

TAXABLE YEAR

California Exempt Organization Business Income Tax Return

FORM

2009

109

Calendar Year 2009 or fiscal year beginning 07/01/09, and ending 06/30/10

A First Return Filed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	B Is this an education IRA within the meaning of R&TC Section 23712? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	CORP # 0505207
Corporation/Organization Name CAL POLY POMONA FOUNDATION, INC		FEIN 95-2417645

Address
3801 WEST TEMPLE AVE. BLDG # 55

City POMONA	State CA	ZIP Code 91768-4038
-----------------------	--------------------	-------------------------------

C Is the organization under audit by the IRS or has the IRS audited in a prior year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No D Final Return? <input type="checkbox"/> Dissolved <input type="checkbox"/> Surrendered (Withdrawn) <input type="checkbox"/> Merged/Reorganized (attach explanation) If a box is checked, enter date _____ E Amended Return <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No F Accounting Method Used: (1) <input type="checkbox"/> Cash (2) <input checked="" type="checkbox"/> Accrual (3) <input type="checkbox"/> Other G Nature of trade or business RETAIL/DINING	H Is the organization a non-exempt charitable trust as described in IRC Section 4947(a)(1)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No I Is this organization claiming any Enterprise Zone (EZ), Los Angeles Revitalization Zone (LARZ), Local Agency Military Base Recovery Area (LAMBRA), Targeted Tax Area (TTA), or Manufacturing Enhancement Area tax benefits? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No J Is this organization a qualified pension, profit-sharing, or stock bonus plan as described in IRC Section 401(a)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No K Unrelated Business Activity (UBA) Code 721000
---	---

Taxable Corporation	1 Unrelated business taxable income from Side 2, Part II, line 30	1	00
	2 Multiply line 1 by the average apportionment percentage _____% from the Schedule R, Apportionment Formula Worksheet, line 6. See instructions	2	00
	3 Enter the lesser amount from line 1 or line 2. If line 2 is zero, enter the amount from line 1	3	00
Taxable Trust	4 Unrelated business taxable income from Side 2, Part II, line 30	4	00
Tax Computation	5 Unrelated business income from line 3 or line 4	5	00
	6 Enterprise zone, LAMBRA, LARZ, TTA, or Pierce's disease losses	6	00
	7 Net Operating Loss deduction. See General Information N	7	00
	8 Add line 6 and line 7	8	00
	9 Net unrelated business taxable income. Subtract line 8 from line 5	9	00
	10 Tax 8.84 % x line 9. See General Information J	10	00
	11 a New jobs credit, amount generated in 2009	11a	00
b New jobs credit, amount claimed in 2009	11b	00	
c Tax credits from Schedule B, line 4, and line 11b, Schedule P (100), or Schedule P (541). See Schedule B instructions	11c	00	
Total Tax	12 Balance. Subtract line 11c from line 10. If line 11c is greater than line 10, enter -0-	12	00
	13 Alternative minimum tax. See General Information Q	13	00
	14 Total tax. Add line 12 and line 13	14	00
Payments	15 Overpayment from a prior year allowed as a credit	15	00
	16 2009 estimated tax payments. See instructions	16	00
	17 2009 Nonresident or real estate withholding. See instructions	17	00
	18 Amount paid with extension (form FTB 3539)	18	00
	19 Total payments and credits. Add line 15 through line 18	19	00
Refund (Direct Deposit of Refund) or Amount Due	20 Tax due. Subtract line 19 from line 14. Pay entire amount with return. See instructions	20	00
	21 Overpayment. Subtract line 14 from line 19. See instructions	21	00
	22 Enter amount of line 21 to be applied to 2010 estimated tax	22	00
	23 Use tax. See instructions	23	00
	24 Refund. If the sum of line 22 and line 23 is less than line 21, then subtract the total from line 21	24	00
	a Fill in the account information to have the refund directly deposited. Routing number	24a	
	b Type: Checking <input type="checkbox"/> Savings <input type="checkbox"/> c Account Number	24c	
	25 Penalties and interest. See General Information M	25	00
	26 <input type="checkbox"/> Check if estimate penalty computed using Exception B or C and attach form FTB 5806.		
	27 Total amount due. Add line 20, line 22, line 23, and line 25, then subtract line 21 from the result	27	00

Unrelated Business Taxable Income

Part I Unrelated Trade or Business Income

1	a	Gross receipts or gross sales	1,218,440	b	Less returns and allowances		Balance	1c	1,218,440	00
2		Cost of goods sold and/or operations from Schedule A, line 7						2	566,253	00
3		Gross profit. Subtract line 2 from line 1c						3	652,187	00
4	a	Capital gain net income. See Specific Line Instructions - Trusts attach Schedule D (541)						4a		00
	b	Net gain (loss) from Part II, Schedule D-1						4b		00
	c	Capital loss deduction for trusts						4c		00
5		Income (or loss) from partnerships, limited liability companies, or S corporations. See specific line instructions. Attach Schedule K-1 (565, 568, or 100S) or similar schedule						5		00
6		Rental income from Schedule C						6	0	00
7		Unrelated debt-financed income from Schedule D						7		00
8		Investment income of an R&TC Section 23701g, 23701i, or 23701n organization from Schedule E						8		00
9		Annuities, interest, rents, and royalties of controlled organizations from Schedule F						9		00
10		Exploited exempt activity income from Schedule G						10		00
11		Advertising income from Schedule H, Part III, Column A						11		00
12		Other income. Attach schedule						12	704,218	00
13		Total unrelated trade or business income. Add line 3 through line 12						13	1,356,405	00

Part II Deductions Not Taken Elsewhere (Except for contributions, deductions must be directly connected with the unrelated business income.)

14		Compensation of officers, directors, and trustees from Schedule I						14		00
15		Salaries and wages						15	553,699	00
16		Repairs						16	53,869	00
17		Bad debts						17		00
18		Interest. Attach schedule						18		00
19		Taxes. Attach schedule						19		00
20		Contributions. See instructions and attach schedule						20		00
21	a	Depreciation (Corporations and Associations - Schedule J) (Trusts - form FTB 3885F)	128,740					21a		00
	b	Less: depreciation claimed on Schedule A. See instructions						21b		00
22		Depletion. Attach schedule						22		00
23	a	Contributions to deferred compensation plans						23a		00
	b	Employee benefit programs. See instructions						23b	159,100	00
24		Other deductions. Attach schedule						24	594,358	00
25		Total deductions. Add line 14 through line 24						25	1,489,766	00
26		Unrelated business taxable income before allowable excess advertising costs. Subtract line 25 from line 13						26	-133,361	00
27		Excess advertising costs from Schedule H, Part III, Column B						27		00
28		Unrelated business taxable income before specific deduction. Subtract line 27 from line 26						28	-133,361	00
29		Specific deduction. See instructions						29	1,000	00
30		Unrelated business taxable income. Subtract line 29 from line 28. If line 28 is a loss, enter line 28.						30	-133,361	00

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer	<i>David F. Prenovost</i>	Title	Executive Director	Date	2/14/11	● Telephone
	Preparer's signature	<i>David F. Prenovost</i>	Date	02/14/11	Check if self-employed	<input type="checkbox"/>	● Preparer's SSN/PTIN P00434118
Paid Preparer's Use Only	Firm's name (or yours, if self-employed) and address	David F. Prenovost CPA 3801 W. Temple Ave., Bldg # 55 Pomona, CA 91768-4038					● FEIN
	May the FTB discuss this return with the preparer shown above? See instructions						● Telephone 909-869-2948

● Yes No

CAL POLY POMONA FOUNDATION, INC 95-2417645

Schedule A Cost of Goods Sold and/or Operations. Method of inventory valuation (specify)

Cost Method

1	Inventory at beginning of year	1	31,443	00
2	Purchases	2	576,623	00
3	Cost of labor	3		00
4	a Additional IRC Section 263A costs. Attach schedule	4a		00
	b Other costs. Attach schedule	4b		00
5	Total. Add line 1 through line 4b	5	608,066	00
6	Inventory at end of year	6	41,813	00
7	Cost of goods sold and/or operations. Subtract line 6 from line 5. Enter here and on Side 2, Part I, line 2	7	566,253	00

Do the rules of IRC Section 263A (with respect to property produced or acquired for resale) apply to this organization? Yes No

Schedule B Tax Credits. Do not complete if you must file Schedule P (100 or 541).

1	Enter credit name	code no.	1	00
2	Enter credit name	code no.	2	00
3	Enter credit name	code no.	3	00
4	Total. Add line 1 through line 3. Enter here and on Side 1, line 11c		4	00

Schedule K Add-On Taxes or Recapture of Tax. See instructions.

1	Interest computation under the look-back method for completed long-term contracts. Attach form FTB 3834	1	00
2	Interest on tax attributable to installment: a Sales of certain timeshares or residential lots	2a	00
	b Method for non-dealer installment obligations	2b	00
3	IRC Section 197(f)(9)(B)(ii) election to recognize gain on the disposition of intangibles	3	00
4	Credit recapture. Credit name	4	00
5	Total. Combine the amounts on line 1 through line 4. See instructions	5	00

Schedule R Apportionment Formula Worksheet

Use only for unrelated trade or business amounts	(a) Total within and outside California	(b) Total within California	(c) Percent within California (b) ÷ (a)
1 Property factor: See instructions	0	0	
2 Payroll factor: Wages and other compensation of employees	0	0	
3 Sales factor: Gross sales and/or receipts less returns and allowances	0	0	
4 Multiply the factor on line 3, column (c) by 2			
5 Total percentage: Add the percentages in column (c), line 1, line 2, and line 4			
6 Average apportionment percentage: Divide the factor on line 5 by 4 and enter the result here and on Form 109, Side 1, line 2. See instructions for exceptions			

Schedule C Rental Income from Real Property and Personal Property Leased with Real Property

For rental income from debt-financed property, use Schedule D, R&TC Section 23701g, Section 23701i, and Section 23701n organizations. See instructions for exceptions.

1 Description of property	2 Rent received or accrued	3 Percentage of rent atr. to personal property
N/A		%
		%
		%

4 Complete if any item in column 3 is more than 50%, or for any item if the rent is determined on the basis of profit or income		5 Complete if any item in column 3 is more than 10%, but not more than 50%		
(a) Deductions directly connected (attach schedule)	(b) Income includible, column 2 less column 4(a)	(a) Gross income reportable, column 2 x column 3	(b) Deductions dir. connected with personal property (att. sch.)	(c) Net income includible, column 5(a) less column 5(b)

Add columns 4(b) and column 5(c). Enter here and on Side 2, Part I, line 6 **0**

CAL POLY POMONA FOUNDATION, INC

95-2417645

Schedule D Unrelated Debt-Financed Income

Table with 6 columns: 1 Description of debt-financed property, 2 Gross income from or allocable to debt-financed property, 3 Deductions directly connected with or allocable to debt-financed property (a) Straight-line depreciation, (b) Other deductions, 4 Amount of average acquisition indebtedness, 5 Average adjusted basis, 6 Debt basis percentage, 7 Gross income reportable, 8 Allocable deductions, 9 Net income (or loss) includible.

Total. Enter here and on Side 2, Part I, line 7

Schedule E Investment Income of an R&TC Section 23701g, Section 23701i, or Section 23701n Organization

Table with 6 columns: 1 Description, 2 Amount, 3 Deductions directly connected, 4 Net investment income, 5 Set-asides, 6 Balance of investment income.

Total. Enter here and on Side 2, Part I, line 8

Enter gross income from members (dues, fees, charges, or similar amounts)

Schedule F Income (Annuities, Interest, Rents, and Royalties) from Controlled Organizations

Table with 6 columns: 1 Name and address of controlled organizations, 2 Gross income from controlled organizations, 3 Deductions directly connected with column 2 income, 4 Exempt controlled organizations (a) Unrelated business taxable income, (b) Taxable income computed as though not exempt, (c) Percentage, 5 Nonexempt controlled organizations (a) Excess taxable income, (b) Taxable income or amount, (c) Percentage, 6 Gross income reportable, 7 Allowable deductions, 8 Net income includible.

Total. Enter here and on Side 2, Part I, line 9

Schedule G Exploited Exempt Activity Income, other than Advertising Income

Table with 8 columns: 1 Description of exploited activity, 2 Gross unrelated business income from trade or business, 3 Expenses directly connected with production of unrelated business income, 4 Net income from unrelated trade or business, 5 Gross income from activity that is not unrelated business income, 6 Expenses attributable to column 5, 7 Excess exempt expense, 8 Net income includible.

Total. Enter here and on Side 2, Part I, line 10

Schedule H Advertising Income and Excess Advertising Costs

Part I Income from Periodicals Reported on a Consolidated Basis

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising income or excess advertising costs. If column 2 is greater than column 3, complete columns 5, 6, and 7. If column 3 is greater than column 2, enter the excess in Part III, column B(b). Do not complete columns 5, 6, and 7.	5 Circulation income	6 Readership costs	7 If column 5 is greater than column 6, enter the income shown in column 4, in Part III, column A(b). If column 6 is greater than column 5, subtract the sum of column 6 and column 3 from the sum of column 5 and column 2. Enter amount in Part III, column A(b). If the amount is less than zero, enter -0-
N/A						
Totals						

Part II Income from Periodicals Reported on a Separate Basis

N/A						
-----	--	--	--	--	--	--

Part III Column A – Net Advertising Income

Part III Column B – Excess Advertising Costs

(a) Enter "consolidated periodical" and/or names of non-consolidated periodicals	(b) Enter total amount from Part I, column 4 or 7, and amounts listed in Part II, cols. 4 and 7	(a) Enter "consolidated periodical" and/or names of non-consolidated periodicals	(b) Enter total amount from Part I, col. 4, and amounts listed in Part II, column 4
N/A		N/A	
Enter total here and on Side 2, Part I, line 11		Enter total here and on Side 2, Part II, line 27	

Schedule I Compensation of Officers, Directors, and Trustees

1 Name of Officer	2 SSN or ITIN	3 Title	4 Percent of time devoted to business	5 Compensation attributable to unrelated business	6 Expense account allowances
N/A			%		
			%		
			%		
			%		
			%		
Total. Enter here and on Side 2, Part II, line 14					

Schedule J Depreciation (Corporations and Associations only. Trusts use form FTB 3885F.)

1 Group and guideline class or description of property	2 Date acquired	3 Cost or other basis	4 Depreciation allowed or allowable in prior years	5 Method of computing depreciation	6 Life or rate	7 Depreciation for this year
1 Total additional first-year depreciation (do not include in items below)						0
2 Other depreciation:						
Buildings	See Statement 19					128,740
Furniture and fixtures						
Transportation equipment						
Machinery and other equipment						
Other (specify)						
3 Other depreciation						
4 Total						128,740
5 Amount of depreciation claimed elsewhere on return						0
6 Balance. Subtract line 5 from line 4. Enter here and on Side 2, Part II, line 21a						128,740

95-2417645

California Statements

FYE: 6/30/2010

Statement 17 - Form 109, Part I, Line 12 - Other Income

<u>Description</u>	<u>Amount</u>
UBIT - KELLOGG HOUSE	\$ 5,041
UBIT - CONFER CENTER & LODGE	699,177
Total	<u>\$ 704,218</u>

Statement 18 - Form 109, Part II, Line 24 - Other Deductions

<u>Description</u>	<u>Amount</u>
RENT	\$ 26,078
ADVERTISING	10,272
UTILITIES	64,507
SUPPLIES	69,619
SERVICES	120,611
INSURANCE	18,791
TRAVEL	745
TELEPHONE	29,224
GENERAL AND ADMINSTRATIVE	110,273
BANK CARD FEE	15,393
POSTAGE	739
OTHERS	128,106
Total	<u>\$ 594,358</u>

California Statements

95-2417645

FYE: 6/30/2010

Statement 19 - Form 109, Schedule J - Depreciation Detail Information

Description	Date Acquired	Cost / Basis	Accum Depr	Method	Life / Rate	Current Depr	Add'l 1st Year
DEPRECIATION		\$	\$			\$ 128,740	\$
Total		\$	\$			\$ 128,740	\$