

Return of Organization Exempt From Income Tax

2001

Department of the Treasury
Internal Revenue Service

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

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

Open to Public Inspection

A For the 2001 calendar year, or tax year period beginning **JUL 1, 2001** and ending **JUN 30, 2002**

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return
 Amended return
 Application pending

C Name of organization: **THE UNIVERSITY OF WEST LOS ANGELES**

D Employer identification number: **95-2458679**

Number and street (or P O box if mail is not delivered to street address) Room/suite **E** Telephone number
1155 W. ARBOR VITAE STREET **(310) 342-5200**

City or town, state or country, and ZIP + 4 **F** Accounting method: Cash Accrual
LOS ANGELES, CA 90301-2902 Other (specify) _____

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)

H and I are not applicable to section 527 organizations
H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates: _____
H(c) Are all affiliates included? **N/A** Yes No (If "No," attach a list)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

G Web site: **WWW.UWLA.EDU/**

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

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

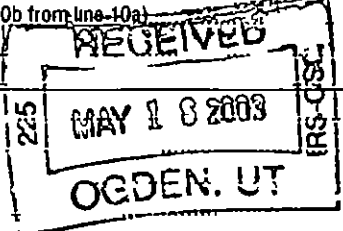
I Enter 4-digit GEN: _____

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12: **2,638,153.**

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

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

Revenue	1 Contributions, gifts, grants, and similar amounts received				
	a Direct public support	1a	42,932.		
	b Indirect public support	1b			
	c Government contributions (grants)	1c			
	d Total (add lines 1a through 1c) (cash \$ <u>42,932.</u> noncash \$ _____)	1d		42,932.	
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2		2,032,232.	
	3 Membership dues and assessments	3			
	4 Interest on savings and temporary cash investments	4			
	5 Dividends and interest from securities	5		197,284.	
	6 a Gross rents SEE STATEMENT 1	6a	309,475.		
	b Less rental expenses SEE STATEMENT 2	6b	3,792.		
	c Net rental income or (loss) (subtract line 6b from line 6a)	6c		305,683.	
7 Other investment income (describe _____)	7				
Expenses	8 a Gross amount from sale of assets other than inventory	(A) Securities	(B) Other		
	b Less cost or other basis and sales expenses	8a			
	c Gain or (loss) (attach schedule)	8b			
	d Net gain or (loss) (combine line 8c, columns (A) and (B))	8c			
	8d	8d			
	9 Special events and activities (attach schedule)				
	a Gross revenue (not including \$ <u>0.</u> of contributions reported on line 1a)	9a	56,230.		
	b Less direct expenses other than fundraising expenses	9b	16,399.		
	c Net income or (loss) from special events (subtract line 9b from line 9a)	9c		39,831.	
	10 a Gross sales of inventory, less returns and allowances	10a			
	b Less cost of goods sold	10b			
	c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c			
11 Other revenue (from Part VII, line 103)	11				
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12		2,617,962.		
Net Assets	13 Program services (from line 44, column (B))	13	1,351,795.		
	14 Management and general (from line 44, column (C))	14	2,042,455.		
	15 Fundraising (from line 44, column (D))	15	25,016.		
	16 Payments to affiliates (attach schedule)	16			
	17 Total expenses (add lines 16 and 44, column (A))	17	3,419,266.		
18 Excess or (deficit) for the year (subtract line 17 from line 12)	18		<801,304.>		
19 Net assets or fund balances at beginning of year (from line 73, column (A))	19		4,647,131.		
20 Other changes in net assets or fund balances (attach explanation)	20		<328,116.>		
21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		3,517,711.		



Part II Statement of Functional Expenses

All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) cash \$ 18,600 . noncash \$	18,600.	18,600.	STATEMENT 8	
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc	0.	0.	0.	0.
26	Other salaries and wages	1,893,412.	967,376.	926,036.	
27	Pension plan contributions	99,958.	46,072.	53,886.	
28	Other employee benefits	92,874.	40,857.	52,017.	
29	Payroll taxes	129,911.	67,499.	62,412.	
30	Professional fundraising fees				
31	Accounting fees	38,954.		38,954.	
32	Legal fees	7,444.		7,444.	
33	Supplies	80,955.	6,348.	74,607.	
34	Telephone	21,478.	1,200.	20,278.	
35	Postage and shipping	25,621.	19,226.	6,395.	
36	Occupancy				
37	Equipment rental and maintenance	83,535.	41,603.	41,932.	
38	Printing and publications	25,066.		25,066.	
39	Travel	3,715.	280.	3,435.	
40	Conferences, conventions, and meetings				
41	Interest	1,466.		1,466.	
42	Depreciation, depletion, etc (attach schedule)	72,049.		72,049.	
43	Other expenses not covered above (itemize)				
a					
b					
c					
d					
e	SEE STATEMENT 5	824,228.	142,734.	656,478.	25,016.
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D) carry these totals to lines 13-15	3,419,266.	1,351,795.	2,042,455.	25,016.

Joint Costs Check if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No

If "Yes" enter (i) the aggregate amount of these joint costs \$ _____, (ii) the amount allocated to Program services \$ _____, (iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose? **SEE STATEMENT 6**

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others.)

a	SEE STATEMENT 7				
		(Grants and allocations \$)		1,351,795.
b					
		(Grants and allocations \$)		
c					
		(Grants and allocations \$)		
d					
		(Grants and allocations \$)		
e	Other program services (attach schedule)	(Grants and allocations \$)		
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)				1,351,795.

Part IV Balance Sheets

Note		(A)		(B)		
Where required, attached schedules and amounts within the description column should be for end-of-year amounts only		Beginning of year		End of year		
Assets	45	Cash - non-interest-bearing		45		
	46	Savings and temporary cash investments	663,682.	46	271,755.	
	47 a	Accounts receivable	123,639.	47a		
	b	Less allowance for doubtful accounts		47b		
				148,445.	47c	123,639.
	48 a	Pledges receivable		48a		
	b	Less allowance for doubtful accounts		48b		
					48c	
	49	Grants receivable		49		
	50	Receivables from officers, directors, trustees, and key employees		50		
	51 a	Other notes and loans receivable	2,460,886.	51a		
	b	Less allowance for doubtful accounts		51b		
				2,278,590.	51c	2,460,886.
	52	Inventories for sale or use		52		
53	Prepaid expenses and deferred charges		1,349,913.	53	1,016,139.	
54	Investments - securities STMT 9	<input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	422,212.	54	20,833.	
55 a	Investments - land, buildings, and equipment basis		55a			
b	Less accumulated depreciation		55b			
				55c		
56	Investments - other		56			
57 a	Land, buildings, and equipment basis	1,158,729.	57a			
b	Less accumulated depreciation	885,630.	57b			
			299,555.	57c	273,099.	
58	Other assets (describe)		58			
59	Total assets (add lines 45 through 58) (must equal line 74)		5,162,397.	59	4,166,351.	
Liabilities	60	Accounts payable and accrued expenses	303,705.	60	399,279.	
	61	Grants payable		61		
	62	Deferred revenue	164,665.	62	202,708.	
	63	Loans from officers, directors, trustees, and key employees		63		
	64 a	Tax-exempt bond liabilities		64a		
	b	Mortgages and other notes payable		64b		
	65	Other liabilities (describe OTHER LIABILITIES)	46,896.	65	46,653.	
66	Total liabilities (add lines 60 through 65)		515,266.	66	648,640.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74					
	67	Unrestricted	2,754,979.	67	1,966,746.	
	68	Temporarily restricted	1,524,194.	68	1,183,007.	
	69	Permanently restricted	367,958.	69	367,958.	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74					
	70	Capital stock, trust principal, or current funds		70		
	71	Paid-in or capital surplus, or land, building, and equipment fund		71		
	72	Retained earnings, endowment, accumulated income, or other funds		72		
73	Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)		4,647,131.	73	3,517,711.	
74	Total liabilities and net assets / fund balances (add lines 66 and 73)		5,162,397.	74	4,166,351.	

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part VI Other Information		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	77	X
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year? N/A	78b	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X
b	If "Yes," enter the name of the organization <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt		
81 a	Enter direct or indirect political expenditures See line 81 instructions 81a 0.		
b	Did the organization file Form 1120-POL for this year?	81b	X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b	If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III) 82b 0.		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A	84b	
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members? N/A	85a	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A	85b	
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year		
c	Dues, assessments, and similar amounts from members 85c N/A		
d	Section 162(e) lobbying and political expenditures 85d N/A		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A		
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f? N/A	85g	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? N/A	85h	
86	501(c)(7) organizations Enter a Initiation fees and capital contributions included on line 12 86a N/A		
b	Gross receipts, included on line 12, for public use of club facilities 86b N/A		
87	501(c)(12) organizations Enter a Gross income from members or shareholders 87a N/A		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 87b N/A		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
89 a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 <input type="text" value="0."/> , section 4912 <input type="text" value="0."/> , section 4955 <input type="text" value="0."/>		
b	501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 0.		
d	Enter Amount of tax on line 89c, above, reimbursed by the organization 0.		
90 a	List the states with which a copy of this return is filed <input type="text" value="CALIFORNIA"/>		
b	Number of employees employed in the pay period that includes March 12, 2001 90b 57		
91	The books are in care of <input type="text" value="BUSINESS OFFICE"/> Telephone no <input type="text" value="310-342-5200"/>		
	Located at <input type="text" value="1155 W. ARBOR VITAE STREET, LOS ANGELES, CA"/> ZIP + 4 <input type="text" value="90301-2902"/>		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A		

Part VII Analysis of Income-Producing Activities (See Specific Instructions on page 32)

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue					
a TUITION AND FEES					2,010,588.
b LIBRARY INCOME					21,644.
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities			14	197,284.	
97 Net rental income or (loss) from real estate					
a debt-financed property			30	305,683.	
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income			14	182,296.	
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events			01	39,831.	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		725,094.	2,032,232.
105 Total (add line 104, columns (B), (D), and (E))					2,757,326.

Note Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See Specific Instructions on page 32)

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
▼	SEE STATEMENT 13

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See Specific Instructions on page 33)

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

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See Specific Instructions on page 33)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

I am preparing this return and accompanying schedules and statements and to the best of my knowledge and belief it is true and correct to the best of my knowledge and belief.

13-03 PRESIDENT

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

OMB No 1545-0047

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

2001

Supplementary Information-(See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Department of the Treasury
Internal Revenue Service

Name of the organization **THE UNIVERSITY OF WEST LOS ANGELES** Employer identification number **95 2458679**

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 1 of the instructions List each one If there are none, enter "None")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
SHELLEY GLICKSTEIN ----- 9905 ROBBINS DRIVE, #5 BEVERLY HILLS	VICE PRESIDEN 40	74,500.	2,100.	1,200.
ARVIN ANNE ----- 6458 CAVALLERI ROAD, MALIBU CA 90265	DEAN 40	85,000.	4,250.	
RAE G. CHESNER ----- 6640 COLGATE AVE. LOS ANGELES, CA	DEAN 40	72,100.	3,600.	
KATHY CERVI ----- 1115 W, ARBOR VITAE ST LOS ANGELES, CA	ASSOCIATE DEA 40	69,000.	3,450.	
RON BEATTY ----- 1115 W, ARBOR VITAE ST LOS ANGELES, CA	DIRECTOR 40	52,500.	2,625.	
Total number of other employees paid over \$50,000 ▶	8			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
PRACTICAL ACADEMIC SUPPORT ----- 8306 WISHIRE BLVD. # 1803 BEVERLY HILLS, CA 90211	CLASSROOM INSTRUCTION	60,000.

Total number of others receiving over \$50,000 for professional services ▶	0	

Part III Statements About Activities (See page 2 of the instructions)	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line 1 of Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities	1	X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)		
a Sale, exchange, or leasing of property?	2a	X
b Lending of money or other extension of credit?	2b	X
c Furnishing of goods, services, or facilities?	2c	X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE PART V, FORM 990	2d	X
e Transfer of any part of its income or assets?	2e	X
3 Does the organization make grants for scholarships, fellowships, student loans, etc ? (See Note below)	3	X
4 Do you have a section 403(b) annuity plan for your employees?	4	X
Note Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments SEE STATEMENT 14		

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions)

The organization is not a private foundation because it is (Please check only ONE applicable box)

5 A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)

6 A school Section 170(b)(1)(A)(ii) (Also complete Part V)

7 A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)

8 A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)

9 A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state **▶** _____

10 An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the Support Schedule in Part IV-A)

11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)

11b A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)

12 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc , functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the Support Schedule in Part IV-A)

13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

Provide the following information about the supported organizations (See page 5 of the instructions)

(a) Name(s) of supported organization(s)	(b) Line number from above'

14 An organization organized and operated to test for public safety Section 509(a)(4) (See page 6 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) Use cash method of accounting **N/A**
 Note You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in)	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)					
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975					
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets.					
23 Total of lines 15 through 22	0.	0.	0.	0.	0.
24 Line 23 minus line 17					
25 Enter 1% of line 23					

26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24	▶ 26a	N/A
	b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1997 through 2000 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts.	▶ 26b	N/A
	c Total support for section 509(a)(1) test. Enter line 24, column (e).	▶ 26c	N/A
	d Add: Amounts from column (e) for lines 18 _____ 19 _____ 22 _____ 26b _____	▶ 26d	N/A
	e Public support (line 26c minus line 26d total)	▶ 26e	N/A
	f Public support percentage (line 26e (numerator) divided by line 26c (denominator))	▶ 26f	N/A %

27 Organizations described on line 12	a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year:	(2000)	(1999)	(1998)	(1997)
	b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year:	(2000)	(1999)	(1998)	(1997)
	c Add: Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____	▶ 27c	N/A		
	d Add: Line 27a total _____ and line 27b total _____	▶ 27d	N/A		
	e Public support (line 27c total minus line 27d total)	▶ 27e	N/A		
	f Total support for section 509(a)(2) test. Enter amount on line 23, column (e).	▶ 27f	N/A		
	g Public support percentage (line 27e (numerator) divided by line 27f (denominator))	▶ 27g	N/A %		
	h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))	▶ 27h	N/A %		

28 Unusual Grants. For an organization described in line 10, 11, or 12, that received any unusual grants during 1997 through 2000, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

Part V Private School Questionnaire (See page 7 of the instructions)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	X	
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	X	
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (if you need more space, attach a separate statement) <u>NONDISCRIMINATORY POLICY STATEMENTS ARE CONTAINED IN ALL ADVERTISEMENTS, BULLETINS, CATALOGUES AND APPLICATIONS.</u>	X	
32	Does the organization maintain the following		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	X	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	X	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	X	
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain (if you need more space, attach a separate statement)	X	
33	Does the organization discriminate by race in any way with respect to		
a	Students' rights or privileges?		X
b	Admissions policies?		X
c	Employment of faculty or administrative staff?		X
d	Scholarships or other financial assistance?		X
e	Educational policies?		X
f	Use of facilities?		X
g	Athletic programs?		X
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain (if you need more space, attach a separate statement)		X
34 a	Does the organization receive any financial aid or assistance from a governmental agency?		X
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement		X
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	X	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions)

N/A

(To be completed ONLY by an eligible organization that filed Form 5768)

Check a if the organization belongs to an affiliated group Check b if you checked "a" and "limited control" provisions apply

Limits on Lobbying Expenditures

(The term "expenditures" means amounts paid or incurred)

	(a) Affiliated group totals	(b) To be completed for ALL electing organizations
	N/A	
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38 Total lobbying expenditures (add lines 36 and 37)	38	
39 Other exempt purpose expenditures	39	
40 Total exempt purpose expenditures (add lines 38 and 39)	40	
41 Lobbying nontaxable amount Enter the amount from the following table -		
If the amount on line 40 is -	The lobbying nontaxable amount is -	
Not over \$500,000	20% of the amount on line 40	
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	
Over \$17,000,000	\$1,000,000	
42 Grassroots nontaxable amount (enter 25% of line 41)	42	
43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43	
44 Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44	

Caution If there is an amount on either line 43 or line 44, you must file Form 4720

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below See the instructions for lines 45 through 50 on page 11 of the instructions)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				N/A (e) Total
	(a) 2001	(b) 2000	(c) 1999	(d) 1998	
45 Lobbying nontaxable amount					0.
46 Lobbying ceiling amount (150% of line 45(e))					0.
47 Total lobbying expenditures					0.
48 Grassroots nontaxable amount					0.
49 Grassroots ceiling amount (150% of line 48(e))					0.
50 Grassroots lobbying expenditures					0.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
a Volunteers		X	
b Paid staff or management (Include compensation in expenses reported on lines c through h)		X	
c Media advertisements		X	
d Mailings to members, legislators, or the public		X	
e Publications, or published or broadcast statements		X	
f Grants to other organizations for lobbying purposes		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		X	
i Total lobbying expenditures (Add lines c through h)			0.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

FORM 990 RENTAL INCOME STATEMENT 1

KIND AND LOCATION OF PROPERTY	ACTIVITY NUMBER	GROSS RENTAL INCOME
CLASSROOM SPACE AND COMPUTER LAB SERVICES	1	309,475.
TOTAL TO FORM 990, PART I, LINE 6A		309,475.

FORM 990 RENTAL EXPENSES STATEMENT 2

DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
DEPRECIATION EXPENSE		3,792.	
- SUBTOTAL -	1		3,792.
TOTAL TO FORM 990, PART I, LINE 6B			3,792.

FORM 990 SPECIAL EVENTS AND ACTIVITIES STATEMENT 3

DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
THE BERNARD S. JEFFERSON DINNER	39,096.		39,096.	15,410.	23,686.
THE DOLLAR-A-DAY CAMPAIGN	17,134.		17,134.	989.	16,145.
TOTAL TO FORM 990, PART I, LINE 9	56,230.		56,230.	16,399.	39,831.

FORM 990 OTHER CHANGES IN NET ASSETS OR FUND BALANCES STATEMENT 4

DESCRIPTION	AMOUNT
IN-KIND RENT INCOME	<328,116.>
TOTAL TO FORM 990, PART I, LINE 20	<328,116.>

FORM 990	OTHER EXPENSES			STATEMENT 5
DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
ADVERTISING	143,124.	5,561.	137,563.	
GRADUATION	3,470.	3,470.		
INSURANCE	48,154.		48,154.	
PROFESSIONAL SERVICES	49,084.	1,750.	47,334.	
PROPERTY TAXES	7,346.		7,346.	
TRAINING	8,383.	5,951.	2,432.	
UTILITIES	172,629.		172,629.	
SECURITY	15,538.		15,538.	
OPEN HOUSE	1,145.		1,145.	
MISC	77,853.	31,614.	46,239.	
FUNDRAISING	25,016.			25,016.
MEMBERSHIPS AND SUBSCRIPTIONS	15,939.	31.	15,908.	
LIBRARY EXPENSES	91,687.	91,687.		
OUTREACH	30,445.	2,670.	27,775.	
COMPUTER EXPENSE	3,852.		3,852.	
PAYROLL FEES	15,133.		15,133.	
WEBSITE DEVELOPMENT	16,053.		16,053.	
CAMPUS RELOCATION	99,377.		99,377.	
TOTAL TO FM 990, LN 43	824,228.	142,734.	656,478.	25,016.

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 6
PART III

EXPLANATION

TO PROVIDE AN OPPORTUNITY FOR INDIVIDUALS FROM VARIOUS BACKGROUNDS TO OBTAIN A QUALITY LEGAL AND PARALEGAL EDUCATION AT A MODERATE COST. THE UNIVERSITY ALSO CONDUCTS NON-DEGREE, PROFESSIONAL EDUCATION COURSES IN LAW AND RELATED FIELDS.

FORM 990 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS STATEMENT 7

DESCRIPTION OF PROGRAM SERVICE ONE

PROVIDED AN OPPORTUNITY FOR MEN AND WOMEN FROM DIVERSE EDUCATIONAL, OCCUPATIONAL, CULTURAL, ETHNIC AND AGE BACKGROUNDS TO OBTAIN A QUALITY LEGAL AND PARALEGAL EDUCATION AT A MODERATE COST. FOR THE YEAR ENDED JUNE 30, 2002, APPROXIMATELY 240 STUDENTS ATTENDED BOTH THE SCHOOL OF LAW AND PARALEGAL.

	<u>GRANTS</u>	<u>EXPENSES</u>
TO FORM 990, PART III, LINE A		1,351,795.

FORM 990 CASH GRANTS AND ALLOCATIONS STATEMENT 8

<u>CLASSIFICATION</u>	<u>DONEE'S NAME</u>	<u>DONEE'S ADDRESS</u>	<u>DONEE'S RELATIONSHIP</u>	<u>AMOUNT</u>
SCHOLARSHIP			UNRELATED	18,600.
TOTAL INCLUDED ON FORM 990, PART II, LINE 22				<u>18,600.</u>

FORM 990 NON-GOVERNMENT SECURITIES STATEMENT 9

<u>SECURITY DESCRIPTION</u>	<u>CORPORATE STOCKS</u>	<u>CORPORATE BONDS</u>	<u>OTHER PUBLICLY TRADED SECURITIES</u>	<u>OTHER SECURITIES</u>	<u>TOTAL NON-GOV'T SECURITIES</u>
IBM STOCK	2,082.				2,082.
TROJAN ENERGY SHARES	1.				1.
CD				18,750.	18,750.
TO 990, LN 54 COL B	<u>2,083.</u>			<u>18,750.</u>	<u>20,833.</u>

FORM 990 OTHER REVENUE NOT INCLUDED ON FORM 990 STATEMENT 10

DESCRIPTION	AMOUNT
AMORTIZATION OF DISCOUNT ON DEFERRED RENT	103,884.
RENTAL EXPENSE	3,792.
TOTAL TO FORM 990, PART IV-A	107,676.

FORM 990 OTHER EXPENSES NOT INCLUDED ON FORM 990 STATEMENT 11

DESCRIPTION	AMOUNT
RENTAL EXPENSE	3,792.
TOTAL TO FORM 990, PART IV-B	3,792.

FORM 990 PART V - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES STATEMENT 12

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN-SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
GEORGE D. TAYLOR 260 S. LAKE AVE. #244 PASADENA, CA 91101	CHAIR 8 TO 30	0.	0.	0.
DEXTER A. HENDERSON 2160 W. ADAMS BLVD. LOS ANGELES, CA 90019	TREASURER 8 TO 30	0.	0.	0.
JANET SCHULMAN 2627 ARMSTRONG AVE. LOS ANGELES, CA 90039	VICE-CHAIR 8 TO 30	0.	0.	0.
MELINDA WILSON JD 1011 LINDENCLIFFS ST. TORRANCE, CA 90502	SECRETARY 8 TO 30	0.	0.	0.
MARCIA GONZALES-KIMBROUGH 1800 CITY HALL EAST LOS ANGELES, CA 90012	TRUSTEE 8 TO 30	0.	0.	0.

G. TIMOTHY HAIGHT, PH.D. 5151 STATE UNIVERSITY DRIVE LOS ANGELES, CA 90032	TRUSTEE 8 TO 30	0.	0.	0.
PATRICK HARRIS 3111 HUTTON DRIVE BEVERLY HILLS, CA 90210	TRUSTEE 8 TO 30	0.	0.	0.
ELBERT T. HUDSON 4727 WILSHIRE BLVD.#202 LOS ANGELES, CA 90010	TRUSTEE 8 TO 30	0.	0.	0.
CARLTON J. JENKINS 4272 HILLCREST DRIVE LOS ANGELES, CA 90008	TRUSTEE 8 TO 30	0.	0.	0.
GAIL L. MORAGOLIS, J.D. 714 P STREET, DIRECTORS OFFICE, 12TH FLOOR SACRAMENTO, CA 95814	TRUSTEE 8 TO 30	0.	0.	0.
TALMADGE C. TILLMAN, JR. 4578 DON MIGUEL DRIVE LOS ANGELES, CA 90008	TRUSTEE 8 TO 30	0.	0.	0.
LAJETTA Y. WRIGHT, J.D.. 535 MAGNOLIA AVENUE LONG BEACH, CA 90802	TRUSTEE 8 TO 30	0.	0.	0.
TOTALS INCLUDED ON FORM 990, PART V		<u>0.</u>	<u>0.</u>	<u>0.</u>

FORM 990 PART VIII - RELATIONSHIP OF ACTIVITIES TO STATEMENT 13
 ACCOMPLISHMENT OF EXEMPT PURPOSES

LINE	EXPLANATION OF RELATIONSHIP OF ACTIVITIES
93A	THE TUITION AND FEES HELP DEFRAY THE COSTS OF PROVIDING CLASSROOM INSTRUCTION AT THE UNIVERSITY LEVEL TO LEGAL AND PARALEGAL STUDENTS.
93B	UNIVERSITY'S LIBRARY CONTAINS AN EXTENSIVE REFERENCE SECTION OF BOOKS, MICROFICHE AND PERIODICALS. THE LIBRARY ALSO HAS COMPUTER ASSISTED LEGAL RESEARCH SYSTEM. INCOME FROM THE LIBRARY IS FROM THE FEES COLLECTED FOR COPYING SERVICES FOR THE STUDENTS AND FACULTY.

SCHEDULE A EXPLANATION OF QUALIFICATIONS TO RECEIVE PAYMENTS STATEMENT 14
PART III, LINE 3

ALL SCHOLARSHIPS ARE AWARDED TO STUDENTS BASED ON ACADEMIC MERIT AND/OR ECONOMIC NEED.

If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only Part II and check this box

Note Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1)

Part II Additional (not automatic) 3-Month Extension of Time - Must file Original and One Copy.		
Type or print File by the extended due date for filing the return See instructions	Name of Exempt Organization THE UNIVERSITY OF WEST LOS ANGELES	Employer identification number 95-2458679
	Number, street, and room or suite no. If a P.O. box, see instructions 1155 W. ARBOR VITAE STREET	For IRS use only
	City, town or post office, state, and ZIP code For a foreign address, see instructions LOS ANGELES, CA 90301-2902	

Check type of return to be filed (File a separate application for each return)

- Form 990 Form 990-EZ Form 990 T (sec 401(a) or 408(a) trust) Form 1041-A Form 5227 Form 8870
- Form 990-BL Form 990-PF Form 990 T (trust other than above) Form 4720 Form 6069

STOP Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868

- If the organization does **not** have an office or place of business in the United States, check this box
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the **whole** group, check this box If it is for **part** of the group, check this box and attach a list with the names and EINs of all members the extension is for

4 I request an additional 3 month extension of time until MAY 15, 2003

5 For calendar year _____, or other tax year beginning JUL 1, 2001 and ending JUN 30, 2002

6 If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period

7 State in detail why you need the extension
ADDITIONAL TIME IS NECESSARY TO GATHER INFORMATION NEEDED TO FILE A COMPLETE AND ACCURATE TAX RETURN.

8a If this application is for Form 990 BL, 990 PF, 990 T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions \$ _____

b If this application is for Form 990 PF, 990 T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 \$ _____

c **Balance Due** Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions \$ N/A

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature Peter Fui Title CPA Date 2/3/03

Notice to Applicant - To Be Completed by the IRS

- We **have** approved this application Please attach this form to the organization's return
- We **have not** approved this application However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions) This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return Please attach this form to the organization's return
- We **have not** approved this application After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file We are not granting the 10 day grace period
- We **cannot consider** this application because it was filed after the due date of the return for which an extension was requested
- Other _____

EXTENSION APPROVED
FEB 25 2003
LINDA WEISKOP, FIELD DIRECTOR
SUBMISSION PROCESSING

Director _____ By _____ Date _____

Alternate Mailing Address - Enter the address if you want the copy of this application for an additional 3 month extension returned to an address different than the one entered above

Type or print	Name SINGER LEWAK GREENBAUM & GOLDSTEIN LLP
	Number and street (include suite, room, or apt no.) Or a P.O. box number 10960 WILSHIRE BLVD., SUITE 1100
	City or town, province or state, and country (including postal or ZIP code) LOS ANGELES, CA 90024-3783

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return

• If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box

• If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

Note Do not complete **Part II** unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Part I Automatic 3-Month Extension of Time - Only submit original (no copies needed)

Note Form 990-T corporations requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041

Type or print	Name of Exempt Organization THE UNIVERSITY OF WEST LOS ANGELES	Employer identification number 95-2458679
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P O box, see instructions 10960 WILSHIRE BLVD, SUITE 1100	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions LOS ANGELES, CA 90024	

Check type of return to be filed (file a separate application for each return)

- | | | |
|--|--|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990 T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990 T (sec 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990 T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041 A | <input type="checkbox"/> Form 8870 |

• If the organization does not have an office or place of business in the United States, check this box

• If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the **whole** group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3-month (6 month, for **990-T corporation**) extension of time until **FEBRUARY 18, 2003** to file the exempt organization return for the organization named above. The extension is for the organization's return for calendar year _____ or tax year beginning **JUL 1, 2001**, and ending **JUN 30, 2002**

2 If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period

3a If this application is for Form 990 BL, 990 PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ _____

b If this application is for Form 990 PF or 990 T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit \$ _____

c **Balance Due** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ **N/A**

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete, and that I am authorized to prepare this form.

Signature ▶ *Peter Fu* Title ▶ *CPA* Date ▶ *10-24-02*