Form **990**

OMB No. 1545-0047 2014

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

Do not enter social security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990.

Dep Inte	artment of th	ne Treasury e Service	► Do not er ► Information	nter social security numbers n about Form 990 and its ins	s on this form as it may be ma structions is at www.irs.gov	de public. //form990,	,		Open to Pul Inspection	olic n
A	For the 2	2014 calendar	r year, or tax year begin		, 2014, and endin				2015	21,550,560,500
В	Check if ap			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,	3 0/			ication number	
	Addres	ss change Co	ommunity Colleg	re League of Ca	lifornia		68-	02244	112	
	Name	change 20	017 O Street	,0 200940 01 04	TTTOTIITO	l	E Teleph			
	Initial	return Sa	acramento, CA 9	5814			/01	6) 2 <i>1</i>	5-5031	
	Final ret	turn/terminated					(31	0) 24	3-3031	
	Ameno	ded return					G Gross	onainta Š	E 010	717
	Applic	ation pending F	Name and address of principa	al officer: Lawrence	Galizio	H(a) is this a			0,040	
		-	ame As C Above	Dawlettee					163	
ī	Tax-exer		501(c)(3) 501(c) () ◀ (insert no.)	4947(a)(1) or 527	H(b) Are all if No,	attach a list.	(see instr	uctions)	
J	Websit		ccleague.org	, (Moore 110.)		Heat Crosse				
K			Corporation Trust	Association Other ►	L Year of formation	H(c) Group 6			natida estado CO	
-		Summary	- Trast	Association Colei	L real of formation	on: 1990) 141 :	state of leg	gal domicile: CA	7
0.000	1 Bri	efly describe t	the organization's missi	ion or most significant	activities: <u>The Comm</u>		701100	. T.		
d.	l ca	alifornia	. a non-profit	nublic benefit	corporation, p	anire A	-011E0	<u>е_тес</u>	ague or	
ĕ	รเ	ccess by	strengthening	colleges throu	igh leadership d	evelon	ment	advo.	csca bo	id Licv
Ē	de	evelopmen	t and district	services.			<u> </u>		casy, pe	<u> </u>
Governance	2 Ch	eck this box 🕨	if the organizatio	on discontinued its oper	ations or disposed of mo	re than 25	5% of its	net ass	ets.	
	3 Nu	mber of voting	g members of the gover	rning body (Part VI, line	e 1a)			3		12
SS	4 Nu	mber of indep	endent voting members	s of the governing body	(Part VI, line 1b)			4		12
Zije Zije	5 To	tal number of	individuals employed in	n calendar year 2014 (F	Part V, line 2a)			5		24
Activities &	73 Tot	tal number of	volunteers (estimate it	Part VIII. solumn (C) li	ine 12			6		0
⋖	h Ne	t unrelated bu	isiness tavable income	from Form 990-T line	34			7a 7b		,986.
	B .10	t amelated bu	isiness taxable income	Hone I one i	J==	₁	ior Year	/B	Current Y	<u>,051.</u>
	8 Co	ntributions and	d grants (Part VIII, line	· 1h)	· · · · · · · · · · · · · · · · · · ·		158,8	40		
Revenue	9 Pro	ogram service	revenue (Part VIII, line	e 2a)	· · · · · · · · · · · · · · · · · · ·		,710,0		4,983	<u>,801.</u> 176
.⊀e	10 Inv	estment incor	me (Part VIII, column (/	A), lines 3, 4, and 7d).			121,0			,170.
æ	11 Oth	ner revenue (F	⊃art VIII, column (A), iir	nes 5, 6d, 8c, 9c, 10c, a	and 11e)					<i>, , ,</i> ₀ .
					column (A), line 12)		,989,9	49.	5,213	,747.
	13 Gra	ants and simil	ar amounts paid (Part I	IX, column (A), lines 1-	3)		<i></i>		<u>, </u>	<u></u>
	14 Be	nefits paid to	or for members (Part I)	X, column (A), line 4)						
	15 Sal	laries, other c	ompensation, employee	e benefits (Part IX, colu	umn (A), lines 5-10)	2	,002,0	49.	2,081	,065.
Expenses	16a Pro	ofessional fund	draising fees (Part IX, o	column (A), line 11e)						(
ber	b Tot	tal fundraising	expenses (Part IX, col	lumn (D), line 25) ►					Service Control of	
ŭ	l	· ·					,838,7		2,978	959
	l			•	(A), line 25)		,840,7		5,060	
							149,1			,024. ,723.
ō 8			porrison odditact and its			Reginning	g of Curren		End of Ye	
Not Assets or Fund Balance	20 Tot	tal assets (Par	rt X, line 16)				,043,5		11,283	
t As	21 Tot	-				ster etc.	,060,2		10,402	
2,5	22 Ne	t assets or fur	nd balances. Subtract li	ine 21 from line 20			,983,3			,484.
P		Signature E				4	, , , , , ,	J -	- 001	, 404.
				urn, including accompanying sc	hedules and statements, and to the	he hest of my	, knowledge	and helief	it is true correct	e and
com	olete. Declar	ation of preparer (other than officer) is based on a	all information of which prepare	hedules and statements, and to ti er has any knowledge.	10 5050 01 1119	momoago	cara bollor	, 15 0 00, 0011001	, 01.0
Sig	ın	Signature of	officer			Dat	е			
He		Lawren	nce Galizio			Presi	dent 8	E CEO		
			nt name and title.							
		Print/Type prepa	irer's name	Preparer's signature	Date Date	1	Check	if P	TIN	
Pa		Alana N		Alana N Theiss	Tri 12/23	/15	self-employe	ed P	00967001	
Pre	parer	Firm's name	► JAMES MARTA &	& CO. LLP						
Us	e Only	Firm's address					Firm's EIN	27-	1682261	
				CA 95825-4688			Phone no.	(916)		14
May	the IRS	discuss this re	eturn with the preparer	shown above? (see ins	structions)				X Yes	No

Б	m 990 (2014) Community College League of California	68-0224448	Page 2
£ 15.	Meaning Tourist Control of the Grant Control of the		
	Check if Schedule O contains a response or note to any line in this Part III		X
ı			
	The Community College League of California, a non-profit publi	<u>c benefit corpora</u>	tion,
	promotes student access and success by strengthening colleges	<u>through leadershi</u>	p
	development, advocacy, policy development and district service	<u>s.</u>	
- 2	Did the organization undertake any significant program services during the year which were not listed on the		
			[]
	Form 990 or 990-EZ? If 'Yes,' describe these new services on Schedule O.	····· Yes	X No
3			
J	Did the organization cease conducting, or make significant changes in how it conducts, any program If 'Yes,' describe these changes on Schedule O.	services? Yes	X No
4			
,	Describe the organization's program service accomplishments for each of its three largest program s Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and alloca and revenue, if any, for each program service reported.	services, as measured by extions to others, the total ex	xpenses. penses,
4 :	a (Code:) (Expenses \$ 1,336,546. including grants of \$) (Revenue \$ 1.207	7,772.)
	Conventions, Conferences and Workshops: The League sponsors con		0DS
	and seminars that provide vital training, information and leader	ership developmen	+ 052
	skills to its members. These include the Annual Convention, Annual	nual Legislative	<u>-</u>
	Conference, Annual Trustees Conference, Classified Leadership	Institute and Stu	. <u> </u>
	Trustees Workshop.		
			·
41	b (Code:) (Expenses \$ 1,032,172. including grants of \$) (Revenue \$)
	Athletic services: Through the California Community College Ath	nletics Association	
	provides services such as community colleges issues series and		
	code with circulation to some 35,000 community colleges, truste	es and other	
	interested in the work of community colleges.		
40	c (Code:) (Expenses \$ 882,164. including grants of \$)) (Revenue \$ 1 445	614
•	District Services Programs: Provide member districts with cost-	-effective easy-	10-1186
	purchasing, fiscal and foundation services. Districts benefit in		
		ices and commodit:	
	collaborative purchasing and competitive pricing for such servi		
	online library databases, energy services and technical assista		
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4 c	online library databases, energy services and technical assistated policies and procedures.		
40	online library databases, energy services and technical assistate policies and procedures.	ance in developing	

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3		3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV.	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V.	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
;	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11a	Х	
ļ	b Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.	116	Х	
•	c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII.	11 c		Х
•	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	X	
	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		Х
12:	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a	Х	
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional			Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	\vdash		<u>X</u>
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
ļ	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		Х
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		X
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18		Х
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.			X
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		<u>X</u>
ŀ	olf 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 ь		

Part IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II......... Χ 21 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III. X 22 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If 'Yes,' complete* Х 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a.... Х 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?..... 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?.... 24c d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?..... 24d 25 a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I..... Х 25a b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I..... Х 25b Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes', complete Schedule L, Part II. X 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III. 27 Х Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV..... X 28a **b** A family member of a current or former officer, director, trustee, or key employee? *If 'Yes,' complete Schedule L, Part IV.* 28b X c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV..... X 28c Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M..... X 29 X 30 X Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N. Part I..... Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II 32 X Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I...... Х 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1..... Χ X 35a 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2...... Х 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI............. 37 Х Form 990 (2014) BAA

Form 990 (2014) Community College League of California Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V	*********			. П
			Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 24			
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1 b (- 1934		
c Did the organization comply with backup withholding rules for reportable payments to vendors and (gambling) winnings to prize winners?	reportable gaming	1 c		X
2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State ments, filed for the calendar year ending with or within the year covered by this return		Sec.		Λ
b If at least one is reported on line 2a, did the organization file all required federal employments.		- caracteristical		37
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see in		2 b	Walesan Sag	X
3a Did the organization have unrelated business gross income of \$1,000 or more during the year.			· ·	
b If 'Yes' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation in Schedule 0</i>		3 a	X	
		3 b		
4 a At any time during the calendar year, did the organization have an interest in, or a signature or off financial account in a foreign country (such as a bank account, securities account, or other b If 'Yes,' enter the name of the foreign country: ►	financial account)?	4 a	Wilder Before Yourn	X
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financia	/ A / / / / / / / / / / / / / /	-		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the t				
b Did any taxable party notify the organization that it was or is a party to a prohibited tax she		5a		<u> </u>
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5 b		
		5 c		
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, solicit any contributions that were not tax deductible as charitable contributions?		6 a		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contribution not tax deductible?	itions or gifts were	6 b		
7 Organizations that may receive deductible contributions under section 170(c).				
a Did the organization receive a payment in excess of \$75 made partly as a contribution and services provided to the payor?	partly for goods and	7 a		X
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided		7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it Form 8282?		7 c		Х
d If 'Yes,' indicate the number of Forms 8282 filed during the year.	7d	70		- 22
e Did the organization receive any funds, directly or indirectly, to pay premiums on a persona		7 e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal be		7 f		X
g If the organization received a contribution of qualified intellectual property, did the organization file as required?				
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did th	e organization file a	7 g		
Form 1098-C?. 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintaine	d by the sponsoring	7 h	Stration	
organization have excess business holdings at any time during the year?		8		
9 Sponsoring organizations maintaining donor advised funds.				
a Did the sponsoring organization make any taxable distributions under section 4966?		9 a	e de construent en en en	Mazantanan
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related pe		9 ь	ı	
10 Section 501(c)(7) organizations. Enter:				
a Initiation fees and capital contributions included on Part VIII, line 12	10 a			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10 b			
11 Section 501(c)(12) organizations. Enter:	1			
a Gross income from members or shareholders	11 a			1111
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11 b			
12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu		12 a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.				
a Is the organization licensed to issue qualified health plans in more than one state?		13a		
Note. See the instructions for additional information the organization must report on Schedu	JIE U.			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c Enter the amount of reserves on hand	13c			
14a Did the organization receive any payments for indoor tanning services during the tax year?.		14a		X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in	Schedule Q	14b		
BAA TEEA0105L 05/28/14		Form	990 (2	2014)

Form 990 (2014) Community College League of California 68-0224448 Page 6 Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI..... Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year..... 12 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent..... 12 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?.... 2 Х Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?...... 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?.... Х Δ X 5 6 Did the organization have members or stockholders?.... 6 X 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?..... 7 a Х b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Х 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?..... Χ 8 a b Each committee with authority to act on behalf of the governing body?..... X 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O..... X 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10 a Did the organization have local chapters, branches, or affiliates?..... 10 a X b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... 11 a X b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12 a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Schedule O how this was done..... 12 c Х 13 Did the organization have a written whistleblower policy?...... 13 14 Did the organization have a written document retention and destruction policy?..... 14 X 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X a The organization's CEO, Executive Director, or top management official. See. Schedule. 0........... 15 a X 15 b b Other officers or key employees of the organization... See. Schedule..0...... If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х 162 taxable entity during the year?..... b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the 16b organization's exempt status with respect to such arrangements?..... Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed > CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Other (explain in Schedule O) Own website Another's website Upon request Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records:

Sarah Kiesling 2017 O Street

Sacramento CA 95814 (916) 245-5031

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

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

X

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

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

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. Position (do not check more (A) (B) (D) than one box, unless person is both an officer and a director/trustee) Name and Title Reportable compensation from Average hours Reportable compensation from Estimated amount of other oer week the organization (W-2/1099-MISC) related organizations (W-2/1099-MISC) compensation from the Institutional trustee employee ndividual trustee romer lighest compensated (list any hours for employee organizations related organiza-tions below dotted See Schedule O (1) Louise Jaffe 1 Chair Õ X 0. 0. 0. (2) Frank Gornick 1 0 X 0. Treasurer 0. 0. (3) Maureen Chenoweth 1 0 Х Secretary 0 0 0. (4) Nancy Chadwick 1 0. Director 0 Х 0. 0 (5) Janet Chaniot 1 0 0._ Board Member X 0. 0. (6) Ron Galatolo 1 0. 0. Board Member 0 Х 0. (7) Paul Gomez 1 Board Member 0 X 0. 0 0. (8) Jamillah Moore 1 Х 0. 0. Board Member 0 0. (9) Manny Ontiveros 1 0. Board Member 0 Х 0. 0. Kimberly Perry 1 Board Member 0 0. 0. 0. (11) Debbie Weatherly 1 0._ Board Member 0 Х 0 0 (12) Scott Lay 40 Former Presiden 0 313,790. 0 29,731. (13) Lawrence Galizio 40 President & CEO 0 Х 0. 0 0. Thuy Nguyen 40 Prior Int CEO 0. 0 0. Form 990 (2014) BAA TEEA0107L 02/27/14

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII... (A) Total revenue (C) Unrelated (B) (D) Related or Revenue exempt business excluded from tax under sections 512-514 function revenue revenue ons, Gifts, Grants Similar Amounts 1a Federated campaigns...... **b** Membership dues..... 1 b c Fundraising events..... 1 c d Related organizations...... 1 d Contributions, Cand Other Simil e Government grants (contributions) 1 e f All other contributions, gifts, grants, and similar amounts not included above . . . 140,801 g Noncash contributions included in lines 1a-1f: \$ h Total. Add lines 1a-1f..... 140,801 Program Service Revenue **Business Code** 2a Membership Dues 900099 2,309,356 2,309,356 541900 b <u>District Services</u> <u>1,445,614.</u> 1,401,178. 44,436 c Conv. Conf. and Workshops 541900 1,207,772 1,207,772 d Publications ____ 541800 20,434. 7,884. 12,550 f All other program service revenue ... g Total. Add lines 2a-2f..... 4,983,176. Investment income (including dividends, interest and other similar amounts)..... 89,770 89,770 Income from investment of tax-exempt bond proceeds. > Royalties..... (i) Real (ii) Personal 6a Gross rents..... b Less: rental expenses c Rental income or (loss)... d Net rental income or (loss)..... (i) Securities 7 a Gross amount from sales of assets other than inventory **b** Less: cost or other basis and sales expenses . . . , , , c Gain or (loss)...... d Net gain or (loss)..... 8a Gross income from fundraising events Other Revenue (not including . \$ of contributions reported on line 1c). See Part IV, line 18..... a **b** Less: direct expenses..... **b** c Net income or (loss) from fundraising events...... 9 a Gross income from gaming activities. See Part IV, line 19..... a b Less: direct expenses..... b c Net income or (loss) from gaming activities..... 10a Gross sales of inventory, less returns and allowances..... a **b** Less: cost of goods sold **b** c Net income or (loss) from sales of inventory...... 11a e Total. Add lines 11a-11d

12 Total revenue. See instructions......

5,213,747.

5,015,960

n.

56,986.

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to one line in this Bort IV.

	Check if Schedule O contains a response or note to any line in this Part IX										
Do 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses						
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.		<u>'</u>								
2	Grants and other assistance to domestic individuals. See Part IV, line 22	, , , , , , , , , , , , , , , , , , , ,									
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.										
4	Benefits paid to or for members										
5	Compensation of current officers, directors, trustees, and key employees	417,732.	319,147.	98,585.	0.						
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0						
7	Other salaries and wages	1,138,140.			0.						
8	Pension plan accruals and contributions	1,130,140.	869,539.	268,601.							
٥	(include section 401(k) and 403(b) employer contributions)	165,423.	126,383.	39,040.							
9	Other employee benefits	250,262.	191,200.	59,062.							
10	Payroll taxes	109,508.	83,664.	25,844.							
11	Fees for services (non-employees):	105,500.	05,004.	23,044.							
	Management										
	Legal										
	: Accounting										
	Lobbying										
	Professional fundraising services. See Part IV, line 17										
	Investment management fees										
g	Other. (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0)	65,881.	50,333.	15,548.							
13	Office expenses	173,357.	132,445.	40,912.							
14	Information technology	170,007.	102,440.	40,012.							
15	Royalties										
16	Occupancy										
17	Travel										
18	Payments of travel or entertainment expenses for any federal, state, or local public officials		,								
19	Conferences, conventions, and meetings	738,053.	563,872.	174,181.							
20	Interest		, - : : : : : : : : : : : : : : : : : :								
21	Payments to affiliates										
22	Depreciation, depletion, and amortization	37,799.	28,878.	8,921.							
	Insurance										
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)										
4	ľ	1,057,606.	808,011.	249,595.							
	Athletics District Services	474,055.	362,178.	111,877.							
	From Special Revenue Reserve	143,063.	109,300.	33,763.							
	Boards	127,632.	97,511.	30,121.							
	All other expenses	161,513.	123,451.	38,062.							
	Total functional expenses. Add lines 1 through 24e	5,060,024.	3,865,912.	1,194,112.	0.						
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► if following SOP 98-2 (ASC 958-720)										
BAA		TEEA0110L 05	/28/14	<u>. </u>	Form 990 (2014)						

		Check if Schedule O contains a response or note to any line in this Part X	* 7 * 4 1 1 1 1 1 1 1 1 1		
	·		(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing	2,621,427.	1	2,682,227.
	2	Savings and temporary cash investments	215,517.	2	262,266.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	289,536.	4	492,212.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
9	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
Ř	9	Prepaid expenses and deferred charges	114,193.	9	399,507.
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation	342,799.	10 c	331,540.
	11	Investments — publicly traded securities	1,882,573.	71	1,801,527.
	12	Investments - other securities. See Part IV, line 11	5,577,516.	12	5,314,368.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	,	15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	11,043,561.	16	11,283,647.
	17	Accounts payable and accrued expenses	286,402.	17	657,221.
	18	Grants payable		18	
	19	Deferred revenue	123,339.	19	183,046.
	20	Tax-exempt bond liabilities		20	
es	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D.	7,650,471.	25	9,561,896.
	26	Total liabilities. Add lines 17 through 25.	8,060,212.	26	10,402,163.
ces	27	Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets.		27	
<u>a</u>	27	Temporarily restricted net assets.	2,983,349.	28	881,484.
ä	28	Permanently restricted net assets.		29	
μ	29	Organizations that do not follow SFAS 117 (ASC 958), check here ►		29	
Net Assets or Fund Balances		and complete lines 30 through 34.			
ध	30	Capital stock or trust principal, or current funds.		30	
Š	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
t A	32	Retained earnings, endowment, accumulated income, or other funds		32	
Re	33	Total net assets or fund balances.	2,983,349.	33	881,484.
	34	Total liabilities and net assets/fund balances	11,043,561.	34	11,283,647.
BA	A				Form 990 (2014)

For	m 990 (2014) Community College League of California	68-0224	448	P	age 12
Pa	Reconciliation of Net Assets				
1	Check if Schedule O contains a response or note to any line in this Part XI				
	Total revenue (must equal Part VIII, column (A), line 12).		5,	213,	747.
2	Total expenses (must equal Part IX, column (A), line 25).	···· 2	5,	060,	024.
3	Revenue less expenses. Subtract line 2 from line 1			<u> 153, </u>	723.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		2,	983,	349.
5	Net unrealized gains (losses) on investments	5	_	109,	045.
6	Donated services and use of facilities				
7	Investment expenses				
8	Prior period adjustments		-2,	146,	543.
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)).	10		881,	
Pa	rt XII Financial Statements and Reporting	1 1 1		001,	404.
<u> </u>	Check if Schedule O contains a response or note to any line in this Part XII				П
				Yes	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				10000
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2	a	X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reseparate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis				
Į	b Were the organization's financial statements audited by an independent accountant?		21	ЬХ	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sebasis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis	eparate			
(c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?	audit,	20	c X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O .				
3 8	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin Audit Act and OMB Circular A-133?	gle	3a	a ·	х
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3t	b	
BAA			For	m 990	(2014)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2014

Open to Public Inspection

Employer identification number

Community College Leagu					68-022444	8					
Part I Reason for Public Ch	arity Status (All o	rganizations must	comple	te this	part.) See instruc	tions.					
The organization is not a private foun											
1 A church, convention of church			tion 170(b)(1)(A)((i).						
—											
	4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's										
name, city, and state:			,-,-								
☐ 1/0(b)(1)(A)(iv). (Complete	170(b)(1)(A)(iv). (Complete Part II.)										
6 A federal, state, or local gov	state, or local government or governmental unit described in section 170(b)(1)(A)(v). vation that normally receives a substantial part of its support from a governmental unit or from the general public described										
in section 170(b)(1)(A)(vi).	(Complete Part II.)			entar uni	it or from the general pub	DIIC described					
8 A community trust described											
investment income and unre June 30, 1975. See section	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 exempt 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). (Complete Part III.)										
10 An organization organized a	•	-									
ines 11a through 11d that d	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.										
a Type I. A supporting organization(s) the power to recomplete Part IV, Sections A	Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must										
management of the supporting											
c Type III functionally integrated organization(s) (see instruct	l. A supporting organizations). You must com	tion operated in connectio	n with, an A, D, an d	nd function	onally integrated with, its s	supported					
d Type III non-functionally integ functionally integrated. The instructions). You must com	rated. A supporting org	ianization operated in cor	nection v	with its s	supported organization(s)	that is not					
e Check this box if the organiz integrated, or Type III non-fu	ation received a writt	en determination from	the IRS t								
f Enter the number of supported					, , , , , , , , , , , , , , , , , , , ,						
g Provide the following information	n about the supported	d organization(s).				<u></u>					
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is organizati in your go docum	ion listed overning	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)					
			Yes	No							
(A)											
(B)											
(C)											
(D)											
(E)	ATTENCINATIVE STREET, AND EAST OF THE BROAD OF THE STREET, AND A STREET,	as profit association is enautory ending that all another before the forms are	nangkanananan e	775.1732 N.S.S.D.SELS							
Total											
BAA For Paperwork Reduction Act N	lotice, see the Instruc	tions for Form 990 or 9	990-EZ.		Schedule A (Form	990 or 990-EZ) 2014					

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale beg	endar year (or fiscal year inning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.)						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4					ing Progressing of the matter than the progress of the matter of the progress of the control of the progress of the control of the progress of the control of control of contro	
Sec	tion B. Total Support						
Cale begi	endar year (or fiscal year Inning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activ	ities, etc (see ins	tructions)				
13	First five years. If the Form 990 is organization, check this box and	for the organization	n's first, second, th	ird, fourth, or fifth t	ax year as a sectio	n 501(c)(3)	▶ □
Sec	tion C. Computation of Du	blic Cupport D	arcantaga				
14	Public support percentage for 20	J14 (line 6, columi	n (f) divided by lir	ne 11, column (f)).		14	<u>%</u> %
15	Public support percentage from					<u> </u>	
	a 33-1/3% support test — 2014. If and stop here. The organization	qualifies as a put	oliciy supported o	rganization			📋
ŀ	33-1/3% support test — 2013. If and stop here. The organization	the organization d qualifies as a pul	id not check a bo blicly supported o	x on line 13 or 16 organization	a, and line 15 is 3	33-1/3% or more,	check this box
17 a	a 10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstance:	s' test, check this	box and stop her	e. Explain in Part	VI how
	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an Private foundation. If the organi	meets the 'facts-a d-circumstances' t	and-circumstances test. The organiza	s' test, check this ation qualifies as a	box and stop her a publicly support	e. Explain in Part ed organization	Vi how the ►
BAA			on a box on mic	.0, 100, 100, 174,	· · · · · · · · · · · · · · · · · · ·		0 or 990-EZ) 2014
					Ş();	にしいし 木 (TUII ブブ	O OI 330-LLA) 4014

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

<u>Sec</u>	tion A. Public Support						
Calen	dar year (or fiscal yr beginning in) 🟲	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions and membership fees					· · · · · · · · · · · · · · · · · · ·	
	received. (Do not include any 'unusual grants.')	200 500	100.000	160 000	150 010	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
2	Gross receipts from admis-	388,582.	123,996.	160,291.	158,849.	140,801.	972,519.
_	sions, merchandise sold or	:					
	services performed, or facilities furnished in any activity that is						
	related to the organization's						
2	tax-exempt purpose Gross receipts from activities	4,231,4/4.	5,598,175.	5,629,342.	4,700,035.	4,926,190.	25,085,216.
J	that are not an unrelated trade or business under section 513.						0.
4	Tax revenues levied for the organization's benefit and						
	either paid to or expended on						
_	its behalf					· · ·	0.
J	facilities furnished by a						
	governmental unit to the organization without charge						,
6	Total. Add lines 1 through 5	4,620,056.	5 722 171	5 700 622	4,858,884.	E 066 001	0. 26,057,735.
	Amounts included on lines 1,	<i>-</i> ₹,020,030.	J, 144,111.	3,103,033.	±,030,004.	J, 000, 331.	20,031,133.
	2, and 3 received from disqualified persons	_		_		_ [_
h	Amounts included on lines 2	0.	0.	0.	0.	0.	0.
N	and 3 received from other than						
	disqualified persons that exceed the greater of \$5,000 or						
	1% of the amount on line 13						
	for the year	0.	0.	0.	0.	0.	0.
	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
8	Public support (Subtract line 7c from line 6.)						26,057,735.
Sec	tion B. Total Support						
Calen	dar year (or fiscal yr beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6	4,620,056.	5,722,171.	5,789,633.	4,858,884.	5,066,991.	26,057,735.
10 a	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties and income from						
	similar sources	7,840.	4,994.	-17,661.	121,065.	89,770.	206,008.
b	Unrelated business taxable income (less section 511						
	taxes) from businesses						_
_	acquired after June 30, 1975 Add lines 10a and 10b	7,840.	4,994.	-17,661.	121,065.	89,770.	<u>0.</u> 206,008.
	Net income from unrelated business	1,840.	4,994.	-17,661.	121,065.	69,110.	۷۷٥,008.
	activities not included in line 10b.						
	whether or not the business is regularly carried on	3,285.	-534.	-204.	981.	36,051.	39,579.
12	Other income. Do not include	٠, ٢, ٢, ٢, ١	201.	204.	, ,,,,,	20,001.	23,3,3.
	gain or loss from the sale of capital assets (Explain in						
	Part VI.). See. PartVI		30,996.				30,996.
13	Total support. (Add lines 9, 10c, 11 and 12.)	4,631,181.	5,757,627.	5,771,768.	4,980,930.	5,192,812.	26,334,318.
14	First five years. If the Form 990 organization, check this box and	is for the organiza	ation's first, secor	nd, third, fourth, o	r fifth tax year as	a section 501(c)(3)
Sec	tion C. Computation of Pul						
	Public support percentage for 20			ne 13, column (f))		15	98.95 %
	Public support percentage from 3	-				——	99.28 %
Sec	tion D. Computation of Inv	estment Incor	ne Percentage)			
17	Investment income percentage for	or 2014 (line 10c,	column (f) divide	d by line 13, colu			0.78 %
	Investment income percentage for						0.52 %
19 a	33-1/3% support tests — 2014. If	the organization	did not check the	box on line 14, a	and line 15 is more	e than 33-1/3%, a	ind line 17 ⊾ √
L	is not more than 33-1/3%, check 33-1/3% support tests — 2013. If						**************************************
	line 18 is not more than 33-1/3%	, check this box a	and stop here. Th	e organization qu	alifies as a public	ly supported orga	nization 🟲 📗
20	Private foundation. If the organization	zation did not che	ck a box on line	14, 19a, or 19b, c	heck this box and	see instructions.	············ <u>► []</u>
BAA			TEEA0403L	07/17/14	Sc	hedule A (Form 99	0 or 990-EZ) 2014

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All S	upporting Ord	anizations
------------------	---------------	------------

		Yes	No
Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain	1		
Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2		
Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below	3a		
Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization made the determination.	3b		
Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use	3с		
Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		
Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с	990000000000	PROFESSION (**2507
Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If 'Yes,' provide detail in Part VI	6		
Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990)	7		
Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990).	8		
Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI	9a		
Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI	9ь		
Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI	9с		
Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer (b) below.	10a		
Did the organization, have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.).	10ь		
	if Wo, "assentie in Part II flow the supported organizations are dissignated. If designated by class or purpose, describe the designation." If historic and continuing relationship, explain. Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2): If "Yes," explain in Part IV how the organization determined that the supported organization was described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part IV when and how the organization made the determination. Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part IV what controls the organization put in place to ensure such use. Was any supported organization not organized in the United States (foreign supported organization?? If "Yes' and if you checked 11a or 11b in Part I, answer (b) and (c) below. Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part IV how the organization had such control and discretion despite being controlled or supervised by or in connection with it's supported organizations. Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)! If "Yes," explain in Part IV what controls the organization used to ensure that all suppor to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. Did the organization add, substitute, or remove any supported organization during the lax year? If Yes, inspe	if No, "ascribe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation." In historic and continuing relationship, explain. Did the organization have any supported organization that does not have an IRS determination of status under section \$50(a)(1) or (2). Did the organization have a supported organization determined that the supported organization was described in section \$50(a)(4), (5), or (6) and satisfied the public support tests under section \$50(a)(2)? If "Yes," ascribe in Part VI when and how the organization make the determination. Did the organization confirm that each supported organization qualified under section \$50(a)(4), (5), or (6) and satisfied the public support tests under section \$50(a)(2)? If "Yes," ascribe in Part VI when and how the organization make the determination. Did the organization ensure that all support to such organizations was used exclusively for section \$170(c)(2)(B) supposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. Was any supported organization not organized in the United States (foreign supported organization)? If "Yes" and if you checked \$11 or \$110 in Part I, answer (b) and (c) below. 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization was used exclusively for section \$10(a)(a) purposes or supported organization was used exclusively for section \$10(a)(a) purposes or supported organization was used exclusively for section \$10(a)(a) purposes. Did the organization support any foreign supported organizations and discretion desprise being controlled or support to the foreign supported organization was used exclusively for section \$10(a)(a) purposes. Did the organization and substitute or remove any foreign supported organizations and substitution only. Now the action was accomplished (such as by and (c) below (f) applicable). Also, provide detail in Part VI, including (p)	Are all of the organization's supported arganizations listed by name in the organization's governing documents? If No. ** describe** Part V how the supported organization and designated by class or purpose, describe the designation. If historic and continuing relationship, explain. Dic the organization have any supported organization that does not have an IRS determination of status under section 505(9(1)) or (2). 2 Did the organization have a supported organization that does not have an IRS determination of status under section 405(9(3)) or (2). 2 Did the organization have a supported organization described in section 501(o(4), (5), or (6)? If "Yes," answer (b) and (c) below. 2 Did the organization confirm that each supported organization qualified under section 501(o(4), (5), or (6) and satisfied the public support tests under section 505(9(2)?) If "Yes," describe in Part V when and how the organization made the determination. 3 Did the organization ensure that all supports to such organizations was used exclusively for section 170(o(2)(8)). 3 Did the continuity of "Yes," explain in Part V what controls the organization put in place to ensure such use organization and the value of the organization put in place to ensure such use organization and the value of the organization put in place to ensure such uses of the purposes? If "Yes," explain in Part V what controls the organization put in place to ensure such uses of the organization of the organization and the organization and orga

man relations of the state of t		.,	.,
11 Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b A family member of a person described in (a) above?	11b	1.	<u> </u>
c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		
Section B. Type I Supporting Organizations			
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint		Yes	No
or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activi If the organization had more than one supported organization, describe how the powers to appoint and/or remov directors or trustees were allocated among the supported organizations and what conditions or restrictions, if an applied to such powers during the tax year.	e v.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing subenefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	ch		
Section C. Type II Supporting Organizations		<u>'</u>	
		Yes	No
Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of supporting organization was vested in the same persons that controlled or managed the supported organization(s).	of the s) 1		
Section D. All Type III Supporting Organizations	·		
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	No
Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tyear, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?			
Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)	2		
By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations play in this regard.	red 3		
Section E. Type III Functionally-Integrated Supporting Organizations	,,,,,,,		
1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions).		
a The organization satisfied the Activities Test. Complete line 2 below.	,.		
b The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	structions).		
2 Activities Test. Answer (a) and (b) below.		Yes	No
		163	140
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constitutes substantially all of its activities.	es l		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	for 2b		
3 Parent of Supported Organizations. Answer (a) and (b) below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees each of the supported organizations? Provide details in Part VI	of 3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If 'Yes,' describe in Part VI the role played by the organization in this regard</i>	3b		

1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on No.	oveml	ner 20 1970. See instruction	ns. All
Sec	other Type III non-functionally integrated supporting organizations must complete tion A — Adjusted Net Income	e Sec	tions A through E. (A) Prior Year	(B) Current Year
			(Ay) Nor rear	(optional)
	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions).	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion.	5		
- 6 	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
	Average monthly value of securities	1a		
<u>k</u>	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets.	1с		
	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other factors (explain in detail in Part VI):		le per le la le transière de la company de la company La company de la company d	
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-inte (see instructions).	grate	d Type III supporting orga	anization
ВАА			Schedule A (Form	1 990 or 990-EZ) 2014

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) So	upporting Organiza	tions (continued)	
Sec	tion D – Distributions		(50000000000000000000000000000000000000	Current Year
1	Amounts paid to supported organizations to accomplish exempt pu	ırposes		
2	Amounts paid to perform activity that directly furthers exempt purposes in excess of income from activity	of supported organization	S.	
3	Administrative expenses paid to accomplish exempt purposes of si			
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)	********	* * * * * * * * * * * * * * * * * * * *	
6	Other distributions (describe in Part VI). See instructions			
7	Total annual distributions. Add lines 1 through 6		*******	
8	Distributions to attentive supported organizations to which the organizati in Part VI). See instructions	on is responsive (provide	details	
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Sec	tion E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014 (reasonable cause required — see instructions)			
3	Excess distributions carryover, if any, to 2014:	Company of the Company		
			and a visit of the description of the second	
			Characteristics and the state of	100000000000000000000000000000000000000
- 6	From 2013			and the same recommends
	f Total of lines 3a through e			
Ç	Applied to underdistributions of prior years			Carry Carry Co. Carry Co.
ŀ	Applied to 2014 distributable amount			
	Carryover from 2009 not applied (see instructions)	22,000,000,000		
	Remainder. Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2014 from Section D, line 7: \$	and the second second	The control of the co	
a	Applied to underdistributions of prior years			
Ŀ	Applied to 2014 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)		To the state of th	
6	Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)		AND AND SECURITY OF SECURITY O	
7	Excess distributions carryover to 2015. Add lines 3j and 4c			
8	Breakdown of line 7:		PROTEIN TO LEGISLATION CONTRACTOR	101111111111111
a				
- t				
- 0		(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		(1) (1) (1) (2) (3) (4) (4) (4) (4)
C	Excess from 2013			
e	Excess from 2014	recipio de caparatió sa caparita.		to continue e pro-

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Schedule A (Form 990 or 990-EZ) 2014

Schedule A (Form 990 or 990-EZ) 2014 Community College League of California 68-0224448 Page 8

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Part III, Line 12 - Other Income

Nature and Source	2014	2013	2012	2011	2010
Other Income Total	\$ 0.	\$ 0.	\$ 0.	\$ 30,996. \$ 30,996.	\$ 0.

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF

Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

		Employer identification number
Community College League	of California	68-0224448
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	\overline{X} 501(c)(3) (enter number) organ	ization
	4947(a)(1) nonexempt charitable trus	t not treated as a private foundation
	527 political organization	,
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trus	st treated as a private foundation
	501(c)(3) taxable private foundation	·
Check if your organization is covered by	y the General Rule or a Special Rule	
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the Gel	neral Rule and a Special Rule. See instructions.
General Rule		
	990-EZ, or 990-PF that received, during the year	contributions totaling \$5,000 or more (in money or
property) from any one contributor.	Complete Parts I and II. See instructions for dete	, contributions totaling \$5,000 or more (in money or rmining a contributor's total contributions.
Special Rules		
For an organization described in sec	ction 501(c)(3) filing Form 990 or 990-EZ that met (A)(vi), that checked Schedule A (Form 990 or 990-E	the 33-1/3% support test of the regulations
received from any one contributor.)(A)(vi), that checked Schedule A (Form 990 or 990-E during the year, total contributions of the greater of	Z), Part II, line 13, 16a, or 16b, and that
Form 990, Part VIII, line 1h, or (ii) F	during the year, total contributions of the greater of form 990-EZ, line 1. Complete Parts I and II.	(1) 40,000 of (2) 270 of the amount of (1)
Ear on organization described in acc	tion E01(a)(7) (8) as (10) files Form 000 as 000	E7 that associated from the control of the control
during the year, total contributions of	ction 501(c)(7), (8), or (10) filing Form 990 or 990 of more than \$1,000 <i>exclusively</i> for religious, char ruelty to children or animals. Complete Parts I, II,	triat received from any one contributor, itable, scientific, literary, or educational
purposes, or for the prevention of cr	ruelty to children or animals. Complete Parts I, II,	and III.
—		
	ction 501(c)(7), (8), or (10) filing Form 990 or 990 sively for religious, charitable, etc., purposes, but	
\$1,000. If this box is checked, enter	here the total contributions that were received du	rio such contributions totaled more than uring the year for an exclusively religious.
charitable, etc., purpose. Do not cor	mplete any of the parts unless the General Rule a	applies to this organization because
it received <i>nonexclusively</i> religious,	charitable, etc., contributions totaling \$5,000 or m	nore during the year > >
• • • • • • • • • • • • • • • • • • •	and by the Consel Bule and an the Consel Bule	- dans t file Cabadula D (Favor 000 000 F7
Gaution: An organization that is not cov 990-PF), but it must answer 'No' on Pai	rered by the General Rule and/or the Special Rule rt IV, line 2, of its Form 990; or check the box on	s does not file Schedule B (Form 990, 990-EZ, or line H of its Form 990-EZ or on its Form 990-PF,
Part I, line 2, to certify that it does not r	meet the filing requirements of Schedule B (Form	990, 990-EZ, or 990-PF).
BAA For Paperwork Reduction Act No or 990-PF.	tice, see the Instructions for Form 990, 990EZ,	Schedule B (Form 990, 990-EZ, or 990-PF) (20
UL SOUPEE.		

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)	Page	1	of	3	of Part 1
Name of organization	Employer	identific	ation num	er	

Community College League of California

68-0224448

	Contributors (see instructions). Use duplicate copies of Part I if additional space	is needed.	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Atkinson, Andelson, Loya, Ruud Romo 17871 Park Plaza Dr, Suite 200 Cerritos, CA 90703	\$ <u>15,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Constellation New Energy 350 South Grand Avenue Los Angeles, CA 90071	\$ <u>15,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	Keenan and Associates 2355 Crenshaw Blvd, Suite 200 Torrance, CA 90501	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Libert Cassidy Whitmore 6033 W. Century Blvd, St 500 Los Angeles, CA 90045	\$ <u>10,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b)	(c)	(4)
	Name, address, and ZIP + 4	Total contributions	(d) Type of contribution
5	Piper Jaffray 345 California Street, Ste 240 San Francisco, CA 94104	Total contributions	Person X Payroll Complete Part II for noncash contributions.
5 (a) Number	Piper Jaffray 345 California Street, Ste 240	contributions	Person X Payroll Noncash (Complete Part II for
(a)	Piper Jaffray 345 California Street, Ste 240 San Francisco, CA 94104 (b)	\$ 5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

2 of

3 of **Part 1**

Community C	· ·	Employer identification number 68-0224448					
Part I Contri	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.						
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
7 RBC C	anital Markets		Person X				

Number	Name, address, and ZIP + 4		Total contributions	Type of contribution
7	RBC Capital Markets			Person X Payroll
	777 S. Figueroa St., St. 850	\$	10,000.	Noncash
	Los Angeles, CA 90744	_		(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution
8	Keygent			Person X
	999 N Sepulveda Blvd Ste 500	\$	5,000.	Payroll Noncash
	El_Segundo, CA_90245			(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution
9	WLC Architects			Person X
	10470 Foothill Blvd, Tower St	\$	15,000.	Payroll Noncash
	Rancho Cucamonga, CA 91730	_	:	(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution
Number	(b) Name, address, and ZIP + 4 Professional Personnel Leasing	-	(c) Total contributions	Type of contribution Person X
Number	Name, address, and ZIP + 4 Professional Personnel Leasing	\$	contributions	Type of contribution
Number	Name, address, and ZIP + 4 Professional Personnel Leasing	\$	contributions	Person X Payroll
Number	Name, address, and ZIP + 4 Professional Personnel Leasing 11751 Ashland Way	\$	contributions	Person X Payroll Noncash (Complete Part II for
10_ (a) Number	Name, address, and ZIP + 4 Professional Personnel Leasing 11751 Ashland Way Yucaipa, CA 92399 (b)	\$	contributions 5,000. (c) Total	Person X Payroll
10_ (a) Number	Name, address, and ZIP + 4 Professional Personnel Leasing 11751 Ashland Way Yucaipa, CA 92399 Name, address, and ZIP + 4	\$	contributions 5,000. (c) Total	Type of contribution Person X Payroll
10_ (a) Number	Name, address, and ZIP + 4 Professional Personnel Leasing 11751 Ashland Way Yucaipa, CA 92399 Name, address, and ZIP + 4 Blach Construction	\$	contributions 5,000. (c) Total contributions	Type of contribution Person X Payroll
10_ (a) Number	Name, address, and ZIP + 4 Professional Personnel Leasing 11751 Ashland Way Yucaipa, CA 92399 Name, address, and ZIP + 4 Blach Construction 469 El Camino Real, Ste 100	\$	contributions 5,000. (c) Total contributions	Type of contribution Person X Payroll
(a) Number 11_ (a) Number	Name, address, and ZIP + 4 Professional Personnel Leasing 11751 Ashland Way Yucaipa, CA 92399 Name, address, and ZIP + 4 Blach Construction 469 El Camino Real, Ste 100 Santa Clara, CA 95050	\$	(c) Total (c) Total (c) Total	Person X Payroll
(a) Number 11_ (a) Number	Name, address, and ZIP + 4 Professional Personnel Leasing 11751 Ashland Way Yucaipa, CA 92399 Name, address, and ZIP + 4 Blach Construction 469 El Camino Real, Ste 100 Santa Clara, CA 95050 Name, address, and ZIP + 4	\$	(c) Total (c) Total (c) Total	Person X Payroll

3 of

3 of Part 1

Community College League of California

Employer identification number 68-0224448

12.30.000	A	(see instructions).				
	Contributore	(coo inctructions)	I laa duwliaata sa	with a filter of the second of the	SE = 0.0000 1 .	
40. 442. 100.00000	OUR IDUIDIS	USEE HISH DURING IST.	- Ose ounicate co	inies of Part III	it additional s	nana is naadad

(a) Number	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution
13_	Morgan Stanley 1999 Ave of the Stars Ste 2400 Los Angeles , CA 90067	\$_	10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution
<u></u>	BRJ 3452 E Foothill Blvd Ste 1100 Pasadena, CA 91107	\$	<u>7,500.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution
— 	AVID 11910 Greenville Ave Ste 107 Dallas, TX 75243	\$	<u>7,</u> 500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution
<u>16</u> _	Foundation for CCC 1102 Q Street, Suite 3500 Sacramento, CA 95814	\$	7,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution
		\$		Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution
		_		

1 of Part II

Community College League of California

Employer identification number 68-0224448

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional s	pace is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A		
<u></u>		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_ _		\$	
BAA	Scher	 ule B (Form 990, 990-EZ, c	r 990-PF) (2014)

of Part III

Name of organization Employer identification number Community College League of California 68-0224448 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8) or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held N/A (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (d) Description of how gift is held (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (b) Purpose of gift (a) No. from Part I (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

2014

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and it instructions is at www.irs.gov/form990.

Open to Public Inspection

Schedule C (Form 990 or 990-EZ) 2014

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) (see instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see instructions), then

	Section 501(c)(4), (5), or (6) c	organizations: Complete Part III.			
Name	of organization			Employer identific	ation number
Cor	mmunity College Lea	que of California		68-022444	8
Pa	rt I-A Complete if the o	rganization is exempt under secti	on 501(c) or is a	section 527 organi	zation.
1		organization's direct and indirect political of			
2					
Pai	rt I-B Complete if the o	rganization is exempt under secti	on 501(c)(3).		
1	Enter the amount of any exc	cise tax incurred by the organization under	section 4955	> \$	0.
2	Enter the amount of any exc	cise tax incurred by organization managers	under section 4955.	⊁\$	0.
3	If the organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?		Yes No
4 a	a Was a correction made?	• • • • • • • • • • • • • • • • • • • •			Yes No
	If 'Yes,' describe in Part IV.				
Pai	t I-C Complete if the o	rganization is exempt under secti	on 501(c), excep	t section 501(c)(3).	
		pended by the filing organization for section			
2	Enter the amount of the filing of	organization's funds contributed to other organ	izations for section 52	7 evemnt	
-	function activities	······································		►\$	
3	Total exempt function expen	ditures. Add lines 1 and 2. Enter here and	on Form 1120-POL.		
	line 17b				
4	Did the filing organization file	e Form 1120-POL for this year?			Yes No
5	Enter the names, addresses	and employer identification number (EIN) s. For each organization listed, enter the a	of all section 527 pol	itical organizations to w	hich the filing
	organization made payments amount of political contribution	s. For each organization listed, enter the a is received that were promptly and directly del	mount paid from the t ivered to a senarate or	filing organization's fundation such	ds. Also enter the
	segregated fund or a political	al action committee (PAC). If additional spa	ace is needed, provide	e information in Part IV	•
	Z-3 NI	(A) A data	(A) EIN	45.4	23 A
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter-0	(e) Amount of political contributions received and promptly and directly delivered to a separate
				none, enter-o	delivered to a separate political organization. If
					none, enter -0
(1)					
(2)		L			
		<u> </u>			
(3)					
(4)					
(5)					
<u>(6)</u>					
(6)		Г		1	

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 20	14 Community Co	<u>llege League of</u>	California	68-0224	1448 Page 2
Part II-A Complete if section 501	the organization (h)).	is exempt under se	ction 501(c)(3) and	filed Form 5768 (el	ection under
A Check ► if the filir	ng organization belongs	to an affiliated group (and	I list in Part IV each affilia	ated group member's name).
		share of excess lobbying		3	·)
		ked box A and 'limited co			
(The term	Limits on Lobbyir 'expenditures' mean	ng Expenditures s amounts paid or incur	red.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expendit					
b Total lobbying expendit				54,359.	
c Total lobbying expendit				54,359.	0.
d Other exempt purpose (5,005,665.	
e Total exempt purpose e	expenditures (add line	s 1c and 1d)		5,060,024.	0.
f Lobbying nontaxable an both columns	nount. Enter the amo	unt from the following tal	ble in	403,001.	
If the amount on line 1e, col	umn (a) or (b) is: T	he lobbying nontaxable	amount is:		
Not over \$500,000)% of the amount on line 1e.			
Over \$500,000 but not over \$1,		100,000 plus 15% of the excess			
Over \$1,000,000 but not over \$		175,000 plus 10% of the excess			
Over \$1,500,000 but not over \$		225,000 plus 5% of the excess of	over \$1,500,000.		
Over \$17,000,000		1,000,000.			-
g Grassroots nontaxable ah Subtract line 1g from lin				100,750.	<u> </u>
i Subtract line 1f from lin				0.	<u>0.</u>
			•	0.	0
j If there is an amount othe section 4911 tax for this	er than zero on either iii s year?	ne in or line II, did the org	janization file Form 4/20	reporting	Yes No
(Som	e organizations that	Year Averaging Period L made a section 501(h) el below. See the instruction	ection do not have to o	complete all of the five	
		ng Expenditures During		•	
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2 a Lobbying non-taxable amount	440,575	. 428,023.	392,039.	403,001.	1,663,638.
b Lobbying ceiling amount (150% of line 2a, column (e))					2,495,457.
c Total lobbying expenditures	320,955	. 347,349.	47,161.	54,359.	769,824.
d Grassroots nontaxable amount	110,144	. 107,006.	98,010.	100,750.	415,910.
e Grassroots ceiling amount (150% of line 2d, column (e))					623,865.
f Grassroots lobbying expenditures					0.
AA				Schedule C (Form	990 or 990-EZ) 2014

Schedule C (Form 990 or 990-EZ) 2014 Community College League of California 68-0224448 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768

	(election under section 501(h)).					
or	each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description	(2)		(b)	
of th	ee lobbying activity.	Yes	No	Ar	nount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers?					
 	b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements?					
; ; ; 2;	Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? n Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total. Add lines 1c through 1i a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? of If 'Yes,' enter the amount of any tax incurred under section 4912					W 516 33
(c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912		TEANCOUNAS TO			
ittgav -	section 501(c)(6).	(C)(J)	01			
2 3	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? TILLE Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5).	 or s	2 3 ection 5	Yes 01(c)	No
	(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) answered 'Yes.'	Part I	II-A,	line 3, is	•	
1	Dues, assessments and similar amounts from members		1			
	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
	a Current year		2 a			
	Total		2 c			
	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		4			

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

5 Taxable amount of lobbying and political expenditures (see instructions)......

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

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

OMB No. 1545-0047 2014

Open to Public Inspection Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

7

8

Community College League of California 68-0224448 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year..... Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year..... Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?..... No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?.... Yes No Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements..... 2a 2 b c Number of conservation easements on a certified historic structure included in (a)...... 2 c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register..... 2 d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, No and enforcement of the conservation easements it holds?..... Yes Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year

and section 170(h)(4)(B)(ii)?....

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for

- b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenue included in Form 990, Part VIII, line 1.....
- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included in Form 990. Part VIII. line 1......
- b Assets included in Form 990, Part X..... BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

►S

No

Part III Organizations Maintain	ning Coll	ections	of Art, Hist	orical Treasures, o	r Other S	Similar Ass	ets (c	:ontinu	ıed)
3 Using the organization's acquisition, items (check all that apply):	accession, a	and other	records, check a	any of the following that a	re a signific	ant use of its	collectic	n	
a Public exhibition			d 🗌 Loan	or exchange programs					
b Scholarly research			e Other						
c Preservation for future genera	tions								
4 Provide a description of the organiza Part XIII.		tions and	explain how the	y further the organization	's exempt p	urpose in			
5 During the year, did the organizati to be sold to raise funds rather that	on solicit o	r receive	donations of a	rt, historical treasures, o	or other sin	nilar assets		. г	¬
Part IV Escrow and Custodial	Arranger	nents.	Complete if	the organization an	swered '	Yes' to For	<u>Yes</u> m 990		_∫No t IV,
line 9, or reported an a									
1 a Is the organization an agent, trusto on Form 990, Part X?				*******	ner assets	not included	Yes	. [No
b If 'Yes,' explain the arrangement in	n Part XIII a	and com	plete the follow	ing table:					
- Devisabes trales							Amoun	<u>t</u>	
c Beginning balance									14.1111
d Additions during the year									
e Distributions during the year									
f Ending balance									
2 a Did the organization include an arr									No
b If 'Yes,' explain the arrangement in	n Part XIII.	Check h	ere if the expla	nation has been provide	ed in Part)	KIII		· · · · · [
Part V Endowment Funds. Co	mplete if	the org	ganization ar	nswered 'Yes' to Fo	rm 990,	Part IV, lin	e 10.		
	(a) Current	t year	(b) Prior yea	r (c) Two years back	(d) Ti	rree years back	(e)	Four years	s back
1 a Beginning of year balance									
b Contributions									
c Net investment earnings, gains,									
and lossesd Grants or scholarships									
e Other expenditures for facilities							1		
and programs									
f Administrative expenses							-		
g End of year balance									
2 Provide the estimated percentage		ent year	end balance (lir	ne 1g, column (a)) held	as:				
a Board designated or quasi-endowmer			[%]						
b Permanent endowment ►		5							
c Temporarily restricted endowment			_%						
The percentages in lines 2a, 2b, a	nd 2c shoul	ld equal	100%.						
3 a Are there endowment funds not in the organization by:	possession	of the o	rganization that a	are held and administered	for the		٦	Yes	No
(i) unrelated organizations							3a(i)		
(ii) related organizations							3a(ii)		<u> </u>
b If 'Yes' to 3a(ii), are the related or									
4 Describe in Part XIII the intended in	-		•						L
			ILION 3 CHOWIN	ent tarias.					
Part VI Land, Buildings, and E Complete if the organiz			'Yes' to Forr	n 990, Part IV, line	11a. Se	e Form 990), Part	t X, Iir	ne 10.
Description of property		(a) Cost	or other basis vestment)	(b) Cost or other basis (other)		umulated eciation	(d) i	Book va	alue
1 a Land	.,.,,		<u></u>					51	,177.
b Buildings				556,397.	****	155,618.			,779.
c Leasehold improvements		-		180,053.		33,290.			,763.
d Equipment				112,971.	1	.00,098.			, 703. , 873.
e Other				157,231.		.37,283.			, <u>673.</u> , 948.
Total. Add lines 1a through 1e. (Column		<u> </u>	m 990 Part V						,940. ,540.
BAA	(u) must e	quai FUII	n 990, rait∧,	column (D), line 100.).			ila D /F/	ر 331. orm 990	
						SCHEOL	אכיף (ך(シロロ ブブリ	12014

Part VII Investments - Other Securities.			
Complete if the organization answered	'Yes' to Form 990	, Part IV, line 11b. See Form	990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other Gift annuity investments	5 314 368	End of Year Market Val	110
(A)	3,314,300.	Lild Of Teal Market Var	ue
<u>(B)</u>			
(C)			
(D)			
(E)			
(F)	• • • • • • • • • • • • • • • • • • • •		
(G)			
(H)			
(1)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)	5,314,368.	Company of the contract of the	
Part VIII Investments - Program Related.		N/A	
Complete if the organization answered		, Part IV, line 11c. See Form	990, Part X, line 13.
(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or er	nd-of-year market value
(1)	····-		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) > Part X Other Assets.	h7 / 7\		
Part X Other Assets. Complete if the organization answered	Yes' to Form 990	Part IV line 11d See Form	990 Part X line 15
(a) Desc	cription	, , , , , , , , , , , , , , , , , , , ,	(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)		•	
Total. (Column (b) must equal Form 990, Part X, column (B)), line 15.)		>
Part X Other Liabilities.		· · · · · · · · · · · · · · · · · · ·	
Complete if the organization answered 'Yes' to For	m 990, Part IV, line 11	e or 11f. See Form 990, Part X, line 2	5
(a) Description of liability	(b) Book value		
(1) Federal income taxes			
(2) Funds Held on Behalf of Others	2,346,04	<u>2.</u>	
(3) Gift Annuities	5,314,36		
(4) Pension Liability	1,901,48		
(5)			
(6)			
(7)		The second of the second of the second	
(8)			
(9)			
(10)			
(11)			reduces a more sensing and
	9,561,89		
2. Liability for uncertain tax positions. In Part XIII, provide the text of the foot			
tax positions under FIN 48 (ASC 740). Check here if the text of the footnote ha	s peen provided in Part XIII.		

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per R	eturn.	
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	. 1	5,104,702.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments	.	
b Donated services and use of facilities	7	
c Recoveries of prior year grants	7 1	
d Other (Describe in Part XIII.)	7	
e Add lines 2a through 2d	. 2e	-109,045.
3 Subtract line 2e from line 1	. 3	5,213,747.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.)	7 1	
c Add lines 4a and 4b	. 4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	. 5	5,213,747.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retur	
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	5,060,024.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		-,
a Donated services and use of facilities		
b Prior year adjustments	- 1	
c Other losses	1 1	
d Other (Describe in Part XIII.)	1	
e Add lines 2a through 2d.	2 e	
3 Subtract line 2e from line 1	3	5,060,024.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		0,000,021.
a investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.)	1	
c Add lines 4a and 4b	4 c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).	5	5,060,024.
Part XIII Supplemental Information.		

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part XI, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Schedule D (Form 990) 2014

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered 'Yes' on Form 990, Part IV, line 23.

Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization ► Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number

Community College League of California 68-0224448

Part I Questions Regarding Compensation

			Yes	l No
1	a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees	3		
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
	b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain	1 b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	X	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee X Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:			
	a Receive a severance payment or change-of-control payment?	4 a	310000000000000000000000000000000000000	X
;	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
-	c Participate in, or receive payment from, an equity-based compensation arrangement?	4 c		X
	If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
	a The organization?	5 a	100001111111111111111111111111111111111	X
	b Any related organization?	5 b		X
	If 'Yes' to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
i	a The organization?	6a		Х
	b Any related organization?	6b		X
	If 'Yes' to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If 'Yes,' describe in Part III.	8		Х
9	If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2014

Schedule J (Form 990) 2014 Community College League of California

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement	(D) Nontaxable	(E) Total of	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation	and other deferred compensation	benefits	columns(B)(i)-(D)	in column (B) reported as deferred in prior Form 990
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

2014

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Community College League of California

Employer identification number 68–0224448

Form 990, Part III, Line 4d - Other Program Services Description

Government Relations: The League represents the local community college perspective on educational, fiscal, organizational and governance issues, including issues of access and diversity, before the California State Legislature and Executive Branch.

Program support services: Include special reports; research studies; telephone, supplies, postage, office & meeting space provision and maintenance; public relations and other miscellaneous program support services.

Form 990, Part VI, Line 11b - Form 990 Review Process

League staff recommends that the Board review the Form 990 at the next scheduled meeting after submittal to the IRS.

Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management Written performance review and comparable compensation data from similar associations and local community colleges.

Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees
Written performance review and comparable compensation data from similar
associations and local community colleges.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

Documents are available on the League's website and upon request.

Form 990, Part VII - Compensation Explanation

Lawrence Galizio

Employee did not start working for the League until after 12/31/2014.

Thuy Nguyen

Employee did not start working for the League until after 12/31/2014.

Form **8868**

(Rev January 2014)

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Department of the Treasury Internal Revenue Service

Information about Form 8868 and its instructions is at www.irs.gov/form8868.

		Month Extensio	n, complete only Part II (on page 2 of th	nis form).	▶ 🗓		
	nplete Part II unless you have already been g			•			
corporation request an e Associated	filing (e-file). You can electronically file Form required to file Form 990-T), or an additiona extension of time to file any of the forms listed in With Certain Personal Benefit Contracts, whi iling of this form, visit www.irs.gov/efile and o	8868 if you nee I (not automatic Part I or Part II v ch must be sent	d a 3-month automatic extension of time 3-month extension of time. You can elevith the exception of Form 8870, Information to the IRS in paper format (see instruct	e to file (6 months for a ectronically file Form 8 n Return for Transfers	868 to		
Part I	Automatic 3-Month Extension of T	ime. Only sul	omit original (no copies needed)				
A corporati	on required to file Form 990-T and requesting				▶ ┌─		
	prporations (including 1120-C filers), partners		nd trusts must use Form 7004 to reques	t an extension of time	to file		
·····	Name of exempt organization or other filer, see instruction	ons.	Enter filer s identi	fying number, see ins			
Гуре or	The state of the s	, , , , , , , , , , , , , , , , , , ,		Employer identification fulfi	iber (Eliv) or		
orint	Community College League e	f Californ	: -	CO 0224440			
::1a b tha	Community College League on Number, street, and room or suite number. If a P.O. box	see instructions.	La	68-0224448 Social security number (SSI	N)		
file by the due date for		,			•		
iling your return. See	2017 O Street City, town or post office, state, and ZIP code. For a foreign address, see instructions.						
nstructions.	Sacramento, CA 95814						
Enter the P	Return code for the return that this application	ı is for (file a sep	parate application for each return)		01		
Application Is For	1	Return Code	Application Is For		Return Code		
	Form 990-EZ	01	Form 990-T (corporation)		07		
Form 990-E		02	Form 1041-A		08		
Form 4720 (03	Form 4720 (other than individual)		09		
Form 990-F	·	04	Form 5227		10		
	(section 401(a) or 408(a) trust)	05	Form 6069		11		
	* * * * * * * * * * * * * * * * * * * *		. 01111 0003				
	(trust other than above)	06	Form 8870		12		
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