TAXABLE YEAR
2010

# California Exempt Organization Business Income Tax Return

\_FORM\_

109

					-
Calenda	month day year $r$ Year 2010 or fiscal year beginning $07/01/10$ , and end	month day year	4		
	Return Filed? Yes X No B Is this an education IRA within the		CORP#	±	-
	R&TC Section 23712?	100		505207	
Corporation	on/Organization Name		FEIN		-
	CAL POLY POMONA FOUNDA	TION INC		5-2417645	
Address					_
	1 WEST TEMPLE AVE. BLDG # 55				
City			State	ZIP Code	_
POM	ONA		CA	91768-4038	
	organization under audit by the IRS or has the IRS audited	H Is the organization a non-exempt			_
n a pri D Final R	or year?	in IRC Section 4947(a)(1)?			1c
•	Dissolved Surrendered (Withdrawn)	I Is this organization claiming any I Revitalization Zone (LARZ), Loca			
•	Merged/Reorganized (attach explanation)	(LAMBRA), Targeted Tax Area (1			
	is checked, enter date	Area (MEA) tax benefits?			lo
	ed Return Yes X No	J Is this organization a qualified per	nsion, profit	t-sharing, or stock	
	ting Method Used: (1) Cash (2) X Accrual (3) Other	bonus plan as described in IRC S	ection 401(	(a)? Yes X No	10
G Nature	of trade or business RETAIL/DINING	K Unrelated Business Activity (UBA	) Code	• 721000	
	1 Unrelated business taxable income from Side 2, Part II, line 3	0	. • 1	00	)
Taxable Corpora-	Multiply line 1 by the average apportionment percentage	% from the Schedule R,			
tion	Apportionment Formula Worksheet, line 6. See instructions		<b>2</b>	00	)_
Yavabla	3 Enter the lesser amount from line 1 or line 2. If line 2 is zero, 6	enter the amount from line 1	. • 3	00	,
Taxable Trust	4 Unrelated business taxable income from Side 2, Part II, line 3	0	. • 4	00	<u> </u>
	5 Unrelated business income from line 3 or line 4		● 5	00	<u></u>
	6 Enterprise zone, LAMBRA, LARZ, TTA, or Pierce's disease lo	sses	<b>6</b>	00	_
	7 Net Operating Loss deduction. See General Information N		. • 7	00	_
Tax Compu-	8 Add line 6 and line 7		. • 8	00	
tation	9 Net unrelated business taxable income. Subtract line 8 from li	ne 5	. • 9	00	
	10 Tax 8.84 % x line 9. See General Information J		. • 10	00	_
		11 b) Amount claimed	<ul><li>11</li></ul>	<b>b</b> 00	_
	c Tax credits from Schedule B. See instructions				_
					_
Total	12 Balance. Subtract line 11d from line 10. If line 11d is greater the	nan line 10, enter -0	. • 12		_
Tax	13 Alternative minimum tax. See General Information Q		9 13		-
	14 Total tax. Add line 12 and line 13		1 1000000000	] 00	ল
	15 Overpayment from a prior year allowed as a credit	15	00		
Payments	16 2010 estimated tax payments. See instructions	1 . 1	00		
	17 2010 withholding (Form 592-B and/or 593.) See instructions	17	00		
	18 Amount paid with extension (form FTB 3539)	18	00	l las	ě
	<ul><li>19 Total payments and credits. Add line 15 through line 18</li><li>20 Tax due. Subtract line 19 from line 14. Pay entire amount with</li></ul>		<b>●</b> 19	. 00	_
	24 Over 11 446 11 40 0 1 4 11			00	-
	1 3		<ul><li>21</li><li>32</li></ul>	00	-
Refund	<ul><li>22 Enter amount of line 21 to be applied to 2011 estimated tax</li><li>23 Use tax. See instructions</li></ul>		- 00	00	-
(Direct	24 Refund. If the sum of line 22 and line 23 is less than line 21, then subtract	t the total from line 21	<b>②</b> 23	00	-
Deposit of   Refund) or	a Fill in the account information to have the refund directly deposited.			00	
Amount Due			24a   24c		
- 40	25 Departice and interest Con Coneral Information M		24C 25	00	
-	26 Check if estimate penalty computed using Exception B or C and	Lattach form FTB 5806	23	100	
	27 Total amount due. Add line 20, line 22, line 23, and line 25, then subtract		27	00	i
	-, in any and and any and and any		41	100	-

### 95-2417645

### **Unrelated Business Taxable Income**

Б-	onielateu business Taxable Income											
<u> </u>	Part Unrelated Trade or Business Income 1 a Gross receipts or 1 502 822 b Less returns					1 500 000						
	gross sales and allowances		Ba	lance	● 1c	1,502,822 00						
2	Cost of goods sold and/or operations (Schedule A, line 7)				<b>2</b>	710,512 00						
3	• • • • • • • • • • • • • • • • • • • •				<b>⊚</b> 3	<b>792,310</b> 00						
4	4 a Capital gain net income. See Specific Line Instructions – Trusts	attach Sched	ule D (541)		<ul><li>4a</li></ul>	00						
	b Net gain (loss) from Part II, Schedule D-1				● 4b	00						
	c Capital loss deduction for trusts				<ul><li>4c</li></ul>	00						
5	Income (or loss) from partnerships, limited liability companies, or S corporation											
		Attach Schedule K-1 (565, 568, or 100S) or similar schedule										
6		<b>6</b>	<b>0</b> 00									
7	· · · · · · · · · · · · · · · · · · ·	• • • • • • • • • • • • • • • • • • • •			7	00						
8		organization (	Schedule El	• • • • • • •	8	00						
_						00						
9					-							
10					● <u>10</u>	00						
11	Advertising income (Schedule H, Part III, Column A)	<u>.</u> . <u>.</u>		'	<b>11</b>	1 045 507						
	Advertising income (Schedule H, Part III, Column A)  Other income. Attach schedule	See	Statement	<del>†</del> '	<ul><li>12</li></ul>	1,245,527 00						
	i I otal unrelated trade or business income. Add line 3 through line 12	<u> </u>			<ul><li>13</li></ul>	2,037,837 00						
	art II Deductions Not Taken Elsewhere (Except for contributions, dedu				d business ir	ncome.)						
14	Compensation of officers, directors, and trustees from Schedule I				<b>●</b> 14	00						
15	Salaries and wages	(	<b>1</b> 5	<b>767,706</b> 00								
16					● 16	<b>91,228</b> 00						
17					● 17	00						
18					<b>a</b> 18	00						
19					9 19	00						
20					20	00						
21			145,	799 o	0							
	b Less: depreciation claimed on Schedule A. See instructions			01		145,799 00						
22	Depleties Attack askedule				22	00						
	a Contributions to deferred compensation plans				23a	00						
	b Employee benefit programs. See instructions		• • • • • • • • • • • • • • • • • • • •		23b	237,586 00						
	b Employee benefit programs. See instructions Other deductions. Attach schedule	·····	Statomont	·······		819,705 00						
	Tatal deductions. Add line 44 through line 94	bee	s ca cement	· · · · · · · · · · · · · · · · · · ·	~ <del></del>							
	Total deductions. Add line 14 through line 24			·	25	2,062,024 00						
	The state of the s				26	<b>-24,187</b> 00						
27					₹ 27	00						
	Unrelated business taxable income before specific deduction. Subtra	act line 27 fron	n line 26		⋑ 28	<b>-24,187</b> <sub>00</sub>						
	Specific deduction. See instructions				9 29	1,000 00						
<u>30</u>	Unrelated business taxable income. Subtract line 29 from line 28. If line 28 is a l				30	$-24,187_{00}$						
Sign	Under penalties of perjury, I declare that I have examined this return, including acco											
Here	re Delier, it is true, correct, and complete. Declaration of preparer (other than taxpayer)	is based on all infor	mation of which preparer ha	•	dge.	<b>●</b> Telephone						
	Signature of officer Signature	while Di	ectoe	Date	12	1 eleptione						
***************************************	Preparer's		Date	Check if		Preparer's SSN/PTIN						
Paid	signature David F. Prenovost, CPA		04/13/12	employed		P00434118						
Use C	only Firm's name (or yours, if self-employed) David F. Prenovost	, CPA				● FEIN						
	if self-employed) and address Bavia F. Prenovost  3801 W. Temple Ave		# 55			A Telephone						
	Pomona, CA 91768	., <u>ug</u>	" 22		***************************************	• Telephone 909-869-2948						
	May the FTB discuss this return with the preparer shown above? See instructions   Yes  No											

1 Description of property

N/A

### 09413690002 04/13/2012 1:17 PM 95-2417645 CAL POLY POMONA FOUNDATION, INC Schedule A Cost of Goods Sold and/or Operations. Method of inventory valuation (specify) 41,813 00 Inventory at beginning of year 700,884 00 2 Purchases 2 ..... 00 3 Cost of labor 3 4 a Additional IRC Section 263A costs. Attach schedule 00 4a b Other costs. Attach schedule 00 4b **742,697**00 Total. Add line 1 through line 4b 5 32,185 00 Inventory at end of year 6 710,512 00 Cost of goods sold and/or operations. Subtract line 6 from line 5. Enter here and on Side 2, Part I, line 2 Do the rules of IRC Section 263A (with respect to property produced or acquired for resale) apply to this organization? X No Schedule B Tax Credits. Do not complete if you must file Schedule P (100 or 541). Do not claim the New Jobs Credit on Schedule B. 00 1 Enter credit name code no. 2 Enter credit name code no. 00 3 Enter credit name 00 code no. 00 4 Total. Add line 1 through line 3. Enter here and on Side 1, line 11c Schedule K Add-On Taxes or Recapture of Tax. See instructions. 00 Interest computation under the look-back method for completed long-term contracts. Attach form FTB 3834 1 Interest on tax attributable to installment: a Sales of certain timeshares or residential lots 00 b Method for non-dealer installment obligations 00 2b IRC Section 197(f)(9)(B)(ii) election to recognize gain on the disposition of intangibles 3 00 00 4 Credit recapture. Credit name 4 Total. Combine the amounts on line 1 through line 4. See instructions ..... 00 Schedule R Apportionment Formula Worksheet (c) Percent within Use only for unrelated trade or business amounts (a) Total within and (b) Total within California outside California California (b) ÷ (a) Property factor: See instructions 0 0 0 0 Payroll factor: Wages and other compensation of employees 0 0 Sales factor: Gross sales and/or receipts less returns and allowances Multiply the factor on line 3, column (c) by 2 Total percentage: Add the percentages in column (c), line 1, line 2, and line 4 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 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.

			%			
			. %			
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) Deduction sonal pro (att. sch.)		ome includible, column 5(a) umn 5(b)			

3643104 034 Form 109 C1 2010 Side 3

2 Rent received

or accrued

3 Percentage of rent attr.

to personal property

0

### CAL POLY POMONA FOUNDATION, INC 95-2417645

Schedule	D Unrel	ated Debt-Fina	nced Inco	me								
1 Description	of debt-finance	ed property			2 Gross income from or			financed property			th or allocable to debt-	
						cable to debt-fir perty	nanced	(a) Straig sch.)	nt-line dep	reciation (attach		Other deductions (attach sch.)
N/A												
					ļ							
4 Amount of average acquisition indebtedness on or allocable to debt-financed property  5 Average adjusted basis allocable to debt-finance property (attach schedul		t-financed	percentage		7 Gross income column 2 x col		total o	able deductions, of columns 3(a) and column 6			come (or loss) includible, n 7 less column 8	
(attach schedu	ie)		VARATORIS - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	column								
N					<u>%</u>							
					%							
Total Enter	hara and an	Side 2 Dort Li		<u> </u>		L						
Schedule		Side 2, Part I, Ii									<u> </u>	
1 Description	2 Amount	ment income (		ns directly connec		4 Net investme	ent income,	<b>5</b> Set	asides ach sched			ice of investment income, on 4 less column 5
N/A			(			00.00		(			Johan	
· · · · · · · · · · · · · · · · · · ·												
	· · · · · · · · · · · · · · · · · · ·				-							
							-	-				
Total. Enter	nere and on	Side 2, Part I, Ii	ne 8									
Enter gross i	ncome from	members (dues	s, fees, cha	arges, or simi	lar amou	unts)						
Schedule		st, Annuities, F										
Exempt Co	introlled Org	anizations										
1 Name of co	ontrolled organ	ization		2 Employer Identification Number		3 Net unrelat income (los	et unrelated come (loss)  4 Total of speci payments ma				e`´	6 Deductions directly connected with income in column (5)
N/A												
*******************************	*********************									******************************		
Nonexemp	t Controlled	Organizations										
	<b>7</b> Taxable	Income		8 Net unrela income (los							ntrolling	11 Deductions directly connected with income in column (10
1.		-										
2.												
3.												
4. Add co	lumns 5 and	10										
5. Add co	lumns 6 and	11										
6. Subtra	ct line 5 from	line 4. Enter he	ere and on	Side 2, Part	1, line 9							
Schedule	G Exploit	ed Exempt Ac	tivity Incor	me, other th	an Adve	rtising Incon	ne					
		ivity (attach sched			ated activi	ity is exploiting						O Not become for findible
2 Gross unrelated business incom from trade or business	auct	enses directly lected with pro- lon of unrelated ness income	4 Net income unrelated tr or business less column	s, column 2	not unit	s income activity that is attributable activity that is attributable to column 5 ess income		es de la Excess exempt ble expense, column 6 less column 5 but no more than column 4		not	8 Net income includible, column 4 less column 7 but not less than zero	
N/A												
												*
						4						
Total. Enter h	ere and on S	Side 2, Part I, Iir	e 10									:

### CAL POLY POMONA FOUNDATION, INC 95-2417645

Schedule H Advertising Income and Excess Advertising Costs

Part I Income from Periodicals Reported  1 Name of periodical  2 Gross advertising income  N/A	3 Direct advertising costs	4 Advertising incon or excess adverticosts. If column 2 greater than colucomplete column 6, and 7. If colum is greater than column 2, enter the excess in Part III, column B(b). Do complete column	ising 2 is mn 3, s 5, nn 3	Circulation income			) .	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
advertising income	advertising	or excess adverticosts. If column 2 greater than colucomplete column 6, and 7. If colum is greater than column 2, enter the excess in Part III, column B(b). Do complete column	ising 2 is mn 3, s 5, nn 3				) .	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
N/A		6, and 7.	dvertising income incom		6 Readership costs		column 6, enter the income shown in column 4, in Part III, column A(b). If column 6 is greater than	
								51.05
T-1.1								
Totals								
Part II Income from Periodicals Reported N/A	on a Separate Bas	SIS						
N/A								
				MATERIAL DE LA CONTRACTION DEL CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DEL CONTRACTION DE LA C	-			
Port III. Column A. Nat Advertising Incom		Part III	Calium	n D. Evene	- A di ta w	ioina C		
Part III Column A – Net Advertising Income  (a) Enter "consolidated periodical" and/or	(b) Enter total amount t	rom (a) Enter		n B – Exces ed periodical" a		ising Co		ter total amount from
names of non-consolidated periodicals	Part I, column 4 or amounts listed in Paccols, 4 and 7	l amount from unn 4 or 7, and issted in Part II, d 7					) Pai	rt I, col. 4, and amounts ed in Part II, column 4
N/A		N/A						
Enter total here and on Side 2, Part I, line 11	,	Enter total	here and or	n Side 2, Part II	, line 27			
Schedule I Compensation of Officers,	Directors, and Tru	stees						
1 Name of Officer	2 SSN or ITIN	3 Title			ent of devoted siness	5 Compen attributa unrelate		6 Expense account allowances
N/A					%			
					%			
	***************************************				%			
					%			
					%			
Total. Enter here and on Side 2, Part II, line 14								
Schedule J Depreciation (Corporations				3885F.)				
Group and guideline class or description of property	2 Date acquired	3 Cost or other basis		iation allowed vable in prior	5 Method compu deprec	ting	Life or rate	7 Depreciation for this year
1 Total additional first-year depreciation (do n	ot include in items b	elow)						. 0
2 Other depreciation:			T	<del></del>	<u> </u>			
Buildings	See State	ment 3						145,799
Furniture and fixtures			1					
Transportation equipment								
Machinery and other equipment								
Other (specify)								
3 Other depreciation								
4 Total								145,799
5 Amount of depreciation claimed elsewhere	on return							0
6 Balance. Subtract line 5 from line 4. Enter he								145,799

34 3645104 Form 109 C1 2010 **Side 5** 

95-2417645

FYE: 6/30/2011

### Statement 1 - Form 109, Part I, Line 12 - Other Income

Description	 Amount
UBIT - KELLOGG HOUSE	\$ 3,912
UBIT - CONFER CENTER & LODGE	 1,241,615
Total	\$ 1,245,527

### Statement 2 - Form 109, Part II, Line 24 - Other Deductions

Description	 Amount
RENT	\$ 29,384
ADVERTISING	20,760
UTILITIES	115,543
SUPPLIES	123,604
SERVICES	154,835
INSURANCE	39,726
TRAVEL	1,054
TELEPHONE	35 <b>,</b> 887
GENERAL AND ADMINSTRATIVE	158,614
BANK CARD FEE	36,330
POSTAGE	3,145
OTHERS	98,418
AGRICULTURE	725
MEALS AND REFRESHMENTS	 1,680
Total	\$ 819,705

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# 09413690002 CAL POLY POMONA FOUNDATION, INC 95-2417645 FYE: 6/30/2011

Information	
Detail	֡
Depreciation	
ر ح	
Schedule,	
109,	
Statement 3 - Form 109,	

	Add'l 1st Year	↔	\$	
	Current Depr		\$ 145,799	
	Life / Rate			
	Method	,	_ "	
	Accum Depr	50-	\$	
	Cost / Basis	₩.	\$	
	Date Acquired			
Description				
	נו ( ד m מ ד ב ב מ מ מ מ	VEF RECIALLON	Total	

# 18413690002 CAL POLY POMONA FOUNDATION, INC הב אאז אהא **California Statements**

95-2417645 FYE: 6/30/2011

Statement 1 - Form 199, Part II, Line 6 - Gross Amount Received from Sale of Assets

	Net Basis		\$ 676,644	9,310,719	315,000	280,000	220,000	276,898
	, e Depr		544 \$	13	000	001	001	\$ 61 \$
	Cost & Expense	1	3 \$ 676,644	9,411,016 9,310,719	315,000	280,000	0 220,000	276,898 4 \$ 11079261
	Gross Proceeds		\$ 669,548		285,000	265,000	230,000	265,000
	Date Sold		6/30/11 \$	6/30/11	9/01/10	5/07/10 11/03/10	5/22/09 12/23/10	9/21/10 1/13/11
	Date Acquired	-	7/01/10	7/01/10	7/23/10	5/07/10	5/22/03	9/21/10
	Whom Sold							
Description	How Received	DONATED SECURITIES	Donation INVESTMENT SECURITIES	Purchase RESIDENTIAL REAL ESTATE	Purchase RESIDENTIAL REAL ESTATE	Purchase RESIDENTIAL REAL ESTATE	Purchase RESIDENTIAL REAL ESTATE	Purchase Total

FYE: 6/30/2011

### Statement 2 - Form 199, Part II, Line 7 - Other Income

Description	Amount
TASTING AND AUCTION HARVEST AUCTION	\$ 71,609 53,223
ATHLETICS DEPT RAFFLE ADMIN FEES AND OTHER INCOME	14,644 836,145
UNREALIZED INVEST GAIN/LOSS	142,248
Total	\$ <u>1,117,869</u>

DATION, INC	California Statements
09413690002 CAL POLY POMONA FOUNDATION, INC	
09413690002	95-2417645

California Statements

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95-2417645 FYE: 6/30/2011

	Statement	Statement 3 - Form 199, Part II,	t II, Line 9 - 0 Amo	9 - Contributions, Gif Amounts	Line 9 - Contributions, Gifts, Grants, and Similar Amounts	<u>nilar</u>	
Activity							
No.				Name		,	Address
City	State	Zip	Relationship		Status	Property Information	Amount
EQUIPMENT POMONA	CA 917	CAL POLY POMONA 91768	ONA UNIVERSITY	SITY		3801 W. TEMPLE	AVE
			*				1,223,165
							1,118,450
							320,682
Subtotal							ر د د
T							3,313,
							\$ 3,313,108
2	St	atement 4 - Form	199, Part II,	Statement 4 - Form 199, Part II, Line 11 - Officer Compensation	Compensation		
Name		-	Address	ess			
	City	State	Zip		Title	Avg	Compensation Amount
BECKY PEPPING				() 		4	
JONATHAN JIANU				EX-OFFICIO		0.50	0
CASSANDRA REYES				STUDENT DIR		0.50	0
החדאים ארוא				STAFF COUNCI		0.50	0
DOIIGIAS FREEB				FACULTY MEMBER	<b>K</b>	0.50	0
ANDREW FRINSTEIN				EX-OFFICIO		0.50	0
				DEAN MEMEBR		0.50	

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4/13/2012 1·16 PM	
09413690002 CAL POLY POMONA FOUNDATION, INC	California Statements
09413690002 C	95-2417645

95-2417645 FYE: 6/30/2011 Statement 4 - Form 199, Part II, Line 11 - Officer Compensation (continued)

Name			Add	Address			
	City	State	Zip	Title		Avg C Hrs	Compensation Amount
EDWIN BARNES III							
PAIII, STOREY				EX-OFFICIO		0.50	
				EXEC DIR	4	40.00	217,355
O. MICHEL ONITS				CHAIRMAN		0.50	
MINNY PONG				COMUNITY DIR		0.50	
MARTIN DENROER				FACULTY MEMBER		0.50	
TTSP PIEX				EX-OFFICIO		0.50	
MET LETN CHANG				EX-OFFICIO		0.50	
OTTARE SANTOS				MEMBER@LARGE		0.50	
SCOTT WARRINGTON				COMUNITY DIR		0.50	
SCIC TISTS				EX-OFFICIO		0.50	
TSMAET. SOUTHEV				STAFF COUNCIL		0.50	
STEPHANIE DODA				EX-OFFICIO		0.50	
NAHO RIGHO				EX-OFFICIO		0.50	
WITT.T.TAM DRIFFAT				STUDENT DIR		0.50	
				COMMUNITY DIR		0.50	
Total						II	217,355

4

FYE: 6/30/2011

# Statement 5 - Form 199, Part II, Line 17 - Other Expenses

Description	Amount
	\$
FASTING AND AUCTION	75,56
VARIOUS CATERING	3,20
ENTERTAINMENT	1,47
ENIERIAINMENI .	Τ/ 1/
HARVEST AUCTION	10.60
VARIOUS	43,62
ENTERTAINMENT	1,50
ATHLETICS DEPT RAFFLE	
VARIOUS EXPENSES	83
BUILDINGS	
Insurance	31,71
Advertising	3,49
Supplies	20,86
Travel	1,32
Repairs	54,66
Utilities	201,19
BANK FEE	
POSTAGE	23
SALARY & WAGES	112,78
EMPLOYEE BENEFITS	53,30 15,39
TELEPHONE	250,79
SERVICES MEALS REFRESHMENT	5
MEALS REFRESHMENT OTHER	87,73
DEPRECIATION	691,59
OTHER EMPLOYEE BENEFITS	778,28
OTHER EMPLOYEE BENEFITS	448,00
THER EMPLOYEE BENEFITS	71,05
THER EMPLOYEE BENEFITS	386,17
PAYROLL TAXES	414,27
PAYROLL TAXES	466,86
PAYROLL TAXES	76,58
PAYROLL TAXES	240,16
Consulting and Other Service	1,395,31
CONSULTING AND OTHER SERVICES	1,659,47
CONSULTING AND OTHER SERVICES	888,95
CONSULTING AND OTHER SERVICES	265,78
ACCOUNTING	150,04
ACCOUNTING	1,12
CCOUNTING	3,30
EGAL	21,82
EGAL	76,61
EGAL	10,57
NVESTMENT MANAGEMENT	22,50
NVESTMENT MANAGEMENT	123,29
RAVEL	439,57
'RAVEL	410,14
PRAVEL	14,46
'RAVEL	

FYE: 6/30/2011

### Statement 5 - Form 199, Part II, Line 17 - Other Expenses (continued)

Description	Amount
Conferences/Meetings	\$ 78,785
Conferences/Meetings	2,353
Repairs and Maintenance	520,104
Repairs and Maintenance	48,980
Repairs and Maintenance	100,482
·	851,808
Utilities	11,247
Utilities	
Utilities	348,176
Feed	72,881
Feed	205,553
Agriculture	319,545
Agriculture	16,175
Miscellaneous	1,181,245
Miscellaneous	346 <b>,</b> 635
Miscellaneous	338,613
Miscellaneous	-118,680
General Administrative	395,889
Meals & Entertainment	9,686
Meals & Entertainment	256,413
Meals & Entertainment	558 <b>,</b> 464
Meals & Entertainment	155,163
Laundry	13,402
	13,544
Equipment Purchase	27,751
Equipment Purchase	
Equipment Purchase	541,823
Equipment Purchase	62,130
Bad Debts	192
Bad Debts	50,309
Bad Debts	1,039
Taxes	23,031
Taxes	98
Taxes	13,068
Indirect Costs Returned	657 <b>,</b> 354
RE Closing Costs	32,618
Transfer in/out	145,331
RE Write-down	157,749
PENSION PLAN CONTRIBUTIONS	527,469
PENSION PLAN CONTRIBUTIONS	595,248
PENSION PLAN CONTRIBUTIONS	97,647
PENSION PLAN CONTRIBUTIONS	306,203
ADVERTISING AND PROMOTION	153,532
	64,097
ADVERTISING AND PROMOTION	12,223
ADVERTISING AND PROMOTION	
OFFICE	1,991,917
OFFICE	1,194,717
OFFICE	940,950
OFFICE	190,605
INFORMATION TECHNOLOGY	252,159
INFORMATION TECHNOLOGY	106,018
INFORMATION TECHNOLOGY	17,105
ROYALTIES	295,459
Insurance	301,045
Insurance	2,327
Insurance	11,496
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### 09413690002 CAL POLY POMONA FOUNDATION, INC 95-2417645

# **California Statements**

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## Statement 5 - Form 199, Part II, Line 17 - Other Expenses (continued)

	Description	Amount
Insurance		\$ 38,230
Total		\$24,626,049

### Statement 6 - Form 199, Schedule L, Line 5 - Federal and State Government

Description	Beginning of Year	End of Year
TREASURY NOTES AGENCY SECURITIES DEBT SERVICE RESERVES	\$11,587,062 7,086,494 237,397	\$15,137,315 5,048,318 237,396
Total	\$18,910,953	\$20,423,029

### Statement 7 - Form 199, Schedule L, Line 7 - Investments in Stock

Description	Beginning of Year	End of Year
EQUITY SECURITIES	\$ 1,093,610	\$ 4,337,267
Total	\$ 1,093,610	\$ 4,337,267

### Statement 8 - Form 199, Schedule L, Line 9 - Other Investments

Description	 Beginning of Year		End of Year
EQUITY INVESTMENT	\$ 233,286	\$	421,953
Total	\$ 233,286	\$_	421,953

### Statement 9 - Form 199, Schedule L, Line 12 - Other Assets

Description	Beginning of Year	End of Year
ASSETS HELD FOR SALE	\$ 1,701,877	\$ 1,791,980
Prepaid Expenses	294,348	335,257
INTEREST CAPITALIZED		978,075
COST OF ISSUANCE		286,150
Total	\$ 1,996,225	\$ 3,391,462

09413690002 CAL POLY POMONA FOUNDATION, INC

**California Statements** 

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### Statement 10 - Form 199, Schedule L, Line 18 - Other Liabilities

Description	Beginning of Year	End of Year
DEPOSITS HELD IN CUSTODY FOR OTHERS LEASE OBLIGATIONS UNITRUST LIABILITY CAL POLY POMONA FOUNDATION CAL POLY POMONA FOUNDATION CAL POLY POMONA FOUNDATION Deferred Revenue	\$ 455,797 31,107,960 678,592 365,000	\$ 574,254 15,274 695,994 185,000 3,505,553 26,996,294 1,196,199
Total	\$33,560,689	\$33,168,568

### Statement 11 - Form 199, Schedule M-1, Line 4 - Income Not Recorded on Books

Description	Amount
Investment expenses	\$ 22,507
Total	\$ 22,507

## Statement 12 - Form 199, Schedule M-1, Line 8 - Deductions Not Charged Against Book Income

Description		Amount
Investment expenses	\$_	22,507
Total	\$	22,507