

TAXABLE YEAR

**California Exempt Organization
Annual Information Return**

FORM

2011

199

Calendar Year 2011 or fiscal year beginning month _____ day _____ year _____ and ending month _____ day _____ year _____

Corporation/Organization Name
LET'S GIVE THEM A SHOT

Address (suite, room, or PMB no.)
c/o 2711 N SEPULVEDA BLVD., SUITE 211

City **MANHATTAN BEACH** State **CA** ZIP Code **90266-2725**

California corporation number
3 0 0 8 3 4 7

FEBIN
2 6 3 3 0 2 2 0 1

A First Return. Yes No

B Amended Return. Yes No

C IRC Section 4947(a)(1) trust. Yes No

D Final Return. Yes No
 Dissolved Surrendered (Withdrawn)
 Merged/Reorganized Enter date: / /

E Check accounting method:
 (1) Cash (2) Accrual (3) Other

F Federal return filed?
 (1) 990T (2) 990(PF) (3) Sch M (990)

G Is this a group filing for the subordinates/affiliates? Yes No
 If "Yes," attach a roster. See instructions.

H Is this organization in a group exemption? Yes No
 If "Yes," what is the parent's name? _____

I 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? Yes No
 If "Yes," explain, and attach copies of revised documents.

J 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)? Yes No
 If "Yes," complete and attach form FTB 3509.

K Is the organization exempt under R&TC Section 23701g? Yes No
 If "Yes," enter the gross receipts from nonmember sources. \$ _____

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

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

O Is the organization under audit by the IRS or has the IRS audited in a prior year? 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	27,540	00
	2	Gross dues and assessments from members and affiliates	2		00
	3	Gross contributions, gifts, grants, and similar amounts received	3		00
	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 D.	4	27,540	00
	5	Cost of goods sold	5		00
	6	Cost or other basis, and sales expenses of assets sold	6		00
	7	Total costs. Add line 5 and line 6	7		00
	8	Total gross income. Subtract line 7 from line 4.	8	27,540	00
Expenses	9	Total expenses and disbursements. From Side 2, Part II, line 18	9	29,534	00
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8	10	(1,994)	00
Filing Fee	11	Filing fee \$10 or \$25. See General Instruction F	11	25	00
	12	Total payments	12		00
	13	Penalties and interest. See General Instruction J	13		00
	14	Use tax. See General Instruction K	14		00
	15	Balance due. Add line 11, line 13, and line 14. Then subtract line 12 from the result	15	25	00

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 _____ Date _____ Telephone _____

Preparer's signature Date _____ Check if self-employed PTN
 P. O. 1 3 4 8 0 0 3
 FCM
 9 5 4 8 8 2 1 3 2
 Telephone
 (310) 379-8783

Firm's name (or yours, if self-employed) and address
RMB ASSOCIATES
P O BOX 1690, MANHATTAN BEACH, CA 90267-1690

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