

CITY OF HUNTINGTON PARK

City Council

Regular Meeting

Agenda

Tuesday, March 19, 2019

6:00 p.m.

City Hall Council Chambers

6550 Miles Avenue, Huntington Park, CA 90255

Jhonny Pineda
Mayor

Karina Macias
Vice Mayor

Graciela Ortiz
Council Member



Marilyn Sanabria
Council Member

Manuel "Manny" Avila
Council Member

All agenda items and reports are available for review in the City Clerk's Office and www.hpca.gov. Any writings or documents provided to a majority of the City Council regarding any item on this agenda (other than writings legally exempt from public disclosure) will be made available for public inspection in the Office of the City Clerk located at 6550 Miles Avenue, Huntington Park, California 90255 during regular business hours, 7:00 a.m. to 5:30 p.m., Monday – Thursday, and at the City Hall Council Chambers during the meeting.

Any person who requires a disability-related modification or accommodation, including auxiliary aids or services, in order to participate in the public meeting may request such modification, accommodation, aid or service by contacting the City Clerk's Office either in person at 6550 Miles Avenue, Huntington Park, California or by telephone at (323) 584-6230. Notification in advance of the meeting will enable the City to make reasonable arrangements to ensure accessibility to this meeting.

PLEASE SILENCE ALL CELL PHONES AND OTHER ELECTRONIC EQUIPMENT WHILE COUNCIL IS IN SESSION. Thank you.

PLEASE NOTE--The numerical order of items on this agenda is for convenience of reference. Items may be taken out of order upon request of the Mayor or Members of the City Council. Members of the City Council and the public are reminded that they must preserve order and decorum throughout the Meeting. In that regard, Members of the City Council and the public are advised that any delay or disruption in the proceedings or a refusal to obey the orders of the City Council or the presiding officer constitutes a violation of these rules.

- The conduct of City Council meetings is governed by the portion of the California Government Code commonly known as the "Brown Act" and by the Huntington Park City Council Meeting Rules of Procedure.
- The City Council meeting is for conducting the City's business, and members of the audience must obey the rules of decorum set forth by law. This means that each speaker will be permitted to speak for three minutes to address items that are listed on the City Council agenda or topics which are within the jurisdictional authority of the City.
- No profanity, personal attacks, booing, cheering, applauding or other conduct disruptive to the meeting will be permitted. Any person not adhering to the Rules of Procedure or conduct authorized by the Brown Act may be asked to leave the Council Chambers.
- All comments directed to the City Council or to any member of the City Council must be directed to the Mayor (or Chairperson if Mayor is absent).

We ask that you please respect the business nature of this meeting and the order required for the proceedings conducted in the Council Chambers.

Public Comment

The Council encourages all residents of the City and interested people to attend and participate in the meetings of the City Council.

If you wish to address the Council, please complete the speaker card that is provided at the entrance to the Council Chambers and give to City Clerk prior to the start of Public Comment.

For both open and closed session each speaker will be limited to three minutes per Huntington Park Municipal Code Section 2-1.207. Time limits may not be shared with other speakers and may not accumulate from one period of public comment to another or from one meeting to another. **This is the only opportunity for public input except for scheduled public hearing items.**

All comments or queries shall be addressed to the Council as a body and not to any specific member thereof. Pursuant to Government Code Section 54954.2(a)(2), the Ralph M. Brown Act, no action or discussion by the City Council shall be undertaken on any item not appearing on the posted agenda, except to briefly provide information, ask for clarification, provide direction to staff, or schedule a matter for a future meeting.

Additions/Deletions to Agenda

Items of business may be added to the agenda upon a motion adopted by a minimum two-thirds vote finding that there is a need to take immediate action and that the need for action came to the attention of the City or Agency subsequent to the agenda being posted. Items may be deleted from the agenda upon the request of staff or Council.

Important Notice

The City of Huntington Park shows replays of City Council Meetings on Local Access Channel 3 and over the Internet at www.hpca.gov. NOTE: Your attendance at this public meeting may result in the recording and broadcast of your image and/or voice.

CALL TO ORDER

ROLL CALL

Mayor Jhonny Pineda
Vice Mayor Karina Macias
Council Member Manuel "Manny" Avila
Council Member Graciela Ortiz
Council Member Marilyn Sanabria

INVOCATION

PLEDGE OF ALLEGIANCE

PRESENTATIONS

Proclamation presented to Ms. Lucero Mora, Leader/Volunteer, American Red Cross Representative, Proclaiming "March 2019 as American Red Cross Month"

"Certificates of Recognition," Presented to the Linda Esperanza Marquez High School Girls Varsity Soccer Team for Becoming the Undefeated Southern League Champions and Los Angeles City Section CIF Division II Runner Ups

Presentation on "Lead Contamination" by the Linda Esperanza Marquez High School Huntington Park Institute of Applied Medicine (HPIAM) Students

PUBLIC COMMENT

Pursuant to Government Code Section 54954.3(a) Members of the public will have an opportunity to address the City Council on items listed on this agenda. For items on this agenda each speaker will be limited to three minutes per Huntington Park Municipal Code Section 2-1.207. Time limits may not be shared with other speakers and may not accumulate from one period of public comment to another or from one meeting to another.

STAFF RESPONSE

RECESS TO CLOSED SESSION

CLOSED SESSION

1. CONFERENCE WITH LABOR NEGOTIATORS Regarding Represented Employees - Government Code Section 54957.6(a)
City's Designated Representative(s) for Negotiations: Ricardo Reyes, City Manager and Nita McKay, Finance/Administrative Services Director
Employee Organization: General Employees Association (GEA)
2. PUBLIC EMPLOYEE DISCIPLINE/DISMISSAL/RELEASE
Government Code Section 54957 – [One matter]
3. CONFERENCE WITH LEGAL COUNSEL – ANTICIPATED LITIGATION
Government Code section 54956.9(d)(4) – [One matter]

RECONVENE TO OPEN SESSION

CLOSED SESSION ANNOUNCEMENT

CONSENT CALENDAR

All matters listed under the Consent Calendar are considered to be routine and will be enacted by one motion. There will be no separate discussion of these items prior to the time the Council votes on the motion unless members of the Council, staff, or the public request specific items to be discussed and/or removed from the Consent Calendar for separate action.

OFFICE OF THE CITY CLERK

1. **Approve Minute(s) of the following City Council Meeting(s):**
 - 1-1. Regular City Council Meeting held February 19, 2019.

FINANCE

2. **Approve Accounts Payable and Payroll Warrant(s) dated March 19, 2019**

END OF CONSENT CALENDAR

REGULAR AGENDA

COUNCIL

3. Council Appointment to Civil Service and Parks and Recreation Commissions

RECOMMENDATION OF ITEM UNDER CONSIDERATION:

1. Make appointment to the Civil Service and Parks and Recreation Commissions consistent with the provisions set forth in Resolution No. 2015-19.

COMMUNITY DEVELOPMENT

4. Consideration and Approval of a Request by the Greater Huntington Park Area Chamber of Commerce to Reduce City Fees Incurred from the Annual 2018 "Sabor de Mexico Lindo Festival," and/or Reimburse Such Charges to the City in two (2) Separate Installments

RECOMMENDATION OF ITEM UNDER CONSIDERATION:

1. Approve the request to reduce City's fees incurred from the annual 2018 "Sabor de Mexico Lindo" Festival;
2. Consider reimbursement to the City for such charges, in two (2) separate installments; and /or
3. Provide staff with direction.

5. Consideration and Approval of an Activity in Public Places Permit for the Greater Huntington Park Area Chamber of Commerce's Annual "Carnaval Primavera" Downtown Street Festival

RECOMMENDATION OF ITEM UNDER CONSIDERATION:

1. Approve Activity in Public Places Permit from the Greater Huntington Park Area Chamber of Commerce to conduct the annual "Carnaval Primavera" along Pacific Boulevard from April 5 through April 7, 2019;
2. Approve request for a fee waiver of City's department costs for the proposed event; and/or
3. Provide staff with direction.

REGULAR AGENDA (CONTINUED)

PUBLIC WORKS

6. Consideration and Approval of Purchase Order (PO) for Six Remote Terminal Units (RTUs) for Six Well Locations

RECOMMENDATION OF ITEM UNDER CONSIDERATION:

1. Approve purchase of six (6) RTUs in the amount of \$118,882.50 in account 681-8030-461.43-30; and
2. Authorize City Manager to approve the encumbrance request.

7. Consideration and Approval of Payment for Emergency Replacement of Traffic Signal Cabinet and Components

RECOMMENDATION OF ITEM UNDER CONSIDERATION:

1. Approve emergency expenditure in the amount of \$24,459.21 in account 221-8014-429.74-10; and
2. Authorize City Manager to execute the check request.

8. Consideration and Approval of Budget Appropriation for the Zoe Avenue Trench and Pavement Repair Project

RECOMMENDATION OF ITEM UNDER CONSIDERATION:

1. Approve a budget appropriation in the amount of \$50,000 in account number 111-8080-431.76-03

9. Consideration and Approval to Submit an Application to the 2019 Safe Routes to School (SR2S) Launch Program to Host a Community Workshop Sponsored by the SR2S National Partnership and U.C. Berkeley Safetrec

RECOMMENDATION OF ITEM UNDER CONSIDERATION:

1. Authorize the Public Works Department to proceed with the submittal of an interest form to the 2019 Safe Routes to School (SR2S) Launch Program to host a Community Workshop sponsored by the SR2S National Partnership in collaboration by U.C. Berkeley SafeTREC.

END OF REGULAR AGENDA

PUBLIC HEARING

COMMUNITY DEVELOPMENT

10. Continued from the February 19 2019, Regular City Council Meeting - Consideration and Approval of Resolution Adopting the 2030 City of Huntington Park General Plan and Certification of an Environmental Impact Report (EIR) Under the California Environmental Quality Act (CEQA)

RECOMMENDATION OF ITEM UNDER CONSIDERATION:

1. Conduct a public hearing;
2. Take public testimony and staff's analysis; and
3. Adopt Resolution No. XXXX-XX, adopting the proposed 2030 City of Huntington Park General Plan and certification of an Environmental Impact Report (EIR) under the California Environmental Quality Act (CEQA).

DEPARTMENTAL REPORTS (Information only)

WRITTEN COMMUNICATIONS

COUNCIL COMMUNICATIONS

Council Member Manuel "Manny" Avila

Council Member Graciela Ortiz

Council Member Marilyn Sanabria

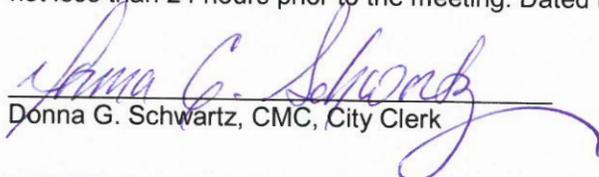
Vice Mayor Karina Macias

Mayor Jhonny Pineda

ADJOURNMENT

The City of Huntington Park City Council will adjourn in memory of Ms. Evelyn Ermelinda Granillo, graduate of Huntington Park High School and longtime resident, to a Regular Meeting on Tuesday, April 2, 2019 at 6:00 P.M.

Donna G. Schwartz, hereby certify under penalty of perjury under the laws of the State of California that the foregoing agenda was posted at City of Huntington Park City Hall and made available at www.hpca.gov not less than 24 hours prior to the meeting. Dated this 14th day of March 2019.


Donna G. Schwartz, CMC, City Clerk

MINUTES

Regular Meeting of the
City of Huntington Park City Council
Tuesday, February 19, 2019

Sergeant at Arms read the Rules of Decorum at the beginning of the meeting.

The regular meeting of the City Council of the City of Huntington Park, California was called to order at 6:02 p.m. on Tuesday, February 19, 2019, in the Council Chambers at City Hall, 6550 Miles Avenue, Huntington Park, California; Mayor Jhonny Pineda presiding.

PRESENT: Council Member(s): Manuel "Manny" Avila, Graciela Ortiz, Marilyn Sanabria, Vice Mayor Karina Macias and Mayor Jhonny Pineda

CITY OFFICIALS/STAFF: Ricardo Reyes, City Manager; Cosme Lozano, Chief of Police; Arnold Alvarez-Glasman, City Attorney; Cynthia Norzagaray, Director of Parks and Recreation; Daniel Hernandez, Director of Public Works; Sergio Infanzon, Director of Community Development; Nita McKay, Director of Finance/Administrative Services and Donna G. Schwartz, City Clerk.

INVOCATION

Invocation was led by Mayor Pineda.

PLEDGE OF ALLEGIANCE

The Pledge of Allegiance was led by Council Member Ortiz.

PRESENTATIONS

Mayor Pineda noted the "Certificate of Appreciation," to AltaMed for Their Outstanding Leadership and Contribution Towards Improving the Health and Wellbeing of the Community.

Leticia Martinez, Executive Director/CEO, representative of The Greater Huntington Park Area Chamber of Commerce presented a PowerPoint on Festivals and Economic Development.

PUBLIC COMMENT

1. Sandra Romero, commented on Measure C regarding Costco, and wants to know more.
2. Francisco Rivera, acknowledged the Public Works Department, commented on pick up of bulky items and noted graffiti on a wall on Florence near Alameda.
3. Rodolfo Cruz, spoke in regards to tree maintenance, commented on not knowing enough about Measure C regarding Costco, redevelopment and city funds.
4. Andy Clapkin, spoke in opposition to Measure C regarding bringing in Costco.
5. Manuel Castillo, commented on Costco; the cost, traffic, water contamination and wants to know what is being done, how much is it going to cost and the guarantee of jobs.

STAFF RESPONSE

City Manager Ricardo Reyes responded to the comments regarding Measure C (Costco) stating the City is currently working on an education program that will help demystify a lot of the beliefs, the city has made no concessions to Costco, with regard to the contaminants they have been addressed.

City Attorney Arnold Alvarez-Glasman added that this is an Advisory Measure, a question to the residents on what efforts the City should take to bring in a Costco, no financial commitment, no concessions made but an effort on where the City might go with this project. It would generate significant sales tax revenue, creating jobs, revenue would pay for police, parks, street repairs and other elements essential to any community. Mr. Alvarez-Glasman also noted there was a rebuttal period with ample opportunity and no one chose to do so.

Community Development Director Sergio Infanzon stated the City is working with the State Water Board noting the State is regulating the process and a clearance is needed in order to move forward.

Mayor Pineda responded to the bulky item pick-up and stated the City will continue to have Public Works go around and pick up the items, and thanked Mr. Rivera for reporting graffiti.

Council Member Ortiz reminded the residents of the My Huntington app to report graffiti.

City Manager Ricardo Reyes responded to the claim comment explaining that there is a process when a claim is submitted an investigation is done and information collected while a Third Party Administrator is involved. A final determination is not made until all information is gathered and reviewed.

CLOSED SESSION

At 6:47 p.m. City Attorney Arnold Alvarez-Glasman recessed to closed session.

1. CONFERENCE WITH LABOR NEGOTIATORS Regarding Represented Employees - Government Code Section 54957.6(a)
City's Designated Representative(s) for Negotiations: Ricardo Reyes, City Manager and Nita McKay, Finance/Administrative Services Director
Employee Organization: General Employees Association (GEA)
2. CONFERENCE WITH LEGAL COUNSEL – ANTICIPATED LITIGATION
[One Potential Case] - Government Code Section 54956.9(d)(4)

At 7:50 p.m. Mayor Pineda reconvened to open session with all Council Members present.

CLOSED SESSION ANNOUNCEMENT

Vanessa Ibarra, Legal, announced all five Council Members were present and briefed on closed session items 1 and 2. 1) no action taken, nothing to report. 2.) no action taken, nothing to report.

CONSENT CALENDAR

At 7:53 p.m. Council Member Ortiz left the chambers.

Motion: Vice Mayor Macias moved to approve consent calendar, seconded by Mayor Pineda. Motion passed 4-0-1, by the following vote:

ROLL CALL:

AYES:	Council Member(s): Avila, Sanabria, Vice Mayor Macias and Mayor Pineda
NOES:	Council Member(s): None
ABSTAINED:	Council Member(s): Ortiz

OFFICE OF THE CITY CLERK

1. Approved Minute(s) of the following City Council Meeting(s):

1-1. Regular City Council Meeting held February 5, 2019.

FINANCE

2. Approved Accounts Payable and Payroll Warrant(s) dated February 19, 2019.

END OF CONSENT CALENDAR

REGULAR AGENDA

OFFICE OF THE CITY CLERK

3. **Consideration and Approval of Resolution Amending Conflict of Interest Code**

City Manager Ricardo Reyes presented the item.

Motion: Council Member Sanabria moved to adopt Resolution No. 2019-05, Amending Resolution No. 2018-02, Amending the City of Huntington Park's Conflict of Interest Code in Accordance with the Political Reform Act, seconded by Vice Mayor Macias. Motion passed 4-0-1, by the following vote:

ROLL CALL:

AYES:	Council Member(s): Avila, Sanabria, Vice Mayor Macias and Mayor Pineda
NOES:	Council Member(s): None
ABSTAINED:	Council Member(s): Ortiz

CITY MANAGER

At 7:53 p.m. Council Member Ortiz returned to the chambers.

4. **Options/Alternatives/Response to Governor Newsom's Comment Regarding Huntington Park's Commitment to Affordable Housing**

- Discussion and/or Action -

City Manager Ricardo Reyes briefly explained the item with regard to Governor Newsom's State of the Address and his comment related to Huntington Park not being in compliant with Affordable Housing.

Discussion followed by Council and staff noting the efforts by the City on Affordable Housing and a draft of the General Plan that is being reviewed, meetings city staff has attended and discussions with the Governor's Office and the State Housing and Community Development, issues to be addressed to the best of our ability and the city's efforts in developing an Ad Hoc Housing and Homelessness Committee.

Council Member Ortiz requested staff look into the reason why Governor Newsom used Huntington Park in his speech.

Motion: Council Member Ortiz motioned to have Vice Mayor Macias and Council Member Sanabria who are members of Huntington Park's Ad Hoc Housing and Homelessness Committee to attend any future meetings held by the Governor's Office and to have Mayor Pineda as an alternate, seconded by Mayor Pineda. Motion passed by one motion.

5. **Consideration and Approval of Acceptance of the 2017 Edward Byrne Memorial Justice Assistance Grant (JAG) Funding**

City Manager Ricardo Reyes presented the staff report and introduced Chief of Police Cosme Lozano who provided additional information.

Motion: Council Member Ortiz moved to authorize the Police Department to accept funding provided through the Edward Byrne Memorial Justice Assistance Grant (JAG) program totaling \$29,495, designate the Chief of Police as the Authorized Grantee Official

for the purpose of executing grant objectives and documentation and appropriate the amount of \$29,495 in account number 227-7116-421.74-10 in the City's FY 2018-19 Budget for police equipment purchases as specified within this report, seconded by Council Member Sanabria. Motion passed 5-0, by the following vote:

ROLL CALL:

AYES: Council Member(s): Avila, Ortiz, Sanabria, Vice Mayor Macias and Mayor Pineda
NOES: Council Member(s): None

PUBLIC WORKS

6. Consideration and Approval of Award of a Construction Contract to for the Huntington Park Signal Synchronization & Bus Speed Improvement Project Capital Improvement Project (CIP) 2018-05 (Call for Projects ID#F7312)

City Manager Ricardo Reyes announced the item and introduced Director of Public Works Daniel Hernandez who presented the staff report.

Motion: Vice Mayor Macias moved to approve a construction contract to Elecnor Belco Electric, Inc. as the lowest responsible, responsive bidder, for the Huntington Park Signal Synchronization & Bus Speed Improvement Project CIP 2018-05 (Call for Projects ID# F7312) for a not-to-exceed amount of \$911,252, authorize the City Manager execute the construction contract agreement and professional services agreement and approve budget appropriation in an amount of \$9,552.93 to account number 207-8016-429.73-10 and \$11,914.07 to account number 209-8010-431.73-10, seconded by Council Member Sanabria. Motion passed 5-0, by the following vote:

ROLL CALL:

AYES: Council Member(s): Avila, Ortiz, Sanabria, Vice Mayor Macias and Mayor Pineda
NOES: Council Member(s): None

At 8:29 p.m. Council Member Ortiz left the chambers.

7. Consideration and Approval of Award of a Professional Services Contract (PSC) for Construction Management/Inspection and Labor Compliance Services for the Huntington Park Signal Synchronization & Bus Speed Improvement Project CIP 2018-05 (Call for Projects ID#F7312)

Director of Public Works Daniel Hernandez presented the staff report.

Motion: Vice Mayor Macias moved to award the Professional Services Agreement to Infrastructure Engineering (IE) instead of KOA, to provide Construction Management & Inspection and Labor Compliance services for the Huntington Park Signal Synchronization & Bus Speed Improvement Project CIP 2018-05 (Call for Projects ID# F7312) for a not-to-exceed amount of \$178,200 and authorize the City Manager or his designee to execute the professional services agreement, seconded by Council Member Sanabria. Motion passed 4-0-1, by the following vote:

ROLL CALL:

AYES: Council Member(s): Avila, Sanabria, Vice Mayor Macias and Mayor Pineda
NOES: Council Member(s): None
ABSTAINED: Council Member(s): Ortiz

Mayor Pineda noted Council chose to go with the lowest bidder.

PUBLIC WORKS

8. Consideration and Approval of Capital Improvement Project (CIP) 2018-07 Downtown Huntington Park I-Park System Implementation Project (Call for Projects ID#F7702) 90% Completion of Design and Authorization to Proceed with Bid Advertisement

Director of Public Works Daniel Hernandez presented the staff report and introduced Cesar Roldan, Consultant with Infrastructure Engineering, who provided a PowerPoint presentation.

Motion: Council Member Sanabria moved to approve, failed due to lack of second.

Substitute Motion: Vice Mayor Macias moved to approve but with the condition that before installing lockers, bike racks and signs for Council to make final decision on where they are placed. Approved Environmental Assessment pursuant to 14 California Code of Regulations § 15301 as a Class 1 categorical exemption under the California Environmental Quality Act (CEQA), approved CIP 2018-07 Downtown Huntington Park i-Park System Implementation Project (Call for Projects ID# F7702) 90% completion of plans, specifications and engineer's estimate (PS&E) and authorized Public Works Department to proceed with bid advertisement for construction, seconded by Council Member Sanabria. Motion passed 4-0-1, by the following vote:

ROLL CALL:

AYES: Council Member(s): Avila, Sanabria, Vice Mayor Macias and Mayor Pineda
NOES: Council Member(s): None
ABSTAINED: Council Member(s): Ortiz

9. Consideration and Approval of Award of Contract for Construction Management and Inspection Services of Capital Improvement Project (CIP) 2018-07 Downtown Huntington Park I-Park System Implementation Project (Call for Projects ID#F7702)

Director of Public Works Daniel Hernandez presented the staff report.

Motion: Vice Mayor Macias moved to authorize Infrastructure Engineers under the currently approved Augmentation Contract to proceed with the construction management and inspection (CM) services of CIP 2018-07 Downtown Huntington Park i-Park System Implementation Project (Call for Projects ID# F7702) for a not-to-exceed fee of 7% based on construction bids and authorize the City Manager or designee to execute the Request for Services (RFS), seconded by Council Member Sanabria. Motion passed 4-0-1, by the following vote:

ROLL CALL:

AYES: Council Member(s): Avila, Sanabria, Vice Mayor Macias and Mayor Pineda
NOES: Council Member(s): None
ABSTAINED: Council Member(s): Ortiz

10. Consideration and Approval of Award of Professional Services Agreement (PSA) for the Annual Sidewalk Hazard Trip Remediation - Capital Improvement Project (CIP) No. 2018-09

At 8:59 p.m. Council Member Ortiz returned to the chambers.

Director of Public Works Daniel Hernandez presented the staff report.

Motion: Council Member Ortiz motioned to award the Professional Services Agreement to the lowest bidder, BPR Inc. instead of Precision Concrete Cutting for the Annual Sidewalk Trip Hazard Remediation CIP No. 2018-09 for a not-to-exceed amount of \$245,000 for FY 2018-19 and a not-to-exceed amount of \$100,000 for FYs 2019-20 and

2020-21 and authorize City Manager to execute a three (3) year agreement with the possibility of two (2), one-year extensions for a not-to-exceed total of five (5) years *and to add to the agreement with BPR Inc. to provide cutting service so that it is ADA compliant, if not able to provide, the item will come back to Council*, seconded by Council Member Sanabria. . Motion passed 5-0, by the following vote:

ROLL CALL:

AYES: Council Member(s): Avila, Ortiz, Sanabria, Vice Mayor Macias and Mayor Pineda
NOES: Council Member(s): None

PUBLIC WORKS

11. Consideration and Approval for Authorization to Purchase a John Deere Gator

Director of Public Works Daniel Hernandez presented the staff report and noted the request for approval for the name change in order to process payment.

Motion: Council Member Sanabria moved to approve the name change and approved purchase of an electric John Deere Gator from Deere & Company, seconded by Vice Mayor Macias. Motion passed 5-0, by the following vote:

ROLL CALL:

AYES: Council Member(s): Avila, Ortiz, Sanabria, Vice Mayor Macias and Mayor Pineda
NOES: Council Member(s): None

City Manager requested Item 13 be heard before Item 12. Council approved.

13. Consideration and Approval of Resolution Approving the 2019 Traffic Engineering Speed Study

Director of Public Works Daniel Hernandez presented the staff report.

Motion: Council Member Ortiz moved to adopt Resolution No. 2019-06, approving the 2019 Traffic Engineering Speed Study, seconded by Council Member Sanabria. Motion passed 5-0, by the following vote:

ROLL CALL:

AYES: Council Member(s): Avila, Ortiz, Sanabria, Vice Mayor Macias and Mayor Pineda
NOES: Council Member(s): None

12. Consideration and Approval of Capital Improvement Project (CIP) ATP cycle II Project (ATPL-5150(012)) 90% Completion of Design and Authorization to Proceed with Bid Advertisement

Director of Public Works Daniel Hernandez presented the staff report and introduced Cesar Roldan, Consultant with Infrastructure Engineering, who provided a PowerPoint presentation.

Motion: Vice Mayor Macias moved to approve but requested staff provide a memo listing the parking spaces that will be eliminated. Approve Environmental Assessment as follows: The proposed project is categorically exempt from the requirements of the California Environmental Quality Act (CEQA) pursuant to 14 California Code of Regulations § 15301 as a Class 1 categorical exemption (Existing Facilities). The project results in minor alterations to existing public facilities involving no significant expansion of the existing use. The project is not anticipated to have any significant impacts with regard to traffic, noise, air quality, or water quality. There are adequate utilities and public

services to serve the project, approved the options that maximizes public safety and minimizes the loss of street parking for CIP 2016-01 ATP Cycle II Project (ATPL-5150(012)) 90% completion of plans, specifications and engineer's estimate (PS&E) and authorized Public Works Department to proceed with bid advertisement after obtaining Caltrans' E-76 (Notice to Proceed) for construction, seconded by Council Member Sanabria. Motion passed 5-0, by the following vote:

ROLL CALL:

AYES: Council Member(s): Avila, Ortiz, Sanabria, Vice Mayor Macias and Mayor Pineda
NOES: Council Member(s): None

END OF REGULAR AGENDA

PUBLIC HEARING

COMMUNITY DEVELOPMENT

14. Continued from the February 5 2019, Regular City Council Meeting - **Consideration and Approval of Resolution Adopting the 2030 City of Huntington Park General Plan and Certification of an Environmental Impact Report (EIR) Under the California Environmental Quality Act (CEQA)**

RECOMMENDATION OF ITEM UNDER CONSIDERATION:

1. Conduct a public hearing;
2. Take public testimony and staff's analysis; and
3. Adopt Resolution No. 2018-27, adopting the proposed 2030 City of Huntington Park General Plan and certification of an Environmental Impact Report (EIR) under the California Environmental Quality Act (CEQA).

Motion: Council Member Sanabria, moved to continue the item to the next regular city council meeting, seconded by Mayor Pineda. Motion passed 5-0, by one motion.

FINANCE

15. Continued from the February 5 2019, Regular City Council Meeting - **Consideration and Approval of a Resolution Establishing New Fees Related to Sidewalk Vendor Permit Fees, Pursuant to Title 3 "Finance," Chapter 1 "Business Licensing," Article 18 "Peddlers and Sidewalk Vendors" of the City of Huntington Park's Municipal Code**

Vanessa Ibarra, Legal, presented the staff report.

Mayor Pineda opened public comment, there being none, closed public comment.

Motion: Vice Mayor Macias moved to adopt Resolution No. 2019-02, Establishing New Fees Related to Sidewalk Vendor Permit Fees, Pursuant to Title 3 "Finance," Chapter 1 "Business Licensing," Article 18 "Peddlers and Sidewalk Vendors" of the City of Huntington Park's Municipal Code, seconded by Mayor Pineda. Motion passed 5-0, by the following vote:

ROLL CALL:

AYES: Council Member(s): Avila, Ortiz, Sanabria, Vice Mayor Macias and Mayor Pineda
NOES: Council Member(s): None

DEPARTMENTAL REPORTS (Information only)

WRITTEN COMMUNICATIONS – None.

COUNCIL COMMUNICATIONS

Council Member Manuel “Manny” Avila, wished all a good night.

Council Member Graciela Ortiz, wished all a good night.

Council Member Marilyn Sanabria, wished all a good night.

Vice Mayor Karina Macias, thanked staff, thanked Parks and Recreation for a successful Senior Valentines Dance, announced Meet Your Chief on February 20th at 7 p.m. Raul Perez Park and wished everyone a good night.

Mayor Jhonny Pineda, thanked everyone, continue to provide good service to the residence and wished everyone a good night.

Council Member Avila acknowledge Mrs. Avila and gave his condolences.

ADJOURNMENT

At 10:05 p.m. Mayor Pineda adjourned the City of Huntington Park City Council in memory of Margarita Avila, founder of El Ranchito Mexican Restaurant, to a Regular Meeting on Tuesday, March 5, 2019 at 6:00 P.M.

Respectfully submitted,

Donna G. Schwartz, CMC
City Clerk

City of Huntington Park List of Funds

Fund	Description	Fund	Description
111	General Fund	234	Congressional Earmark
114	Spec Events Contrib Rec	235	Federal Street Improvmt
120	Special Revenue DNA ID	237	Community Planning
121	Special Revnu Welfare Inm	239	Federal CDBG Fund
122	Prevention Intervention	240	HUD EZ/EC Soc Sec Block
123	Board of Corrections - LEAD	242	HUD Home Program
124	Auto Theft	243	HUD 108 B03MC060566
150	Emergency Preparedness	245	EPA Brownfield
151	Economic Development	246	LBPHCP-Lead Base
201	Environmental Justice	247	Neighborhood Stabilization
202	CFP Crosswalks	248	Homelessness Prevention
204	SR2S Middleton Safe Route	252	ABC
205	CFP Pacific Blvd	275	Successor Agency
206	CFP iPark Pay Station	283	Sewer Maintenance Fund
207	CFP Signal Synchronization	285	Solid Waste Mgmt Fund
208	CMAQ Metro Rapid	286	Illegal Disposal Abatemnt
209	CFP City Street Resurfacing	287	Solid Waste Recycle Grant
216	Employees Retirement Fund	288	COMPBC
217	OPEB	334	Ped/Bike Path Fund
219	Sales Tax-Transit Fund A	349	Capital Improvement Fund
220	Sales Tax-Transit C	475	Public Financng Authority
221	State Gasoline Tax Fund	533	Business Improv Dist Fund
222	Measure R	535	Strt Lght & Lndscp Assess
223	Local Origin Program Fund	681	Water Department Fund
224	Office of Traffc & Safety	741	Fleet Maintenance
225	Cal Cops Fund	745	Worker's Compensation Fnd
226	Air Quality Improv Trust	746	Employee Benefit Fund
227	Offc of Criminal Justice	748	Veh & Equip Replacement
228	Bureau of Justice Fund	779	Deferred Comp. Trust Fund
229	Police Forfeiture Fund	800	Pooled Cash
231	Parking System Fund	801	Pooled Cash Fund
232	Art in Public Places Fund	802	Pooled Interest
233	Bullet Proof Vest Grant		

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4IMPRINT INC	7060580	111-6030-451.61-35	P&R STAFF JACKETS	1,898.07
				\$1,898.07
AFSCME COUNCIL 36	PPE 2/24/2019	802-0000-217.60-10	AFSCME COUNCIL 36 DUES	694.26
				\$694.26
ALADDIN LOCK & KEY SERVICE	28701	111-8020-431.43-10	PW LOCK KEY ACCESSORIES	107.90
				\$107.90
ALVAREZ-GLASMAN & COLVIN	2018-12-18211	111-0220-411.32-70	LEGAL SRVCS 12/2018	34,282.95
	2018-12-18212	111-0220-411.32-70	LEGAL SRVCS 12/2018	5,316.00
				\$39,598.95
AMERICAN CELEBRATIONS	196283	111-6020-451.56-41	P&R EVENT SUPPLIES	131.40
	200301	111-6020-451.56-41	P&R EVENT SUPPLIES	30.06
				\$161.46
ANGELA CORNEJO	71764208	111-0110-411.58-09	SEMINAR PARKING REIMBURSE	16.00
	124941	111-0110-411.61-20	COUNCIL MEETING SUPPLIES	22.99
	125791	111-0110-411.61-20	OFFICE SUPPLY REIMBURSE	2.00
	54	111-0110-411.61-20	COUNCIL MEETING SUPPLIES	49.57
				\$90.56
BATTERY SYSTEMS INC	4747213	741-8060-431.43-20	AUTO BATTERY PURCHASE	117.00
	4793743	741-8060-431.43-20	AUTO BATTERY PURCHASE	392.00
	4795563	741-8060-431.43-20	AUTO BATTERY RETURNED	-129.22
	4797371	741-8060-431.43-20	AUTO BATTERY PURCHASE	336.47
				\$716.25
BLACK AND WHITE EMERGENCY VEHICLES	2860	111-7022-421.56-41	PD PATROL REPAIR	160.00
				\$160.00
BURRO CANYON ENTERPRISES, INC.	1814	111-7010-421.56-41	PD RANGE FEES	150.00
				\$150.00
CAL PRIVATE BANK-FIT	PPE 2/24/2019	802-0000-217.20-10	FEDERAL TAX DEPOSIT	55,238.02
				\$55,238.02
CAL PRIVATE BANK-MEDICARE	PPE 2/24/2019	802-0000-217.10-10	MEDICARE TAX DEPOSIT	7,786.25
				\$7,786.25
CAL PRIVATE BANK-SIT	PPE 2/24/2019	802-0000-217.20-20	STATE TAX DEPOSIT	19,649.15
				\$19,649.15
CALIF PUBLIC EMPLOYEES RETIREMENT	PPE 2/10/2019	802-0000-217.30-10	RETIREMENT BENEFIT	36,836.26
	PPE 2/24/2019	802-0000-217.30-10	RETIREMENT BENEFIT	37,296.33
	PPE 2/10/2019	802-0000-218.10-10	RETIREMENT BENEFIT	63,875.44
	PPE 2/24/2019	802-0000-218.10-10	RETIREMENT BENEFIT	64,419.43
				\$202,427.46
CALIFORNIA MARKETING INC	38586	111-0210-413.56-41	NEWSLETTER MAILING 2/2019	507.87
				\$507.87
CALIFORNIA PARK&RECREATION SOCIETY	135674	111-6010-451.59-15	CPRS MEMBERSHIP	165.00
	135817	111-6010-451.59-15	CPRS MEMBERSHIP	165.00
				\$330.00

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CALPERS	15587458	111-9013-413.56-41	MEDICAL BENEFITS	386.61
	15587458	217-9010-413.28-00	RETIREE MEDICAL BENEFITS	158,915.10
	15587458	217-9010-413.56-41	MEDICAL BENEFITS	386.54
	15587458	802-0000-217.50-10	MEDICAL BENEFITS	168,090.85
				\$327,779.10
CHAMPION CJD	554514	741-8060-431.43-20	VARIOUS VEHICLE PARTS	277.90
	555283	741-8060-431.43-20	AUTO PARTS PURCHASE	13.07
	555344	741-8060-431.43-20	COIL IGNITION PURCHASE	35.51
				\$326.48
CHARTER COMMUNICATIONS	0514415022019	111-7010-421.53-10	PD INTERNET 3/1/19-3/29/19	514.85
	0389644022119	121-7040-421.56-14	PD BUSN TV SRVC 3/2019	274.66
				\$789.51
CITY OF ALHAMBRA	10/22/2018	111-7010-421.61-20	PD RANGE FEE REIMBURSEMNT	10.00
				\$10.00
CITY OF HUNTINGTON PARK FLEXIBLE	PPE 2/24/2019	802-0000-217.30-30	MEDICAL REIMBURSE 125	615.01
				\$615.01
CITY OF HUNTINGTON PARK GEA	PPE 2/24/2019	802-0000-217.60-10	ASSOC DUES-PRE PAID LEGAL	122.50
				\$122.50
CLINICAL LAB OF SAN BERNARDINO, INC	966993	681-8030-461.56-41	WATER QUALITY TESTING	293.50
				\$293.50
COLONIAL SUPPLEMENTAL INSURANCE	PPE 2/24/2019	802-0000-217.50-40	SUPPLEMENTAL INSURANCE	1,049.12
				\$1,049.12
CONRAD S. CHACON	19-J3	111-7010-421.61-20	PARKING REIMBURSEMENT	10.00
	52570	111-7010-421.61-20	PARKING REIMBURSEMENT	22.00
				\$32.00
COPY SET	3510	287-8055-432.54-00	USED OIL EVENT FLYERS	198.45
				\$198.45
COUNTY OF L.A. DEPT OF PUBLIC WORKS	PW-19021103933	221-8014-429.56-41	TRAFIC SIGNL MAINT 1/2019	881.73
				\$881.73
CRAFCO INC	9401996849	221-8010-431.61-21	POTHOLE PATCHING SUPPLIES	1,997.46
				\$1,997.46
DAILY JOURNAL CORPORATION	B3208515	111-5010-419.54-00	COMM DEV ORDINANCE AD	92.40
	B3216951	111-5010-419.54-00	COMM DEV ORDINANCE AD	113.40
				\$205.80
DATA TICKET INC.	97297	111-7065-441.56-41	ANIMAL CITATION PROCESSING	48.50
	0983/0984	111-9010-415.56-15	PARKING CITATION PROCESS 1/2019	11,260.09
	0983/0984	111-9010-419.53-10	PARKING CITATION 1/2019	671.58
				\$11,980.17
DAVID VALDOVINOS	342019	111-6060-466.33-20	CONTRACT INSTRUCTOR	175.00
				\$175.00
DEPARTMENT OF ANIMAL CARE & CONTROL	1/2019	111-7065-441.56-41	ANIMAL CARE 1/2019	11,969.20
				\$11,969.20

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DEPARTMENT OF CORONER	19ME0189	111-7030-421.56-41	AUTOPSY REPORTS	47.00
				\$47.00
DF POLYGRAPH	2019/2	111-7010-421.56-41	POLYGRAPH EXAM SERVICES	175.00
				\$175.00
DISCOUNT SCHOOL SUPPLY	5212290219	111-6020-451.61-35	AFTER SCHOOL SUPPLIES	476.58
				\$476.58
DONALD JHUNG & ASSOCIATES	20631-22022	681-0000-228.70-00	WATER FINAL REFUND	134.84
				\$134.84
DUGMORE AND DUNCAN , INC.	222511	111-8020-431.43-10	PW ADMIN KEY PURCHASE	344.72
				\$344.72
EXPERT ROOTER	096793	111-8024-421.43-10	PD PLUMBING SERVICES	135.00
	096850	111-8024-421.43-10	PD PLUMBING SERVICES	90.00
				\$225.00
EXPRESS TRANSPORTATION SERVICES LLC	HPE02282019	111-0000-362.20-15	HP EXPRESS 2/2019	-500.00
	HPE02282019	219-0000-362.20-10	HP EXPRESS 2/2019	-2,000.00
	HPE02282019	219-8085-431.56-43	HP EXPRESS 2/2019	26,717.33
	DAR03012019	219-8085-431.56-45	DIAL A RIDE 3/2019	59,620.00
	HPE02282019	220-0000-340.30-00	HP EXPRESS 2/2019	-4,963.48
	HPE02282019	220-8085-431.56-43	HP EXPRESS 2/2019	31,169.34
	HPE02282019	222-8010-431.56-43	HP EXPRESS 2/2019	26,717.33
				\$136,760.52
F&A FEDERAL CREDIT UNION	PPE 2/24/2019	802-0000-217.60-40	EMPLOYEE CU DEDUCTION	10,285.50
				\$10,285.50
FM THOMAS AIR CONDITIONING INC	39549	111-8024-421.56-41	AC EMERGENCY SRVC 1/2019	2,107.50
				\$2,107.50
GALLS, LLC	BC0776031	111-7010-421.61-20	PD UNIFORM PURCHASE	61.71
				\$61.71
GLOBALSTAR USA	10089549	111-7010-421.53-10	PD PHONE SRVC 1/16/19-3/15/19	85.94
				\$85.94
GOLDEN METERS SERVICE INC	1212	535-8090-452.61-20	WATER METER REPLACEMENT	1,850.44
				\$1,850.44
GOLDEN WEST COLLEGE	3/4-3/22/2019	111-7010-421.59-15	PUBLIC SAFETY COURSE	349.00
				\$349.00
GRAFFITI PROTECTIVE COATINGS INC.	1005-0119	111-8095-431.56-75	GRAFFITI REMOVAL 1/2019	32,350.00
				\$32,350.00
GRAINGER	9079437183	111-8022-419.43-10	CONVEX MIRROR PURCHASE	38.81
	9044526938	221-8010-431.61-21	PW HARD HAT PURCHASE	9.08
	9088053096	221-8010-431.61-21	ASPHALT COMPACTION TOOL	80.18
	9043756858	741-8060-431.43-20	BATTERY CHARGER PURCHASE	33.20
	9045056125	741-8060-431.43-20	VEHICLE CLEANING SUPPLY	77.61
	9077690445	741-8060-431.43-20	MEMORY CABLE PURCHASE	27.48
				\$266.36

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HASA, INC.	629808	681-8030-461.41-00	HYPO SODIUM CHLORITE	202.42
	629809	681-8030-461.41-00	HYPO SODIUM CHLORITE	192.67
	630325	681-8030-461.41-00	HYPO SODIUM CHLORITE	201.04
	630329	681-8030-461.41-00	HYPO SODIUM CHLORITE	170.89
	630330	681-8030-461.41-00	HYPO SODIUM CHLORITE	219.29
	630830	681-8030-461.41-00	HYPO SODIUM CHLORITE	192.67
	630831	681-8030-461.41-00	HYPO SODIUM CHLORITE	219.29
				\$1,398.27
HUNTINGTON PARK POLICE MGMT ASSN.	PPE 2/24/2019	802-0000-217.60-10	POLICE MGMT ASSOC DUES	150.00
				\$150.00
HUNTINGTON PARK POLICE OFFICER ASSN	PPE 2/24/2019	802-0000-217.60-10	POLICE OFFICER ASSOC DUES	6,848.09
				\$6,848.09
INFRASTRUCTURE ENGINEERS	23828	111-8010-431.76-01	ENGINEERING SRVC 1/2019	65,300.25
				\$65,300.25
JCL TRAFFIC	99127	221-8012-429.61-20	TRAFFIC BARRICADE PURCHAS	1,404.92
				\$1,404.92
JERRY'S AUTO BODY, INC.	31415	741-8060-431.43-20	P&R VAN AUTO BODY REPAIRS	1,957.60
				\$1,957.60
JOE MEDINA	690217/71622	111-0000-228.20-00	P&R YOUTH SPORTS REFUND	70.00
				\$70.00
JUAN LOZANO	FALL2018	111-9018-413.35-10	TUITION REIMBURSEMENT	1,500.00
				\$1,500.00
LACMTA	103334	219-8085-431.58-50	METRO TAP CARDS 1/2019	6,400.00
				\$6,400.00
LAN WAN ENTERPRISE, INC	63087	111-7010-421.56-41	EMAIL SECURITY SOFTWARE	3,461.98
	63088	111-9010-419.43-15	EMAIL SECURITY	3,461.58
	62652	225-7120-421.74-10	PD VEHICLE TABLETS	6,132.11
	63186	225-7120-421.74-10	PD LAPTOP PURCHASE	1,673.93
				\$14,729.60
LB JOHNSON HARDWARE CO #1	702048	111-8023-451.43-10	HARDWARE PURCHASE	37.19
	100154	221-8014-429.61-20	TRAFFIC SIGNAL FUSE PURCH	6.56
	100271	741-8060-431.43-20	WHEEL PURCHASE	11.80
	100295	741-8060-431.43-20	FLEET SHOP FITTINGS EQUIP	81.01
				\$136.56
LGP EQUIPMENT RENTALS INC	108418	221-8010-431.61-21	SIDEWALK REPAIR CEMENT	431.16
				\$431.16
LIBERTY PAPER	299439	111-0110-411.61-20	CITYWIDE PAPER PURCHSE	35.19
	299439	111-0210-413.61-20	CITYWIDE PAPER PURCHSE	105.56
	299439	111-1010-411.61-20	CITYWIDE PAPER PURCHSE	70.38

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LIBERTY PAPER	299439	111-2030-413.61-20	CITYWIDE PAPER PURCHASE	70.38
	299439	111-3010-415.61-20	CITYWIDE PAPER PURCHASE	510.00
	299439	111-5010-419.61-20	CITYWIDE PAPER PURCHASE	422.24
	299439	111-6010-451.61-20	CITYWIDE PAPER PURCHASE	455.36
	299439	111-7010-421.61-20	CITYWIDE PAPER PURCHASE	2,359.61
	299439	111-8020-431.61-20	CITYWIDE PAPER PURCHASE	82.79
				\$4,111.51
LIEBERT CASSIDY WHITMORE	1473050	111-0220-411.32-70	LEGAL SERVICES 1/2019	518.00
				\$518.00
MALLORY SAFETY AND SUPPLY LLC	4605450	225-7120-421.74-10	PD FACE SHIELDS	2,858.82
				\$2,858.82
MARTINEZ, ALICIA	5249-2212	681-0000-228.70-00	WATER CREDIT REFUND	13.19
				\$13.19
MCMMASTER-CARR SUPPLY CO.	86958604	111-8022-419.43-10	SUMP PUMP REPLACEMNT PART	45.31
				\$45.31
MICKEY COHEN MOTORS	49	741-8060-431.43-20	PD MOTORCYCLE REPAIRS	814.47
				\$814.47
MIGUEL JUAREZ	1990579	745-9031-413.52-30	SETTLEMENT CLAIM	996.00
				\$996.00
NATION WIDE RETIREMENT SOLUTIONS	PPE 2/24/2019	802-0000-217.40-10	DEFERRED COMP DEDUCT	14,365.83
				\$14,365.83
NATIONWIDE ENVIRONMENTAL SERVICES	29807	220-8070-431.56-41	BUS STOP CLEANING 1/2019	16,709.13
	29935	221-8010-431.56-41	SWEEPING SRVCS 3/2019	5,331.18
	29935	222-8010-431.56-41	SWEEPING SRVCS 3/2019	33,744.63
	29935	231-8010-415.56-41	SWEEPING SRVCS 3/2019	7,736.92
				\$63,521.86
NET TRANSCRIPTS INC	0023907-IN	111-7010-421.56-41	PD TRANSCRIPTION SRVCS	137.25
				\$137.25
NIXON-EGLI EQUIPMENT CO	P35205	741-8060-431.43-20	ASPHALT STRAINERS/FILTERS	433.17
				\$433.17
NORBERTO AYON	8054812/7661805	111-8010-431.15-20	TOOL REIMBURSEMENT	22.10
	8054812/7661805	111-8020-431.15-20	TOOL REIMBURSEMENT	22.10
	8054812/7661805	111-8022-419.15-20	TOOL REIMBURSEMENT	22.10
	8054812/7661805	111-8023-451.15-20	TOOL REIMBURSEMENT	22.10
	8054812/7661805	111-8024-421.15-20	TOOL REIMBURSEMENT	22.10
	8054812/7661805	221-8014-429.15-20	TOOL REIMBURSEMENT	44.21
	8054812/7661805	535-8016-431.15-20	TOOL REIMBURSEMENT	22.10
	8054812/7661805	681-8030-461.15-20	TOOL REIMBURSEMENT	44.22
				\$221.03
NORTH STAR LAND SCAPE LLC	1596-02	231-8010-415.56-41	LANDSCAPE SRVCS 2/2019	3,103.80
	1596-02	535-8090-452.56-60	LANDSCAPE SRVCS 2/2019	17,508.87
				\$20,612.67

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O'REILLY AUTO PARTS	2959-479581	741-8060-431.43-20	FLEET BATTERY PURCHASE	53.35
	2959-479627	741-8060-431.43-20	DOOR LOCK MOTOR PURCHASE	38.95
	2959-479851	741-8060-431.43-20	BATTERY & BELT PURCHASE	100.36
	2959-481676	741-8060-431.43-20	AUTO LOCK SWITCH PURCHASE	45.27
	2959-481720	741-8060-431.43-20	AUTO IGNITION COILS	70.14
	2959-481731	741-8060-431.43-20	AUTO AIR HOSE SHOP SUPPLY	9.36
	2959-480120	741-8060-431.74-10	FLEET SHOP COOLING PAD	985.64
	2959-480127	741-8060-431.74-10	ENGINE CRANE LIFT PURCHAS	1,100.81
				\$2,403.88
OK PRINTING DESIGN & DIGITAL PRINT	1172	111-7010-421.61-20	PD SRMET BROCHURES	333.59
	1214	111-7040-421.61-31	PD ENVELOPES FOR RECORDS	134.75
	1213	111-8020-431.61-20	PW ANALYST BUSINESS CARDS	41.90
				\$510.24
OLDTIMERS HOUSING DEVELOPMENT	18477-15226	681-0000-228.70-00	WATER BALANCE REFUND	178.29
				\$178.29
OLIVAREZ MADRUGA, LLP	6222	111-0220-411.32-70	LEGAL SERVICES-HP TOW	4,002.43
				\$4,002.43
ORIENTAL TRADING COMPANY, INC.	694801262-01	111-6010-451.61-20	P&R ADMIN SUPPLIES	108.40
				\$108.40
PENSKE CHEVROLET	233533	741-8060-431.43-20	AUTO PART-DOOR LATCH	248.74
				\$248.74
PIRTEK COMMERCE SOUTH	S2875230.001	741-8060-431.43-20	PW HYDRAULIC HOSE REPAIR	348.08
				\$348.08
PRUDENTIAL OVERALL SUPPLY	52223291	111-7010-421.56-41	PD MAT CLEANING SERVICES	21.28
	52218622	111-8022-419.43-10	CITY HALL MAT SERVICES	32.41
	52223292	111-8022-419.43-10	CITY HALL MAT SERVICES	30.96
				\$84.65
PSYCHOLOGICAL CONSULTING ASSOC, INC	523562	111-7022-421.56-41	PD EMPLOYMENT EVALUATIONS	800.00
				\$800.00
PURCHASE POWER	2/14/2019	111-9010-419.53-20	CITY WIDE POSTAGE 1/2019	1,064.24
				\$1,064.24
RACHEL BEARD	68791/71618	111-0000-228.20-00	P&R DEPOSIT REFUND	500.00
				\$500.00
RENE OCAMPO	69836/71619	111-0000-228.20-00	P&R DEPOSIT REFUND	398.00
				\$398.00
RICOH AMERICAS CORP	62531469	111-6010-451.56-41	P&R COPIER 3/2019	225.63
				\$225.63
RICOH USA, INC.	5055946549	111-6010-451.56-41	P&R COPIER LEAS 2/18-3/18	196.07
				\$196.07
RIVERSIDE COUNTY SHERIFF'S DEPT	3/26-3/27/2019	111-7010-421.59-15	PD INTERVENTION COURSE	69.00
	BCTC0012499	111-7010-421.59-15	PD GROUND DEFENSE COURSE	68.00
				\$137.00

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SAUL GUARDADO	2/19/2019	111-6030-451.33-90	REFEREE SERVICES	159.00
				\$159.00
SMART & FINAL	35183	111-0110-411.61-20	COUNCIL EVENT SUPPLIES	40.67
	042375	111-6020-451.61-35	P&R AFTER SCHOOL SNACKS	85.08
	44803	111-6020-451.61-35	P&R AFTER SCHOOL SNACKS	6.05
	033249	111-7010-421.61-20	PD MEETING/EVENT SUPPLIES	14.33
	042275	111-7010-421.61-20	PD MEETING/EVENT SUPPLIES	43.71
	049050	111-7010-421.61-20	PD MEETING/EVENT SUPPLIES	71.71
				\$261.55
SOURCE ONE OFFICE PRODUCTS, INC.	WO-38842-1	111-1010-411.61-20	CITY CLERK OFFICE SUPPLY	15.00
	WO-39988-1	111-1010-411.61-20	CITY CLERK OFFICE SUPPLY	50.30
	WO-38424-1	111-3010-415.61-20	FINANCE OFFICE SUPPLIES	10.65
	WO-40246-1	111-3010-415.61-20	FINANCE OFFICE SUPPLIES	26.28
				\$102.23
SOUTH COAST AIR QUALITY MGMT DISTR.	3409064	741-8060-431.42-05	DIESEL GENERATOR RENEWAL	406.79
	3411702	741-8060-431.42-05	EMISSIONS FEES	131.79
				\$538.58
SOUTHERN CALIFORNIA EDISON	1/22-2/21/2019	111-8022-419.62-10	VARIOUS SERVICE ACCOUNTS	1,758.66
	12/28-2/07/2019	111-8022-419.62-10	VARIOUS SERVICE ACCOUNTS	1,063.46
	12/28-2/07/2019	111-8023-451.62-10	VARIOUS SERVICE ACCOUNTS	8,278.63
	1/05-2/05/2019	221-8014-429.62-10	VARIOUS TRAFIC SIGNALS	3,147.91
	2/05-3/07/2019	221-8014-429.62-10	TRAFFIC SIGNAL PACIFIC BLVD	44.94
	2/01-3/06/2019	231-8010-415.62-10	VARIOUS SERVICE ACCOUNTS	542.98
	1/25-2/26/2019	535-8016-431.62-10	STREET LIGHT 3220 OLIVE ST	40.92
	2/04-3/06/2019	535-8016-431.62-10	SERVICE-6621 WILSON	54.45
	12/28-2/07/2019	681-8030-461.62-20	VARIOUS SERVICE ACCOUNTS	7,066.37
				\$21,998.32
SOUTHERN CALIFORNIA NEWS GROUP	0000378528	111-5010-419.54-00	NOTICE OF PUBLIC HEARING	665.07
	00219885	111-5010-419.54-00	COM DEV PUBLIC HEARING AD	714.31
				\$1,379.38
SPARKLETTS	15142085 022819	111-0110-411.66-05	COUNCIL WATER 2/12-2/26/19	85.78
	15142085 022819	111-0210-413.61-20	ADMIN WATER 2/12-2/26/19	85.78
	15142085 022819	111-1010-411.61-20	CITY CLERK WATER 2/12-2/26/19	14.70
	15142085 022819	111-2030-413.61-20	HR WATER 2/12-2/26/19	13.40
	15142085 022819	111-3010-415.61-20	FINANCE WATER 2/12-2/26/19	52.15
	15142085 022819	111-5010-419.61-20	COMM DEV WATER 2/12-2/26/19	27.70
	15142085 022819	111-5055-419.61-20	CODE ENFORCE WATER 2/12-2/26/19	27.70
	15142085 022819	111-6010-451.56-41	P&R WATER 2/12/19-2/26/19	35.16
	15142085 022819	111-8020-431.61-20	PW ADMIN WATER 2/12-2/26/19	80.12
	15142085 022819	111-8080-431.61-20	PW ENGINEER WATER 2/12-2/26/19	27.70

**CITY OF HUNTINGTON PARK
DEMAND REGISTER
3-19-2019**

Payee Name	Invoice Number	Account Number	Description	Transaction Amount
STEVEN A. THORESON	113-7292451-439	111-7010-421.61-20	OFFICE SUPPLY REIMBURSEMT	24.87
				\$24.87
SULLY MILLER CONTRACTING COMPANY	1421232	111-8010-431.76-01	STREET IMPROVMNT PROJ	34,505.99
	1421232	210-8010-431.76-01	STREET IMPROVMNT PROJ	34,505.99
	1421232	221-8010-431.76-01	STREET IMPROVMNT PROJ	34,505.99
	1421232	222-8010-431.76-01	STREET IMPROVMNT PROJ	34,505.99
	1421232	239-8010-431.76-01	STREET IMPROVMNT PROJ	285,479.27
				\$445,793.00
SUNSHINE POS, LLC	68515	231-8010-415.61-20	PARKING PAY STATION PAPER	505.09
				\$505.09
SUPERIOR COURT OF CALIFORNIA	DEC18-JAN19	111-9010-415.56-10	PARKING CITATION SURCHRG	46,474.60
				\$46,474.60
SUSAN CRUM	16	111-0110-411.61-20	CM ADMIN OFFICE SUPPLIES	6.38
				\$6.38
T2 SYSTEMS CANADA INC.	IRIS0000050661	231-8010-415.56-41	PAY STATION SOFTWR 2/2019	2,250.00
	IRIS0000051802	231-8010-415.56-41	PAY STATION SOFTWR 3/2019	2,250.00
				\$4,500.00
THE FORMS DESK, INC.	26622	111-3010-415.61-20	BUSINESS LIC ENVELOPES	533.50
				\$533.50
TOWN HALL STREAMS	9695	111-1010-411.56-41	COUNCIL STREAMING 3/2019	300.00
				\$300.00
U.S. BANK	PPE 2/24/2019	802-0000-217.30-20	PARS DEDUCTION	1,711.69
	PPE 2/24/2019	802-0000-217.30-20	PT EMPLOYEE PARS DEDUCT	1,914.47
	PPE 2/24/2019	802-0000-218.10-05	PARS EMPLOYER CONTRIBUTE	14,241.16
				\$17,867.32
U.S. HEALTH WORKS	3473098-CA	111-2030-413.56-41	MEDICAL SERVICES	84.00
				\$84.00
UNDERGROUND SERVICE ALERT OF SO CAL	18DSBFEE91	221-8014-429.56-41	CA STATE REGULATORY FEE	143.16
				\$143.16
VALLARTA COLLISION & BODY SHOP INC.	02419	741-8060-431.43-20	PD AUTO BODY REPAIR	1,550.00
				\$1,550.00
VALLEY ALARM	861728	111-8020-431.56-41	ALARM SERVICE 2/2019	665.34
	861728	111-8022-419.56-41	ALARM SERVICE 2/2019	665.33
	861728	111-8023-451.56-41	ALARM SERVICE 2/2019	665.33
				\$1,996.00
VAN IWAARDEN ASSOCIATES	MARCH2019	111-9010-419.56-41	ACTUARIAL SERVICES	451.00
				\$451.00

**CITY OF HUNTINGTON PARK
DEMAND REGISTER
3-19-2019**

Payee Name	Invoice Number	Account Number	Description	Transaction Amount
VERIZON WIRELESS	9820453547	111-0110-411.53-10	COUNCIL CELL 11/17-12/16/18	340.92
	9822391573	111-0110-411.53-10	COUNCIL CELL 12/17-1/16/19	309.15
	9824340219	111-0110-411.53-10	COUNCIL CELL 1/17-2/16/19	309.15
	9820453547	111-0210-413.53-10	ADMIN CELL 11/17-2/16/19	163.53
	9822391573	111-0210-413.53-10	ADMIN CELL 12/17-1/16/19	163.67
	9824340219	111-0210-413.53-10	ADMIN CELL 1/17-2/16/19	213.22
	9820453547	111-3010-415.53-10	FINANCE CELL 11/17-12/16/18	67.76
	9822391573	111-3010-415.53-10	FINANCE CELL 12/17-1/16/19	67.83
	9824340219	111-3010-415.53-10	FINANCE CELL 1/17-2/16/19	67.83
	9820453547	111-6010-419.53-10	P&R CELL 11/17-12/16/18	104.29
	9821371000	111-6010-419.53-10	P&R SPLASH FLEX CARD	38.01
	9822391573	111-6010-419.53-10	P&R MONITOR 12/17-1/16/19	107.91
	9824340219	111-6010-419.53-10	P&R CELL 1/17-2/16/19	224.99
	9825265710	111-6010-419.53-10	P&R CELL 2/2-3/1/19	38.01
	9821371000	111-8010-431.43-05	PW STREET OPS 12/2-1/1/19	800.00
	9821371000	111-8010-431.53-10	PW CELL 12/2-1/1/19	1,138.23
	9825265710	111-8010-431.53-10	PW CELL 2/2-3/1/19	815.86
	9821371000	111-8020-431.43-05	PW HWY 12/2-1/1/19	1,000.00
	9821371000	681-8030-461.53-10	PW WATER 12/2-1/1-19	114.03
	9825265710	681-8030-461.53-10	P&R 2/2-3/1/19	114.03
				\$6,198.42
VULCAN MATERIALS COMPANY	72085158	221-8010-431.61-21	ASPHALT PATCHING SUPPLIES	87.01
	72091676	221-8010-431.61-21	ASPHALT PATCHING SUPPLIES	106.19
	72094306	221-8010-431.61-21	ASPHALT PATCHING SUPPLIES	378.15
				\$571.35
WALTERS WHOLESALE ELECTRIC COMPANY	S112416789.001	111-8023-451.43-10	PEREZ PARK SECURITY LIGHT	1,642.50
	S112487659.001	111-8023-451.43-10	P&R BRACKETS & PLATES	58.52
	S112554853.001	111-8023-451.43-10	P&R COMPUTER DATA CABLES	294.65
				\$1,995.67
WAXIE SANITARY SUPPLY	77984331	741-8060-431.43-20	FLEET SHOP CLEANING SUPLY	268.93
				\$268.93
WESTERN EXTERMINATOR COMPANY	6757936	111-8020-431.56-41	EXTERMINATOR SRVC 1/2019	67.50
	6757936	111-8022-419.56-41	EXTERMINATOR SRVC 1/2019	49.00
	6757936	111-8023-451.56-41	EXTERMINATOR SRVC 1/2019	329.50
	6757936	111-8024-421.56-41	EXTERMINATOR SRVC 1/2019	50.00
	6757936	535-8090-452.56-60	EXTERMINATOR SRVC 1/2019	139.50
				\$635.50
XEROX CORPORATION	096227098	111-8020-431.43-05	PW COPIER LEASE 1/21-2/21	97.81
	096227098	285-8050-432.43-05	PW COPIER LEASE 1/21-2/21	97.81
	096227098	681-8030-461.43-05	PW COPIER LEASE 1/21-2/21	97.81
				\$293.43
				\$1,626,434.25



CITY OF HUNTINGTON PARK

City Clerk's Office
City Council Agenda Report

March 19, 2019

Honorable Mayor and Members of the City Council
City of Huntington Park
6550 Miles Avenue
Huntington Park, CA 90255

Dear Mayor and Members of the City Council:

COUNCIL APPOINTMENT TO THE CIVIL SERVICE AND PARKS AND RECREATION COMMISSIONS

IT IS RECOMMENDED THAT THE CITY COUNCIL:

1. Make appointment to the Civil Service and Parks and Recreation Commissions consistent with the provisions set forth in Resolution No. 2015-19

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

On May 18, 2015, the City Council adopted Resolution No. 2015-19 which established a new process for making appointments to various City Commissions.

Individuals appointed to the Civil Service and Parks and Recreation Commissions will be required to submit to a LiveScan and subsequently take an Oath of Office.

FISCAL IMPACT

There is no fiscal impact. Compensation for the Civil Service Commission is \$100 per meeting per Commissioner, which has been budgeted for FY 2018-2019 to account 111-2026-413.19-05. Parks and Recreation Commission is \$75 a month per Commissioner, which has been budgeted for FY 2018-2019 to account 111-6025-413.19-05.

CONCLUSION

Terms will run concurrent with the Council Member who appoints. After appointment City Clerk will notify applicants of the nominations.

COUNCIL APPOINTMENT TO THE CIVIL SERVICE AND PARKS AND RECREATION COMMISSIONS

March 19, 2019

Page 2 of 2

Respectfully submitted,



RICARDO REYES
City Manager



Donna G. Schwartz, CMC
City Clerk

ATTACHMENT(S)

- A. Resolution No. 2015-19, Adopting Revised Rules, Method of Appointment, Guidelines for the Conduct of Meetings and Structure for all Commissions of the city and Repealing all Prior Resolutions or Provisions in Conflict with the Provisions Contained Herein.

ATTACHMENT "A"

1 **SECTION 3: Appointment, Reappointment and Removal.**

2 Each member of the City Council shall have authority to appoint one (1)
3 member to each Commission, with the exception of the Youth Commission, which
4 shall consist of two (2) members appointed by each City Councilmember. Each
5 Councilmember shall appoint their Commissioners within sixty (60) days of assuming
6 office, or from the adoption of this Resolution, or from a vacancy occurring for said
7 Commission position for that respective Councilmember appointment. If no
8 appointment is made within sixty (60) days of assuming office, or from the adoption of
9 this Resolution, or from a vacancy occurring for said Commission position, the Mayor
10 shall appoint a member to the vacant seat.

11 Commission members may be removed from their appointment due to
12 disqualification as provided for in this Resolution or upon the sole decision by the
13 Councilmember who appointed that Commissioner. All appointments or removal of
14 Commissioners shall occur at an open meeting of the City Council. If removal of a
15 Commissioner occurs, the City Clerk shall send notice to that Commissioner at the last
16 address on file with the City.

17 **SECTION 4: Term of Office.**

18 Each Commissioner's term shall be for a period of four years, unless removed
19 by the appointing Councilmember or as a result of disqualification as set forth herein.
20 Notwithstanding the foregoing, no Commissioner shall serve for a period which
21 exceeds the time in office for the Councilmember appointing that Commissioner. In
22 the event that the appointing Councilmember completes his or her term, vacates their
23 office or otherwise is no longer holding office, the term of the Commissioner appointed
24 by said Councilmember shall end. However, nothing contained in this section shall
25 prevent another Councilmember or the new Councilmember from appointing the
26 individual back to the same Commission or to a different Commission.

27 **SECTION 5: Vacancy Due to Disqualification.**

28 When a member no longer meets the qualifications for the Commission, the
member is therefore disqualified, and the office shall thereupon become vacant.

SECTION 6: Vacancy.

 If for any reason a vacancy occurs, it shall be filled by appointment by the
member of the City Council who appointed said Commissioner for the unexpired
portion of such term.

SECTION 7: Quorum.

 A majority of the total number of members of the Commission shall constitute a
quorum for the transaction of business, but a lesser number may adjourn from time to
time for want of quorum and until a quorum can be obtained.

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SECTION 8: Purpose.

The purpose, duties and responsibilities of each Commission shall be established by the City Council by ordinance and codified in the Huntington Park Municipal Code.

SECTION 9: Organization.

Annually in the month of March, the Commission shall elect one of its members as Chair and Vice-Chair. City staff shall act as the Commission Secretary. Staff liaisons shall act as the conduit for all communications to the City Council.

SECTION 10: Meetings.

Regular meetings of the Commission shall be as set by each Commission. The place of such meetings shall be at City Hall unless otherwise designated by the City Council or approved by a majority of the total membership of the Commission. When the day for such regular meetings falls on a legal holiday, the meeting shall not be held on such holiday, but shall be held at the same hour on the next succeeding day thereafter which is not a holiday. All meetings of the Commission shall be open and public, and subject to all laws of the state of California e.g. the Brown Act, governing open public meetings. The Commission shall adopt its own rules for the transaction of its business and keep a record of resolutions, findings and recommendations and actions voted upon. A report of each meeting of the Commission shall be given to the City Council.

SECTION 11: Termination of Commission.

Termination of the Commission shall be done at the will and vote of the City Council.

SECTION 12: Compensation.

Commission member compensation shall be set by resolution of the City Council.

SECTION 13: Commission Handbook.

All Commission Members must adhere to the provisions contained and referenced in the City of Huntington Park Commission Handbook as approved by the City Council.

SECTION 14:

The City Clerk shall certify to the adoption of this Resolution.

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PASSED, APPROVED AND ADOPTED THIS 18th day of May, 2015.


Karina Macias
Mayor

ATTEST:


Donna G. Schwartz, CMC
City Clerk

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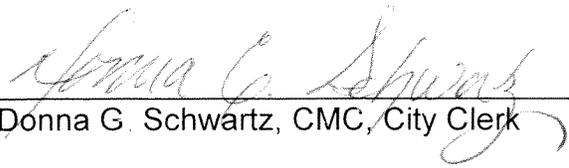
CERTIFICATION

STATE OF CALIFORNIA)
COUNTY OF LOS ANGELES) SS
CITY OF HUNTINGTON PARK)

I, Donna G. Schwartz, City Clerk of the City of Huntington Park, California, do hereby certify that the foregoing Resolution No. 2015–19 was duly passed and adopted by the City Council of the City of Huntington Park at a regular meeting of the City Council held on the 18th day of May, 2015, by the following vote, to wit:

AYES: Council Member(s): Pineda, Sanabria, Vice Mayor Ortiz, Mayor Macias
NOES: Council Member(s): None
ABSENT: Council Member(s): Amezquita

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Seal of the City of Huntington Park, this 20th day of May 2015.



Donna G. Schwartz, CMC, City Clerk



CITY OF HUNTINGTON PARK

Community Development Department
City Council Agenda Report

March 19, 2019

Honorable Mayor and Members of the City Council
City of Huntington Park
6550 Miles Avenue
Huntington Park, CA 90255

Dear Mayor and Members of the City Council:

CONSIDERATION AND APPROVAL OF A REQUEST BY THE GREATER HUNTINGTON PARK AREA CHAMBER OF COMMERCE TO REDUCE CITY'S FEES INCURRED FROM THE ANNUAL 2018 "SABOR DE MEXICO LINDO FESTIVAL"; AND/OR REIMBURSE SUCH CHARGES IN TWO (2) SEPARATE INSTALLMENTS

IT IS RECOMMENDED THAT THE CITY COUNCIL:

1. Approve the request to reduce City's fees incurred from the annual 2018 "Sabor de Mexico Lindo" Festival;
2. Consider reimbursement to the City for such charges in two (2) separate installments; and/or
3. Provide staff with direction.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

• ***2018 Activity in Public Places Application***

On September 18, 2018 the Huntington Park City Council approved Activity in Public Places Permit for "Sabor De Mexico Lindo" street festival, which has been conducted annually. At that time, the applicant was provided with the City's departmental services charges associated with the events which were included in the staff report.

• ***Financial Assistance Requested***

On March 7, 2019, the Chamber submitted a request for a reduction in fees associated with the 2018 "Sabor de Mexico Lindo" event. If no reduction of fees is granted, the Chamber requests a payment plan option allowing them to make two payments for the costs of the event. The following payment plan has been proposed by the Chamber of Commerce:

CONSIDERATION AND APPROVAL OF A REQUEST BY THE GREATER HUNTINGTON PARK AREA CHAMBER OF COMMERCE TO REDUCE CITY'S FEES INCURRED FROM THE ANNUAL 2018 "SABOR DE MEXICO LINDO FESTIVAL"; AND/OR REIMBURSE SUCH CHARGES IN TWO (2) SEPARATE INSTALLMENTS

March 19, 2019

Page 2 of 2

1 st Payment - March 18, 2019	\$20,000.00
2 nd Payment - April 10, 2019	\$19,627.18
Total to be Paid	\$39,627.18

The City Council may consider this request.

CONCLUSION

Upon Council approval, staff will proceed with recommended actions.

Respectfully submitted,



RICARDO REYES
City Manager



SERGIO INFANZON
Community Development Director

ATTACHMENT(S)

- A. Letter from the Chamber
- B. Tax statement 2016
- C. Tax statement 2017
- D. Bank statements 2017
- E. Bank statements 2018

ATTACHMENT "A"

The Greater Huntington Park Area CHAMBER OF COMMERCE

6725 Seville Ave., Huntington Park, CA 90255 • Tel: 323-585-1155 • Info@HPChamber.org • www.HPChamber.org



March 7, 2019

Honorable Mayor Jhonny Pineda and City Councilmembers
CITY OF HUNTINGTON PARK
6550 Miles Avenue
Huntington Park, CA 90255

Regarding: "CARNAVAL PRIMAVERA DOWNTOWN FESTIVAL"

Dear Mayor Pineda and Councilmembers:

This year the Chamber of Commerce is faced with a number of budget cuts due to a combination of a shortage of members, as a result of closing businesses, and surviving businesses that are unable to pay their annual-dues.

In addition, the 2018 Downtown Festivals generated approximately \$25,000 less than what was budgeted. Also, the Chamber of Commerce has been trying to recoup the losses the organization suffered in the year 2016 when the "Sabor De Mexico Lindo Downtown Festival" was not presented in its original location due to the city's beautification construction project. The "Sabor De Mexico Lindo Downtown Festival" was held in the City of Vernon, and was not as successful. The event suffered a loss of \$75,000.

These major reductions of revenue-sources have caused the Chamber to revisit their calendar-year budget, as well as make some major adjustments and deletions. The Chamber of Commerce for the past several years has been struggling financially to recoup the costs of the festival.

Attached for your review are the Chamber of Commerce's 2017 and 2016 Year End Tax Reports as filed with the Internal Revenue Service. Said reports will affirm the Chamber's financial losses. In addition, the Chamber of Commerce has attached copies of the official bank statements for the year 2017 and 2018.

The Board of Directors recognizes the outstanding invoice from the city of Huntington Park in the amount of \$39,627.18 for services provided on public safety, plus advertising the event on traffic control lights, plus vehicles for the transporting of barricades for the event's presentation.

While the events are an Economic Development for the community, and a public safety matter for a wholesome family event, the Chamber of Commerce requests the City of Huntington Park's assistance to entertain the feasibility of reducing the costs.

President

Andy Molina

Southeast Churches Services Center

1st Vice President

Sonia Luz

Casa Luz Restaurant

2nd Vice President

Jose Zepeda, Jr.

El Aviso Magazine

Treasurer

Don Brabant*

Brabant Realty & Management

Executive Director/CEO

Leticia Martinez

*Greater Huntington Park Area
CHAMBER OF COMMERCE*

DIRECTORS

Gilda Acosta*

St. Francis Medical Centers

Denise Campos

So. California Gas Company

Salvador Garcia

Shakey's Pizza

Ramon Gonzalez

Norm's Restaurant

Leonardo Lopez, Jr.

Leonardo's Restaurants

Martin Nava

New Start Housing.

Vicente Ortiz

Don Chente's Bar and Grill.

Patricia Rives

Community Hospital

** Past President*

In reviewing the financial records back to the year 1996, the Chamber of Commerce every year since then has paid the city of Huntington Park an excess of over \$1,000,000.00 for the event, fees and/or donations. The figure does not include other revenue generated from the event to the city such as electrical permits from contracted agencies, parks and recreation donation for the property usage of staging the rides prior to the event, and any other fees.

The Chamber of Commerce has worked with the city for decades and have complied in fulfilling their obligations. It is must be duly noted that there is no other organization in the City of Huntington Park that presents major events of our caliber, nor has paid the city continuously for so many years as the organization.

With the current economic-climate, it is necessary for the Chamber to present our annual April Festival in order to be operational and to provide a benefit to the community for the first half of the year.

The Chamber feels committed to continue to provide physical, informational and promotional assistance to the businesses, residents and also to the City of Huntington Park.

As the Chamber receives no financial-assistance from the City for its day to day operation and services, we are respectfully requesting the City Council to approve of our upcoming 26th Annual "Carnaval Primavera Downtown Festival" for April 5, 6 and 7, 2019 on Pacific Blvd., between Gage Ave. to Slauson Ave.

In the case if no reduction can be offered by the City on the 2018 "Sabor De Mexico Lindo Festival," the Chamber of Commerce would like to submit the following payment plan commitment in the efforts of fulfilling our obligation to the city of Huntington Park:

- March 18, 2019 - \$20,000
- April 10, 2019 - \$19,627.18

In addition, as the Chamber of Commerce will be paying the balance in full for all straight costs as stipulated in the city's recent email invoice, and have provided proof of financial hardship, the organization requests the City of Huntington Park to assist in waiving the fees or a portion thereof for the upcoming 26th Annual "Carnaval Primavera Downtown Festival."

The Chamber is looking forward to continue to be of service to the City of Huntington Park and its businesses as well as its residents. By continuing to work together we can be of major value not only to each other, but to the people that we are here to serve.

Please feel free to contact me if you have any questions. We look forward to your response.

Respectfully,

THE GREATER H.P. AREA CHAMBER OF COMMERCE


Leticia Martinez, Executive Director/CEO

Cc: Andy Molina, President
Chamber Board of Directors
Rick Reyes, City Manager
Sergio Infanzon, Community Develop. Dir.

Chief of Police Cosme Lozano
Daniel Hernandez, Public Works Director
Donna Schwartz, City Clerk
Cynthia Norzagaray, Parks & Rec. Director

ATTACHMENT "B"

RETURNED TO NOVEMBER 15, 2017

Form 990

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

OMB No. 1545-0047

2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2016 calendar year, or tax year beginning and ending

B Check if applicable:

- X Address change
Name change
Initial return
Final return/terminated
Amended return
Application pending

C Name of organization: HUNTINGTON PARK CHAMBER OF COMMERCE
Doing business as
Number and street (or P.O. box if mail is not delivered to street address) Room/suite: 6725 SEVILLE AVE
City or town, state or province, country, and ZIP or foreign postal code: HUNTINGTON PARK, CA 90255
F Name and address of principal officer: LETICIA MARTINEZ SAME AS C ABOVE

D Employer identification number

E Telephone number

G Gross receipts \$ 398,375.

H(a) Is this a group return for subordinates? Yes No X
H(b) Are all subordinates included? Yes No

I Tax-exempt status: 501(c)(3) X 501(c)(6) (insert no.) 4947(a)(1) or 527

J Website: HPCHAMBER1.COM

H(c) Group exemption number

K Form of organization: X Corporation Trust Association Other

L Year of formation: 1921 M State of legal domicile: CA

Part I Summary

1 Briefly describe the organization's mission or most significant activities: THE PROMOTION OF COMMUNITY GOODWILL THROUGH THE SPONSORSHIP AND PROMOTION OF COMMUNITY ORIENTED
2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.
3 Number of voting members of the governing body (Part VI, line 1a) 3 7
4 Number of independent voting members of the governing body (Part VI, line 1b) 4 0
5 Total number of individuals employed in calendar year 2016 (Part V, line 2a) 5 2
6 Total number of volunteers (estimate if necessary) 6 0
7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0.
7b Net unrelated business taxable income from Form 990-T, line 34 7b 0.

Table with columns: Revenue, Expenses, Prior Year, Current Year. Rows 8-19 detailing contributions, program service revenue, investment income, other revenue, total revenue, grants paid, benefits paid, salaries, professional fundraising fees, total fundraising expenses, other expenses, total expenses, and revenue less expenses.

Table with columns: Net Assets or Fund Balances, Beginning of Current Year, End of Year. Rows 20-22 detailing total assets, total liabilities, and net assets or fund balances.

Part II Signature Block

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 officer) is based on all information of which preparer has any knowledge.

Sign Here: Signature of officer LETICIA MARTINEZ, EXECUTIVE DIRECTOR
Date

Paid Preparer Use Only: Print/Type preparer's name MICHAEL MASSONI, Preparer's signature, Date 10/31/17, Check if self-employed X, PTIN, Firm's name LATIMER & MASSONI CPA'S, Firm's EIN, Firm's address, Phone no.

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: PROMOTE THE AFFAIRS OF THE CITY OF HUNTINGTON PARK

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations 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 \$ 420,348. including grants of \$) (Revenue \$ 398,375.) ORGANIZATION IS A CHAMBER OF COMMERCE FOR THE CITY OF HUNTINGTON PARK FOR THE PURPOSE OF PROMOTING THE AFFAIRS OF THE CITY.

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 420,348.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

Table with columns for question number, question text, Yes, and No. Rows include questions 20a through 38 regarding hospital facilities, financial statements, grants, compensation, tax-exempt bonds, and controlled entities.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Input box for Schedule O

Table with columns for question number, description, sub-questions (1a-13c, 14a-14b), Yes, and No. Contains various tax compliance questions and their corresponding answers.

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.

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 7; 1b Enter the number of voting members included in line 1a... 0; 2 Did any officer, director, trustee, or key employee have a family relationship... X; 3 Did the organization delegate control over management duties... X; 4 Did the organization make any significant changes to its governing documents... X; 5 Did the organization become aware during the year of a significant diversion of the organization's assets... X; 6 Did the organization have members or stockholders... X; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body... X; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body... X; 8a Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body... X; 8b 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 Did the organization have local chapters, branches, or affiliates? X; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy? X; 14 Did 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? 15a The organization's CEO, Executive Director, or top management official X; 15b 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," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed CA
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[] Own website [] Another's website [X] Upon request [] Other (explain in Schedule O)
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records: LATIMER AND MASSONI -

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f				
	g Noncash contributions included in lines 1a-1f: \$					
	h Total. Add lines 1a-1f					
	Program Service Revenue	2 a CARNIVAL PRIMAVERA	Business Code	253,786.	253,786.	
b SABOR DE MEXICO			114,406.	114,406.		
c MEMBERSHIP			12,317.	12,317.		
d INSTALLATION			9,555.	9,555.		
e GOLF TOURNAMENT			4,475.	4,475.		
f All other program service revenue			3,524.	3,524.		
g Total. Add lines 2a-2f			398,063.			
Other Revenue		3 Investment income (including dividends, interest, and other similar amounts)		312.	312.	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross rents	(i) Real				
		(ii) Personal				
		b Less: rental expenses				
		c Rental income or (loss)				
	d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
		b Less: cost or other basis and sales expenses				
		c Gain or (loss)				
	d Net gain or (loss)					
	8 a 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						
9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities					
10 a 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				
11 a						
	b					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d					
12 Total revenue. See instructions.		398,375.	398,375.	0.	0.	

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).

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

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 domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	18,936.		18,936.	
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	7,880.		7,880.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	4,497.		4,497.	
10 Payroll taxes	5,309.		5,309.	
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	4,989.		4,989.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion	383.		383.	
13 Office expenses	2,140.		2,140.	
14 Information technology				
15 Royalties				
16 Occupancy	8,098.		8,098.	
17 Travel	1,200.		1,200.	
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				
23 Insurance	640.		640.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a CARNIVAL PRIMAVERA	185,476.	185,476.		
b SABOR DE MEXICO	167,942.	167,942.		
c GOLF TOURNAMANT	23,763.	23,763.		
d MEMBERSHIP RECRUITMENT	13,073.	13,073.		
e All other expenses	32,995.	30,094.	2,901.	
25 Total functional expenses. Add lines 1 through 24e	477,321.	420,348.	56,973.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1	68,301.	1	37,677.
	2	38,740.	2	
	3		3	
	4	11,006.	4	31,485.
	5		5	
	6		6	
	7		7	
	8		8	
	9	1,475.	9	1,800.
	10a			
	10b		10c	
	11		11	
	12		12	
	13		13	
	14		14	
	15		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	119,522.	16	70,962.
Liabilities	17	40,289.	17	70,676.
	18		18	
	19		19	
	20		20	
	21		21	
	22		22	
	23		23	
	24		24	
	25		25	
	26	Total liabilities. Add lines 17 through 25	40,289.	26
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27	22,662.	27	-56,285.
	28	56,571.	28	56,571.
	29		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30		30	
	31		31	
	32		32	
33	79,233.	33	286.	
34	Total net assets or fund balances	119,522.	34	70,962.



Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	398,375.
2	Total expenses (must equal Part IX, column (A), line 25)	2	477,321.
3	Revenue less expenses. Subtract line 2 from line 1	3	-78,946.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	79,233.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-1.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	286.

Part XII Financial Statements and Reporting

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

		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
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2b	Were the organization's financial statements audited by an independent accountant?		X
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2c	If "Yes" to line 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.			
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
3b	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		

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2016

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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

Name of the organization **HUNTINGTON PARK CHAMBER OF COMMERCE** Employer identification number **[REDACTED]**

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in 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" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area

Protection of natural habitat Preservation of a certified historic structure

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, and not on a historic structure listed in the National Register	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?

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, 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)?

Yes No

9 In Part XIII, 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" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), 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 XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), 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) Revenue included on 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 (ASC 958) relating to these items:

a Revenue included on 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 XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds 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" on 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 XIII and complete the following table:

Table with columns for Amount and rows for 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, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

Table with columns (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back and rows for 1a-1g: Beginning of year balance, Contributions, Net investment earnings, gains, and losses, Grants or scholarships, Other expenditures for facilities and programs, Administrative expenses, End of year balance.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment %, b Permanent endowment %, c Temporarily restricted endowment %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

Table with columns Yes No and rows 3a(i) unrelated organizations, 3a(ii) related organizations, 3b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Table with columns (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value and rows for 1a Land, 1b Buildings, 1c Leasehold improvements, 1d Equipment, 1e Other.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 0.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include line numbers and a final total column.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include line numbers and a final total column.

Part XIII Supplemental Information.

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, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

N/A

PART XI, LINE 4B - OTHER ADJUSTMENTS:

N/A

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2016

Open to Public
Inspection

Name of the organization

HUNTINGTON PARK CHAMBER OF COMMERCE

Employer identification number

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

EVENTS AND PROGRAMS.

FORM 990, PART VI, SECTION B, LINE 11B:

THE BOARD OF DIRECTORS REVIEWS THE FINANCIAL INFORMATION FOR FORM 990 ON A
MONTHLY BASIS BEFORE IT ACTUALLY GOES INTO THE FORM.

FORM 990, PART VI, SECTION B, LINE 15A:

COMPENSATION FOR THE KEY INDIVIDUAL IS DETERMINED BY THE BOARD OF DIRECTORS

FORM 990, PART VI, SECTION C, LINE 19:

THE BOARD CONSIDERS ALL REQUESTS FOR THE AVAILABILITY OF FINANCIAL
STATEMENTS TO THE PUBLIC AND DECIDES ON A CASE BY CASE BASIS. IF THERE ARE
ANY CONFLICTS OF INTEREST, THE BOARD HAS TO CONSIDERS EACH CONFLICTING
ISSUE AND MAKE CHOICES.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

ROUNDING

-1.

ATTACHMENT "C"

Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
 ▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the **2017** calendar year, or tax year beginning **2017**, and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C HUNTINGTON PARK CHAMBER OF COMMERCE 6725 SEVILLE AVE HUNTINGTON PARK, CA 90255	D Employer identification number [REDACTED] E Telephone number [REDACTED] G Gross receipts \$ 464,620.
F Name and address of principal officer: LETICIA MARTINEZ SAME AS C ABOVE		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
I Tax-exempt status: <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) (6) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶
J Website: ▶ HPCHAMBER.COM		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1921 M State of legal domicile: CA

Part I Summary

	1	Briefly describe the organization's mission or most significant activities: THE PROMOTION OF COMMUNITY GOODWILL THROUGH THE SPONSORSHIP AND PROMOTION OF COMMUNITY ORIENTED EVENTS AND PROGRAMS.	
Activities & Governance	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
	3	Number of voting members of the governing body (Part VI, line 1a)	3 19
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4 0
	5	Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5 3
	6	Total number of volunteers (estimate if necessary)	6 0
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a 0.
	7b	Net unrelated business taxable income from Form 990-T, line 34	7b 0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year Current Year 15,178.
	9	Program service revenue (Part VIII, line 2g)	398,063. 449,442.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	312.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	398,375. 464,620.
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)
14		Benefits paid to or for members (Part IX, column (A), line 4)	
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	36,622. 98,909.
16a		Professional fundraising fees (Part IX, column (A), line 11e)	
b		Total fundraising expenses (Part IX, column (D), line 25) ▶	
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	440,699. 351,905.
Net Assets or Fund Balances	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	477,321. 455,314.
	19	Revenue less expenses. Subtract line 18 from line 12	-78,946. 9,306.
	20	Total assets (Part X, line 16)	Beginning of Current Year End of Year 70,962. 14,575.
	21	Total liabilities (Part X, line 26)	70,676. 4,983.
	22	Net assets or fund balances. Subtract line 21 from line 20	286. 9,592.

Part II Signature Block

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 officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer LETICIA MARTINEZ Type or print name and title	Date EXECUTIVE DIRECTOR
------------------	---	----------------------------

Paid Preparer Use Only	Print/Type preparer's name KATHLEEN P. URQUIDEZ, CPA	Preparer's signature KATHLEEN P. URQUIDEZ, CPA	Date 1/15/19	Check <input type="checkbox"/> if self-employed	PTIN [REDACTED]
	Firm's name ▶ BEZICH, UROUIDEZ & SALAZAR, CPAS. INC.				Firm's EIN ▶ [REDACTED]
	Firm's address ▶ [REDACTED]				Phone no. [REDACTED]

May the IRS discuss this return epa n above? (see instructions) Yes No

Form **8879-EO**

**IRS e-file Signature Authorization
for an Exempt Organization**

OMB No. 1545-1878

For calendar year 2017, or fiscal year beginning _____, 2017, and ending _____, 20____

2017

Department of the Treasury
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**
▶ **Go to www.irs.gov/Form8879EO for the latest information.**

Name of exempt organization

Employer identification number

HUNTINGTON PARK CHAMBER OF COMMERCE

[REDACTED]

Name and title of officer

LETICIA MARTINEZ

EXECUTIVE DIRECTOR

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1 a Form 990 check here	▶ <input checked="" type="checkbox"/>	b Total revenue , if any (Form 990, Part VIII, column (A), line 12)	1 b	<u>464,620.</u>
2 a Form 990-EZ check here	▶ <input type="checkbox"/>	b Total revenue , if any (Form 990-EZ, line 9)	2 b	_____
3 a Form 1120-POL check here	▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3 b	_____
4 a Form 990-PF check here	▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4 b	_____
5 a Form 8868 check here	▶ <input type="checkbox"/>	b Balance Due (Form 8868, line 3c)	5 b	_____

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2017 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize BEZICH, URQUIDEZ & SALAZAR, CPAS to enter my PIN [REDACTED] as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ _____ Date ▶ _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. _____
Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2017 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.**

ERO's signature ▶ KATHLEEN P. UROUIDEZ, CPA Date ▶ _____

**ERO Must Retain This Form – See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So**

BAA For Paperwork Reduction Act Notice, see instructions.

Form **8879-EO** (2017)



Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III. []

1 Briefly describe the organization's mission:

THE PROMOTION OF COMMUNITY GOODWILL THROUGH THE SPONSORSHIP AND PROMOTION OF COMMUNITY ORIENTED EVENTS AND PROGRAMS.

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 [X] 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 [X] No

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations 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 \$ including grants of \$) (Revenue \$)

THE ORGANIZATION IS A CHAMBER OF COMMERCE FOR THE CITY OF HUNTINGTON PARK FOR THE PURPOSE OF PROMOTING THE AFFAIRS OF THE CITY.

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

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If 'Yes,' complete Schedule H.</i>		X
b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If 'Yes,' complete Schedule I, Parts I and II.</i>		X
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If 'Yes,' complete Schedule I, Parts I and III.</i>		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? <i>If 'Yes,' complete Schedule J.</i>		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? <i>If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25a.</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If 'Yes,' complete Schedule L, Part I.</i>		
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? <i>If 'Yes,' complete Schedule L, Part I.</i>		
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If 'Yes,' complete Schedule L, Part II.</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part III.</i>		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? <i>If 'Yes,' complete Schedule L, Part IV.</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV.</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If 'Yes,' complete Schedule L, Part IV.</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M.</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M.</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I.</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete Schedule N, Part II.</i>		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? <i>If 'Yes,' complete Schedule R, Part I.</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1.</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes,' complete Schedule R, Part V, line 2.</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2.</i>		
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? <i>If 'Yes,' complete Schedule R, Part VI.</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

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.

Check if Schedule O contains a response or note to any line in this Part VI. X

Section A. Governing Body and Management

		Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 19		
1 b	Enter the number of voting members included in line 1a, above, who are independent.		
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 governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7 a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
7 b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8 a	The governing body?	X	
8 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.)

		Yes	No
10 a	Did the organization have local chapters, branches, or affiliates?		X
10 b	If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11 a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
12 a	Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O		
12 a	Did the organization have a written conflict of interest policy? If 'No,' go to line 13.		X
12 b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
12 c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done.		
13	Did the organization have a written whistleblower policy?		X
14	Did 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?		
15 a	The organization's CEO, Executive Director, or top management official. SEE SCHEDULE O	X	
15 b	Other officers or key employees of the organization. If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).		X
16 a	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
16 b	If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed CA
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. SEE SCHEDULE O
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records: ▶
 LETICIA MARTINEZ 6725 SEVILLE AVE HUNTINGTON PARK CA 90255

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

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

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

1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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 neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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 trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) THERESA BAGUES DIRECTOR	1 0	X					0.	0.	0.	
(2) DENISE CAMPOS DIRECTOR	1 0	X					0.	0.	0.	
(3) ALFREDO FUENTES DIRECTOR	1 0	X					0.	0.	0.	
(4) ADRIAN GARCIA DIRECTOR	1 0	X					0.	0.	0.	
(5) SALVADOR GARCIA DIRECTOR	1 0	X					0.	0.	0.	
(6) RAMON GONZALEZ DIRECTOR	1 0	X					0.	0.	0.	
(7) LEWIS KIM DIRECTOR	1 0	X					0.	0.	0.	
(8) LEONARDO LOPEZ, JR. DIRECTOR	1 0	X					0.	0.	0.	
(9) JOE MARTINEZ DIRECTOR	1 0	X					0.	0.	0.	
(10) NOEL PALLAIS DIRECTOR	1 0	X					0.	0.	0.	
(11) VICTOR PERAZA DIRECTOR	1 0	X					0.	0.	0.	
(12) PATRICIA RIVES DIRECTOR	1 0	X					0.	0.	0.	
(13) ANDY MOLINA PRESIDENT	1 0			X			0.	0.	0.	
(14) JOSE ZEPEDA, JR. SR. VICE PRES	1 0			X			0.	0.	0.	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(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 trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(15) MARTIN NAVA 1ST VICE PRES	1 0			X			0.	0.	0.
(16) SONIA LUZ 2ND VICE PRES	1 0			X			0.	0.	0.
(17) GILDA ACOSTA 3RD VICE PRES	1 0			X			0.	0.	0.
(18) DON BRABANT TREASURER	1 0			X			0.	0.	0.
(19) LETICIA MARTINEZ EXECUTIVE DIR.	40 0			X			60,375.	0.	0.
(20)									
(21)									
(22)									
(23)									
(24)									
(25)									
1 b Sub-total							60,375.	0.	0.
c Total from continuation sheets to Part VII, Section A							0.	0.	0.
d Total (add lines 1b and 1c)							60,375.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If 'Yes,' complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If 'Yes,' complete Schedule J for such individual</i>		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If 'Yes,' complete Schedule J for such person</i>		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns					
	1 b Membership dues	15,178.				
	1 c Fundraising events					
	1 d Related organizations					
	1 e Government grants (contributions)					
	1 f All other contributions, gifts, grants, and similar amounts not included above					
	g Noncash contributions included in lines 1a-1f: \$					
	h Total. Add lines 1a-1f.	▶	15,178.			
Program Service Revenue	2 a <u>CARNIVAL PRIMAVERA</u> Business Code	228,001.	228,001.			
	2 b <u>SABOR DE MEXICO</u>	206,115.	206,115.			
	2 c <u>GOLF TOURNAMENT</u>	7,480.	7,480.			
	2 d <u>INSTALLATION DINNER</u>	5,845.	5,845.			
	2 e <u>STATE OF CITY ADDRESS</u>	1,000.	1,000.			
	2 f All other program service revenue	1,001.	1,001.			
	g Total. Add lines 2a-2f.	▶	449,442.			
Other Revenue	3 Investment income (including dividends, interest and other similar amounts)					
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross rents	(i) Real				
		(ii) Personal				
		b Less: rental expenses				
		c Rental income or (loss)				
	d Net rental income or (loss)	▶				
	7 a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
		b Less: cost or other basis and sales expenses				
		c Gain or (loss)				
	d Net gain or (loss)	▶				
	8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a				
		b Less: direct expenses				
c Net income or (loss) from fundraising events		▶				
9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses					
	c Net income or (loss) from gaming activities	▶				
10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold					
	c Net income or (loss) from sales of inventory	▶				
Miscellaneous Revenue	11 a					
	b					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d.	▶				
12 Total revenue. See instructions.	▶	464,620.	449,442.	0.	0.	

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).

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

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 domestic organizations and domestic governments. See Part IV, line 21.				
2 Grants and other assistance to domestic individuals. See Part IV, line 22.	4,500.			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	60,375.			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0.			
7 Other salaries and wages.	20,708.			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).				
9 Other employee benefits.	10,784.			
10 Payroll taxes.	7,042.			
11 Fees for services (non-employees):				
a Management.				
b Legal.				
c Accounting.				
d Lobbying.				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion.				
13 Office expenses.	14,181.			
14 Information technology.				
15 Royalties.				
16 Occupancy.	23,300.			
17 Travel.	6,419.			
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.				
23 Insurance.				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <u>PROGRAM EXPENSE</u>	283,516.			
b <u>PAYROLL FEES</u>	4,814.			
c <u>POSTAGE AND SHIPPING</u>	4,296.			
d <u>TELEPHONE AND INTERNET</u>	4,266.			
e All other expenses.	11,113.			
25 Total functional expenses. Add lines 1 through 24e.	455,314.			
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1	Cash -- non-interest-bearing	37,677.	1	616.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	31,485.	4	13,959.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). 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	1,800.	9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D		10a	
	b	Less: accumulated depreciation		10b	10c
	11	Investments -- publicly traded securities		11	
	12	Investments -- other securities. See Part IV, line 11		12	
	13	Investments -- program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	70,962.	16	14,575.	
Liabilities	17	Accounts payable and accrued expenses	70,676.	17	4,983.
	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	Loans and other 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 (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25		
26	Total liabilities. Add lines 17 through 25	70,676.	26	4,983.	
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	-56,285.	27	-46,979.
	28	Temporarily restricted net assets	56,571.	28	56,571.
	29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), 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.	286.	33	9,592.	
34	Total liabilities and net assets/fund balances.	70,962.	34	14,575.	

BAA

Form 990 (2017)

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	464,620.
2	Total expenses (must equal Part IX, column (A), line 25)	2	455,314.
3	Revenue less expenses. Subtract line 2 from line 1	3	9,306.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	286.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	9,592.

Part XII Financial Statements and Reporting

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

		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
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?		X
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
c	If 'Yes' to line 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.			
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.		

BAA

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

Open to Public
Inspection

Employer identification number

HUNTINGTON PARK CHAMBER OF COMMERCE

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

THE BOARD OF DIRECTORS REVIEWS THE FINANCIAL INFORMATION FOR FORM 990 ON A MONTHLY BASIS BEFORE IT ACTUALLY GOES INTO THE FORM.

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT

COMPENSATION FOR THE KEY INDIVIDUAL IS DETERMINED BY THE BOARD OF DIRECTORS.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

THE BOARD CONSIDERS ALL REQUESTS FOR THE AVAILABILITY OF FINANCIAL STATEMENTS TO THE PUBLIC AND DECIDES ON A CASE BY CASE BASIS. IF THERE ARE ANY CONFLICTS OF INTEREST, THE BOARD CONSIDERS EACH CONFLICTING ISSUE AND MAKE CHOICES.

ATTACHMENT "D"

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ January 1, 2017 - January 31, 2017 ■ Page 1 of 4



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

Questions?

Available by phone 24 hours a day, 7 days a week:
Telecommunications Relay Services calls accepted

1-800-CALL-WELLS (1-800-225-5935)

TTY: 1-800-877-4833

En español: 1-877-337-7454

Online: wellsfargo.com/biz

Write: Wells Fargo Bank, N.A. (114)
P.O. Box 6995
Portland, OR 97228-6995

Your Business and Wells Fargo

Visit wellsfargoworks.com to explore videos, articles, infographics, interactive tools, and other resources on the topics of business growth, credit, cash flow management, business planning, technology, marketing, and more.

Account options

A check mark in the box indicates you have these convenient services with your account(s). Go to wellsfargo.com/biz or call the number above if you have questions or if you would like to add new services.

Business Online Banking	<input checked="" type="checkbox"/>
Online Statements	<input checked="" type="checkbox"/>
Business Bill Pay	<input checked="" type="checkbox"/>
Business Spending Report	<input checked="" type="checkbox"/>
Overdraft Protection	<input type="checkbox"/>

Activity summary

Beginning balance on 1/1	\$38,006.06
Deposits/Credits	6,886.00
Withdrawals/Debits	- 7,310.07
Ending balance on 1/31	\$37,581.99
Average ledger balance this period	\$36,565.35

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ February 1, 2017 - February 28, 2017 ■ Page 1 of 4



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

Questions?

Available by phone 24 hours a day, 7 days a week:
Telecommunications Relay Services calls accepted

1-800-CALL-WELLS (1-800-225-5935)

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Business Online Banking	<input checked="" type="checkbox"/>
Online Statements	<input checked="" type="checkbox"/>
Business Bill Pay	<input checked="" type="checkbox"/>
Business Spending Report	<input checked="" type="checkbox"/>
Overdraft Protection	<input type="checkbox"/>

Activity summary

Beginning balance on 2/1	\$37,581.99
Deposits/Credits	29,610.10
Withdrawals/Debits	- 42,842.09
Ending balance on 2/28	\$24,350.00
Average ledger balance this period	\$8,156.32

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ March 1, 2017 - March 31, 2017 ■ Page 1 of 6



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803



Questions?

Available by phone 24 hours a day, 7 days a week:
Telecommunications Relay Services calls accepted

1-800-CALL-WELLS (1-800-225-5935)

TTY: 1-800-877-4833

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Account options

A check mark in the box indicates you have these convenient services with your account(s). Go to wellsfargo.com/biz or call the number above if you have questions or if you would like to add new services.

Business Online Banking
Online Statements
Business Bill Pay
Business Spending Report
Overdraft Protection

Activity summary

Beginning balance on 3/1	\$24,350.00
Deposits/Credits	23,060.40
Withdrawals/Debits	- 36,408.18
Ending balance on 3/31	\$11,002.22

Average ledger balance this period \$11,598.51

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ April 1, 2017 - April 30, 2017 ■ Page 1 of 5



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

Questions?

Available by phone 24 hours a day, 7 days a week:
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Account options

A check mark in the box indicates you have these convenient services with your account(s). Go to wellsfargo.com/biz or call the number above if you have questions or if you would like to add new services.

Business Online Banking	<input checked="" type="checkbox"/>
Online Statements	<input checked="" type="checkbox"/>
Business Bill Pay	<input checked="" type="checkbox"/>
Business Spending Report	<input checked="" type="checkbox"/>
Overdraft Protection	<input type="checkbox"/>

Activity summary

Beginning balance on 4/1	\$11,002.22
Deposits/Credits	167,095.00
Withdrawals/Debits	- 101,963.87
Ending balance on 4/30	\$76,133.35
Average ledger balance this period	\$68,290.25

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ May 1, 2017 - May 31, 2017 ■ Page 1 of 5



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

Questions?

Available by phone 24 hours a day, 7 days a week:
Telecommunications Relay Services calls accepted

1-800-CALL-WELLS (1-800-225-5935)

TTY: 1-800-877-4833

En español: 1-877-337-7454

Online: wellsfargo.com/biz

Write: Wells Fargo Bank, N.A. (114)

P.O. Box 6995

Portland, OR 97228-6995

Your Business and Wells Fargo

Cash flow is a key indicator of the financial health of your business. Find tips and strategies for effective cash flow management at wellsfargoworks.com.

Account options

A check mark in the box indicates you have these convenient services with your account(s). Go to wellsfargo.com/biz or call the number above if you have questions or if you would like to add new services.

Business Online Banking
Online Statements
Business Bill Pay
Business Spending Report
Overdraft Protection

Activity summary

Beginning balance on 5/1	\$76,133.35
Deposits/Credits	10,502.00
Withdrawals/Debits	- 55,381.10
Ending balance on 5/31	\$31,254.25
Average ledger balance this period	\$41,741.30

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ June 1, 2017 - June 30, 2017 ■ Page 1 of 5



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

Questions?

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Business Online Banking	<input checked="" type="checkbox"/>
Online Statements	<input checked="" type="checkbox"/>
Business Bill Pay	<input checked="" type="checkbox"/>
Business Spending Report	<input checked="" type="checkbox"/>
Overdraft Protection	<input type="checkbox"/>

Activity summary

Beginning balance on 6/1	\$31,254.25
Deposits/Credits	9,357.21
Withdrawals/Debits	- 17,480.77
Ending balance on 6/30	\$23,130.69
Average ledger balance this period	\$28,047.74

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ July 1, 2017 - July 31, 2017 ■ Page 1 of 5



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

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Business Online Banking	<input checked="" type="checkbox"/>
Online Statements	<input checked="" type="checkbox"/>
Business Bill Pay	<input checked="" type="checkbox"/>
Business Spending Report	<input checked="" type="checkbox"/>
Overdraft Protection	<input type="checkbox"/>

Other Wells Fargo Benefits

Apply for a Commercial Equity Line of Credit and enjoy a low rate of Prime + 0% on your balance through December 31, 2018

Whether you are planning to make property improvements, expand your business, or purchase either property or large equipment, we want to help you with your financing. Small business owners and real estate investors can get up to \$500,000 in commercial real estate financing that starts as a 5-year, Prime-based revolving equity line after which the balance converts to an adjustable 15-year amortized loan for a total term of 20 years.

Key benefits of our real estate secured financing:

- No application fee, and no appraisal fee
- Low 1% origination fee due at closing

To learn more, or apply for this great offer, please call: 1-866-416-4320, Monday - Friday, 8:00 a.m. to 5:00 p.m. Pacific Time.

Note: All financing is subject to credit approval. Some restrictions may apply.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ August 1, 2017 - August 31, 2017 ■ Page 1 of 5



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

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Business Online Banking	<input checked="" type="checkbox"/>
Online Statements	<input checked="" type="checkbox"/>
Business Bill Pay	<input checked="" type="checkbox"/>
Business Spending Report	<input checked="" type="checkbox"/>
Overdraft Protection	<input type="checkbox"/>

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Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ September 1, 2017 - September 30, 2017 ■ Page 1 of 5



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

Questions?

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Business Online Banking	<input checked="" type="checkbox"/>
Online Statements	<input checked="" type="checkbox"/>
Business Bill Pay	<input checked="" type="checkbox"/>
Business Spending Report	<input checked="" type="checkbox"/>
Overdraft Protection	<input type="checkbox"/>

Activity summary

Beginning balance on 9/1	\$5,103.38
Deposits/Credits	30,754.00
Withdrawals/Debits	- 14,710.40
Ending balance on 9/30	\$21,146.98
Average ledger balance this period	\$8,671.59

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ October 1, 2017 - October 31, 2017 ■ Page 1 of 5



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

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En español: 1-877-337-7454

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Business Online Banking
Online Statements
Business Bill Pay
Business Spending Report
Overdraft Protection

Activity summary

Beginning balance on 10/1	\$21,146.98
Deposits/Credits	158,109.68
Withdrawals/Debits	- 103,992.10
Ending balance on 10/31	\$75,264.56
Average ledger balance this period	\$64,833.85

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ November 1, 2017 - November 30, 2017 ■ Page 1 of 5



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

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Business Online Banking	<input checked="" type="checkbox"/>
Online Statements	<input checked="" type="checkbox"/>
Business Bill Pay	<input checked="" type="checkbox"/>
Business Spending Report	<input checked="" type="checkbox"/>
Overdraft Protection	<input type="checkbox"/>

Activity summary

Beginning balance on 11/1	\$75,264.56
Deposits/Credits	5,920.00
Withdrawals/Debits	- 65,601.06
Ending balance on 11/30	\$15,583.50
Average ledger balance this period	\$42,954.31

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ December 1, 2017 - December 31, 2017 ■ Page 1 of 4



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

Questions?

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- Business Online Banking
- Online Statements
- Business Bill Pay
- Business Spending Report
- Overdraft Protection

Activity summary

Beginning balance on 12/1	\$15,583.50
Deposits/Credits	4,315.00
Withdrawals/Debits	- 18,171.24
Ending balance on 12/31	\$1,727.26
Average ledger balance this period	\$8,132.68

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

ATTACHMENT "E"

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ January 1, 2018 - January 31, 2018 ■ Page 1 of 4

WELLS
FARGO

THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

Questions?

Available by phone 24 hours a day, 7 days a week:
Telecommunications Relay Services calls accepted

1-800-CALL-WELLS (1-800-225-5935)

TTY: 1-800-877-4833

En español: 1-877-337-7454

Online: wellsfargo.com/biz

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P.O. Box 6995
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Account options

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Business Online Banking
Online Statements
Business Bill Pay
Business Spending Report
Overdraft Protection

Activity summary

Beginning balance on 1/1	\$1,727.26
Deposits/Credits	16,665.00
Withdrawals/Debits	- 6,439.71
Ending balance on 1/31	\$11,952.55
Average ledger balance this period	\$4,098.47

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ February 1, 2018 - February 28, 2018 ■ Page 1 of 5



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

Questions?

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- Business Online Banking
- Online Statements
- Business Bill Pay
- Business Spending Report
- Overdraft Protection

Activity summary

Beginning balance on 2/1	\$11,952.55
Deposits/Credits	23,797.39
Withdrawals/Debits	- 25,642.54
Ending balance on 2/28	\$10,107.40
Average ledger balance this period	\$7,740.55

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ March 1, 2018 - March 31, 2018 ■ Page 1 of 5



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

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- Business Online Banking
- Online Statements
- Business Bill Pay
- Business Spending Report
- Overdraft Protection

Activity summary

Beginning balance on 3/1	\$10,107.40
Deposits/Credits	38,912.20
Withdrawals/Debits	- 31,956.96
Ending balance on 3/31	\$17,062.64
Average ledger balance this period	\$9,721.27

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA
California account terms and conditions apply

For Direct Deposit use
Routing Number (RTN): [REDACTED]

For Wire Transfers use
Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ April 1, 2018 - April 30, 2018 ■ Page 1 of 6



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

Questions?

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Business Online Banking
Online Statements
Business Bill Pay
Business Spending Report
Overdraft Protection

Activity summary

Beginning balance on 4/1	\$17,062.64
Deposits/Credits	159,892.59
Withdrawals/Debits	- 94,209.06
Ending balance on 4/30	\$82,746.17
Average ledger balance this period	\$72,645.30

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ May 1, 2018 - May 31, 2018 ■ Page 1 of 4



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- Online Statements
- Business Bill Pay
- Business Spending Report
- Overdraft Protection

Activity summary

Beginning balance on 5/1	\$82,746.17
Deposits/Credits	1,750.00
Withdrawals/Debits	- 60,624.88
Ending balance on 5/31	\$23,871.29
Average ledger balance this period	\$43,360.92

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ June 1, 2018 - June 30, 2018 ■ Page 1 of 5



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6725 SEVILLE AVE
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- Online Statements
- Business Bill Pay
- Business Spending Report
- Overdraft Protection

Activity summary

Beginning balance on 6/1	\$23,871.29
Deposits/Credits	7,225.00
Withdrawals/Debits	- 19,857.77
Ending balance on 6/30	\$11,238.52
Average ledger balance this period	\$19,602.30

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

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Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ July 1, 2018 - July 31, 2018 ■ Page 1 of 4



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Business Online Banking
Online Statements
Business Bill Pay
Business Spending Report
Overdraft Protection

Activity summary

Beginning balance on 7/1	\$11,238.52
Deposits/Credits	14,816.96
Withdrawals/Debits	- 12,669.83
Ending balance on 7/31	\$13,385.65
Average ledger balance this period	\$10,514.12

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ August 1, 2018 - August 31, 2018 ■ Page 1 of 5



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

Questions?

Available by phone 24 hours a day, 7 days a week:
Telecommunications Relay Services calls accepted

1-800-CALL-WELLS (1-800-225-5935)

TTY: 1-800-877-4833

En español: 1-877-337-7454

Online: wellsfargo.com/biz

Write: Wells Fargo Bank, N.A. (114)
P.O. Box 6995
Portland, OR 97228-6995

Your Business and Wells Fargo

Access complimentary resources and tools to help you create or revise your business plan - whether you're an experienced business owner or just starting out. Find out more at wellsfargoworks.com/plan.

Account options

A check mark in the box indicates you have these convenient services with your account(s). Go to wellsfargo.com/biz or call the number above if you have questions or if you would like to add new services.

Business Online Banking
Online Statements
Business Bill Pay
Business Spending Report
Overdraft Protection

Account number: [REDACTED] ■ August 1, 2018 - August 31, 2018 ■ Page 2 of 5



was used when the transaction was sent for authorization and we are unable to match them. In those cases, you may be charged an overdraft fee if the transaction is paid into overdraft.

In addition, in the "Available balance, posting order, and overdrafts" section of the Deposit Account Agreement under the heading "IMPORTANT INFORMATION ABOUT FEES," we added the following:

We track transactions that reduced your available balance while pending and caused overdraft fees on other transactions. If these transactions are presented for payment within 10 business days after they first appeared as pending, we will waive any overdraft fees on those transactions. In rare circumstances, the merchant presents transactions for payment with a different identification code than was used when the transaction was sent for authorization and we are unable to match them.

Activity summary

Beginning balance on 8/1	\$13,385.65
Deposits/Credits	14,479.00
Withdrawals/Debits	- 25,288.92
Ending balance on 8/31	\$2,575.73
Average ledger balance this period	\$8,249.00

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ September 1, 2018 - September 30, 2018 ■ Page 1 of 5



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

Questions?

Available by phone 24 hours a day, 7 days a week:
Telecommunications Relay Services calls accepted

1-800-CALL-WELLS (1-800-225-5935)

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En español: 1-877-337-7454

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Portland, OR 97228-6995

Your Business and Wells Fargo

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Account options

A check mark in the box indicates you have these convenient services with your account(s). Go to wellsfargo.com/biz or call the number above if you have questions or if you would like to add new services.

- Business Online Banking
- Online Statements
- Business Bill Pay
- Business Spending Report
- Overdraft Protection

Activity summary

Beginning balance on 9/1	\$2,575.73
Deposits/Credits	41,790.00
Withdrawals/Debits	- 29,308.89
Ending balance on 9/30	\$15,056.84
Average ledger balance this period	\$17,483.72

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ October 1, 2018 - October 31, 2018 ■ Page 1 of 5



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

Questions?

Available by phone 24 hours a day, 7 days a week:
Telecommunications Relay Services calls accepted

1-800-CALL-WELLS (1-800-225-5935)

TTY: 1-800-877-4833

En español: 1-877-337-7454

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Account options

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- Business Online Banking
- Online Statements
- Business Bill Pay
- Business Spending Report
- Overdraft Protection

Activity summary

Beginning balance on 10/1	\$15,056.84
Deposits/Credits	147,841.00
Withdrawals/Debits	- 114,041.40
Ending balance on 10/31	\$48,856.44

Average ledger balance this period \$51,894.61

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use
Routing Number (RTN): [REDACTED]

For Wire Transfers use
Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ November 1, 2018 - November 30, 2018 ■ Page 1 of 4



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

Questions?

Available by phone 24 hours a day, 7 days a week:
Telecommunications Relay Services calls accepted

1-800-CALL-WELLS (1-800-225-5935)

TTY: 1-800-877-4833

En español: 1-877-337-7454

Online: wellsfargo.com/biz

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P.O. Box 6995
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Account options

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- Business Online Banking
- Online Statements
- Business Bill Pay
- Business Spending Report
- Overdraft Protection

Activity summary

Beginning balance on 11/1	\$48,856.44
Deposits/Credits	2,190.00
Withdrawals/Debits	- 38,207.61
Ending balance on 11/30	\$12,838.83

Average ledger balance this period \$28,992.28

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ December 1, 2018 - December 31, 2018 ■ Page 1 of 5



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

Questions?

Available by phone 24 hours a day, 7 days a week:
Telecommunications Relay Services calls accepted

1-800-CALL-WELLS (1-800-225-5935)

TTY: 1-800-877-4833

En español: 1-877-337-7454

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Account options

A check mark in the box indicates you have these convenient services with your account(s). Go to wells Fargo.com/biz or call the number above if you have questions or if you would like to add new services.

- Business Online Banking
- Online Statements
- Business Bill Pay
- Business Spending Report
- Overdraft Protection

Activity summary

Beginning balance on 12/1	\$12,838.83
Deposits/Credits	3,536.62
Withdrawals/Debits	- 13,435.42
Ending balance on 12/31	\$2,940.03
Average ledger balance this period	\$7,130.68

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.



CITY OF HUNTINGTON PARK

Community Development Department
City Council Agenda Report

March 19, 2019

Honorable Mayor and Members of the City Council
City of Huntington Park
6550 Miles Avenue
Huntington Park, CA 90255

Dear Mayor and Members of the City Council:

CONSIDERATION AND APPROVAL OF AN ACTIVITY IN PUBLIC PLACES PERMIT FOR THE GREATER HUNTINGTON PARK AREA CHAMBER OF COMMERCE'S ANNUAL "CARNAVAL PRIMAVERA" DOWNTOWN STREET FESTIVAL

IT IS RECOMMENDED THAT THE CITY COUNCIL:

1. Approve Activity in Public Places Permit from the Greater Huntington Park Area Chamber of Commerce to conduct the annual "Carnaval Primavera" along Pacific Boulevard April 5 through April 7, 2019;
2. Approve request for a fee waiver of City's department costs for the proposed event; and/or
3. Provide staff with direction.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

Pursuant to Huntington Park Municipal Code 5-13.02 City Council approval of an Activity in Public Places Permit (Permit) is required when the request proposes to utilize public property. The Greater Huntington Park Area Chamber of Commerce is requesting the street closure of Pacific Boulevard, between Gage Avenue and Slauson Avenue, April 5 through April 7, 2019 for the annual "Carnaval Primavera" street festival.

FISCAL IMPACT/FINANCING

The Greater Huntington Park Area Chamber of Commerce (Chamber of Commerce) is responsible for costs incurred by the City related to the street festival. City staff has reviewed the applicable estimated departmental costs with the Chamber prior to the event. The total actual cost will be determined by the City's Finance Department after the conclusion of the event. The Chamber will be required to pay the final invoice within 30 days of receiving the invoice.

For this year's event, City staff has reviewed the application and is able to provide the following cost estimate for this year's Carnaval Primavera:

CONSIDERATION AND APPROVAL OF AN ACTIVITY IN PUBLIC PLACES PERMIT FOR THE GREATER HUNTINGTON PARK AREA CHAMBER OF COMMERCE'S ANNUAL "CARNAVAL PRIMAVERA" DOWNTOWN STREET FESTIVAL

March 19, 2019

Page 2 of 3

Police Department	\$40,097.88
Public Works Department	\$ 3,112.90
Finance Department	\$ 2,444.00
Building Division	\$ 1,299.20
Total Estimated Cost to City	\$46,953.98

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

• ***Activities in Public Places***

This year, the street festival will take place on Friday, April 5, 2019 from 5:00 p.m. to 11:00 p.m.; Saturday, April 6, 2019 from 11:00 a.m. to 11:00 p.m.; and Sunday, April 7, 2019 from 11:00 a.m. to 10:30 p.m.

Per the Huntington Park Municipal Code, Section 5-13 (Activities in Public Places), the request to use the public street requires City Council Approval. The Police Department, Public Works Department, Engineering Division, Building and Safety Division, Finance Department, Community Development Department and the Office of the City Clerk have reviewed the application to ensure compliance with all applicable federal, state and local regulations.

In addition, as part of the application process, when an event is requested to take place on a street, alley, or if other interruptions of street or sidewalk areas are anticipated, the applicants are required to obtain written consent of at least seventy percent (70%) of the businesses, individuals, or parties impacted by the event. Signatures are being collected and pending to be submitted on Monday.

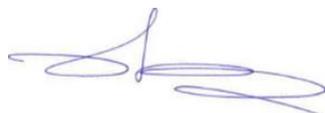
• ***Financial Assistance Request***

On March 7, 2019, the Chamber submitted a request asking the City of Huntington Park "to assist in waiving the fees or a portion thereof for the upcoming 26th Annual Carnival Primavera Downtown Festival." The City Council may consider the request and direct staff as appropriate.

CONCLUSION

Upon Council approval, staff will proceed with recommended actions.

Respectfully submitted,



RICARDO REYES
City Manager

**CONSIDERATION AND APPROVAL OF AN ACTIVITY IN PUBLIC PLACES PERMIT
FOR THE GREATER HUNTINGTON PARK AREA CHAMBER OF COMMERCE'S
ANNUAL "CARNAVAL PRIMAVERA" DOWNTOWN STREET FESTIVAL**

March 19, 2019

Page 3 of 3



SERGIO INFANZON
Community Development Director

ATTACHMENT(S)

- A. Activity in Public Places Permit/Application/Street Festival Layout
- B. Departmental/Agency Cost Estimates
- C. Signed Petitions of Supporting Businesses
- D. Taxes for 2016
- E. Taxes for 2017
- F. Bank Statements for 2017
- G. Bank Statement for 2018

ATTACHMENT "A"



CITY OF HUNTINGTON PARK
 Community Development Dept. • Planning Division
 6550 Miles Avenue, Huntington Park, CA 90255
 Tel. (323) 584-6210 • planning@hpca.gov

ACTIVITY IN PUBLIC PLACES PERMIT APPLICATION

RECEIVED
 JAN 22 2019

FILING FEE: Minor Events: \$255.00 plus \$10.00 per day;
 Non-Profits - \$95.00 plus \$10.00 per day;
Major Events: \$1,640.00 plus \$10.00 per day;
 Non-Profits - \$555.00 plus \$10.00 per day.

PERMIT NO. 2019-01

1. **APPLICANT** (If the applicant is an organization or business, also include the name of a contact person):
The Greater Huntington Park Area Chamber of Commerce

Mailing Address: 6725 Seville Ave., Huntington Park, CA 90255

Phone 1: 323-585-1155 Phone 2: _____ email: _____

Huntington Park Business License No: _____

Non-profit organization? Yes No If yes, Tax I.D. No? 95-1239700

Emergency Contact (name and telephone): Leticia Martinez/323-585-1155

2. **ADDRESS / LOCATION OF EVENT/ACTIVITY** (Describe on which portion of the public-right-of-ways the event/activity will take place, i.e. – sidewalk, street alley, etc.):
Pacific Blvd., Between Gage Ave. -Slauson Ave.

3. **DESCRIPTION OF EVENT/ACTIVITY** (Describe purpose of event/activity. Include all activities such as meetings, assembly, parade, procession, or entertainment, etc., if more space is needed please attach a separate sheet of paper):
Special Downtown Festival to promote the city of Huntington Park and showcase shopping district entertainment stage, retail commercial exhibit booths, arts/crafts, food booths, free samplings, amusement rides for all ages.

4. **DATE(S) OF EVENT/ACTIVITY:**
April 5, 6 and 7, 2019

5. **TIME(S) OF EVENT/ACTIVITY (for each day):**
Friday: 5:00 p.m.-11:00 p.m./ Saturday 11:00 a.m.-11:00 p.m./ Sunday: 11:00 a.m.-10:30 p.m.

6. **Have you conducted this event/activity in the past twelve (12) months, in this or a neighboring city?**
 Yes No If yes, where? On Pacific Blvd., Between Florence Ave. to Randolph St.
 Date(s) _____

7. **Have you requested or obtained a permit from any other city within which the event/activity shall commence, terminate or occur in part?**
 Yes No If yes, which city? N/A

8. **Number of persons expected to attend event/activity?** 100,000

9. **Number and type of vehicles, equipment, and animals that will be used at the event/activity?**
None

10. Will there be vendors that will be participating in the event/activity?

Yes No If yes, how many? _____

11. Do you have insurance for the event/activity?

Yes No If yes, provide information and attach proof: Frank Amador Insurance

12. Applicant's authorized representative(s) for management of event/activity. If more than one, please list on a separate sheet of paper. (Note: Applicant or authorized representative(s) must be present at all times during the event/activity)

Representative's Name: Leticia Martinez

Contact Number: 323-585-1155

Mailing Address: 6725 Seville Ave., Huntington Park, CA 90255

13. Do you anticipate the involvement of any City officials and/or departments in the event/activity?

Yes No If yes, please describe in detail: If we can have the mayor, vice mayor, and city council members attend and give recognitions to special guests.celebrities honored at the event. Police Department officials for public safety.

Please Note:

- **Submittal of a plan/map showing the location of the event/activity, including pedestrian and/or vehicle circulation is required.**
- **A fully completed application with all required approvals must be submitted to the Community Development Department a minimum of thirty (30) days prior to the date of the event/activity, or a minimum of ninety (90) days prior to the date of the event/activity if City Council approval is required.**

CERTIFICATE AND AFFIDAVIT OF APPLICANT: I/We understand and agree to abide by all of the Activity in Public Places Permit regulations of the City of Huntington Park and any other conditions imposed for the event/activity requested. I/We certify that all statements made on this application are true and complete. I/We understand that any false statement may result in denial of the requested permit or revocation of any issued permit.

Leticia Martinez
Applicant's Signature

1/22/19
Date

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

FOR OFFICE USE ONLY - DO NOT WRITE BELOW THIS LINE

Date Submitted: _____ Received By: _____

Filing Fee: _____ Receipt No.: _____

City Council Approval Required? No Yes If yes, tentative meeting date? _____

Departmental/Division Approvals Required:

- | | | | |
|---|---|--|---|
| <input checked="" type="checkbox"/> Building and Safety | <input checked="" type="checkbox"/> City Clerk | <input checked="" type="checkbox"/> Engineering | <input type="checkbox"/> Parks & Recreation |
| <input checked="" type="checkbox"/> Planning | <input checked="" type="checkbox"/> Police Department | <input checked="" type="checkbox"/> Public Works | <input checked="" type="checkbox"/> Revenue Collections |

Outside Agency Approvals Required:

- L.A. County Fire Dept. L.A. County Health Dept. Dept. of Alcoholic Beverage Control (ABC)



CITY OF HUNTINGTON PARK
 Community Development Dept. • Planning Division
 6550 Miles Avenue, Huntington Park, CA 90255
 Tel. (323) 584-6210 • planning@hpca.gov

DEPARTMENTS / AGENCIES REVIEW CHECKLIST

ACTIVITY IN PUBLIC PLACES PERMIT APPLICATION

PERMIT NO. 2019-01

The Community Development Department requires proof of approval from the following departments/agencies that are checked:

Los Angeles County Fire Department
Fire Prevention Division
 3161 E. Imperial Hwy.
 Lynwood, CA 90255
 (310) 603-5258

Approved Not Approved No Approval Necessary

Approved w/ Conditions - Comments: _____

 Signature: **X** _____ Date: _____

Los Angeles County Health Department
Environmental Health Specialist
 245 S. Fetterly Avenue, Room 2014
 Los Angeles, CA 90022
 (323) 780-2272

Approved Not Approved No Approval Necessary

Approved w/ Conditions - Comments: _____

 Signature: **X** _____ Date: _____

State Dept. of Alcoholic Beverage Control
Duty Investigator
 3530 Wilshire Blvd., Suite 1110
 Los Angeles, CA 90010
 (213) 736-2005

Approved Not Approved No Approval Necessary

Approved w/ Conditions - Comments: _____

 Signature: **X** _____ Date: _____

Huntington Park Police Department
Watch Commander
 6542 Miles Avenue
 Huntington Park, CA 90255
 (323) 584-6254

Approved Not Approved No Approval Necessary

Approved w/ Conditions - Comments: _____

 Signature: **X** _____ Date: _____

Huntington Park City Manager's Office
City Manager
 6550 Miles Avenue
 Huntington Park, CA 90255
 (323) 584-6223

Approved Not Approved No Approval Necessary

Approved w/ Conditions - Comments: _____

 Signature: **X** _____ Date: _____

ACTIVITY IN PUBLIC PLACES PERMIT APPLICATION

PERMIT NO. 2019-01

The Community Development Department requires proof of approval from the following departments/agencies that are checked:

Huntington Park Office of the City Clerk
City Clerk
6550 Miles Avenue, Room 148
Huntington Park, CA 90255
(323) 584-6230

<input type="checkbox"/> Approved	<input type="checkbox"/> Not Approved	<input type="checkbox"/> No Approval Necessary
<input type="checkbox"/> Approved w/ Conditions - Comments: _____		
Signature: X _____ Date: _____		

Huntington Park Planning Division
Community Development Director
6550 Miles Avenue, Room 145
Huntington Park, CA 90255
(323) 584-6251

<input type="checkbox"/> Approved	<input type="checkbox"/> Not Approved	<input type="checkbox"/> No Approval Necessary
<input type="checkbox"/> Approved w/ Conditions - Comments: _____		
Signature: X _____ Date: _____		

Huntington Park Finance Department
Finance Manager
6550 Miles Avenue, Room 127
Huntington Park, CA 90255
(323) 584-6237

<input type="checkbox"/> Approved	<input type="checkbox"/> Not Approved	<input type="checkbox"/> No Approval Necessary
<input type="checkbox"/> Approved w/ Conditions - Comments: _____		
Signature: X _____ Date: _____		

Huntington Park Building Division
Building Official
6550 Miles Avenue, Room 145
Huntington Park, CA 90255
(323) 584-6315

<input type="checkbox"/> Approved	<input type="checkbox"/> Not Approved	<input type="checkbox"/> No Approval Necessary
<input type="checkbox"/> Approved w/ Conditions - Comments: _____		
Signature: X _____ Date: _____		

Huntington Park Public Works Dept.
Public Works Director / City Engineer
6550 Miles Avenue, Room 145
Huntington Park, CA 90255
(323) 584-6253

<input type="checkbox"/> Approved	<input type="checkbox"/> Not Approved	<input type="checkbox"/> No Approval Necessary
<input type="checkbox"/> Approved w/ Conditions - Comments: _____		
Signature: X _____ Date: _____		

Huntington Park Parks and Rec. Dept.
Parks and Recreation Director
3401 E. Florence Avenue
Huntington Park, CA 90255
(323) 584-6218

<input type="checkbox"/> Approved	<input type="checkbox"/> Not Approved	<input type="checkbox"/> No Approval Necessary
<input type="checkbox"/> Approved w/ Conditions - Comments: _____		
Signature: X _____ Date: _____		

Debra Martinez

From: stefanie@hpchamber.org
Sent: Thursday, March 7, 2019 3:34 PM
To: Debra Martinez
Subject: HP Chamber of Commerce-Carnaval Primavera
Attachments: securitymap19.pdf; CityofHuntingtonPark19.pdf; Vendor List up-to-date.pdf

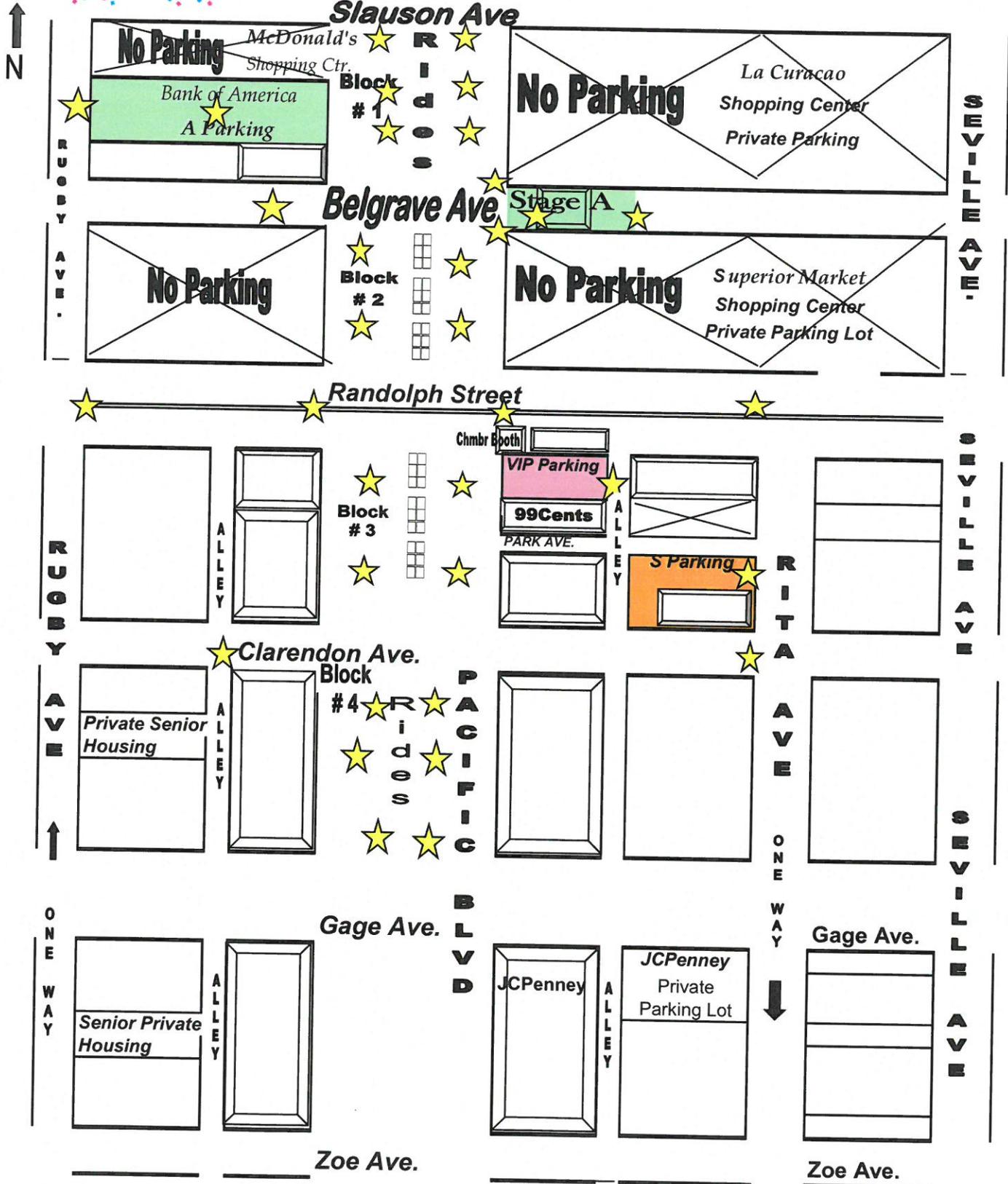
Hi Debra,

- 2)The information to the security company is
Arturo Romero
MAX 24 PRIVATE SECURITY
Phone: (323) 813 - 6291
- 3) Attached a map layout identifying the location of all vendors
- 4)Attached list of vendors confirmed to date.
- 5) We requested a list of the rides, should have it by next week.
- 7) Requested the list of the number of animals and the type of animals for the petting zoo.
- 9) Clarify if police department services are being requested. - yes
- 10) Provide proof of liability insurance. We are working on it.

Sincerely,
Stefanie Villagomez
The Greater Huntington Park Area
CHAMBER OF COMMERCE



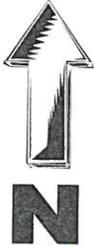
THE GREATER HUNTINGTON PARK AREA CHAMBER OF COMMERCE
 "CARNIVAL PRIMAVERA DOWNTOWN FESTIVAL"
SECURITY MAP



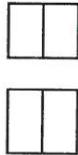
- 1 William Kettlecorn
- 2 Mexico Lindo
- 3 San Diego Scratch BBQ
- 4 Los Colorines
- 5 Rigo Airbrush
- 6 Martin Toys
- 7 Nancy Accessorios
- 8 Nancy Accessorios
- 9 Cynthia's Arts
- 10 Sundance Engraving
- 11 Sundance Engraving
- 12 Direct TV
- 13 Shanah Design
- 14 Fun4FamilyStore
- 15 Inglewood Cemetery
- 16 Martin Toys
- 17 Downey Federal Union
- 18 Frian Kettlecorn
- 19 Happy Ice
- 20 Goods Toys
- 21 Betos Nut House
- 22 Hollywood Gear
- 23 Salud Divino Tesoro
- 24 Direct TV
- 25 Leonors Mexican Food
- 26 Kali Churros
- 27 Mikie's Tacos
- 28 Mario's Tacos

SLAUSON AVE.

BLOCK #1



R
I
D
E
S



portables



Trash Roll Off

BELGRAVE AVE.

The Greater H.P. Area
CHAMBER OF COMMERCE

PRESENTS

26th Anniversary

CARNAVAL



PRIMAVERA

Downtown Festival

April 5, 6 and 7, 2019

Stage

Drinking
Responces

Entertainment
Loading &
Unloading

portables

BLOCK #2

Trash Roll Off

BELGRAVE AVE.

Stage A

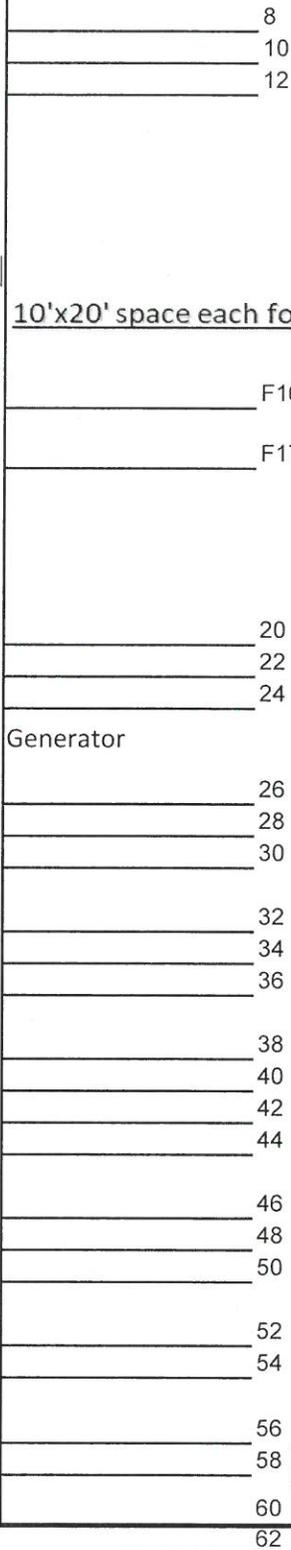
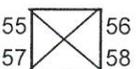
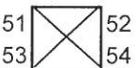
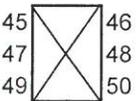
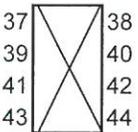
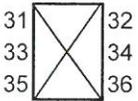
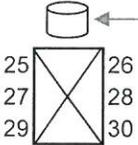
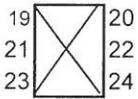
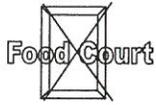
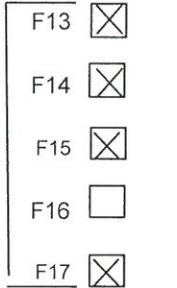
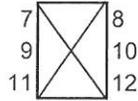
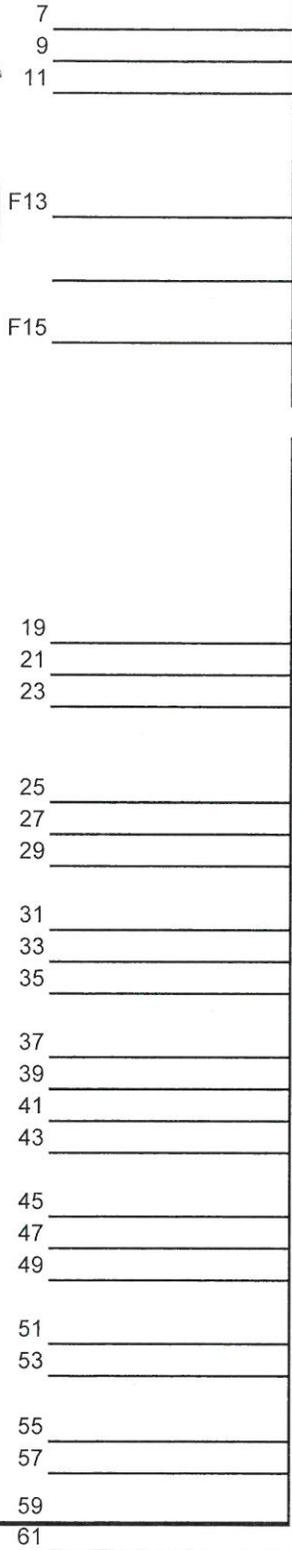
Dressing Rooms

Entertainment Loading & Unloading



N

F14



10'x20' space each food booth



April 5, 6 and 7, 2019
 Presented By
 The Greater Huntington Park Area
 CHAMBER OF COMMERCE

RANDOLPH STREET

portables

Rock Climber

Chamber Booth

Duval Prod

BLOCK #3

RANDOLPH STREET

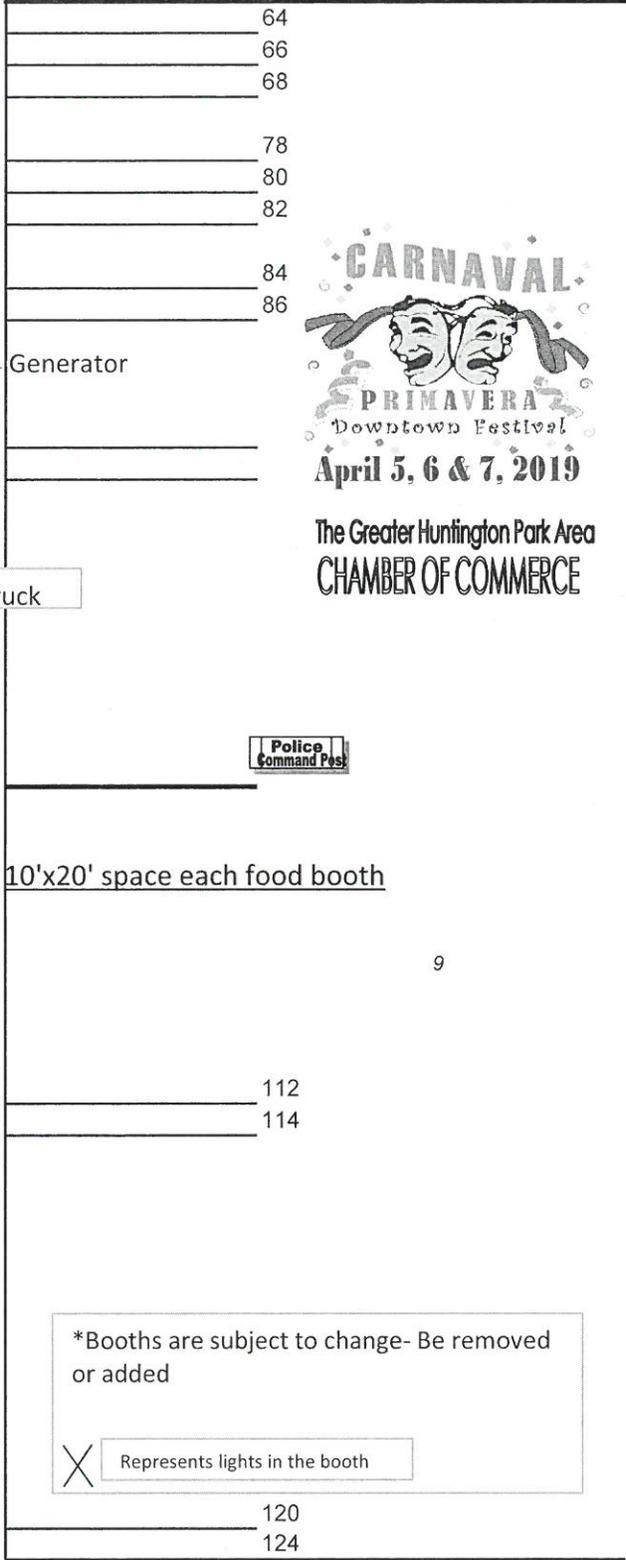
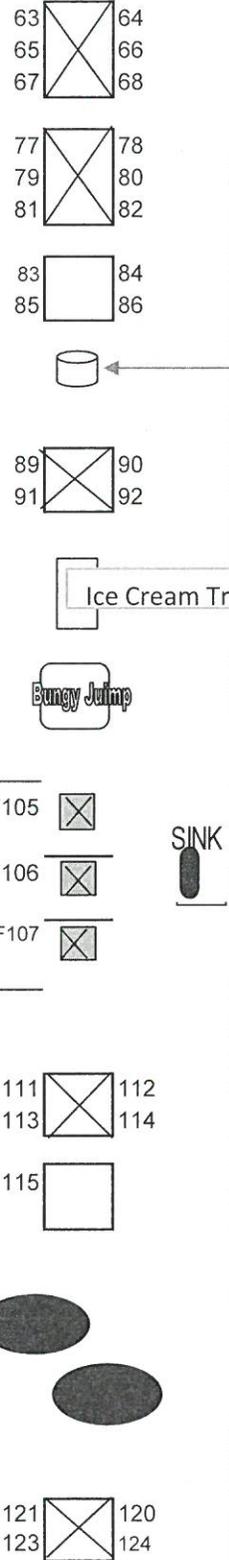
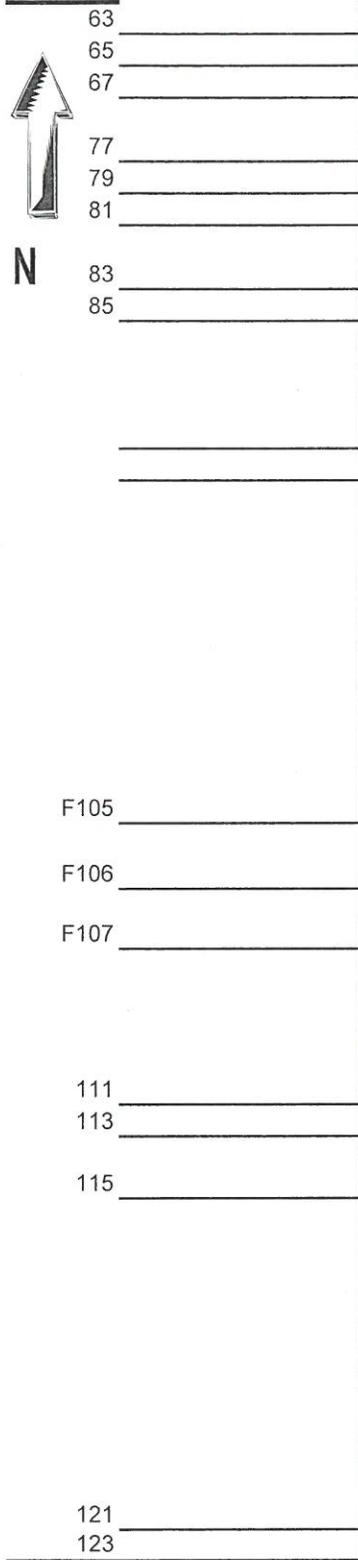
RANDOLPH STREET

portables

Rock Climber

Chamber Booth

Boval Food



The Greater Huntington Park Area
CHAMBER OF COMMERCE

Trash Roll Off

Petting Zoo

CLARENDON AVE.

Ponies

BLOCK #4

Trash Roll Off

Petting Zoo

CLARENDON AVE.

Ponies



N

**R
I
D
E
S**

**The Greater H.P. Area
CHAMBER OF COMMERCE**

PRESENTS

26th Anniversary

CARNAVAL



PRIMAVERA

Downtown Festival

April 5, 6 and 7, 2019

GAGE AVE.

ATTACHMENT "B"

				Officer	Officers	
--	--	--	--	---------	----------	--

Carnaval Primavera 2019 (Sunday)						
Position	Hourly Rate	Overtime Rate 150%	Hours Worked	Total of Hours Worked Per Officer	Total # Of Officers	
Police Lieutenant	\$ 147.00	\$ 220.50	8.00	\$1,764.00	1	\$1,764.00
Police Sergeant	\$ 147.00	\$ 220.50	8.00	\$1,764.00	1	\$1,764.00
Police Sergeant	\$ 147.00	\$ 220.50	6.00	\$1,323.00	1	\$1,323.00
Senior Officer	\$ 132.00	\$ 198.00	6.00	\$1,188.00	3	\$3,564.00
Police Officer	\$ 48.83	\$ 73.25	6.00	\$439.47	4	\$1,757.88
Total Projected Overtime						\$10,172.88

Carnaval Primavera 2019 (Street Clearing Detail - Thursday)						
Position	Hourly Rate	Overtime Rate 150%	Hours Worked	Total of Hours Worked Per Officer	Total # Of Officers	
Police Lieutenant	\$ 147.00	\$ 220.50	3.50	\$771.75	1	\$771.75
Traffic Officer - Senior Officer	\$ 132.00	\$ 198.00	3.50	\$693.00	1	\$693.00
Parking Enforcement Officer	\$ 97.00	\$ 145.50	3.50	\$509.25	1	\$509.25
Total Projected Overtime						\$1,974.00

Total Projected Overtime Grand Total	\$40,097.88
---	--------------------

				Officer	Officers	

Applicants Signature Accepting Estimate of Contract Servies: _____ **Date:** _____

All Contract Services hourly / overtime rates are quoted per 10/16/18 Master Fee Schedule

Inkind servies include on-duty personnel, reserve officers, police cadets, police explorer, poli for all three event days

Inkind services also include on duty Parking Enforcement hours/services for NO PARKING postings on Tuesday prior

Code Enforcement, Licensing, and Costs associated with City Yard employees are not part of this estimate.

THIS IS A PRELIMINARY ESTIMATE

THIS ESTIMATE IS SUBJECT TO CHANGE BASED ON THE AVAILABILITY OF ON DUTY PERSONNEL AND CHANGING CONDITIONS IN THE EVENT PLANNING

**CITY OF HUNTINGTON PARK
PUBLIC WORKS DEPARTMENT
Carnaval Primavera Downtown Festival April 5, 6 & 7, 2019
Job cost Estimate**

PERSONNEL								
DATE	JOB DESCRIPTION	HOURS	REG RATE	OVERTIME RATE	# OF STAFF	CLASSIFICATION	SUB TOTAL	GRAND TOTAL
4/2/2019 Tuesday	Deliver delineators at assigned locations, for posting of No Parking at Pacific Blvd (10:00 AM.)	2	\$42.80		2	Maintenance Workers	\$171.20	
4/4/2019 Thursday	Deliver barricades, cones, delineators & event signs at assigned locations for street closure (8:00 AM.)	4	\$42.80		4	Maintenance Workers	\$684.80	
4/4/2019 Thursday	Set up and close all left turn pockets and assist with street closure (Overtime 4:30 PM. - 7:30 PM).	3		\$64.19	2	Maintenance Workers	\$385.14	
		3		\$91.78	1	PW Supervisor	\$275.34	
4/5/2019 Friday	Pick up all delineators from Pacific Blvd (8:00 AM.)	2	\$42.80		2	Maintenance Workers	\$171.20	
4/8/2019 Monday	Pick up all barricades, cones, delineators, and event signs (7:00 AM.)	4	\$42.80		4	Maintenance Workers	\$684.80	
Sub Total							\$2,372.48	
25.0% Overhead							\$333.00	
PERSONNEL TOTAL							\$2,705.48	
EQUIPMENT	TYPE	HOURS	HOURLY RATE					
Unit 349/409	Ford F150 w/ trailer (409)	4	\$22.76				\$91.04	
Unit 353/410	Ford F450 w/ trailer (410)	8	\$28.17				\$225.36	
Unit 346	Chevrolet Stake bed	4	\$22.76				\$91.04	
EQUIPMENT TOTAL							\$407.44	\$407.44
MATERIALS		QTY.	RATE					
MATERIAL TOTAL								
TOTAL EVENT COST							\$3,112.92	
TOTAL OVERTIME PERSONNEL COST							\$660.48	

PREPARED BY: Juan A Preciado
DATE: March 14, 2019

1	William Kettlecorn **	—	No Lic
2	Mexico Lindo ?	—	Name Mexico Lindo Que Rico
3	San Diego Scratch BBQ **	—	No Lic
4	Los Colorines	exp. 3/31/19	
5	Rigo Airbrush **	—	No Lic.
6	Martin Toys	exp. 10/31/19	
7	Nancy Accesorios **	—	No Lic.
8	Nancy Accesorios **	—	No Lic.
9	Cynthia's Arts **	CLOSED ACCT.	
10	Sundance Engraving **	CLOSED ACCT.	
11	Sundance Engraving **	CLOSED ACCT.	
12	Direct TV **	—	No Lic
13	Shanah Design	exp. 10/31/2019	
14	Fun4FamilyStore	exp. 11/30/2019	
15	Inglewood Cemetery	exp. 10/31/2019	
16	Martin Toys	exp. 10/31/19	
17	Downey Federal Union *	—	No Lic
18	Frian Kettlecorn	exp. 10/31/2019	
19	Happy Ice **	—	No Lic.
20	Goods Toys **	—	No Lic.
21	Betos Nut House **	—	No Lic.
22	Hollywood Gear **	—	No Lic.
23	Salud Divino Tesoro **	—	No. Lic
24	Direct TV **	—	No Lic
25	Leonors Mexican Food	—	exp. 10/31/2019
26	Kali Churros	—	exp. 10/31/2019
27	Mikie's Tacos	—	exp. 3/31/2019
28	Mario's Tacos	—	exp. 10/31/2019

16 NEW Lic @ 139.00 = \$ 2,224.00

2 RENEWALS @ 111.00 = \$ 222.00

Please ask if #2 (Mexico Lindo) is now Mexico Lindo Que Rico... our system only has a bl for Mexico Lindo Que Rico.

Debra Martinez

From: Silvia Tapia
Sent: Tuesday, March 12, 2019 2:50 PM
To: Debra Martinez
Subject: RE: Activity in Public Places 2018_01, Sabor de Mexico Lindo

Follow Up Flag: Follow up
Flag Status: Flagged

Estimate only:

- \$460.00 After-hour Inspection
- \$839.20 Electrical (includes lighting & 2 generators)
- **\$1,299.20 Total**

- Paul Maurer shows will pull their own permits for the carnival rides and generators.

Silvia M. Tapia
Lead Permit Technician
City of Huntington Park

(323)584-6271

From: Debra Martinez
Sent: Tuesday, March 12, 2019 2:32 PM
To: Silvia Tapia <STapia@hpca.gov>
Subject: FW: Activity in Public Places 2018_01, Sabor de Mexico Lindo

Hello Silvia,

The email below has the estimate for 2018 "Sabor de Mexico Lindo Carnaval".

Can an estimate be provided for this carnival.

Debra Martinez | Planning Technician | City of Huntington Park
Community Development Department | Planning Division
6550 Miles Avenue | Huntington Park, CA 90255
☎ (323) 584-6324 | 📠 (323) 584-6244
✉ dmartinez@hpca.gov
🌐 www.hpca.gov

From: Silvia Tapia
Sent: Wednesday, September 12, 2018 5:17 PM
To: Debra Martinez <DMartinez@hpca.gov>
Subject: RE: Activity in Public Places 2018_01, Sabor de Mexico Lindo

ATTACHMENT "C"

SIGNED PETITIONS OF SUPPORTING BUSINESSES
PENDING SUBMITTAL

ATTACHMENT "D"

RETURNED TO NOVEMBER 15, 2017

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2016

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

A For the 2016 calendar year, or tax year beginning

and ending

B Check if applicable:

- Address change
- Name change
- Initial return
- Final return/terminated
- Amended return
- Application pending

C Name of organization

HUNTINGTON PARK CHAMBER OF COMMERCE

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite

6725 SEVILLE AVE

City or town, state or province, country, and ZIP or foreign postal code

HUNTINGTON PARK, CA 90255

F Name and address of principal officer: LETICIA MARTINEZ

SAME AS C ABOVE

D Employer identification number

E Telephone number

G Gross receipts \$ 398,375.

H(a) Is this a group return for subordinates? Yes No

H(b) Are all subordinates included? Yes No
If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: 501(c)(3) 501(c)(6) (insert no.) 4947(a)(1) or 527

J Website: ▶ HPCHAMBER1.COM

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1921 **M** State of legal domicile: CA

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: THE PROMOTION OF COMMUNITY GOODWILL THROUGH THE SPONSORSHIP AND PROMOTION OF COMMUNITY ORIENTED		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	7
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	0
	5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)	5	2
	6	Total number of volunteers (estimate if necessary)	6	0
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	7b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	0.	0.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	555,704.	398,063.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	203.	312.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	555,907.	398,375.
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
14		Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	19,564.	36,622.
16a		Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
16b		Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.		
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	541,184.	440,699.
18		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	560,748.	477,321.
Net Assets or Fund Balances	19	Revenue less expenses. Subtract line 18 from line 12	-4,841.	-78,946.
	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	119,522.	70,962.
	22	Net assets or fund balances. Subtract line 21 from line 20	40,289.	70,676.
		79,233.	286.	

Part II Signature Block

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 officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer: **LETICIA MARTINEZ, EXECUTIVE DIRECTOR** Date: _____

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: **MICHAEL MASSONI** Preparer's signature: _____ Date: **10/31/17** Check if self-employed: PTIN: _____

Firm's name: **LATIMER & MASSONI CPA'S** Firm's EIN: _____

Firm's address: _____ Phone no.: _____

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: PROMOTE THE AFFAIRS OF THE CITY OF HUNTINGTON PARK

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 420,348. including grants of \$) (Revenue \$ 398,375.) ORGANIZATION IS A CHAMBER OF COMMERCE FOR THE CITY OF HUNTINGTON PARK FOR THE PURPOSE OF PROMOTING THE AFFAIRS OF THE CITY.

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 420,348.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 19 regarding organizational requirements and financial reporting.

Part IV Checklist of Required Schedules (continued)

Table with columns for question number, question text, Yes, and No. Rows include questions 20a through 38 regarding hospital facilities, financial statements, grants, compensation, tax-exempt bonds, and controlled entities.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Input box for Schedule O

Table with columns for question numbers (1a-14b), Yes/No checkboxes, and numerical answers. Includes questions about Form 1096, Form W-2G, Form W-3, Form 990-T, Form 8886-T, Form 8282, Form 8899, Form 1098-C, Form 4966, Form 501(c)(7), Form 501(c)(12), Form 4947(a)(1), and Form 720.

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.

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 7; 1b Enter the number of voting members included in line 1a... 0; 2 Did any officer, director, trustee, or key employee have a family relationship... X; 3 Did the organization delegate control over management duties... X; 4 Did the organization make any significant changes to its governing documents... X; 5 Did the organization become aware during the year of a significant diversion of the organization's assets... X; 6 Did the organization have members or stockholders... X; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body... X; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body... X; 8a Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body... X; 8b 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 Did the organization have local chapters, branches, or affiliates? X; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy? X; 14 Did 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? 15a The organization's CEO, Executive Director, or top management official X; 15b 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," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed CA
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[] Own website [] Another's website [X] Upon request [] Other (explain in Schedule O)
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records: LATIMER AND MASSONI -

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a			
	b Membership dues	1b			
	c Fundraising events	1c			
	d Related organizations	1d			
	e Government grants (contributions)	1e			
	f All other contributions, gifts, grants, and similar amounts not included above	1f			
	g Noncash contributions included in lines 1a-1f: \$				
	h Total. Add lines 1a-1f				
	Program Service Revenue	2 a CARNIVAL PRIMAVERA	Business Code	253,786.	253,786.
b SABOR DE MEXICO			114,406.	114,406.	
c MEMBERSHIP			12,317.	12,317.	
d INSTALLATION			9,555.	9,555.	
e GOLF TOURNAMENT			4,475.	4,475.	
f All other program service revenue			3,524.	3,524.	
g Total. Add lines 2a-2f			398,063.		
Other Revenue		3 Investment income (including dividends, interest, and other similar amounts)		312.	312.
	4 Income from investment of tax-exempt bond proceeds				
	5 Royalties				
	6 a Gross rents	(i) Real (ii) Personal			
	b Less: rental expenses				
	c Rental income or (loss)				
	d Net rental income or (loss)				
	7 a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other			
	b Less: cost or other basis and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss)				
	8 a 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				
	9 a Gross income from gaming activities. See Part IV, line 19	a			
b Less: direct expenses	b				
c Net income or (loss) from gaming activities					
10 a 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			
11 a					
b					
c					
d All other revenue					
e Total. Add lines 11a-11d					
12 Total revenue. See instructions.		398,375.	398,375.	0.	0.

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).

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

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 domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	18,936.		18,936.	
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	7,880.		7,880.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	4,497.		4,497.	
10 Payroll taxes	5,309.		5,309.	
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	4,989.		4,989.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion	383.		383.	
13 Office expenses	2,140.		2,140.	
14 Information technology				
15 Royalties				
16 Occupancy	8,098.		8,098.	
17 Travel	1,200.		1,200.	
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				
23 Insurance	640.		640.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a CARNIVAL PRIMAVERA	185,476.	185,476.		
b SABOR DE MEXICO	167,942.	167,942.		
c GOLF TOURNAMANT	23,763.	23,763.		
d MEMBERSHIP RECRUITMENT	13,073.	13,073.		
e All other expenses	32,995.	30,094.	2,901.	
25 Total functional expenses. Add lines 1 through 24e	477,321.	420,348.	56,973.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1	68,301.	1	37,677.
	2	38,740.	2	
	3		3	
	4	11,006.	4	31,485.
	5		5	
	6		6	
	7		7	
	8		8	
	9	1,475.	9	1,800.
	10a			
	10b		10c	
	11		11	
	12		12	
	13		13	
	14		14	
	15		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	119,522.	16	70,962.
Liabilities	17	40,289.	17	70,676.
	18		18	
	19		19	
	20		20	
	21		21	
	22		22	
	23		23	
	24		24	
	25		25	
	26	Total liabilities. Add lines 17 through 25	40,289.	26
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27	22,662.	27	-56,285.
	28	56,571.	28	56,571.
	29		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30		30	
	31		31	
	32		32	
33	79,233.	33	286.	
34	Total net assets or fund balances	119,522.	34	70,962.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	398,375.
2	Total expenses (must equal Part IX, column (A), line 25)	2	477,321.
3	Revenue less expenses. Subtract line 2 from line 1	3	-78,946.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	79,233.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-1.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	286.

Part XII Financial Statements and Reporting

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

		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
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2b	Were the organization's financial statements audited by an independent accountant?		X
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2c	If "Yes" to line 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.			
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
3b	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		

Form 990 (2016)

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2016

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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

Name of the organization **HUNTINGTON PARK CHAMBER OF COMMERCE** Employer identification number **[REDACTED]**

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in 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" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area

Protection of natural habitat Preservation of a certified historic structure

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, and not on a historic structure listed in the National Register	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?

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, 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)?

Yes No

9 In Part XIII, 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" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), 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 XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), 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) Revenue included on 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 (ASC 958) relating to these items:

a Revenue included on 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 XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds 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" on 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 XIII and complete the following table:

Table with columns for Amount and rows for 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, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

Table with columns (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back and rows for 1a-1g: Beginning of year balance, Contributions, Net investment earnings, gains, and losses, Grants or scholarships, Other expenditures for facilities and programs, Administrative expenses, End of year balance.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment %, b Permanent endowment %, c Temporarily restricted endowment %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

Table with columns Yes No and rows 3a(i) unrelated organizations, 3a(ii) related organizations, 3b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Table with columns (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value and rows for 1a Land, 1b Buildings, 1c Leasehold improvements, 1d Equipment, 1e Other.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 0.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

Table with 3 columns: (a) Description of security or category, (b) Book value, (c) Method of valuation. Rows include (1) Financial derivatives, (2) Closely-held equity interests, (3) Other, and sub-rows (A) through (H).

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)

Part VIII Investments - Program Related.

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

Table with 3 columns: (a) Description of investment, (b) Book value, (c) Method of valuation. Rows (1) through (9).

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)

Part IX Other Assets.

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

Table with 2 columns: (a) Description, (b) Book value. Rows (1) through (9).

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

Part X Other Liabilities.

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

Table with 2 columns: (a) Description of liability, (b) Book value. Row 1 includes (1) Federal income taxes, and rows (2) through (9).

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include descriptions, sub-headers (2a-2d, 4a-4b), and totals (1, 2e, 3, 4c, 5).

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include descriptions, sub-headers (2a-2d, 4a-4b), and totals (1, 2e, 3, 4c, 5).

Part XIII Supplemental Information.

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, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

N/A

PART XI, LINE 4B - OTHER ADJUSTMENTS:

N/A

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2016

Open to Public
Inspection

Name of the organization

HUNTINGTON PARK CHAMBER OF COMMERCE

Employer identification number

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

EVENTS AND PROGRAMS.

FORM 990, PART VI, SECTION B, LINE 11B:

THE BOARD OF DIRECTORS REVIEWS THE FINANCIAL INFORMATION FOR FORM 990 ON A
MONTHLY BASIS BEFORE IT ACTUALLY GOES INTO THE FORM.

FORM 990, PART VI, SECTION B, LINE 15A:

COMPENSATION FOR THE KEY INDIVIDUAL IS DETERMINED BY THE BOARD OF DIRECTORS

FORM 990, PART VI, SECTION C, LINE 19:

THE BOARD CONSIDERS ALL REQUESTS FOR THE AVAILABILITY OF FINANCIAL
STATEMENTS TO THE PUBLIC AND DECIDES ON A CASE BY CASE BASIS. IF THERE ARE
ANY CONFLICTS OF INTEREST, THE BOARD HAS TO CONSIDERS EACH CONFLICTING
ISSUE AND MAKE CHOICES.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

ROUNDING

-1.

ATTACHMENT "E"

Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
 ▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the **2017** calendar year, or tax year beginning **2017**, and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C HUNTINGTON PARK CHAMBER OF COMMERCE 6725 SEVILLE AVE HUNTINGTON PARK, CA 90255	D Employer identification number [REDACTED] E Telephone number [REDACTED] G Gross receipts \$ 464,620.
F Name and address of principal officer: LETICIA MARTINEZ SAME AS C ABOVE		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
I Tax-exempt status: <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) (6) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶
J Website: ▶ HPCHAMBER.COM		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1921 M State of legal domicile: CA

Part I Summary

	1	Briefly describe the organization's mission or most significant activities: THE PROMOTION OF COMMUNITY GOODWILL THROUGH THE SPONSORSHIP AND PROMOTION OF COMMUNITY ORIENTED EVENTS AND PROGRAMS.	
Activities & Governance	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
	3	Number of voting members of the governing body (Part VI, line 1a)	3 19
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4 0
	5	Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5 3
	6	Total number of volunteers (estimate if necessary)	6 0
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a 0.
	7b	Net unrelated business taxable income from Form 990-T, line 34	7b 0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	15,178.
	9	Program service revenue (Part VIII, line 2g)	398,063.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	312.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	398,375. 464,620.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	4,500.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	36,622. 98,909.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	440,699. 351,905.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	477,321. 455,314.
Net Assets or Fund Balances	19	Revenue less expenses. Subtract line 18 from line 12	-78,946. 9,306.
	20	Total assets (Part X, line 16)	70,962. 14,575.
	21	Total liabilities (Part X, line 26)	70,676. 4,983.
	22	Net assets or fund balances. Subtract line 21 from line 20	286. 9,592.

Part II Signature Block

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 officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer LETICIA MARTINEZ Type or print name and title	Date EXECUTIVE DIRECTOR
------------------	---	----------------------------

Paid Preparer Use Only	Print/Type preparer's name KATHLEEN P. URQUIDEZ, CPA	Preparer's signature KATHLEEN P. URQUIDEZ, CPA	Date 1/15/19	Check <input type="checkbox"/> if self-employed	PTIN [REDACTED]
	Firm's name ▶ BEZICH, UROUIDEZ & SALAZAR, CPAS. INC.				Firm's EIN ▶ [REDACTED]
	Firm's address ▶ [REDACTED]				Phone no. [REDACTED]

May the IRS discuss this return with you? Yes No

Form **8879-EO**

**IRS e-file Signature Authorization
for an Exempt Organization**

OMB No. 1545-1878

For calendar year 2017, or fiscal year beginning _____, 2017, and ending _____, 20____

2017

Department of the Treasury
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**
▶ **Go to www.irs.gov/Form8879EO for the latest information.**

Name of exempt organization

Employer identification number

HUNTINGTON PARK CHAMBER OF COMMERCE

[Redacted]

Name and title of officer

LETICIA MARTINEZ

EXECUTIVE DIRECTOR

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1 a Form 990 check here	▶ <input checked="" type="checkbox"/>	b Total revenue , if any (Form 990, Part VIII, column (A), line 12)	1 b	<u>464,620.</u>
2 a Form 990-EZ check here	▶ <input type="checkbox"/>	b Total revenue , if any (Form 990-EZ, line 9)	2 b	
3 a Form 1120-POL check here	▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3 b	
4 a Form 990-PF check here	▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4 b	
5 a Form 8868 check here	▶ <input type="checkbox"/>	b Balance Due (Form 8868, line 3c)	5 b	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2017 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize BEZICH, URQUIDEZ & SALAZAR, CPAS to enter my PIN [Redacted] as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ _____ Date ▶ _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. [Redacted]
Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2017 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.**

ERO's signature ▶ KATHLEEN P. UROUIDEZ, CPA Date ▶ _____

**ERO Must Retain This Form – See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So**

BAA For Paperwork Reduction Act Notice, see instructions.

Form **8879-EO** (2017)

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III. []

1 Briefly describe the organization's mission:

THE PROMOTION OF COMMUNITY GOODWILL THROUGH THE SPONSORSHIP AND PROMOTION OF COMMUNITY ORIENTED EVENTS AND PROGRAMS.

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 [X] 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 [X] No

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations 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 \$ including grants of \$) (Revenue \$)

THE ORGANIZATION IS A CHAMBER OF COMMERCE FOR THE CITY OF HUNTINGTON PARK FOR THE PURPOSE OF PROMOTING THE AFFAIRS OF THE CITY.

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

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If 'Yes,' complete Schedule H.</i>		X
b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If 'Yes,' complete Schedule I, Parts I and II.</i>		X
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If 'Yes,' complete Schedule I, Parts I and III.</i>		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? <i>If 'Yes,' complete Schedule J.</i>		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? <i>If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25a.</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If 'Yes,' complete Schedule L, Part I.</i>		
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? <i>If 'Yes,' complete Schedule L, Part I.</i>		
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If 'Yes,' complete Schedule L, Part II.</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part III.</i>		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? <i>If 'Yes,' complete Schedule L, Part IV.</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV.</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If 'Yes,' complete Schedule L, Part IV.</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M.</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M.</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I.</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete Schedule N, Part II.</i>		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? <i>If 'Yes,' complete Schedule R, Part I.</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1.</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes,' complete Schedule R, Part V, line 2.</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2.</i>		
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? <i>If 'Yes,' complete Schedule R, Part VI.</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

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.

Check if Schedule O contains a response or note to any line in this Part VI. X

Section A. Governing Body and Management

		Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 19		
1 b	Enter the number of voting members included in line 1a, above, who are independent.		
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 governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7 a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
7 b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8 a	The governing body?	X	
8 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.)

		Yes	No
10 a	Did the organization have local chapters, branches, or affiliates?		X
10 b	If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11 a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
12 a	Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O		
12 a	Did the organization have a written conflict of interest policy? If 'No,' go to line 13.		X
12 b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
12 c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done.		
13	Did the organization have a written whistleblower policy?		X
14	Did 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?		
15 a	The organization's CEO, Executive Director, or top management official. SEE SCHEDULE O	X	
15 b	Other officers or key employees of the organization. If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).		X
16 a	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
16 b	If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **CA**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. **SEE SCHEDULE O**
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records: **LETICIA MARTINEZ 6725 SEVILLE AVE HUNTINGTON PARK CA 90255**

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

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

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

1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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 neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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 trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) THERESA BAGUES DIRECTOR	1 0	X					0.	0.	0.	
(2) DENISE CAMPOS DIRECTOR	1 0	X					0.	0.	0.	
(3) ALFREDO FUENTES DIRECTOR	1 0	X					0.	0.	0.	
(4) ADRIAN GARCIA DIRECTOR	1 0	X					0.	0.	0.	
(5) SALVADOR GARCIA DIRECTOR	1 0	X					0.	0.	0.	
(6) RAMON GONZALEZ DIRECTOR	1 0	X					0.	0.	0.	
(7) LEWIS KIM DIRECTOR	1 0	X					0.	0.	0.	
(8) LEONARDO LOPEZ, JR. DIRECTOR	1 0	X					0.	0.	0.	
(9) JOE MARTINEZ DIRECTOR	1 0	X					0.	0.	0.	
(10) NOEL PALLAIS DIRECTOR	1 0	X					0.	0.	0.	
(11) VICTOR PERAZA DIRECTOR	1 0	X					0.	0.	0.	
(12) PATRICIA RIVES DIRECTOR	1 0	X					0.	0.	0.	
(13) ANDY MOLINA PRESIDENT	1 0			X			0.	0.	0.	
(14) JOSE ZEPEDA, JR. SR. VICE PRES	1 0			X			0.	0.	0.	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(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 trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(15) MARTIN NAVA 1ST VICE PRES	1 0			X			0.	0.	0.
(16) SONIA LUZ 2ND VICE PRES	1 0			X			0.	0.	0.
(17) GILDA ACOSTA 3RD VICE PRES	1 0			X			0.	0.	0.
(18) DON BRABANT TREASURER	1 0			X			0.	0.	0.
(19) LETICIA MARTINEZ EXECUTIVE DIR.	40 0			X			60,375.	0.	0.
(20)									
(21)									
(22)									
(23)									
(24)									
(25)									
1 b Sub-total							60,375.	0.	0.
c Total from continuation sheets to Part VII, Section A							0.	0.	0.
d Total (add lines 1b and 1c)							60,375.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If 'Yes,' complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If 'Yes,' complete Schedule J for such individual</i>		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If 'Yes,' complete Schedule J for such person</i>		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1 a				
	b Membership dues	1 b 15,178.				
	c Fundraising events	1 c				
	d Related organizations	1 d				
	e Government grants (contributions)	1 e				
	f All other contributions, gifts, grants, and similar amounts not included above	1 f				
	g Noncash contributions included in lines 1a-1f: \$					
	h Total. Add lines 1a-1f.		15,178.			
Program Service Revenue	2 a <u>CARNIVAL PRIMAVERA</u>	Business Code	228,001.	228,001.		
	b <u>SABOR DE MEXICO</u>		206,115.	206,115.		
	c <u>GOLF TOURNAMENT</u>		7,480.	7,480.		
	d <u>INSTALLATION DINNER</u>		5,845.	5,845.		
	e <u>STATE OF CITY ADDRESS</u>		1,000.	1,000.		
	f All other program service revenue		1,001.	1,001.		
	g Total. Add lines 2a-2f.		449,442.			
	Other Revenue	3 Investment income (including dividends, interest and other similar amounts)				
4 Income from investment of tax-exempt bond proceeds						
5 Royalties						
6 a Gross rents		(i) Real				
		(ii) Personal				
		b Less: rental expenses				
		c Rental income or (loss)				
d Net rental income or (loss)						
7 a Gross amount from sales of assets other than inventory		(i) Securities				
		(ii) Other				
		b Less: cost or other basis and sales expenses				
		c Gain or (loss)				
d Net gain or (loss)						
8 a 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					
9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities					
10 a 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	11 a	Business Code				
	b					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d.					
	12 Total revenue. See instructions.		464,620.	449,442.	0.	0.

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).

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

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 domestic organizations and domestic governments. See Part IV, line 21.				
2 Grants and other assistance to domestic individuals. See Part IV, line 22.	4,500.			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	60,375.			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0.			
7 Other salaries and wages.	20,708.			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).				
9 Other employee benefits.	10,784.			
10 Payroll taxes.	7,042.			
11 Fees for services (non-employees):				
a Management.				
b Legal.				
c Accounting.				
d Lobbying.				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion.				
13 Office expenses.	14,181.			
14 Information technology.				
15 Royalties.				
16 Occupancy.	23,300.			
17 Travel.	6,419.			
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.				
23 Insurance.				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <u>PROGRAM EXPENSE</u>	283,516.			
b <u>PAYROLL FEES</u>	4,814.			
c <u>POSTAGE AND SHIPPING</u>	4,296.			
d <u>TELEPHONE AND INTERNET</u>	4,266.			
e All other expenses.	11,113.			
25 Total functional expenses. Add lines 1 through 24e.	455,314.			
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1	Cash -- non-interest-bearing	37,677.	1	616.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	31,485.	4	13,959.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). 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	1,800.	9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D		10a	
	b	Less: accumulated depreciation		10b	10c
	11	Investments -- publicly traded securities		11	
	12	Investments -- other securities. See Part IV, line 11		12	
	13	Investments -- program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	70,962.	16	14,575.	
Liabilities	17	Accounts payable and accrued expenses	70,676.	17	4,983.
	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	Loans and other 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 (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25		
26	Total liabilities. Add lines 17 through 25	70,676.	26	4,983.	
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	-56,285.	27	-46,979.
	28	Temporarily restricted net assets	56,571.	28	56,571.
	29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), 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.	286.	33	9,592.	
34	Total liabilities and net assets/fund balances.	70,962.	34	14,575.	

BAA

Form 990 (2017)

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	464,620.
2	Total expenses (must equal Part IX, column (A), line 25)	2	455,314.
3	Revenue less expenses. Subtract line 2 from line 1	3	9,306.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	286.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	9,592.

Part XII Financial Statements and Reporting

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

		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
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?		X
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
c	If 'Yes' to line 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.			
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.		

BAA

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

Open to Public
Inspection

Name of the organization

HUNTINGTON PARK CHAMBER OF COMMERCE

Employer identification number

[REDACTED]

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

THE BOARD OF DIRECTORS REVIEWS THE FINANCIAL INFORMATION FOR FORM 990 ON A MONTHLY BASIS BEFORE IT ACTUALLY GOES INTO THE FORM.

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT

COMPENSATION FOR THE KEY INDIVIDUAL IS DETERMINED BY THE BOARD OF DIRECTORS.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

THE BOARD CONSIDERS ALL REQUESTS FOR THE AVAILABILITY OF FINANCIAL STATEMENTS TO THE PUBLIC AND DECIDES ON A CASE BY CASE BASIS. IF THERE ARE ANY CONFLICTS OF INTEREST, THE BOARD CONSIDERS EACH CONFLICTING ISSUE AND MAKE CHOICES.

ATTACHMENT "F"

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ January 1, 2017 - January 31, 2017 ■ Page 1 of 4



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

Questions?

Available by phone 24 hours a day, 7 days a week:
Telecommunications Relay Services calls accepted

1-800-CALL-WELLS (1-800-225-5935)

TTY: 1-800-877-4833

En español: 1-877-337-7454

Online: wellsfargo.com/biz

Write: Wells Fargo Bank, N.A. (114)
P.O. Box 6995
Portland, OR 97228-6995

Your Business and Wells Fargo

Visit wellsfargoworks.com to explore videos, articles, infographics, interactive tools, and other resources on the topics of business growth, credit, cash flow management, business planning, technology, marketing, and more.

Account options

A check mark in the box indicates you have these convenient services with your account(s). Go to wellsfargo.com/biz or call the number above if you have questions or if you would like to add new services.

Business Online Banking	<input checked="" type="checkbox"/>
Online Statements	<input checked="" type="checkbox"/>
Business Bill Pay	<input checked="" type="checkbox"/>
Business Spending Report	<input checked="" type="checkbox"/>
Overdraft Protection	<input type="checkbox"/>

Activity summary

Beginning balance on 1/1	\$38,006.06
Deposits/Credits	6,886.00
Withdrawals/Debits	- 7,310.07
Ending balance on 1/31	\$37,581.99
Average ledger balance this period	\$36,565.35

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ February 1, 2017 - February 28, 2017 ■ Page 1 of 4



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

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Business Online Banking
Online Statements
Business Bill Pay
Business Spending Report
Overdraft Protection

Activity summary

Beginning balance on 2/1	\$37,581.99
Deposits/Credits	29,610.10
Withdrawals/Debits	- 42,842.09
Ending balance on 2/28	\$24,350.00
Average ledger balance this period	\$8,156.32

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ March 1, 2017 - March 31, 2017 ■ Page 1 of 6



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803



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Business Online Banking
Online Statements
Business Bill Pay
Business Spending Report
Overdraft Protection

Activity summary

Beginning balance on 3/1	\$24,350.00
Deposits/Credits	23,060.40
Withdrawals/Debits	- 36,408.18
Ending balance on 3/31	\$11,002.22

Average ledger balance this period \$11,598.51

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ April 1, 2017 - April 30, 2017 ■ Page 1 of 5



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

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Business Online Banking	<input checked="" type="checkbox"/>
Online Statements	<input checked="" type="checkbox"/>
Business Bill Pay	<input checked="" type="checkbox"/>
Business Spending Report	<input checked="" type="checkbox"/>
Overdraft Protection	<input type="checkbox"/>

Activity summary

Beginning balance on 4/1	\$11,002.22
Deposits/Credits	167,095.00
Withdrawals/Debits	- 101,963.87
Ending balance on 4/30	\$76,133.35
Average ledger balance this period	\$68,290.25

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ May 1, 2017 - May 31, 2017 ■ Page 1 of 5



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

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Business Online Banking
Online Statements
Business Bill Pay
Business Spending Report
Overdraft Protection

Activity summary

Beginning balance on 5/1	\$76,133.35
Deposits/Credits	10,502.00
Withdrawals/Debits	- 55,381.10
Ending balance on 5/31	\$31,254.25

Average ledger balance this period \$41,741.30

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ June 1, 2017 - June 30, 2017 ■ Page 1 of 5



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

Questions?

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Business Online Banking	<input checked="" type="checkbox"/>
Online Statements	<input checked="" type="checkbox"/>
Business Bill Pay	<input checked="" type="checkbox"/>
Business Spending Report	<input checked="" type="checkbox"/>
Overdraft Protection	<input type="checkbox"/>

Activity summary

Beginning balance on 6/1	\$31,254.25
Deposits/Credits	9,357.21
Withdrawals/Debits	- 17,480.77
Ending balance on 6/30	\$23,130.69
Average ledger balance this period	\$28,047.74

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ July 1, 2017 - July 31, 2017 ■ Page 1 of 5



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

Questions?

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Business Online Banking	<input checked="" type="checkbox"/>
Online Statements	<input checked="" type="checkbox"/>
Business Bill Pay	<input checked="" type="checkbox"/>
Business Spending Report	<input checked="" type="checkbox"/>
Overdraft Protection	<input type="checkbox"/>

Other Wells Fargo Benefits

Apply for a Commercial Equity Line of Credit and enjoy a low rate of Prime + 0% on your balance through December 31, 2018

Whether you are planning to make property improvements, expand your business, or purchase either property or large equipment, we want to help you with your financing. Small business owners and real estate investors can get up to \$500,000 in commercial real estate financing that starts as a 5-year, Prime-based revolving equity line after which the balance converts to an adjustable 15-year amortized loan for a total term of 20 years.

Key benefits of our real estate secured financing:

- No application fee, and no appraisal fee
- Low 1% origination fee due at closing

To learn more, or apply for this great offer, please call: 1-866-416-4320, Monday - Friday, 8:00 a.m. to 5:00 p.m. Pacific Time.

Note: All financing is subject to credit approval. Some restrictions may apply.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ August 1, 2017 - August 31, 2017 ■ Page 1 of 5



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

Questions?

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Account options

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Business Online Banking	<input checked="" type="checkbox"/>
Online Statements	<input checked="" type="checkbox"/>
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Business Spending Report	<input checked="" type="checkbox"/>
Overdraft Protection	<input type="checkbox"/>

Other Wells Fargo Benefits

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Note: All financing is subject to credit approval. Some restrictions may apply.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ September 1, 2017 - September 30, 2017 ■ Page 1 of 5



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

Questions?

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Business Online Banking	<input checked="" type="checkbox"/>
Online Statements	<input checked="" type="checkbox"/>
Business Bill Pay	<input checked="" type="checkbox"/>
Business Spending Report	<input checked="" type="checkbox"/>
Overdraft Protection	<input type="checkbox"/>

Activity summary

Beginning balance on 9/1	\$5,103.38
Deposits/Credits	30,754.00
Withdrawals/Debits	- 14,710.40
Ending balance on 9/30	\$21,146.98
Average ledger balance this period	\$8,671.59

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ October 1, 2017 - October 31, 2017 ■ Page 1 of 5



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

Questions?

Available by phone 24 hours a day, 7 days a week:
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Business Online Banking
Online Statements
Business Bill Pay
Business Spending Report
Overdraft Protection

Activity summary

Beginning balance on 10/1	\$21,146.98
Deposits/Credits	158,109.68
Withdrawals/Debits	- 103,992.10
Ending balance on 10/31	\$75,264.56
Average ledger balance this period	\$64,833.85

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ November 1, 2017 - November 30, 2017 ■ Page 1 of 5



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

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- | | |
|--------------------------|-------------------------------------|
| Business Online Banking | <input checked="" type="checkbox"/> |
| Online Statements | <input checked="" type="checkbox"/> |
| Business Bill Pay | <input checked="" type="checkbox"/> |
| Business Spending Report | <input checked="" type="checkbox"/> |
| Overdraft Protection | <input type="checkbox"/> |

Activity summary

Beginning balance on 11/1	\$75,264.56
Deposits/Credits	5,920.00
Withdrawals/Debits	- 65,601.06
Ending balance on 11/30	\$15,583.50
Average ledger balance this period	\$42,954.31

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ December 1, 2017 - December 31, 2017 ■ Page 1 of 4



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HUNTINGTON PARK CA 90255-4803

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- Business Online Banking
- Online Statements
- Business Bill Pay
- Business Spending Report
- Overdraft Protection

Activity summary

Beginning balance on 12/1	\$15,583.50
Deposits/Credits	4,315.00
Withdrawals/Debits	- 18,171.24
Ending balance on 12/31	\$1,727.26
Average ledger balance this period	\$8,132.68

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

ATTACHMENT "G"

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ January 1, 2018 - January 31, 2018 ■ Page 1 of 4

WELLS
FARGO

THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

Questions?

Available by phone 24 hours a day, 7 days a week:
Telecommunications Relay Services calls accepted

1-800-CALL-WELLS (1-800-225-5935)

TTY: 1-800-877-4833

En español: 1-877-337-7454

Online: wellsfargo.com/biz

Write: Wells Fargo Bank, N.A. (114)
P.O. Box 6995
Portland, OR 97228-6995

Your Business and Wells Fargo

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Account options

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Business Online Banking
Online Statements
Business Bill Pay
Business Spending Report
Overdraft Protection

Activity summary

Beginning balance on 1/1	\$1,727.26
Deposits/Credits	16,665.00
Withdrawals/Debits	- 6,439.71
Ending balance on 1/31	\$11,952.55
Average ledger balance this period	\$4,098.47

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ February 1, 2018 - February 28, 2018 ■ Page 1 of 5



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

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- Business Spending Report
- Overdraft Protection

Activity summary

Beginning balance on 2/1	\$11,952.55
Deposits/Credits	23,797.39
Withdrawals/Debits	- 25,642.54
Ending balance on 2/28	\$10,107.40
Average ledger balance this period	\$7,740.55

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ March 1, 2018 - March 31, 2018 ■ Page 1 of 5



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6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

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- Online Statements
- Business Bill Pay
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- Overdraft Protection

Activity summary

Beginning balance on 3/1	\$10,107.40
Deposits/Credits	38,912.20
Withdrawals/Debits	- 31,956.96
Ending balance on 3/31	\$17,062.64

Average ledger balance this period \$9,721.27

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

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Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ April 1, 2018 - April 30, 2018 ■ Page 1 of 6



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HUNTINGTON PARK CA 90255-4803

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Business Online Banking
Online Statements
Business Bill Pay
Business Spending Report
Overdraft Protection

Activity summary

Beginning balance on 4/1	\$17,062.64
Deposits/Credits	159,892.59
Withdrawals/Debits	- 94,209.06
Ending balance on 4/30	\$82,746.17
Average ledger balance this period	\$72,645.30

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

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Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ May 1, 2018 - May 31, 2018 ■ Page 1 of 4



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- Online Statements
- Business Bill Pay
- Business Spending Report
- Overdraft Protection

Activity summary

Beginning balance on 5/1	\$82,746.17
Deposits/Credits	1,750.00
Withdrawals/Debits	- 60,624.88
Ending balance on 5/31	\$23,871.29
Average ledger balance this period	\$43,360.92

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ June 1, 2018 - June 30, 2018 ■ Page 1 of 5



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6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

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- Overdraft Protection

Activity summary

Beginning balance on 6/1	\$23,871.29
Deposits/Credits	7,225.00
Withdrawals/Debits	- 19,857.77
Ending balance on 6/30	\$11,238.52
Average ledger balance this period	\$19,602.30

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

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Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ July 1, 2018 - July 31, 2018 ■ Page 1 of 4



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Business Online Banking
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Business Bill Pay
Business Spending Report
Overdraft Protection

Activity summary

Beginning balance on 7/1	\$11,238.52
Deposits/Credits	14,816.96
Withdrawals/Debits	- 12,669.83
Ending balance on 7/31	\$13,385.65
Average ledger balance this period	\$10,514.12

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

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Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ August 1, 2018 - August 31, 2018 ■ Page 1 of 5



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- Overdraft Protection

Account number: [REDACTED] ■ August 1, 2018 - August 31, 2018 ■ Page 2 of 5



was used when the transaction was sent for authorization and we are unable to match them. In those cases, you may be charged an overdraft fee if the transaction is paid into overdraft.

In addition, in the "Available balance, posting order, and overdrafts" section of the Deposit Account Agreement under the heading "IMPORTANT INFORMATION ABOUT FEES," we added the following:

We track transactions that reduced your available balance while pending and caused overdraft fees on other transactions. If these transactions are presented for payment within 10 business days after they first appeared as pending, we will waive any overdraft fees on those transactions. In rare circumstances, the merchant presents transactions for payment with a different identification code than was used when the transaction was sent for authorization and we are unable to match them.

Activity summary

Beginning balance on 8/1	\$13,385.65
Deposits/Credits	14,479.00
Withdrawals/Debits	- 25,288.92
Ending balance on 8/31	\$2,575.73
Average ledger balance this period	\$8,249.00

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ September 1, 2018 - September 30, 2018 ■ Page 1 of 5



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

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Activity summary

Beginning balance on 9/1	\$2,575.73
Deposits/Credits	41,790.00
Withdrawals/Debits	- 29,308.89
Ending balance on 9/30	\$15,056.84
Average ledger balance this period	\$17,483.72

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

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Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ October 1, 2018 - October 31, 2018 ■ Page 1 of 5



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

Questions?

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- Business Bill Pay
- Business Spending Report
- Overdraft Protection

Activity summary

Beginning balance on 10/1	\$15,056.84
Deposits/Credits	147,841.00
Withdrawals/Debits	- 114,041.40
Ending balance on 10/31	\$48,856.44

Average ledger balance this period \$51,894.61

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

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Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ November 1, 2018 - November 30, 2018 ■ Page 1 of 4



THE GREATER HUNTINGTON PARK AREA
6725 SEVILLE AVE
HUNTINGTON PARK CA 90255-4803

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Activity summary

Beginning balance on 11/1	\$48,856.44
Deposits/Credits	2,190.00
Withdrawals/Debits	- 38,207.61
Ending balance on 11/30	\$12,838.83

Average ledger balance this period \$28,992.28

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

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Wells Fargo Business Choice Checking

Account number: [REDACTED] ■ December 1, 2018 - December 31, 2018 ■ Page 1 of 5



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HUNTINGTON PARK CA 90255-4803

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- Business Spending Report
- Overdraft Protection

Activity summary

Beginning balance on 12/1	\$12,838.83
Deposits/Credits	3,536.62
Withdrawals/Debits	- 13,435.42
Ending balance on 12/31	\$2,940.03
Average ledger balance this period	\$7,130.68

Account number: [REDACTED]

THE GREATER HUNTINGTON PARK AREA

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

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CITY OF HUNTINGTON PARK

Public Works Department
City Council Agenda Report

March 19, 2019

Honorable Mayor and Members of the City Council
City of Huntington Park
6550 Miles Avenue
Huntington Park, CA 90255

Dear Mayor and Members of the City Council:

CONSIDERATION AND APPROVAL OF PURCHASE ORDER (PO) FOR SIX REMOTE TERMINAL UNITS (RTUs) FOR SIX WELL LOCATIONS

IT IS RECOMMENDED THAT THE CITY COUNCIL:

1. Approve purchase of six (6) RTUs in the amount of \$118,882.50 in account 681-8030-461.43-30; and
2. Authorize City Manager to approve the encumbrance request.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

In 2014 and 2015, the City had to replace two Remote Terminal Units (RTUs) located at Well Site #14 and Well Site #15 due to failure of aged equipment. This equipment was deemed obsolete and it was necessary upgrade both units.

In August 2017, the main office SCADA computer system failed. The failure inhibited the ability of water operations to remotely operate the water system via SCADA control. Fortunately, Emerson was able to fabricate a skeleton system which enabled basic one way communication to occur while the new equipment was on order. As a result, Water Operations staff were forced to operate the system on a limited basis until the SCADA computer hardware and software configurations were completed four months later. The new equipment/software at the main office was migrated and configured to work with the new and old RTUs at the eight remote Well sites. Due to budget constraints it was determined to forestall replacement of the six remaining obsolete units and phase the replacement of these remaining RTUs.

As proposed, each of the six upgraded RTUs will be custom fabricated with the same footprint and mounting arrangement as the old units. Control logic from each location will be migrated to each new unit. This will ensure seamless installation and will bring the entire SCADA system up to current industry standards.

CONSIDERATION AND APPROVAL OF PURCHASE ORDER (PO) FOR SIX REMOTE TERMINAL UNITS (RTUs) FOR SIX WELL LOCATIONS

March 19, 2019

Page 2 of 2

The lump sum pricing includes a \$16,619.25 discount due to engineering efficiency, materials cost savings and streamed lined mobilization. Equipment compatibility, software migration and installation support services, in addition to cost savings, justify the decision to approve the proposal.

Inframark was directed to obtain the quote from our SCADA System provider. The direction is consistent with our agreement between the City and Inframark. The total cost of the RTUs (\$98,250 + tax) include Inframark’s 10% markup to facilitate the procurement and management of installation which may include trouble shooting.

Vendor	Description	Total Cost
Emerson	6 RTUs	\$108,075.00
Inframark	Procurement and Installation Management	\$10,807.50
	Total	\$118,882.50

FISCAL IMPACT/FINANCING

Funding for infrastructure improvements were approved in the City’s FY 2018-19 Adopted Budget for \$300,000 in account number 681-8030-461-43-30, Water Department Fund, Infrastructure Maintenance. No budget appropriations are needed at this time.

CONCLUSION

Upon Council approval, staff will proceed with the recommended actions.

Respectfully submitted,



RICARDO REYES
City Manager



DANIEL HERNANDEZ
Director of Public Works

ATTACHMENT(S)

A. Quote

ATTACHMENT "A"



Emerson
Power & Water Solutions, Inc.
200 Beta Drive
Pittsburgh, PA 15238

January 7, 2019

Inframark
900 Bissell Street
Huntington Park, CA 90255

Attention: Joanna Rodarte

Subject: Huntington Park RTU upgrades – Sum lump price
Emerson Process Management Power & Water Solutions, Inc.
Offer No. WAS-AM-19DM0917

Dear Ms. Rodarte,

Emerson Process Management Power & Water Solutions, Inc. part of the Emerson Automation Solutions family of business units (Emerson), is pleased to submit this offer to Inframark for RTU upgrades at the City of Huntington Park. This offer consists of the contents of this letter (including Term & Conditions attachments) and any reference made herein.

This offer is constructed as a lump sum price assuming that Inframark orders the six RTU's in a single order. When ordering all RTU's together, Emerson can deliver the District significant savings due to engineering efficiency, materials costs savings and streamlined mobilization efforts. This is the recommended option if the District budget allows.

Thank you for the opportunity to submit this offer. Should you have any questions or require additional information, please feel free to contact Mike Yamrus at 732-682-0502, or me at (412) 963-4202.

Sincerely,

Diego Mora | Mike Yamrus

Proposal Specialist / Account Executive
Emerson Automation Solutions
Power & Water Solutions, Inc.

Attachments: Commercial Description
Terms and Conditions of Sale Form B (01 08)

Scope of Work

Emerson will provide new ControlWave Micro RTU hardware to update the City's sites that are currently operating with obsolete RTU hardware. The existing RTU control logic at those locations will be migrated, loaded into the new RTU hardware, and tested prior to shipment and installation. The new RTU assemblies will each be designed and custom fabricated with the same footprint and mounting arrangement as the old RTU hardware. This will allow each new RTU installation to occur quickly and with relative ease.

The new RTU's will communicate in the same manner and protocol as the old RTU's. Thus, each new RTU will appear the same as each respective old RTU to the SCADA system. The intent is to furnish the City remote sites with up-to-date technology, and to make this transition as seamlessly as possible.

Note that two of the City's sites, Cottage Station and Randolph & Bissell, have already been previously migrated to the latest RTU hardware. These two sites will remain in operation as-is.

Emerson will coordinate with Inframark to arrive at a mutually agreeable installation plan to minimize disruption of operations. Emerson will replace the existing RTU hardware at each of the required sites with new ControlWave-Micro panel assemblies. The existing radio equipment and RTU cabinets will be maintained. Following each replacement, the SCADA computer configuration will be revised and updated as needed. Each respective site will then be tested to ensure proper automatic operation.

The following services are going to be provided as part of this effort:

- Project Management
- Procurement
- Panel Design
- Loop Drawings
- Programming/Conversion of existing control logic programs
- Factory testing
- Field Start Up Installation and Test
- Revision of network configuration and signal tag database in the SCADA HMI computer

Bill of Material

Santa Ana & Salt Lake - Well 12 [SAN]

- (1) *ControlWave Micro Retrofit Panel assembly*
 - (1) 3330 6-Slot Retrofit Panel
 - DC Distribution Strip
 - (1) CW Micro 8-Slot Chassis
 - (1) CW Micro 12-24V System Controller
 - (1) CW Micro CPU, 1-Ethernet, 2-RS232, 1-RS485 Ports
 - (1) CW Micro I/O module w/ Remote Term. Blocks, with Fuses - 16 DI, Isolated, with LEDs
 - (1) CW Micro I/O module w/ Remote Term. Blocks, with Fuses - 8 AI, Isolated, 1-5 V or 4-20 mA
 - (1) CW Micro I/O module w/ Remote Term. Blocks, with 6A Relay - 16 DO, 5A Open Source, with LEDs
 - (1) Serial cable adapter – 15 position (for reconnection to existing radio equipment)

Florence & Salt Lake - Well 16 [FLOR]

- (1) *ControlWave Micro Retrofit Panel assembly*
 - (1) 3330 6-Slot Retrofit Panel
 - DC Distribution Strip
 - (1) CW Micro 8-Slot Chassis
 - (1) CW Micro 12-24V System Controller
 - (1) CW Micro CPU, 1-Ethernet, 2-RS232, 1-RS485 Ports

- (1) CW Micro I/O module w/ Remote Term. Blocks, with Fuses - 16 DI, Isolated, with LEDs
- (1) CW Micro I/O module w/ Remote Term. Blocks, with Fuses - 8 AI, Isolated, 1-5 V or 4-20 mA
- (1) CW Micro I/O module w/ Remote Term. Blocks, with 6A Relay - 16 DO, 5A Open Source, with LEDs
- (1) Serial cable adapter – 15 position (for reconnection to existing radio equipment)

Miles & Slauson - Well 17 [MLSN]

- (1) *ControlWave Micro Retrofit Panel assembly*
 - (1) 3330 6-Slot Retrofit Panel
 - DC Distribution Strip
 - (1) CW Micro 8-Slot Chassis
 - (1) CW Micro 12-24V System Controller
 - (1) CW Micro CPU, 1-Ethernet, 2-RS232, 1-RS485 Ports
 - (1) CW Micro I/O module w/ Remote Term. Blocks, with Fuses - 16 DI, Isolated, with LEDs
 - (1) CW Micro I/O module w/ Remote Term. Blocks, with Fuses - 8 AI, Isolated, 1-5 V or 4-20 mA
 - (1) CW Micro I/O module w/ Remote Term. Blocks, with Fuses - 4 AO, Isolated, 1-5 V or 4-20 mA
 - (1) CW Micro I/O module w/ Remote Term. Blocks, with 6A Relay - 16 DO, 5A Open Source, with LEDs
 - (1) Serial cable adapter – 15 position (for reconnection to existing radio equipment)

Bear Avenue Plant [BEAR]

- (1) *ControlWave Micro Retrofit Panel assembly*
 - (1) 3330 6-Slot Retrofit Panel
 - DC Distribution Strip
 - (1) CW Micro 8-Slot Chassis
 - (1) CW Micro 12-24V System Controller
 - (1) CW Micro CPU, 1-Ethernet, 2-RS232, 1-RS485 Ports
 - (1) CW Micro I/O module w/ Remote Term. Blocks, with Fuses - 16 DI, Isolated, with LEDs
 - (1) CW Micro I/O module w/ Remote Term. Blocks, with Fuses - 8 AI, Isolated, 1-5 V or 4-20 mA
 - (1) CW Micro I/O module w/ Remote Term. Blocks, with 6A Relay - 16 DO, 5A Open Source, with LEDs
 - (1) Serial cable adapter – 15 position (for reconnection to existing radio equipment)

Data Concentrator - Well 18 [HPDC]

- (1) *ControlWave Micro RTU Retrofit Panel assembly*
 - (1) 3330 12-Slot Retrofit Panel
 - DC Distribution Strip
 - (1) CW Micro 8-Slot Chassis
 - (1) CW Micro 12-24V System Controller
 - (1) CW Micro CPU, 1-Ethernet, 2-RS232, 1-RS485 Ports
 - (1) 4-port Comm Expansion Module - 2-RS232, 2-RS485
 - (1) CW Micro I/O module w/ Remote Term. Blocks, with Fuses - 16 DI, Isolated, with LEDs
 - (1) CW Micro I/O module w/ Remote Term. Blocks, with 6A Relay - 16 DO, 5A Open Source, with LEDs
 - (1) Serial cable adapter – 15 position (for reconnection to existing radio equipment)
 - (1) Serial cable adapter – 9 position (for reconnection to existing SCADA PC)
 - (1) Ethernet switch, 5 ports with Ethernet patch cable
 - (1) CW Configuration cable (for supporting maintenance on the new RTU's)

MWD [MWD]

- (1) *ControlWave Micro RTU Retrofit Panel assembly*
 - (1) 3330 6-Slot Retrofit Panel
 - DC Distribution Strip
 - (1) CW Micro 8-Slot Chassis
 - (1) CW Micro 12-24V System Controller
 - (1) CW Micro CPU, 1-Ethernet, 2-RS232, 1-RS485 Ports
 - (1) CW Micro I/O module w/ Remote Term. Blocks, with Fuses - 16 DI, Isolated, with LEDs
 - (1) CW Micro I/O module w/ Remote Term. Blocks, with Fuses - 8 AI, Isolated, 1-5 V or 4-20 mA
 - (1) CW Micro I/O module w/ Remote Term. Blocks, with 6A Relay - 16 DO, 5A Open Source, with LEDs
 - (1) Serial cable adapter – 9 position (for reconnection to existing radio equipment)

General Clarifications and Exclusions

A. Materials not included:

- Any wire or cable (power, fiber optic, patch cables, signal, communications, grounding or other), conduit, junction boxes, and/or other material and hardware pertaining to the installation of equipment, including but not limited to, ground wires, ground lugs, ground rods, wire labels, wire lugs and/or connectors.
- Any mounting, fastening and support hardware and materials (such as nuts, bolts, washers, unistrut, channels, antenna mounting hardware, cable hanging kits, etc.), custom installation hardware, special brackets and U-bolts/V-bolts, lightning rods, antenna towers, poles, and masts of any kind, mounting stands, pipe stands, etc. for instruments and/or other equipment, and concrete bases that may be required to mount panels, instruments and/or other equipment unless otherwise indicated in this proposal.
- Except for the materials and services specifically defined in Emerson's bill of material, all materials and services are excluded from Emerson's scope of supply.

B. Services

- Emerson's scope is exclusive of any interdisciplinary site coordination for all scheduling and planning of site activities as well as third party material and services scope related RFI resolution.
- Services as part of this proposal are to be provided during normal business hours (8:00 AM to 5:00 PM Monday through Friday Holidays Excluded).
- All physical installation and electrical installation (including but not limited to moving, mounting and fastening of equipment, signal wiring and terminations, communication wiring and terminations, power wiring and terminations, and ground wiring and terminations), will be by others unless otherwise indicated herein.
- Field support schedule is subject to availability of field resources. Project schedule will be as mutually agreed.

C. Others

- Power and signal wiring and grounding of all equipment supplied hereunder must be completed in full accordance with the manufacturer's requirements and in compliance with applicable specifications, codes standards, including but not limited to, NEC.
- Duties and taxes are excluded from Emerson's offer.
- Bonds, fees and licenses are not included in our offer.
- Emerson's warranty liability will not be extended due to failure by others to complete the designated work in a timely fashion.
- Start-up and operational testing services will require personnel to use services equipment such as hand tools, test equipment, etc. This will, in certain instances, involve removing wires from terminals to perform loop checkout, testing and calibration. In no circumstance will Emerson accept any responsibility for additional cost incurred by the use of union personnel as a result of jurisdictional labor requirements due to service personnel start-up activity on this project. Union fees and Union Labor are not included.
- All on site shipments, receiving, handling, safe storage and local transportation will be by others.
- Emerson's standard warranty, as defined in its standard terms and conditions, shall apply.

D. Ordering

- All Purchase Orders must clearly reference this offer along with its terms and conditions. Emerson's Storefront customer service will accept and process purchase orders for this offer, therefore if you would like to place an order, please send your purchase order document (PDF) to the following email address: PWS.WAS_Storefront@Emerson.com

Commercial Description

This document defines the commercial basis under which Emerson makes this offer to Inframark for RTU upgrades at the City of Huntington Park.

Terms and Conditions	This offer expressly limits acceptance to the terms of this offer including the terms and conditions set forth in the attached Emerson Process Management Terms & Conditions of Sale Form B (01 08) and Software Licensing Agreement, as included with this offer.
Pricing	<p>The price as offered is \$98,250.00 exclusive of applicable taxes.</p> <p><i>Taxes are not included in our offer, however all taxes will be applied when invoicing if applicable</i></p>
Warranty	The terms of the warranty are defined in the attached Terms and Conditions of Sale Form B.
Delivery	<p>Emerson will deliver the offered system based upon a mutually agreed delivery schedule.</p> <p>If, after the project has started, the customer requests a delay in delivery, installation, or acceptance testing of any of the products or services purchased under this offer, then Emerson reserves the right to invoice for payment for all goods and services provided to date, and close out the project. Upon Emerson's request, the customer will issue a new purchase order for any remaining scope of supply using the previously offered pricing.</p>
Terms of Payment	<p>Emerson Process Management would like to work with you in developing a mutually agreeable milestone payment schedule. A typical payment schedule is shown below.</p> <p>Invoices will be issued for each of the following deliverable line items with payment due Net 30 days from the date of the invoice. The amount of each invoice shall be calculated by applying the percentages (%) shown below against the total Purchase Order price including any changes.</p> <p>30% Upon Submittal Approval 60% Upon Delivery 10% Upon completion of start-up and customer acceptance (but in any event no later than 60 days after major product shipment)</p>
Bid Validity	This offer shall remain valid for ninety (90) days from the date of this letter, unless otherwise extended, modified, or withdrawn in writing by Emerson. The return of a purchase order acceptable to Emerson during such validity period will be sufficient to form an agreement based exclusively on the terms and conditions of this offer.
Proprietary and Confidential Information	This offer and any subsequent communications relative to this offer are considered to be proprietary and confidential information of Emerson. Accordingly, such proprietary and confidential information shall not be published, used, reproduced, transmitted, or disclosed to others outside your organization without prior written consent by Emerson.



CITY OF HUNTINGTON PARK

Public Works Department
City Council Agenda Report

March 19, 2019

Honorable Mayor and Members of the City Council
City of Huntington Park
6550 Miles Avenue
Huntington Park, CA 90255

Dear Mayor and Members of the City Council:

CONSIDERATION AND APPROVAL OF PAYMENT FOR EMERGENCY REPLACEMENT OF TRAFFIC SIGNAL CABINET AND COMPONENTS

IT IS RECOMMENDED THAT THE CITY COUNCIL:

1. Approve emergency expenditure in the amount of \$24,459.21 in account 221-8014-429.74-10; and
2. Authorize City Manager to execute the check request.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

On the morning of February 14, 2019 the City of Huntington Park was experiencing heavy rain and high winds. This weather may have caused the primary electrical wires to fall on the secondary electrical wires below at the intersection of Santa Fe Ave & Slauson Ave causing the wires to short-on-contact and break apart. This resulted in a power outage in the surrounding area.

The police department contacted the public works department to assist with closing streets and detour traffic from the incident location. Southern California Edison immediately contacted their subcontractor to replace the high-tension wires that were damaged by the weather conditions.

Staff evaluated the intersection and discovered that the surge conductors had damaged the signal indicators, the power supply, the load switches, the fuses, and the main cabinet at the intersection.

Staff contacted St. Francis Electric, our Traffic Signal Maintenance contractor, to assist with repairing the damages to the traffic signal equipment at the intersection. The high-tension wires shorting on contact destroyed the main cabinet at a total loss. Without replacement of a cabinet the traffic signal and railroad track lights at the intersection would not have been operational to warn drivers and presented a safety concern which is why staff felt it appropriate to proceed with the cabinet replacement.

CONSIDERATION AND APPROVAL OF PAYMENT FOR EMERGENCY REPLACEMENT OF TRAFFIC SIGNAL CABINET AND COMPONENTS

March 19, 2019

Page 2 of 2

St. Francis Electric replaced the (6) six burned out indicators and replaced the main cabinet with a brand new unit. They made sure all necessary steps were taken to get the normal operation up and running for all the signals in the intersection.

FISCAL IMPACT/FINANCING

Funding for Traffic Signal Maintenance was approved in the City's FY 2018-19 Adopted Budget for \$42,500 in account number 221-8014-429.74-10. Staff will also submit a claim to Southern California Edison to recoup some of damage cost associated with their high-tension wires falling.

CONCLUSION

Upon Council approval, staff will proceed with the recommended actions.

Respectfully submitted,



RICARDO REYES
City Manager



Daniel Hernandez
Director of Public Works

Attachment(s)

A. St. Francis Electric Invoice #1661057

ATTACHMENT "A"

CONTRACT BILLING

ST. FRANCIS ELECTRIC

BILL TO:

City of Huntington Park 6550 Miles Avenue Huntington Park, CA 90255

NO. 1661057**DATE** 2/28/2019**SFE JOB NO.** 16-610**CONT. JOB NO.** _____**P.O. NO.** _____**CUSTOMER NO.** _____**PROGRESS BILLING NO.** 3

PROJECT: *Huntington Park - TS Maintenance
February '19 Response Billing*

Slauson @ Santa Fe - Cabinet Spiked on 2/15/19. Work Completed on 2/20/19.

CONTRACT AMOUNT	\$	76,968.00	
CHANGE ORDERS	\$	-	
ITEMS W/O RETENTION	\$	-	
REVISED CONTRACT	\$	<u>76,968.00</u>	
AMOUNT BILLED TO DATE	\$	30,458.71	
BALANCE LEFT	\$	46,509.29	
LESS PREVIOUS BILLINGS	\$	(5,999.50)	
GROSS DUE THIS INVOICE	\$	<u>24,459.21</u>	
LESS RETENTION	\$	-	
NET DUE THIS INVOICE	\$	<u>24,459.21</u>	\$ 24,459.21

INVOICE

• P.O. BOX 2057 • SAN LEANDRO • CA • 94577
PHONE 510 639-0639 • FAX 510 639-4653

CITY OF HUNTINGTON PARK FEBRUARY 2019 RESPONSE BILLING REPORT
 SLAUSON @ SANTA FE
 BILLING ADDRESS:
 CITY OF HUNTINGTON PARK
 ATTN: PUBLIC WORKS DEPARTMENT
 6550 MILES AVENUE
 HUNTINGTON PARK, CA 90255

Site: Slauson Ave | Santa Fe Ave (10 records) \$24,459.21
Work Order Number: WO-00056050 (7 records) \$2,585.37

Technician	Problem	Quote Amount	Quote Date	Hours	Rate	Total
Mario Lopez	Jesus Sanchez	CABINET HIT BY SCE SURGE OF POWER. MOST OF THE LED LIGHTS ARE BURN'T OUT.	Traffic Signal	3	\$130.50	\$391.50
		FND: I/S BLACK OUT, CABINET REAR BADLY DAMAGE STRUCK BY VEH. A-TAKEN: PCR, REPLACED ALL RED LEDS, AND LEAVE THE I/S IN RED FLASH. CABINET TO BE REPLACED ON THE FOLLOWING MONDAY.	LED - 12" Red Arrow	2	\$95.16	\$190.32
			LED - 8" Red Ball	2	\$108.00	\$216.00
				1	\$165.39	\$165.39
				15	\$435.00	\$6525.00
				8	\$1,057.44	\$8459.52
				6	\$593.88	\$3563.28

Work Order Number: WO-00056102 (1 record) \$20,850.00

Technician	Problem	Quote Amount	Quote Date	Hours	Rate	Total
F/up Lance Alm	PCR SWAP OUT BURNT CABINET	Traffic Signal	2/19/2019 21:00	1	\$20,850.00	\$20,850.00
		PCR REMOVED DAMAGED 332 CABINET AND INSTALLED NEW 332 CABINET COMPLETE SUPPLIED BY SFE, LAND ALL WIRES AND TEST. FOUND PROBLEMS WITH TRAIN PREEMPTION PER SAL LEFT IN FLASH; ALSO SWAPPED OUT MULTIPLE LEDS AT LOCATION. ASSISTED BY JESUS AND CESAR. JESUS WILL F/UP				

Work Order Number: WO-00056131 (2 records) \$1,023.84

Technician	Problem	Quote Amount	Quote Date	Hours	Rate	Total
Sal Ortega	Jesus Sanchez	AFTER CABINET REPLACEMENT YESTERDAY, R/R1 NOT PROPERLY FUNCTIONING. I/S LEFT IN LOCAL CABINET FLASH.	Traffic Signal	8	\$232.00	\$1,856.00
		RELOCATE/REWIRE THE 255 R/R ISOLATOR CARD, FROM THE SLOT 10 TO THE SLOT 14 ON THE J FILE. PER MCCAIN CABINET DRAWING ASSISTED BY THE MCCAIN TECHNICAL SUPPORT PERSONNEL. RESET AND WALKED I/S, PPBs, PHASING, AND INDICATIONS CHECKED AND VERIFIED. MET WITH SAL ORTEGA-HP ON SITE.				

Grand Totals (12 records) \$24,459.21



CITY OF HUNTINGTON PARK

Public Works Department
City Council Agenda Report

March 19, 2019

Honorable Mayor and Members of the City Council
City of Huntington Park
6550 Miles Avenue
Huntington Park, CA 90255

Dear Mayor and Members of the City Council:

CONSIDERATION AND APPROVAL OF BUDGET APPROPRIATION FOR THE ZOE AVENUE TRENCH AND PAVEMENT REPAIR PROJECT

IT IS RECOMMENDED THAT THE CITY COUNCIL:

1. Approve a budget appropriation in the amount of \$50,000 in account number 111-8080-431.76-03.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

In May 2018 the City settled with the County of Los Angeles and agreed to the sum of \$650,000 for the City to complete the necessary repairs on Zoe Avenue. The settlement amount is all inclusive for the essential functions to complete the repair such as Design, Bid Preparation, Bid Analysis, Construction, Construction Management, Construction Inspection, Materials Testing and Labor Compliance.

On September 18, 2108 City Council approved an award of a contract for design, construction management/inspection, labor compliance and geotechnical testing/field observation of the Zoe Avenue Trench and Pavement Repair Project to Transtech Engineers in an amount not to exceed \$90,000.

The appropriation amount requested is to cover associated design, and bid advertisement and analyze. The remaining project appropriations will be included in the FY 2019-20 budget to cover the cost of the project.

FISCAL IMPACT/FINANCING

The settlement amount of \$650,000 was received in June 2018 and will be utilized for the \$50,000 appropriation requested above.

CONSIDERATION AND APPROVAL OF BUDGET APPROPRIATION FOR THE ZOE AVENUE TRENCH AND PAVEMENT REPAIR PROJECT

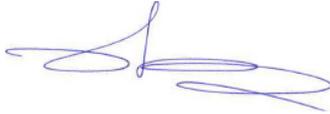
March 19, 2019

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CONCLUSION

Upon Council approval, staff will proceed with the recommended actions.

Respectfully submitted,



RICARDO REYES
City Manager



DANIEL HERNANDEZ
Director of Public Works

ATTACHMENT(S)

None



CITY OF HUNTINGTON PARK

Public Works Department
City Council Agenda Report

March 19, 2019

Honorable Mayor and Members of the City Council
City of Huntington Park
6550 Miles Avenue
Huntington Park, CA 90255

Dear Mayor and Members of the City Council:

CONSIDERATION AND APPROVAL TO SUBMIT AN APPLICATION TO THE 2019 SAFE ROUTES TO SCHOOL (SR2S) LAUNCH PROGRAM TO HOST A COMMUNITY WORKSHOP SPONSORED BY THE SR2S NATIONAL PARTNERSHIP AND U.C. BERKELEY SAFETREC

IT IS RECOMMENDED THAT THE CITY COUNCIL:

1. Authorize the Public Works Department to proceed with the submittal of an interest form to the 2019 Safe Routes to School (SR2S) Launch Program to host a Community Workshop sponsored by the SR2S National Partnership in collaboration by U.C. Berkeley SafeTREC.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

In early March of 2019, the Safe Routes to School National Partnership in collaboration with U.C. Berkeley SafeTREC introduced the 2019 Safe Routes to School Launch Program and announced the acceptance of applications from communities interested in supporting new levels of enhanced safety measures that promote students walking and biking to and from school. The program is offering three California Communities the opportunity to host an in-person Safe Routes to School community workshop and action planning session, or a virtual Safe Routes to School training curated for the City. Funding for this program is provided by a grant from the California Office of Traffic Safety through the National Highway Traffic Safety Administration. The interest form must be submitted by Thursday, March 28, 2019 to be eligible to apply for consideration of hosting one of the community workshops.

Safe Routes to School (SRTS) is a national initiative which aims to encourage and enable children to safely walk and bicycle to school while minimizing the use of motorized vehicles to get to and from school. Programs such as SRTS or Active Transportation Program (ATP) try to facilitate the development of projects that help improve safety and reduce traffic, fuel consumption, and air pollution near schools. Both SRTS and ATP programs assist in providing funding mechanisms that help public agencies and schools develop solutions that combine inspiration, education, engineering, enforcement and

CONSIDERATION AND APPROVAL TO SUBMIT AN APPLICATION TO THE 2019 SAFE ROUTES TO SCHOOL (SR2S) LAUNCH PROGRAM TO HOST A COMMUNITY WORKSHOP SPONSORED BY THE SR2S NATIONAL PARTNERSHIP AND U.C. BERKELEY SAFETREC

March 19, 2019

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evaluation of its infrastructure to improve the safety and health and wellness of the community's school children by advocating for safety measures at crosswalks near schools and other points of interest.

Based on statistics from the Office of Traffic Safety:

- In 1980, 7% of children ages 6-11 were overweight
- In 2004 18.8% were overweight
- Parents driving children to school account for 20-25% of morning traffic during the school year
- Childhood asthma rates have increased by 160% in the last 15 years
- Automobile emissions and exhaust have been identified as asthma triggers

In certain Southern California communities, the above-mentioned statistics are higher. SRTS and ATP fund infrastructure projects that aid in improving the ability of students to walk and bicycle to school safely and fund program activities designed to encourage walking and bicycling to school; examples of eligible projects include public awareness campaigns, traffic education and enforcement and training of volunteers and program managers.

A successful application must demonstrate that the City has developed partnerships with Non-Profit and other non-Governmental Organizations and show letters/resolutions of support from all its potential partners. Must prepare, if it already does not exist, a school travel plan, identify educational programs that complement an engineering project through the documentation of the problem via photographs and traffic data.

The City's main focal point is the Gage Avenue Corridor and the surrounding streets within close proximity to the following elementary/middle schools (K-8):

- Academia Moderna School – 6410 Rita Avenue
- Antonio Maria Lugo Academy – 2665 Clarendon Avenue
- Aspire Clarendon Elementary School – 2665 Clarendon Avenue
- Aspire Huntington Park Charter School – 6005 Stafford Avenue
- Aspire L.A. Secondary Charter School – 2079 Saturn Avenue
- Aspire Titan Academy – 6724 South Alameda Street
- Chester W. Nimitz Middle School – 6021 Carmelita Avenue
- Henry T. Gage Middle School – 2880 East Gage Avenue
- Hope Street Elementary School – 7560 State Street
- Huntington Park New Elementary School – 6055 Corona Avenue
- Middleton Street Elementary School – 6537 Malabar Street
- Miles Avenue Elementary School – 6720 Miles Avenue
- Pacific Boulevard School – 2660 East 57th Street
- Renuevo School – 3154 E. Gage Avenue
- San Antonio Elementary School – 6222 State Street

CONSIDERATION AND APPROVAL TO SUBMIT AN APPLICATION TO THE 2019 SAFE ROUTES TO SCHOOL (SR2S) LAUNCH PROGRAM TO HOST A COMMUNITY WORKSHOP SPONSORED BY THE SR2S NATIONAL PARTNERSHIP AND U.C. BERKELEY SAFETREC

March 19, 2019

Page 3 of 3

- St Matthias Elementary School – 7130 Cedar Street
- Walnut Park Elementary School – 2642 Olive Street

If the City Council approves the submittal of the interest form (Attachment A), staff will proceed with the submittal of the necessary information to the Safe Routes to School National Partnership and U.C. Berkeley SafeTREC for its evaluation and consideration.

LEGAL REQUIREMENT

There are no legal requirements/concerns with the approval of this directive.

ENVIRONMENTAL IMPACT

There are no environmental impacts associated with the approval of this directive.

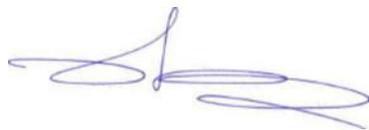
FISCAL IMPACT/FINANCING

There are no fiscal impacts associated with this directive.

CONCLUSION

Upon Council approval, staff will proceed with the recommended actions.

Respectfully submitted,



RICARDO REYES
City Manager



DANIEL HERNANDEZ
Director of Public Works

ATTACHMENT(S)

A. Interest Form

ATTACHMENT "A"

Safe Routes to School Launch Program - Interest Form

* Required

Name *

Your answer

Email address *

Your answer

Community location *

Your answer

How did you hear about the Safe Routes to School Launch Program?

Your answer



To your knowledge, which of the following is in place in your community? (Check all that apply)

- Pedestrian Advisory Committee
- Bicycle Advisory Committee
- Pedestrian Coalition or Collaborative
- Bicycle Coalition or Collaborative
- Complete Streets Policy or Complete Streets Resolution
- Safe Routes to School Policy or Resolution (City)
- Safe Routes to School Policy or Resolution (School District)
- General Plan which addresses multi-modal safety
- Pedestrian Master Plan
- Bicycle Master Plan
- Safe Routes to School Committee, Task Force or Collaborative
- Other:

What are your main goals for your community's participation in the Safe Routes to School Launch Program?

Your answer



For community-based organizations or schools/school districts:
Have you worked with your local government agencies on Safe Routes to School, pedestrian, and/or bicycle safety issues before? If yes, provide name(s) and contact information:

Your answer

For government agencies: Have you worked with your local community-based organizations or school(s)/school district(s) on Safe Routes to School, pedestrian, and/or bicycle safety issues before? If yes, provide name(s) and contact information:

Your answer

Are there stakeholders you would like to participate in the Planning Committee for the workshop? If yes, provide name(s) and contact information:

Your answer

During which months can you host the Safe Routes to School Launch Program workshop? (Check all that apply)

April

May

June

July

NEXT



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Google Forms



CITY OF HUNTINGTON PARK

City Council Meeting Agenda Tuesday, March 19, 2019

PUBLIC HEARING

COMMUNITY DEVELOPMENT

- 10 Continued from the February 19 2019, Regular City Council Meeting -
**Consideration and Approval of Resolution Adopting the 2030 City of
Huntington Park General Plan and Certification of an Environmental Impact
Report (EIR) Under the California Environmental Quality Act (CEQA)**

RECOMMENDATION OF ITEM UNDER CONSIDERATION:

1. Conduct a public hearing;
2. Take public testimony and staff's analysis; and
3. Adopt Resolution No. XXXX-XX, adopting the proposed 2030 City of Huntington Park General Plan and certification of an Environmental Impact Report (EIR) under the California Environmental Quality Act (CEQA).

- TO BE CONTINUED -