR CONDITIONING IMP	07-01-02	S/LMM	39	17,821	0	0	0	17,821	2,952	457
DOORS, ROOF DONATED	07-01-03	200DBHY	7	3,525	0	0	0	3,525	2,709	544
IMPROVEMENTS	12-31-05	S/LMM	39	1	0	0	0	1	0	0
WINDOW IMPROVEMENTS	03-21-06	S/LMM	39	11,452	0	0	0	11,452	294	0
IMPROVEMNT 9116 MAIN	09-30-06	S/LMM	39	79,382	0	0	0	79,382	4,664	2,035
12 Assets			Subtotals:	207,383	0	0	0	207,383	30,742	5,477
<u>Computers</u>										
COMPUTERS DONATED	12-01-01	200DBHY	5	1	0	0	0	1	0	0
SOFTWARE	06-01-02	200DBMQ	3	750	0	0	0	750	750	0
COMPUTER & PERIPHRLS	07-01-02	200DBMQ	5	10,644	0	0	0	10,644	10,644	0
DONATED COMPUTERS	12-31-05	200DBHY	5	1	0	0	0	1	0	0
COMPUTER EQUIPMENT	05-23-09	200DBHY	5	3,113	0	0	0	3,113	0	623
5 Assets			Subtotals:	14,509	0	0	0	14,509	11,394	623
<u>Buildings</u>										
BLDG 9116 MAIN DONAT	07-01-94	S/LMM	39	0	0	0	0	0	0	0
BLDG 9124 MAIN DON	11-27-96	S/LMM	39	0	0	0	0	0	0	0
IMPROVEMENTS	07-01-04	S/LMM	39	5,300	0	0	0	5,300	2,874	136
IMPROVEMENTS CHALL	12-31-05	S/LMM	39	220,421	0	0	0	220,421	22,883	5,652
IMPROVMNT 9116 MAIN	01-01-06	S/LMM	39	1,000	0	0	0	1,000	26	26
SECURITY SYSTEM	07-19-06	S/LMM	39	7,895	0	0	0	7,895	412	202
ELECTRICAL IMPROVE	08-02-06	S/LMM	39	25,467	0	0	0	25,467	618	653
SECURITY GATES	01-04-07	S/LMM	39	1,500	0	0	0	1,500	74	38
BUILDING MATERIALS	01-15-07	S/LMM	39	1,190	0	0	0	1,190	61	31

* Asset disposed this year

-C Carryover basis in like-kind exchange transaction

-B Excess basis in like-kind exchange transaction

2009 California Depreciation Schedule

STRIVE FOUNDATION
33-0411257

11-09-2010

Description	Date	Method	Year	Cost	Land/ Other	§179	Spec Allow	Basis	Prior	Current
Form 990										
<u>Buildings</u>										
BUILDING MATERIALS	02-15-07	S/LMM	39	1,778	0	0	0	1,778	86	46
BUILDING MATERIALS	03-15-07	S/LMM	39	1,170	0	0	0	1,170	54	30
BUILDING MATERIALS	05-01-07	S/LMM	39	1,500	0	0	0	1,500	62	38
BUILDING IMPROVEMENTS	07-01-07	S/LMM	39	728	0	0	0	728	31	17
IMPROVEMENTS	06-16-08	S/LMM	39	1,137	0	0	0	1,137	16	29
IMPROVEMENTS	10-02-08	S/LMM	39	560	0	0	0	560	3	14
DONATED IMPROVEMENTS	10-15-08	S/LMM	39	125	0	0	0	125	1	3
IMPROVEMENTS	10-18-08	S/LMM	39	1,257	0	0	0	1,257	7	32
17 Assets			Subtotals:	271,028	0	0	0	271,028	27,208	6,947
<u>Furniture & Fixtures</u>										
CLASSROOM DESKS	01-11-07	200DBHY	7	1,000	0	0	0	1,000	388	175
CLASSROOM DESKS	01-24-07	200DBHY	7	1,143	0	0	0	1,143	444	200
FURNITURE	02-01-07	200DBHY	7	108	0	0	0	108	42	19
CLASSROOM DESKS	02-03-07	200DBHY	7	1,000	0	0	0	1,000	388	175
FURNITURE	02-07-07	200DBHY	7	379	0	0	0	379	147	66
CLASSROOM DESKS	02-13-07	200DBHY	7	786	0	0	0	786	305	137
STOVES	03-20-07	200DBHY	7	747	0	0	0	747	290	131
STOVES	03-20-07	200DBHY	7	750	0	0	0	750	291	131
FURNITURE	04-13-07	200DBHY	7	215	0	0	0	215	84	38
FURNITURE	05-04-07	200DBHY	7	107	0	0	0	107	42	19
CASE-CHAIRS-OFFICE	07-01-07	200DBHY	7	388	0	0	0	388	151	68
OFFICE FURNITURE	12-24-07	200DBHY	7	223	0	0	0	223	87	39
KITCHEN FURNITURE	05-08-09	200DBHY	7	564	0	0	0	564	0	81
13 Assets			Subtotals:	7,410	0	0	0	7,410	2,659	1,279
<u>Equipment & Machinery</u>										
KITCHEN UTENSILS DON	07-01-99	200DBHY	7	1	0	0	0	1	0	0
KITCHEN EQUIPMENT DON	07-01-00	200DBHY	5	1	0	0	0	1	0	0
KITCHEN EQUIPMENT DON	07-01-00	200DBHY	5	1	0	0	0	1	0	0
KITCHEN EQUIPMENT DON	06-30-01	200DBHY	7	1	0	0	0	1	0	0
KITCHEN EQUIPMENT	06-14-06	200DBMQ	7	1	0	0	0	1	0	0
APPLIANCES	09-30-06	200DBMQ	7	2,141	0	0	0	2,141	1,205	267
APPLIANCES	12-01-06	200DBMQ	7	325	0	0	0	325	183	41
LEARNING EQUIPMENT	03-11-08	200DBHY	7	550	0	275	0	275	40	67
CAMERA EQUIPMENT	07-11-08	200DBHY	5	502	0	251	0	251	50	80
APPLIANCES	11-03-09	200DBHY	7	1,662	0	0	0	1,662	0	237

* Asset disposed this year

-C Carryover basis in like-kind exchange transaction

-B Excess basis in like-kind exchange transaction

2009 California Depreciation Schedule

STRIVE FOUNDATION
33-0411257

11-09-2010

Description	Date	Method Year	Cost	Land/ Other	§179	Spec Allow	Basis	Prior	Current
10 Assets		Subtotals:	5,185	0	526	0	4,659	1,478	692
58 Assets		Totals:	527,187	0	526	0	513,253	94,077	16,094
58 Assets		Grand Totals:	527,187	0	526	0	513,253	94,077	16,094

* Asset disposed this year
 -C Carryover basis in like-kind exchange transaction
 -B Excess basis in like-kind exchange transaction

2009 DETAIL STATEMENTS

STRIVE FOUNDATION
33-0411257

STATEMENT #1 - TAXES (CA 199 PG 2 PT 2 LN 14)

PAYROLL TAXES.....	13,449
PROPERTY TAXES.....	955
PERMITS.....	30
LICENSES.....	187

TOTAL CARRIED TO CA 199 PG 2 PT 2 LN 14..... 14,621

STATEMENT #2 - OTHER (CA 199 PG 2 PT 2 LN 17)

ACCOUNTING.....	7,500
AUTO.....	3,662
BANK FEES.....	41
DUES & SUBSCRIPTIONS.....	50
EMPLOYMENT COSTS.....	1,930
FUNDRAISING.....	4,409
GARDENING.....	3,581
INSTRUCTORS.....	20,515
INSURANCE.....	19,077
INTERNET/WEBSITE.....	4,262
OFFICE SUPPLIES.....	2,816
POSTAGE.....	977
PRINTING & REPRODUCTION.....	218
PROGRAM SERVICES.....	35,282
REPAIRS & MAINTENANCE.....	3,898
SECURITY.....	425
TELEPHONE.....	2,915
TRAVEL.....	142
UTILITIES.....	7,332
PAYROLL PROCESSING.....	3,830

TOTAL CARRIED TO CA 199 PG 2 PT 2 LN 17..... 122,862

STATEMENT #3 - EXPENSES RECORDED NOT DEDUCTED (CA 199 PG 2 SCH M LN 5)

BOOK DEPRECIATION.....	15,415
------------------------	--------

TOTAL CARRIED TO CA 199 PG 2 SCH M LN 5..... 15,415

STATEMENT #4 - DEDUC NOT CHARGED AGAINST BOOK (CA 199 PG 2 SCH M LN 8)

TAX DEPRECIATION.....	16,094
-----------------------	--------

TOTAL CARRIED TO CA 199 PG 2 SCH M LN 8..... 16,094

2009 DETAIL STATEMENTS

STRIVE FOUNDATION
33-0411257

STATEMENT #5 - BEGINNING: OTHER ASSETS (CA 199 PG 2 SCH L LN12)

START UP FEES..... 1,950

TOTAL CARRIED TO CA 199 PG 2 SCH L LN12..... 1,950

STATEMENT #6 - YEAR END: OTHER ASSETS (CA 199 PG 2 SCH L LN12)

START UP FEES..... 1,950

TOTAL CARRIED TO CA 199 PG 2 SCH L LN12..... 1,950
