OMB No. 1545-1150

Open to Public Inspection

Form **990-EZ** 

Department of the Treasury Internal Revenue Service

Short Form
Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.

The organization may have to use a copy of this return to satisfy state reporting requirements. For the 2009 calendar year, or tax year beginning and ending

R Ch	eck if	C Name of organization				D Empl	oyer ic	Jentification	on number					
	plicable:	, I lease												
_		inge label or							0-3312814					
			\		Room/suite									
	Initial	1366	/		1100111/00110				030					
	ated	Instruc-												
	Amend					1								
	pending	IAGUNA BEACH, CA 92651			-				Accrual					
	• Secti	on 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach	i a com	pleted				Casi	Accidal					
		WHEELS 4 LIFE   20 - 3312814												
l W	ebsite	: ► WHEELS4LIFE.ORG			-			•						
J Ta	ax-exe	mpt status (check only one) $ X$ 501(c) ( $3$ ) $\blacktriangleleft$ (insert no.) $\longrightarrow$ 4947(a)(												
K C	heck 🕨	if the organization is not a section 509(a)(3) supporting organization <b>and</b> its g	gross re	ceipts ar	e normally <b>no</b>	t more th	nan \$2	5,000. A F	orm 990-EZ or					
		Form 990 return is not required, but if the organization chooses to file a return	n, be su	re to file	a complete re	turn.			20 624					
L A	dd lines	s 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$500,000 or more, file Form 9	990 inst	ead of F	orm 990-EZ	<b>)</b>			39,624.					
300000000	rt I	Revenue, Expenses, and Changes in Net Assets or Fund	Bala	ances	(See the instr	uctions 1	for Pai	11.)	20 117					
	1 (	Contributions, gifts, grants, and similar amounts received					1		39,117.					
	2	Program service revenue including government fees and contracts												
	3 1	Membership dues and assessments					3							
	4 1	Investment income		,			4		507.					
		Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)					5c							
Revenue	6	Coording events and activities (complete applicable parts of Schedule G). If any amount is from naming, check here												
	0	Cross revenue (not including \$ of contributions												
	a	Gross revenue (not including \$\phi\$	6a											
Œ			-											
							6c							
			1	1										
	b	U LESS, COST OI GOODS SOID												
	8	Other revenue (describe				/			39.624.					
									03/0210					
	11	Benefits paid to or for members												
es									950					
Sus	13	Professional fees and other payments to independent contractors	· · · · · · · · · · · · · · · · · · ·	CITIAL		2								
Expenses	14	Occupancy, rent, utilities, and maintenance	o E E	STA	LEMENT	<del></del>		-						
Ш	15	Printing publications postage and shipping												
		Other expenses (describe	SEE	STA	LEMENT	)								
	17	Total expenses. Add lines 10 through 16						-						
	18	Excess or (deficit) for the year (Subtract line 17 from line 9)					18	1	-14,2/1.					
ets	19								70 445					
Net Assets									78,445.					
et/	20								CA 174					
Z	21	Net assets or fund balances at end of year. Combine lines 18 through 20				🕨			64,1/4.					
Pa	art II	Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or m	nore, file	Form 9	90 instead of	Form 99	0-EZ.							
-		(See the instructions for Part II.)		(										
22	Casl	h, savings, and investments			63	,939	-		3/,16/.					
23	Land	d and buildings					23							
24	Othe	er assets (describe ► OTHER DEPRECIABLE ASSETS		)		,506			27,007.					
25		al assets			78	,445			64,174.					
26		al liabilities (describe		)		0			0.					
27	Net	assets or fund balances (line 27 of column (B) must agree with line 21)			78	,445	• 27		64,174.					
932	171	assets of faire Series and Benefits Reduction Act Notice and the congrete int	etructio	ne				Forr	n 990-EZ (2009)					

m 990-EZ (2009) WHEELS 4 LIFE			20-	33128	14 Page <b>2</b>				
m 990-EZ (2009) WHEELS 4 LIFE art III Statement of Program Service Accomplishmer		enses							
at is the organization's primary exempt purpose? SEE STATEMENT	(Required for section 501(c)(3) and 501(c)(4) organizations and								
il with at was ashigned in corning out the organization's exempt pur	SUBSECULAR CONTRACTOR OF THE	(a)(1) trusts; optional							
e services provided, the number of persons benefited, and other relevan	t information for each progr	ram title.		for others.)					
SEE STATEMENT 4									
	28a	43,010.							
(Grants \$ ) If this amount includes foreign (	grants, check here			204	10/0101				
Nous Air-ludes favoire	aranta ahask hara	<b>•</b>		29a					
(draine \$	ants \$ ) If this amount includes foreign grants, check here								
(Create \$\)	30a								
Other program services (attach schedule)	rants \$ ) If this amount includes foreign grants, check here her program services (attach schedule)								
(Grants \$ ) If this amount includes foreign	grants, check here	<b>&gt;</b>		31a 32	43,010.				
(add lines 28s through 31s)	i and lines 28s through 31a)								
Part IV List of Officers, Directors, Trustees, and Key I	Employees. List each one ev	en if not compensated.	(See the	e instructions f	for Part IV.)				
Social Bothod Porcol	(b) Title and average hours	(c) Compensation	(u) 0	ontributions employee	(e) Expense				
(a) Name and address	per week devoted to	(If not paid, enter		efit plans &	account and				
(a) Namo and addition	position	-0)		leferred	other allowances				
	CULTOWAN OF T	HE BOARD	COII	npensation					
ANDREW HERRICK, 30722 MARILYN DRIVE,	_CHAIRMAN OF T 1.00	O.		0.	0				
LAGUNA BEACH, CA 92651	EXECUTIVE DIR		-						
HANS REY, 30722 MARILYN DRIVE,	10.00	0.		0.	0				
LAGUNA BEACH, CA 92651	TREASURER/SEC		+						
CARMEN FREEMAN, 30722 MARILYN DRIVE,	5.00	0.		0.	. 0				
LAGUNA BEACH, CA 92651 DIANA GRABER, 30722 MARILYN DRIVE,	BOARD MEMBER								
	1.00	0.	•	0.	. 0				
LAGUNA BEACH, CA 92651 MARK PETERMAN, 30722 MARILYN DRIVE,	BOARD MEMBER								
LAGUNA BEACH, CA 92651	1.00	0	•	0.	. 0				
JOSEPH SANTLEY, 30722 MARILYN DRIVE,	BOARD MEMBER								
LAGUNA BEACH, CA 92651	1.00	0	•	0.	. 0				
JAGONA BENCHY CH 32002									
			-						
			+						
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		77							

NOVEMBER 15, 2010

WHEELS 4 LIFE 30722 MARILYN DRIVE LAGUNA BEACH, CA 92651

WHEELS 4 LIFE:

ENCLOSED ARE THE 2009 EXEMPT ORGANIZATION RETURNS, AS FOLLOWS...

2009 FORM 990-EZ

2009 CALIFORNIA FORM 199

2009 CALIFORNIA FORM RRF-1

EACH ORIGINAL SHOULD BE DATED, SIGNED AND FILED IN ACCORDANCE WITH THE FILING INSTRUCTIONS. THE COPY SHOULD BE RETAINED FOR YOUR FILES.

VERY TRULY YOURS,

LAWRENCE R. MITCHELL & COMPANY, CPAS