

**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)

Department of the Treasury  
Internal Revenue Service

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

**A** For the 2007 calendar year, or tax year beginning **JUL 1, 2007** and ending **JUN 30, 2008**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization LOS ANGELES COUNTY MUSEUM OF NATURAL HISTORY FOUNDATION	<b>D</b> Employer identification number 93-1022351
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 900 EXPOSITION BLVD.	<b>E</b> Telephone number 213-763-3437
	City or town, state or country, and ZIP + 4 LOS ANGELES, CA 90007	<b>F</b> Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ▶
	Please use IRS label or print or type. See Specific Instructions.	

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

*Hand I are not applicable to section 527 organizations.*

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

**H(b)** If "Yes," enter number of affiliates ▶ N/A

**H(c)** Are all affiliates included? (If "No," attach a list.) N/A  Yes  No

**H(d)** Is this a separate return filed by an organization covered by a group ruling?  Yes  No

**I** Group Exemption Number ▶ N/A

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

**G** Website: ▶ WWW.NHM.ORG

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

**K** Check here  if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

**L** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 45,352,320.

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

<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, and similar amounts received:			
	<b>a</b> Contributions to donor advised funds	<b>1a</b>		
	<b>b</b> Direct public support (not included on line 1a)	<b>1b</b>	12,590,804.	
	<b>c</b> Indirect public support (not included on line 1a)	<b>1c</b>		
	<b>d</b> Government contributions (grants) (not included on line 1a)	<b>1d</b>	6,161,035.	
	<b>e</b> Total (add lines 1a through 1d) (cash \$ 17,642,542. noncash \$ 1,109,297. )	<b>1e</b>		18,751,839.
	<b>2</b> Program service revenue including government fees and contracts (from Part VII, line 93)	<b>2</b>		11,707,673.
	<b>3</b> Membership dues and assessments	<b>3</b>		2,106,949.
	<b>4</b> Interest on savings and temporary cash investments	<b>4</b>		1,287,764.
	<b>5</b> Dividends and interest from securities	<b>5</b>		147,908.
	<b>6 a</b> Gross rents	<b>6a</b>		
	<b>b</b> Less: rental expenses	<b>6b</b>		
<b>c</b> Net rental income or (loss). Subtract line 6b from line 6a	<b>6c</b>			
<b>7</b> Other investment income (describe ▶ )	<b>7</b>			
<b>8 a</b> Gross amount from sales of assets other than inventory	(A) Securities		(B) Other	
	10,800,085.	<b>8a</b>		
	Less: cost or other basis and sales expenses	<b>8b</b>		
	7,521,196.	<b>8c</b>		
<b>c</b> Gain or (loss) (attach schedule)	<b>8c</b>	3,278,889.		
<b>d</b> Net gain or (loss). Combine line 8c, columns (A) and (B) STMT 1	<b>8d</b>		3,278,889.	
<b>9</b> Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>				
<b>a</b> Gross revenue (not including \$ of contributions reported on line 1b)	<b>9a</b>			
<b>b</b> Less: direct expenses other than fundraising expenses	<b>9b</b>			
<b>c</b> Net income or (loss) from special events. Subtract line 9b from line 9a	<b>9c</b>			
<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>10a</b>			
	<b>b</b> Less: cost of goods sold	<b>10b</b>		
	<b>c</b> Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a	<b>10c</b>		
<b>11</b> Other revenue (from Part VII, line 103)	<b>11</b>		550,102.	
<b>12</b> Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	<b>12</b>		37,831,124.	
<b>Expenses</b>	<b>13</b> Program services (from line 44, column (B))	<b>13</b>	17,138,298.	
	<b>14</b> Management and general (from line 44, column (C))	<b>14</b>	2,595,287.	
	<b>15</b> Fundraising (from line 44, column (D))	<b>15</b>	2,920,902.	
	<b>16</b> Payments to affiliates (attach schedule)	<b>16</b>		
	<b>17</b> Total expenses. Add lines 16 and 44, column (A)	<b>17</b>		22,654,487.
<b>Net Assets</b>	<b>18</b> Excess or (deficit) for the year. Subtract line 17 from line 12	<b>18</b>	15,176,637.	
	<b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A))	<b>19</b>	144,595,817.	
	<b>20</b> Other changes in net assets or fund balances (attach explanation) SEE STATEMENT 2	<b>20</b>		-2,642,878.
	<b>21</b> Net assets or fund balances at end of year. Combine lines 18, 19, and 20	<b>21</b>		157,129,576.

**Part II Statement of Functional Expenses**

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

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.</i>	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
<b>22a</b> Grants paid from donor advised funds (attach schedule) (cash \$ 0, noncash \$ 0, If this amount includes foreign grants, check here <input type="checkbox"/> <b>22a</b> )				
<b>22b</b> Other grants and allocations (attach schedule) (cash \$ 0, noncash \$ 0, If this amount includes foreign grants, check here <input type="checkbox"/> <b>22b</b> )				
<b>23</b> Specific assistance to individuals (attach schedule) <b>23</b>				
<b>24</b> Benefits paid to or for members (attach schedule) <b>24</b>				
<b>25a</b> Compensation of current officers, directors, key employees, etc. listed in Part V-A <b>25a</b>	580,366.	348,220.	87,056.	145,090.
<b>b</b> Compensation of former officers, directors, key employees, etc. listed in Part V-B <b>25b</b>	0.	0.	0.	0.
<b>c</b> Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) <b>25c</b>				
<b>26</b> Salaries and wages of employees not included on lines 25a, b, and c <b>26</b>	7,495,526.	5,872,026.	640,770.	982,730.
<b>27</b> Pension plan contributions not included on lines 25a, b, and c <b>27</b>				
<b>28</b> Employee benefits not included on lines 25a - 27 <b>28</b>	2,131,157.	1,721,923.	113,527.	295,707.
<b>29</b> Payroll taxes <b>29</b>	626,333.	487,263.	54,742.	84,328.
<b>30</b> Professional fundraising fees <b>30</b>				
<b>31</b> Accounting fees <b>31</b>	310,736.	253,438.	29,210.	28,088.
<b>32</b> Legal fees <b>32</b>	41,351.	33,726.	3,887.	3,738.
<b>33</b> Supplies <b>33</b>	879,657.	625,005.	147,069.	107,583.
<b>34</b> Telephone <b>34</b>	36,333.	21,895.	10,804.	3,634.
<b>35</b> Postage and shipping <b>35</b>	236,582.	43,277.	2,354.	190,951.
<b>36</b> Occupancy <b>36</b>				
<b>37</b> Equipment rental and maintenance <b>37</b>	2,027,297.	1,430,794.	381,895.	214,608.
<b>38</b> Printing and publications <b>38</b>	451,837.	285,477.	33,228.	133,132.
<b>39</b> Travel <b>39</b>	185,794.	97,237.	3,306.	85,251.
<b>40</b> Conferences, conventions, and meetings <b>40</b>	79,689.	61,955.	8,159.	9,575.
<b>41</b> Interest <b>41</b>	219,339.	211,695.		7,644.
<b>42</b> Depreciation, depletion, etc. (attach schedule) <b>42</b>	431,774.	254,747.	177,027.	
<b>43</b> Other expenses not covered above (itemize):				
a <b>43a</b>				
b <b>43b</b>				
c <b>43c</b>				
d <b>43d</b>				
e <b>43e</b>				
f <b>43f</b>				
g SEE STATEMENT 3 <b>43g</b>	6,920,716.	5,389,620.	902,253.	628,843.
<b>44</b> Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15) <b>44</b>	22,654,487.	17,138,298.	2,595,287.	2,920,902.

**Joint Costs.** Check  if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No  
 If "Yes," enter (i) the aggregate amount of these joint costs \$ N/A ; (ii) the amount allocated to Program services \$ N/A ;  
 (iii) the amount allocated to Management and general \$ N/A ; and (iv) the amount allocated to Fundraising \$ N/A

Part III Statement of Program Service Accomplishments (See the instructions.)

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

Table with 2 columns: Description of program service and Program Service Expenses. Rows include sections a, b, c, d, e, and f (Total of Program Service Expenses). Total amount shown as 17,138,298.

**Part IV Balance Sheets** (See the instructions.)

**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
Assets	45 Cash - non-interest-bearing .....	21,125.	45	21,325.
	46 Savings and temporary cash investments .....	18,995,156.	46	30,574,840.
	47 a Accounts receivable .....	47a 454,654.		
	b Less: allowance for doubtful accounts .....	47b	71,979.	47c 454,654.
	48 a Pledges receivable .....	48a 3,101,529.		
	b Less: allowance for doubtful accounts .....	48b 657,692.	3,242,130.	48c 2,443,837.
	49 Grants receivable .....		3,241,169.	49 2,774,727.
	50 a Receivables from current and former officers, directors, trustees, and key employees .....			50a
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....			50b
	51 a Other notes and loans receivable .....	51a		
	b Less: allowance for doubtful accounts .....	51b		51c
	52 Inventories for sale or use .....			52
	53 Prepaid expenses and deferred charges .....		2,232,404.	53 1,154,798.
	54 a Investments - publicly-traded securities STMT 7 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV		107,559,089.	54a 113,295,694.
	b Investments - other securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV			54b
	55 a Investments - land, buildings, and equipment: basis STMT 6	55a		
	b Less: accumulated depreciation .....	55b		55c
	56 Investments - other .....			56
	57 a Land, buildings, and equipment: basis .....	57a 58,888,395.		
b Less: accumulated depreciation .....	57b 30,338,214.	15,841,869.	57c 28,550,181.	
58 Other assets, including program-related investments (describe <input type="checkbox"/> SEE STATEMENT 8 )		81,344,196.	58 78,233,112.	
59 <b>Total assets</b> (must equal line 74). Add lines 45 through 58		232,549,117.	59 257,503,168.	
Liabilities	60 Accounts payable and accrued expenses .....	3,022,549.	60	4,842,087.
	61 Grants payable .....		61	
	62 Deferred revenue .....	530,751.	62	422,341.
	63 Loans from officers, directors, trustees, and key employees .....		63	
	64 a Tax-exempt bond liabilities .....	84,400,000.	64a	89,790,000.
	b Mortgages and other notes payable .....		64b	
	65 Other liabilities (describe <input type="checkbox"/> INTEREST RATE SWAP AGREEMENT )		0.	65 5,319,164.
66 <b>Total liabilities.</b> Add lines 60 through 65		87,953,300.	66 100,373,592.	
Net Assets or Fund Balances	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.</b>			
	67 Unrestricted .....	130,018,488.	67	136,660,272.
	68 Temporarily restricted .....	11,459,179.	68	17,269,806.
	69 Permanently restricted .....	3,118,150.	69	3,199,498.
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.</b>			
	70 Capital stock, trust principal, or current funds .....		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund .....		71	
	72 Retained earnings, endowment, accumulated income, or other funds .....		72	
	73 <b>Total net assets or fund balances.</b> Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)		144,595,817.	73 157,129,576.
74 <b>Total liabilities and net assets/fund balances.</b> Add lines 66 and 73		232,549,117.	74 257,503,168.	





<b>Part VI Other Information</b> (continued)		Yes	No
<b>82 a</b>	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value? .....	<b>82a</b>	X
<b>b</b>	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) .....	<b>82b</b>	
<b>83 a</b>	Did the organization comply with the public inspection requirements for returns and exemption applications? .....	<b>83a</b>	X
<b>b</b>	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions? .....	<b>83b</b>	X
<b>84 a</b>	Did the organization solicit any contributions or gifts that were not tax deductible? .....	<b>84a</b>	X
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? .....	<b>84b</b>	
<b>85 a</b>	<b>501(c)(4), (5), or (6).</b> Were substantially all dues nondeductible by members? .....	<b>85a</b>	
<b>b</b>	Did the organization make only in-house lobbying expenditures of \$2,000 or less? .....	<b>85b</b>	
	If "Yes" was answered to either 85a or 85b, <b>do not</b> complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
<b>c</b>	Dues, assessments, and similar amounts from members .....	<b>85c</b>	N/A
<b>d</b>	Section 162(e) lobbying and political expenditures .....	<b>85d</b>	N/A
<b>e</b>	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices .....	<b>85e</b>	N/A
<b>f</b>	Taxable amount of lobbying and political expenditures (line 85d less 85e) .....	<b>85f</b>	N/A
<b>g</b>	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? .....	<b>85g</b>	
<b>h</b>	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? .....	<b>85h</b>	
<b>86</b>	<b>501(c)(7) organizations.</b> Enter: <b>a</b> Initiation fees and capital contributions included on line 12 .....	<b>86a</b>	N/A
<b>b</b>	Gross receipts, included on line 12, for public use of club facilities .....	<b>86b</b>	N/A
<b>87</b>	<b>501(c)(12) organizations.</b> Enter: <b>a</b> Gross income from members or shareholders .....	<b>87a</b>	N/A
<b>b</b>	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) .....	<b>87b</b>	N/A
<b>88 a</b>	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX .....	<b>88a</b>	X
<b>b</b>	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI .....	<b>88b</b>	X
<b>89 a</b>	<b>501(c)(3) organizations.</b> Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0.; section 4912 ▶ 0.; section 4955 ▶ 0. ....		
<b>b</b>	<b>501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction .....	<b>89b</b>	X
<b>c</b>	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 .....		
<b>d</b>	Enter: Amount of tax on line 89c, above, reimbursed by the organization .....		
<b>e</b>	<b>All organizations.</b> At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? .....	<b>89e</b>	X
<b>f</b>	<b>All organizations.</b> Did the organization acquire a direct or indirect interest in any applicable insurance contract? .....	<b>89f</b>	X
<b>g</b>	<b>For supporting organizations and sponsoring organizations maintaining donor advised funds.</b> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? .....	<b>89g</b>	X
<b>90 a</b>	List the states with which a copy of this return is filed ▶ CA		
<b>b</b>	Number of employees employed in the pay period that includes March 12, 2007 .....	<b>90b</b>	278
<b>91 a</b>	The books are in care of ▶ LOS ANGELES COUNTY MUSEUM OF NATURAL HISTO Telephone no. ▶ 213-763-3437 Located at ▶ 900 EXPOSITION BLVD, LOS ANGELES, CA ZIP + 4 ▶ 90007		
<b>b</b>	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)? .....	<b>91b</b>	X
	If "Yes," enter the name of the foreign country ▶ N/A		
	See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1</b> , Report of Foreign Bank and Financial Accounts.		

**Part VI Other Information** (continued)

c At any time during the calendar year, did the organization maintain an office outside of the United States? **91c**  Yes  No  
 If "Yes," enter the name of the foreign country N/A

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here   
 and enter the amount of tax-exempt interest received or accrued during the tax year **92** N/A

**Part VII Analysis of Income-Producing Activities** (See the instructions.)

**Note:** Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
<b>93</b> Program service revenue:					
a MUSEUM ADMISSION FEES					2,433,868.
b MUSEUM USE & SERVICES					347,215.
c PROGRAM INCOME					570,590.
d LOS ANGELES COUNTY SUPPORT					8,356,000.
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
<b>94</b> Membership dues and assessments					2,106,949.
<b>95</b> Interest on savings and temporary cash investments			14	1,287,764.	
<b>96</b> Dividends and interest from securities			14	147,908.	
<b>97</b> Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
<b>98</b> Net rental income or (loss) from personal property					
<b>99</b> Other investment income					
<b>100</b> Gain or (loss) from sales of assets other than inventory			18	3,278,889.	
<b>101</b> Net income or (loss) from special events					
<b>102</b> Gross profit or (loss) from sales of inventory					
<b>103</b> Other revenue:					
a SHOP COMMISSION			03	426,156.	
b MUSEUM CATALOG AND OTHER					123,946.
c					
d					
e					
<b>104</b> Subtotal (add columns (B), (D), and (E))		0.		5,140,717.	13,938,568.
<b>105</b> Total (add line 104, columns (B), (D), and (E))					19,079,285.

**Note:** Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	SEE STATEMENT 12

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See the instructions.)

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

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See the instructions.)

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

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

**Note:** If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

**Part XI Information Regarding Transfers To and From Controlled Entities.** Complete only if the organization is a controlling organization as defined in section 512(b)(13). N/A

106 Did the reporting organization **make** any transfers **to** a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

<b>Yes</b>	<b>No</b>

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	----- ----- -----			
b	----- ----- -----			
c	----- ----- -----			
<b>Totals</b>				

107 Did the reporting organization **receive** any transfers **from** a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

<b>Yes</b>	<b>No</b>

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	----- ----- -----			
b	----- ----- -----			
c	----- ----- -----			
<b>Totals</b>				

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

<b>Yes</b>	<b>No</b>

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.

<b>Please Sign Here</b>	Signature of officer _____ LINDA ROSS, CFO Type or print name and title	Date _____	
<b>Paid Preparer's Use Only</b>	Preparer's signature _____ Firm's name (or yours if self-employed), address, and ZIP + 4 SINGERLEWAK LLP 10960 WILSHIRE BLVD. SUITE 1100 LOS ANGELES, CALIFORNIA 90024-3783	Date 01/27/09	Check if self-employed <input type="checkbox"/> Preparer's SSN or PTIN (See Gen. Inst. X) EIN _____ Phone no. (310) 477-3924

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

**Organization Exempt Under Section 501(c)(3)**

OMB No. 1545-0047

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

**2007**

Department of the Treasury  
Internal Revenue Service

**Supplementary Information-(See separate instructions.)**  
▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization	LOS ANGELES COUNTY MUSEUM OF NATURAL HISTORY FOUNDATION	Employer identification number	93 1022351
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**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**

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

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
DANIELLE LACHARITE 900 EXPOSITION BLVD., LOS ANGELES, CA	VP ANNUAL GIVING 40.00	115,000.	9,422.	0.
THOMAS JACOBSON 900 EXPOSITION BLVD., LOS ANGELES, CA	SR. VP ADVANCEMENT 40.00	179,375.	14,908.	0.
CARL SELKIN 900 EXPOSITION BLVD., LOS ANGELES, CA	VP EDUCATION 40.00	153,750.	9,264.	0.
SIMON ADLAM 900 EXPOSITION BLVD., LOS ANGELES, CA	SR. PROJECT MGR 40.00	135,742.	6,468.	0.
KAREN WISE 900 EXPOSITION BLVD., LOS ANGELES, CA	EXEC. PROJECT MGR 40.00	159,057.	12,212.	0.
Total number of other employees paid over \$50,000	33			

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

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

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
CO ARCHITECTS 5055 WILSHIRE BLVD, 9TH FLOOR, LOS ANGELES, CA 90	ARCHITECT	632,978.
HAWKINGS DELAFIELD & WOOD LLP ONE CHASE MANHATTAN PLAZA, NEW YORK, NY 10005	LEGAL	190,000.
NIXON PEABODY LLP GAS COMPANY TOWER, 555 W. 5TH STR. 46TH FLOOR, LO	LEGAL	183,499.
PRICEWATERHOUSECOOPERS LLP PO BOX 31001-0068, PASADENA, CA 91110	ACCOUNTING	106,503.
MARILYN PAYNE PO BOX 90444, LONG BEACH, CA 90809-0444	ACCOUNTING	72,193.
Total number of others receiving over \$50,000 for professional services	4	

**Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services**

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
MATT CONSTRUCTION CORP. PO BOX 31001-1822, PASADENA, CA 91110	CONSTRUCTION	9,089,121.
INTER-CON SECURITY SYSTEM 210 SOUTH DELACEY AVENUE, PASADENA, CA 91105	SECURITY	762,638.
HEALTH NET INSURANCE FILE #52617, LOS ANGELES, CA 90074	HEALTH INSURANCE	678,545.
TIAA PO BOX 76113, LOS ANGELES, CA 90088	403B RETIREMENT PLAN	675,014.
DIAMOND CONTRACT SERVICES PO BOX 10746, BURBANK, CA 91510	JANITORIAL	641,777.
Total number of other contractors receiving over \$50,000 for other services	56	

**Part III Statements About Activities** (See page 2 of the instructions.)

		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ \$ <u>72,412.</u> (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) VI-A, LINE 38B	X	
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a	Sale, exchange, or leasing of property? .....		X
b	Lending of money or other extension of credit? .....		X
c	Furnishing of goods, services, or facilities? .....		X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE PART V-A, FORM 990 .....	X	
e	Transfer of any part of its income or assets? .....		X
3 a	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.) .....		X
b	Did the organization have a section 403(b) annuity plan for its employees? .....	X	
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement .....		X
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services? .....		X
4 a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g .....		X
b	Did the organization make any taxable distributions under section 4966? .....		N/A
c	Did the organization make a distribution to a donor, donor advisor, or related person? .....		N/A
d	Enter the total number of donor advised funds owned at the end of the tax year .....		N/A
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year .....		N/A
f	Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts .....		0.
g	Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year .....		0.

**Part IV Reason for Non-Private Foundation Status** (See pages 4 through 8 of the instructions.)

I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5  A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6  A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7  A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8  A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9  A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state
- 10  An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a  An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b  A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13  An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:  
 Type I       Type II       Type III-Functionally Integrated       Type III-Other

Provide the following information about the supported organizations. (See page 8 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
<b>Total</b> .....					▶

- 14  An organization organized and operated to test for public safety. Section 509(a)(4). (See page 8 of the instructions.)

**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12.) **Use cash method of accounting.**

**Note:** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
<b>15</b> Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	5,655,320.	11,333,292.	6,406,710.	9,349,211.	32,744,533.
<b>16</b> Membership fees received	2,177,503.	1,848,937.	1,768,994.	1,566,380.	7,361,814.
<b>17</b> Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	9,317,161.	8,959,085.	9,192,419.	9,857,282.	37,325,947.
<b>18</b> Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	409,212.	255,594.	185,221.	179,247.	1,029,274.
<b>19</b> Net income from unrelated business activities not included in line 18					
<b>20</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
<b>21</b> The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
<b>22</b> Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	441,564.	453,356.	436,387.	126,008.	1,457,315.
<b>23</b> Total of lines 15 through 22	18,000,760.	22,850,264.	17,989,731.	21,078,128.	79,918,883.
<b>24</b> Line 23 minus line 17	8,683,599.	13,891,179.	8,797,312.	11,220,846.	42,592,936.
<b>25</b> Enter 1% of line 23	180,008.	228,503.	179,897.	210,781.	
<b>26 Organizations described on lines 10 or 11:</b> a Enter 2% of amount in column (e), line 24					<b>26a</b> N/A
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					<b>26b</b> N/A
c Total support for section 509(a)(1) test: Enter line 24, column (e)					<b>26c</b> N/A
d Add: Amounts from column (e) for lines: 18 _____ 19 _____ 22 _____ 26b _____					<b>26d</b> N/A
e Public support (line 26c minus line 26d total)					<b>26e</b> N/A
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					<b>26f</b> N/A %
<b>27 Organizations described on line 12:</b> a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: (2006) 1,059,990. (2005) 2,064,059. (2004) 1,322,973. (2003) 2,581,882.					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2006) 170,726. (2005) 42,995. (2004) 439,093. (2003) 316,230.					
c Add: Amounts from column (e) for lines: 15 32,744,533. 16 7,361,814. 17 37,325,947. 20 _____ 21 _____					<b>27c</b> 77,432,294.
d Add: Line 27a total 7,028,904. and line 27b total 969,044.					<b>27d</b> 7,997,948.
e Public support (line 27c total minus line 27d total)					<b>27e</b> 69,434,346.
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)					<b>27f</b> 79,918,883.
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					<b>27g</b> 86.8810%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					<b>27h</b> 1.2879%

**28 Unusual Grants:** For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

**Part V Private School Questionnaire** (See page 9 of the instructions.)

N/A

**(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? .....		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? .....		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? .....		
If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
_____			
_____			
_____			
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff? .....	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? .....	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? .....	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions? .....	32d	
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
_____			
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges? .....	33a	
b	Admissions policies? .....	33b	
c	Employment of faculty or administrative staff? .....	33c	
d	Scholarships or other financial assistance? .....	33d	
e	Educational policies? .....	33e	
f	Use of facilities? .....	33f	
g	Athletic programs? .....	33g	
h	Other extracurricular activities? .....	33h	
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
_____			
_____			
34 a	Does the organization receive any financial aid or assistance from a governmental agency? .....	34a	
b	Has the organization's right to such aid ever been revoked or suspended? .....	34b	
If you answered "Yes" to either 34a or b, please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation .....	35	

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 11 of the instructions.)

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

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

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for <b>all</b> electing organizations
		N/A	
<b>36</b> Total lobbying expenditures to influence public opinion (grassroots lobbying) .....	<b>36</b>		0.
<b>37</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .....	<b>37</b>		72,412.
<b>38</b> Total lobbying expenditures (add lines 36 and 37) .....	<b>38</b>		72,412.
<b>39</b> Other exempt purpose expenditures .....	<b>39</b>		22,582,075.
<b>40</b> Total exempt purpose expenditures (add lines 38 and 39) .....	<b>40</b>		22,654,487.
<b>41</b> Lobbying nontaxable amount. Enter the amount from the following table -			
<b>If the amount on line 40 is -</b>		<b>The lobbying nontaxable amount is -</b>	
Not over \$500,000 .....		20% of the amount on line 40 .....	
Over \$500,000 but not over \$1,000,000 .....		\$100,000 plus 15% of the excess over \$500,000 .....	
Over \$1,000,000 but not over \$1,500,000 .....		\$175,000 plus 10% of the excess over \$1,000,000 .....	
Over \$1,500,000 but not over \$17,000,000 .....		\$225,000 plus 5% of the excess over \$1,500,000 .....	
Over \$17,000,000 .....		\$1,000,000 .....	
<b>42</b> Grassroots nontaxable amount (enter 25% of line 41) .....	<b>42</b>		250,000.
<b>43</b> Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36 .....	<b>43</b>		0.
<b>44</b> Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38 .....	<b>44</b>		0.

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

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 13 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
<b>45</b> Lobbying nontaxable amount .....	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
<b>46</b> Lobbying ceiling amount (150% of line 45(e)) .....					6,000,000.
<b>47</b> Total lobbying expenditures .....	72,412.	78,299.	230,000.	118,295.	499,006.
<b>48</b> Grassroots nontaxable amount .....	250,000.	250,000.	250,000.	250,000.	1,000,000.
<b>49</b> Grassroots ceiling amount (150% of line 48(e)) .....					1,500,000.
<b>50</b> Grassroots lobbying expenditures .....			0.	0.	0.

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A) (See page 14 of the instructions.)

N/A

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

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

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 14 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting organization to a noncharitable exempt organization of:

Table with columns Yes, No and rows 51a(i), a(ii), b(i), b(ii), b(iii), b(iv), b(v), b(vi), c

- (i) Cash
(ii) Other assets
b Other transactions:
(i) Sales or exchanges of assets with a noncharitable exempt organization
(ii) Purchases of assets from a noncharitable exempt organization
(iii) Rental of facilities, equipment, or other assets
(iv) Reimbursement arrangements
(v) Loans or loan guarantees
(vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received: N/A

Table with 4 columns: (a) Line no., (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements

52 a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule: N/A

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship

FORM 990 GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES STATEMENT 1

DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)
SALE OF INVESTMENTS	10,800,085.	7,521,196.	0.	3,278,889.
TO FORM 990, PART I, LINE 8	10,800,085.	7,521,196.	0.	3,278,889.

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FORM 990                      OTHER CHANGES IN NET ASSETS OR FUND BALANCES                      STATEMENT    2

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DESCRIPTION	AMOUNT
UNREALIZED GAIN ON INTEREST RATE SWAPS	-6,995,329.
CHANGE IN VALUE OF OBLIGATION UNDER SPLIT-INTEREST AGREEMENT	71,695.
UNREALIZED GAINS AND LOSSES FROM INVESTMENTS	6,468,941.
LOSS ON BOND REFUNDING	-2,188,185.
	<hr/>
TOTAL TO FORM 990, PART I, LINE 20	-2,642,878.
	<hr/> <hr/>

FORM 990

OTHER EXPENSES

STATEMENT 3

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
EXHIBIT EXPENSES	203,106.	203,106.		
PROTECTIVE AND CUSTODIAL EXPENSES	1,336,867.	807,446.	479,851.	49,570.
PROFESSIONAL FEES	1,869,898.	1,525,103.	175,773.	169,022.
ADVERTISING	417,043.	311,311.	60,844.	44,888.
MISCELLANEOUS	932,226.	597,347.	83,636.	251,243.
TEMPORARY STAFF	774,292.	596,770.	68,744.	108,778.
AMORTIZATION	206,830.	188,037.	14,991.	3,802.
BAD DEBT EXPENSE	673,285.	666,580.	5,348.	1,357.
PARTICIPANTS COST	62,675.	62,675.		
SUPPLEMENTS	48,930.	35,681.	13,066.	183.
AUXILLARY SERVICES	395,564.	395,564.		
<b>TOTAL TO FM 990, LN 43</b>	<b>6,920,716.</b>	<b>5,389,620.</b>	<b>902,253.</b>	<b>628,843.</b>

DESCRIPTION OF PROGRAM SERVICE ONE

THE FOUNDATION PROVIDES EDUCATIONAL, PUBLIC PROGRAMMING, PERMANENT AND TEMPORARY EXHIBITS , AND RESEARCH ACTIVITIES AT THE MUSEUM WITH A MISSION TO INSPIRE WONDER, DISCOVERY AND RESPONSIBILITY FOR OUR NATURAL AND CULTURAL WORLDS.

THE COUNTY OF LOS ANGELES (THE "COUNTY") THROUGH ITS DEPARTMENT OF MUSEUM OF NATURAL HISTORY (THE " DEPARTMENT") OPERATES AND MAINTAINS THE LOS ANGELES COUNTY MUSEUM OF NAURAL HISTORY (THE "MUSEUM").

THE COUNTY REIMBURSES THE FOUNDATION FOR CERTAIN SERVICES IT PROVIDES FOR THE MUSEUM, AND THE AMOUNT OF THE REIMBURSEMENT IS REFLECTED AS PART OF THE FOUNDATION'S REVENUE AND SUPPORT. IN ADDITION, THE COUNTY PROVIDES FUNDS DIRECTLY TO PROVIDERS OF SERVICES TO THE MUSEUM, WHICH ARE NOT INCLUDED IN THE FOUNDATION'S FINANCIAL STATEMENTS.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE A	_____	_____
	=====	=====
		17,138,298.

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FORM 990      STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE      STATEMENT      5  
PART III

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EXPLANATION

THE FOUNDATION, A CALIFORNIA NONPROFIT CORPORATION, WAS INCORPORATED IN 1965 FOR THE PURPOSE OF PROVIDING FINANCIAL AND OTHER SUPPORT TO THE LOS ANGELES COUNTY MUSEUM OF NATURAL HISTORY (THE "MUSEUM"). THE FOUNDATION DEVELOPS AND MAINTAINS A NUMBER OF THE MUSEUM'S EDUCATIONAL, SCIENTIFIC AND CULTURAL PROGRAMS AND SERVICES, AND IN THE EXPANSION OF ITS COLLECTION, AS THE COUNTY, THROUGH THE DEPARTMENT, OPERATES AND MAINTAINS THE MUSEUM. A BOARD OF GOVERNORS APPOINTED BY THE BOARD OF SUPERVISORS IS THE GOVERNING BODY OF THE DEPARTMENT.

FORM 990

NON-GOVERNMENT SECURITIES

STATEMENT 6

SECURITY DESCRIPTION	COST/FMV	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	TOTAL NON-GOV'T SECURITIES
CORPORATE BONDS-PUBLICLY TRADED	FMV		1,692,773.		1,692,773.
MONEY MARKET FUNDS	FMV			296,384.	296,384.
MUTUAL FUNDS	FMV			4,246.	4,246.
TO FORM 990, LINE 54A, COL B			1,692,773.	300,630.	1,993,403.

FORM 990 GOVERNMENT SECURITIES STATEMENT 7

DESCRIPTION	COST/FMV	U.S. GOVERNMENT	STATE AND LOCAL GOV'T	TOTAL GOV'T SECURITIES
COMMON STOCKS-PUBLICALLY TRADED	FMV		111,157,483.	111,157,483.
GOVERNMENT SECURITIES	FMV	144,808.		144,808.
TOTAL TO FORM 990, LINE 54A, COL B		144,808.	111,157,483.	111,302,291.

FORM 990

OTHER ASSETS

STATEMENT 8

DESCRIPTION	BEGINNING OF YEAR	END OF YEAR
CASH WITH FISCAL AGENT	79,668,031.	78,233,112.
INTEREST RATE SWAP AGREEMENT	1,676,165.	
TOTAL TO FORM 990, PART IV, LINE 58	81,344,196.	78,233,112.

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FORM 990                      OTHER REVENUE NOT INCLUDED ON FORM 990                      STATEMENT      9

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DESCRIPTION	AMOUNT
UNREALIZED LOSS ON INTEREST RATE SWAPS	-6,995,329.
CHANGE IN VALUATION OF OBLIGATION UNDER SPLIT-INTEREST AGREEMENTS	71,695.
LOSS ON BOND REFUNDING	-2,188,185.
TOTAL TO FORM 990, PART IV-A	-9,111,819.

FORM 990 PART V-A - LIST OF CURRENT OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES STATEMENT 10

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
JANE PISANO 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	PRESIDENT OF MUSEUM 40.00	190,897.	21,031.	0.
JAMES GILSON 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	SECRETARY 40.00	170,500.	21,232.	0.
MARILYN PAYNE 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	CFO/VP FIN 40.00	58,745.	11,675.	0.
JURAL GARRETT 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	TREASURER 40.00	32,821.	12,373.	0.
LEONARD NAVARRO 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	DEPUTY DIRECTOR, ADMIN. & 40.00	44,498.	16,594.	0.
WALLIS ANNENBERG 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	TRUSTEE 1.00	0.	0.	0.
ANISSA BALSON 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	TRUSTEE 1.00	0.	0.	0.
ARUN BHUMITRA 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	GOVERNOR 1.00	0.	0.	0.
KENNETH W. BENTLEY 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	GOVERNOR 1.00	0.	0.	0.
LYNN W. BRENGEL 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	TRUSTEE 1.00	0.	0.	0.
NEAL H. BROCKMEYER 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	TRUSTEE 1.00	0.	0.	0.

HOWARD E. CHAMBERS 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	GOVERNOR 1.00	0.	0.	0.
DAVID COMSKY 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	GOVERNOR 1.00	0.	0.	0.
DR. MARK W. DUNDEE 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	GOVERNOR 1.00	0.	0.	0.
MICHAEL J. FOURTICQ 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	TRUSTEE 1.00	0.	0.	0.
STANLEY GOLD 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	TRUSTEE 1.00	0.	0.	0.
PAUL G. HAAGA, JR. 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	BOARD PRESIDENT 1.00	0.	0.	0.
SARAH MEEKER JENSEN 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	TRUSTEE 1.00	0.	0.	0.
CURTIS C. JUNG 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	GOVERNOR 1.00	0.	0.	0.
BETTINA KOREK 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	GOVERNOR 1.00	0.	0.	0.
ROGER KOZBERG 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	TRUSTEE 1.00	0.	0.	0.
MRS. KENNETH LEVENTHAL 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	TRUSTEE 1.00	0.	0.	0.
PARTICIA LOMBARD 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	TRUSTEE 1.00	0.	0.	0.
KI SUH PARK 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	GOVERNOR 1.00	0.	0.	0.

JOAN PAYDEN 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	TRUSTEE 1.00	0.	0.	0.
JULIO RAMIREZ, JR. 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	GOVERNOR 1.00	0.	0.	0.
MRS. THOMAS REDDIN 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	TRUSTEE 1.00	0.	0.	0.
RICHARD K. ROEDER 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	BOARD VICE CHAIR 1.00	0.	0.	0.
SHELDON STONE 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	TRUSTEE 1.00	0.	0.	0.
KEVIN SHARER 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	BOARD CHAIR 1.00	0.	0.	0.
MARILYN F. SOLOMON 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	GOVERNOR 1.00	0.	0.	0.
NICHOLAS H. STONNINGTON 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	GOVERNOR 1.00	0.	0.	0.
GREGORY R. STUBBLEFIELD 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	TRUSTEE 1.00	0.	0.	0.
DR. RICHARD SUN 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	GOVERNOR 1.00	0.	0.	0.
EDWARD P. ROSKI, JR. 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	TRUSTEE 1.00	0.	0.	0.
RICHARD S. VOLPERT 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	BOARD OF GOVERNORS PRES. 1.00	0.	0.	0.
SIMON WEN SHAO 900 EXPOSITION BLVD. LOS ANGELES, CA 90007	GOVERNOR 1.00	0.	0.	0.

DAVID GLICKMAN	TRUSTEE			
900 EXPOSITION BLVD.	1.00	0.	0.	0.
LOS ANGELES, CA 90007				
DOUGLAS RING	TRUSTEE			
900 EXPOSITION BLVD.	1.00	0.	0.	0.
LOS ANGELES, CA 90007				
DR. JAMES S. ROYER	PRESIDENT OF THE ALLIANCE			
900 EXPOSITION BLVD.	1.00	0.	0.	0.
LOS ANGELES, CA 90007				
MIRIAM SCHULMAN	TRUSTEE			
900 EXPOSITION BLVD.	1.00	0.	0.	0.
LOS ANGELES, CA 90007				
VICTORIA CHAPUS	TRUSTEE			
900 EXPOSITION BLVD.	1.00	0.	0.	0.
LOS ANGELES, CA 90007				
FIONA CHALOM	TRUSTEE			
900 EXPOSITION BLVD.	1.00	0.	0.	0.
LOS ANGELES, CA 90007				
MADELYN JACKREL	TRUSTEE			
900 EXPOSITION BLVD.	1.00	0.	0.	0.
LOS ANGELES, CA 90007				
MADISON RICHARDSON	TRUSTEE			
900 EXPOSITION BLVD.	1.00	0.	0.	0.
LOS ANGELES, CA 90007				
TOTALS INCLUDED ON FORM 990, PART V-A		497,461.	82,905.	0.

FORM 990 PART V-A OFFICER COMPENSATION FROM STATEMENT 11  
 RELATED ORGANIZATIONS

OFFICER'S NAME	COMPENSATION	EMPLOYEE BENEFIT PLAN CONTRIBUTION	EXPENSE ACCOUNT
JANE PISANO	134,177.		

  

NAME OF RELATED ORGANIZATION	EMPLOYER ID NUMBER
COUNTY OF LOS ANGELES	95-6000927

RELATIONSHIP BETWEEN ORGANIZATIONS

SUPPORTING ORGANIZATION

COMPENSATION DESCRIPTION

EMPLOYMENT FOR WORK DONE FOR THE COUNTY OF LOS ANGELES

OFFICER'S NAME	COMPENSATION	EMPLOYEE BENEFIT PLAN CONTRIBUTION	EXPENSE ACCOUNT
JURAL GARRETT	152,515.		

  

NAME OF RELATED ORGANIZATION	EMPLOYER ID NUMBER
COUNTY OF LOS ANGELES	95-6000927

RELATIONSHIP BETWEEN ORGANIZATIONS

SUPPORTING ORGANIZATION

COMPENSATION DESCRIPTION

EMPLOYMENT FOR WORK DONE FOR THE COUNTY OF LOS ANGELES

<u>OFFICER'S NAME</u>	<u>COMPENSATION</u>	<u>EMPLOYEE BENEFIT PLAN CONTRIBUTION</u>	<u>EXPENSE ACCOUNT</u>
LEONARD NAVARRO	128,994.		
<u>NAME OF RELATED ORGANIZATION</u>		<u>EMPLOYER ID NUMBER</u>	
COUNTY OF LOS ANGELES		95-6000927	
<u>RELATIONSHIP BETWEEN ORGANIZATIONS</u>			
<u>SUPPORTING ORGANIZATION</u>			
<u>COMPENSATION DESCRIPTION</u>			
EMPLOYMENT FOR WORK DONE FOR THE COUNTY OF LOS ANGELES			

FORM 990

PART VIII - RELATIONSHIP OF ACTIVITIES TO  
ACCOMPLISHMENT OF EXEMPT PURPOSES

STATEMENT 12

LINE	EXPLANATION OF RELATIONSHIP OF ACTIVITIES
93A- D & 103D	<p>ALL EXEMPT FUNCTION INCOME ALLOWS THE FOUNDATION TO SUPPORT THE MISSION OF THE MUSEUM. IT ALLOWS THE MUSEUM TO PRESENT NATURAL AND CULTURAL HISTORY TO THE PUBLIC AS WELL AS PROVIDE SUPPORT FOR RESEARCH AND EDUCATION IN NATURAL AND CULTURAL HISTORY. THE FOUNDATION PROVIDES SUPPORT AND ASSISTANCE IN THE MAINTENANCE AND DEVELOPMENT OF THE MUSEUM'S EDUCATIONAL, SCIENTIFIC AND CULTURAL PROGRAMS AND SERVICES AND EXPANSION OF COLLECTIONS. IN CONNECTION WITH THIS ASSISTANCE, THE COUNTY AND THE FOUNDATION HAVE ENTERED INTO FUNDING AGREEMENT THAT EXTENDS TO JUNE 30, 2081. UNDER THE TERMS OF THE FUNDING AGREEMENT, THE COUNTY PROVIDED APPROXIMATELY \$13.5 MILLION TO THE FOUNDATION FOR THE FISCAL YEAR ENDED JUNE 30, 2008. FACILITIES IN GOOD REPAIR AND WORKING ORDER. AT JUNE 30, 2008, \$8,356,000 HAD BEEN RECEIVED DIRECTLY BY THE FOUNDATION AS REIMBURSEMENT FOR CERTAIN FOUNDATION SERVICES AND IS INCLUDED IN THE ACCOMPANYING STATEMENTS OF ACTIVITIES AS SUPPORT FROM THE COUNTY. THE REMAINING AMOUNT OF \$5,185,183 HAD BEEN PROVIDED DIRECTLY BY THE COUNTY TO OTHER PROVIDERS OF SERVICES TO THE MUSEUM AND IS NOT REFLECTED IN THIS RETURN.</p> <p>THESE FUNDS WERE USED TO OPERATE AND GENERALLY ADMINISTER THE MUSEUM AND MAINTAIN AND PRESERVE THE MUSEUM AND ALL STRUCTURES AND</p>

SCHEDULE A	OTHER INCOME			STATEMENT 13
DESCRIPTION	2006 AMOUNT	2005 AMOUNT	2004 AMOUNT	2003 AMOUNT
OTHER INCOME	441,564.	453,356.	436,387.	126,008.
TOTAL TO SCHEDULE A, LINE 22	441,564.	453,356.	436,387.	126,008.

Depreciation and Amortization (Including Information on Listed Property) 990

2007

Attachment Sequence No. 67

Department of the Treasury Internal Revenue Service

See separate instructions. Attach to your tax return.

Name(s) shown on return

Business or activity to which this form relates

Identifying number

LOS ANGELES COUNTY MUSEUM OF NATURAL HISTORY FOUNDATION

FORM 990 PAGE 2

93-1022351

Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I.

Table with 5 main rows for Part I. Line 1: Maximum amount. Line 2: Total cost of section 179 property. Line 3: Threshold cost of section 179 property. Line 4: Reduction in limitation. Line 5: Dollar limitation for tax year. Line 6-7: Description of property and cost. Line 8: Total elected cost. Line 9: Tentative deduction. Line 10: Carryover of disallowed deduction. Line 11: Business income limitation. Line 12: Section 179 expense deduction. Line 13: Carryover of disallowed deduction to 2008.

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

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

Table with 3 rows for Part II. Line 14: Special depreciation allowance. Line 15: Property subject to section 168(f)(1) election. Line 16: Other depreciation (including ACRS).

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

Section A

Table with 2 rows for Section A. Line 17: MACRS deductions for assets placed in service in tax years beginning before 2007. Line 18: If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here.

Section B - Assets Placed in Service During 2007 Tax Year Using the General Depreciation System

Table with 7 columns: (a) Classification of property, (b) Month and year placed in service, (c) Basis for depreciation, (d) Recovery period, (e) Convention, (f) Method, (g) Depreciation deduction. Rows include 3-year, 5-year, 7-year, 10-year, 15-year, 20-year, 25-year property, Residential rental property, and Nonresidential real property.

Section C - Assets Placed in Service During 2007 Tax Year Using the Alternative Depreciation System

Table with 7 columns: (a) Class life, (b) Month and year placed in service, (c) Basis for depreciation, (d) Recovery period, (e) Convention, (f) Method, (g) Depreciation deduction. Rows include 12-year and 40-year class life.

Part IV Summary (see instructions)

Table with 3 rows for Part IV. Line 21: Listed property. Line 22: Total. Line 23: For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs.

Part V

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

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

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

24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No

Table with columns (a) Type of property, (b) Date placed in service, (c) Business/investment use percentage, (d) Cost or other basis, (e) Basis for depreciation, (f) Recovery period, (g) Method/Convention, (h) Depreciation deduction, (i) Elected section 179 cost

25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use 25

26 Property used more than 50% in a qualified business use: Table with columns for percentage and other details

27 Property used 50% or less in a qualified business use: Table with columns for percentage and other details

28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28

29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 29

Section B - Information on Use of Vehicles

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

Table for Section B with columns (a) through (f) Vehicle and rows 30-36 regarding miles driven and personal use availability

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

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

Table for Section C with rows 37-41 regarding policy statements and requirements, and Yes/No columns

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

Part VI Amortization

Table for Part VI with columns (a) Description of costs, (b) Date amortization begins, (c) Amortizable amount, (d) Code section, (e) Amortization period or percentage, (f) Amortization for this year

42 Amortization of costs that begins during your 2007 tax year: Table with columns for percentage and other details

43 Amortization of costs that began before your 2007 tax year 43

44 Total. Add amounts in column (f). See the instructions for where to report 44