## Form **990**

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A	For the	2018 calen	dar year, or tax	vear begin	ning 7/0	11	. 2018	8, and endi	na 6	/30		2019			
	Check if a		С	.,		-	,	,	<b>.</b>			ification number	,		
_		ess change	Community	. Collec	e Leamie	of Cal	ifornia	1			0224				
	H 10017 0 05							E Teleph							
	$\vdash$	H Sacramento CA 95811								300					
	Initial return Sacramento, CA 93611							(91	6) 2	45-5031					
	Final r	return/terminated													
	Amer	nded return								G Gross	eceipts	\$ 5,97	6,346.		
	Appli	ication pending	F Name and add	lress of principa	officer: Sar	ah Kies	ling		2	s a group retu			es X No		
			Same As C	Above					H(b) Are a	all subordinate: o," attach a lisi	included	d?	es No		
Т	Tax-exe	empt status:	X 501(c)(3)	501(c) (	) <b>4</b> (ii	nsert no.)	4947(a)(1) c	or 527	1 ""	o, duacira is	. (500 111	siruciions)			
J	Webs	ite: > ww	w.ccleagu	e.ora				100 TO -	H(c) Grou	p exemption n	umber 🏲	•			
K	Form of	f organization:	X Corporation	Trust	Association	Other -		Year of forma				egal domicile: (	'A		
_	ırt I	Summar		100000						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
	1 B	riefly descri	be the organiza	ation's miss	ion or most	significant a	ctivities: Th	Commi	nitu	7011200	T.e.a.	mie of			
	٦ - ا	'aliforn	ia, a non	-profit	public	henefit	COTPOT	ation	promot	es stin	iont	access	and		
Activities & Governance	=	UCCASS.	by streng	thening	college	e throu	nh lead	archin	develo	nmant	advo	access_	olicy		
5			ent and d				311 _1000.	crourb.	GCACT.	pmerre.	_aav	cacy, p	71171 -		
ē			if the				tions or dis	nosed of m	ore than	25% of its	net as				
පි			ting members								3	JC(J.	10		
<b>9</b> 5			dependent voti								4		10		
ë.			of individuals	_			•	•			5		26		
3			of volunteers								6		42		
₹	7a To	otal unrelate	ed business rev	enue from	Part VIII, col	lumn (C), lir	ne 12				7a	10	3,980.		
Ī	b N∈	et unrelated	business taxa	ble income	from Form 9	90-T, line 3	<b>8</b>		<i></i>		7b		0,354.		
										Prior Year		Current	_		
_	8 C	ontributions	and grants (Pa	art VIII, line	1h)					71,0	33.	12	4,993.		
<u> </u>			ice revenue (P						_	6,124,8	$\overline{}$		3,730.		
Revenue			come (Part VII							100,9			7,623.		
8	11 0	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)									.,				
			- add lines 8							6,296,8	68.	5.97	6,346.		
										-,,-		-,-			
			her compensation, employee benefits (Part IX, column (A), lines 5-10) If fundraising fees (Part IX, column (A), line 11e)							1,922,7	2 36	9,471.			
8													7,411.		
Expenses	l .		-	•	• •	•					-				
×			sing expenses (	•		· —									
	<b>17</b> 0	ther expens	es (Part IX, co	lumn (A), li	nes 11a-11d	, 11f-24e)							5,695.		
	18 To	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)								0,000,000			5,675,166		
	19 Re	evenue less	expenses. Sul	otract line 1	8 from line 1	12				665,0	41.	30	1,180.		
8	-3-							W PERMIT	Beginn	ing of Currer		End of			
Ŷ.	<b>20</b> To	otal assets (	Part X, line 16	)						2,665,1		14,16	0,499.		
₹6	20 To 21 To 22 No	otal liabilitie	s (Part X, line	26)						8,261,5			1,367.		
25	22 No	et assets or	fund balances	Subtract li	ne 21 from l	ine 20				4,403,5			9,132.		
	rtll	Signatur								4,400,0	11.	4,00	7, 132.		
		_							Ma bast of	m. banuladan	and ball	ad 14 ta a	and and		
comp	olete. Decla	aration of prepar	clare that I have ex- rer (other than office	er) is based on	all information of	f which prepare	has any knowl	ledge.	the best of	illy knowledge	and bene	et, it is ude, com	ect, and		
_	-								Т						
Sign Here		Signatur	re of officer							)ate					
		Can	h Vicelia	.~					Eine	noo Dii					
			sh Kieslir print name and title		_				FIIIc	nce Di	recti	)I			
_			reparer's name		Preparer's sign	nature		Date		Oheat 1	71-2 1	PTIN			
		1			' -					Delivery -	ן "נ				
Pai		James		MARKET	James M					self-employ	ed ,	P0035852	.U		
	eparer	Firm's name			CO. LL	r				-					
US	e Only	Firm's addre		OWE AVE						Firm's EIN		<u>-1682261</u>			
_		SACRAMENTO, CA 95825-4688							Phone no. (916) 993-9494						
May	May the IRS discuss this return with the preparer shown above? (see instructions)										. X Yes	No			

		- 77	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	5
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	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.			
í	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	
ı	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.	11b	Х	
•	bid 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
•	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
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
12a	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
ŀ	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	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
ŧ	bid 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		x
15	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
	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		X
	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
18				X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes.'	18		
	complete Schedule G, Part III	19 20a		X
	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a	,	**
			$\neg$	X - 0
21	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	21		Х

	n 990 (2018) Community College League of California 68-022444  rt IV Checklist of Required Schedules (continued)	18	F	age
rai	Checklist of Required Schedules (continued)		Yes	No
22	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.	22	103	Х
23	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 Schedule J.	23	x	
24 8	a 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	24a		Х
ŀ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		1
(	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		
•	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		-
<b>25</b> 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 1	25a		Х
t	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	25b		Х
26	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.	26		Х
27	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
28	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):	31		
а	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		х
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	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		х
33	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	33		х
34	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	34		х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
t	olf 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	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	36		х
37	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
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O	38	х	
Par	t 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		Vac	

38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b Note. All Form 990 filers are required to complete Schedule O	) and 19?	38	х	
Part V Statements Regarding Other IRS Filings and Tax Compliance				P270.03
Check if Schedule O contains a response or note to any line in this Part V				🗌
	12	22 12	Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	a 43			
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	<b>b</b> 0			Line of
c Did the organization comply with backup withholding rules for reportable payments to vendors and report	table gaming			100
c Did the organization comply with backup withholding rules for reportable payments to vendors and report (gambling) winnings to prize winners?		1 c	Х	
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Form 990 (2018) Community College League of California

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No
2 8	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 26			
t	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2Ь	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a	X	_
	off 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule Q	3 b	Х	_
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	-1111	Х
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			000
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
E	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
c	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		х
Ŀ	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6Ь		
7	Organizations that may receive deductible contributions under section 170(c).			
8	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х
Ł	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 was required to file	_		,,
	Form 8282?	7с	_	Х
	If 'Yes,' indicate the number of Forms 8282 filed during the year	7.		Х
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899			
	as required?	7 g		2
Г	Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring			- nois
	organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		-
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter:	200		
	Initiation fees and capital contributions included on Part VIII, line 12	access.	1.8	
11				
	Gross income from members or shareholders	98		111
-	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
ь	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	100	11 22	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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 Schedule O.	12	160	
	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		Pil.	
	Enter the amount of reserves on hand		1	17
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule Q	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15	100	х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х
	If 'Yes,' complete Form 4720, Schedule O.			

Form 990 (2018) 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 Yes No 1a Enter the number of voting members of the governing body at the end of the tax year. . . . . 10 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 . . . . 10 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 X 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 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?..... 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 Х 6 Did the organization have members or stockholders?.... 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more X members of the governing body?..... 7 a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... X 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body?..... 8a b Each committee with authority to act on behalf of the governing body?..... 8Ь X 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...... Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No X 10a Did the organization have local chapters, branches, or affiliates?..... 10a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?..... 10b X 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done..... X 13 Did the organization have a written whistleblower policy?..... 13 14 Did the organization have a written document retention and destruction policy?..... X 14 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? 15a X X 15 b 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 X taxable entity during the year?..... 16a 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 organization's exempt status with respect to such arrangements?. 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A 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 Own website Another's website Upon request Other (explain in Schedule O) 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

Form 990 (2018)	Community	College	T.eamie	of	California

68-0224448

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

## 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. (C) Position (do not check more than one box, unless person is both an officer and a (F) Estimated amount of other (A) Name and Title (B) Reportable compensation from Reportable compensation from Average hours director/trustee) amount of other compensation from the organization and related organizations per the organization (W-2/1099-MISC) related organizations (W-2/1099-MISC) Former Highest compensated Key employee Institutional andividual (list any hours for related rganiza tions brustee trustee below (1) Jim Moreno 1 Board Chair 0 X 0 0 0. (2) Marvin Martinez 1 X 0 0 0 1stVC/Treasurer 0. (3) Shondra West 1 2ndVC/Secretary 0 X 0 0. 0 (4) Stephan Castellanos 1 Board Member 0 Х 0 0. 0 (5) Jose Fierro 1 X 0. Board Member 0 0 0 (6) Adrienne Grey 1 Board Member 0 X 0. 0 0. (7) Karen Jimenez 1 Board Member 0 X 0 0. 0 (8) Ann Ransford 1 Board Member 0 X 0 0 0. (9) Linda Wah 1 Board Member 0 X 0 0 0. (10) Joe Wyse 1 0. Board Member 0 X 0. 0 40 (11) Lawrence Galizio 0 President & CEO 244,090. 0 7,496. (12) Sarah Kiesling 40 Finance Directr 0 X 134,059 0 9,349. (13) Carlyle Carter 40 President/CEO-CCCA 0 X 0 12,504. 176,826. 40 (14) Lisa Mealoy Vice President Ops 0 118,263. 0. 7,316.

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Fait VII Section A. Onicers, Directors, Th	13(663,	ivea		iki	uye	<del>5</del> 5,	air	u mignest con	ipensaleu Emp	loyees (continued)
	(B)	l		((	C)					
(A) Name and title	Average hours per	box	, unle	check ess po	erson	than is bot	h an	(D)  Reportable compensation from	(E) Reportable	(F) Estimated
	week (list any	<b>├</b>		_				the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation
	hours	or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	ĬĬ	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related
	related organiza	를 <u>ହ</u>	S	74	흫	99	"			organizations
	- tions below	\S	2		ğ	mpe		ŀ		
	dotted line)	8	stee		1	Sale				
						g				
(15) Lizette Navarette	_ 40 _									
Legislative Dirctr	0	ļ				X	L	140,775.	0.	7,752.
(16) Carmen Sandoval	_40_					١				
Director Ed Svcs	0		$\vdash$			X	<u> </u>	126,010.	0.	8,912.
(17) James Wiser	_40_	{				v		102 775	0	F 000
Director Library S	0		Н		H	Х		103,775.	0.	5,998.
(18)										
(19)			Н		$\vdash$		$\vdash$			
	<b></b>	1		,					İ	
(20)	<b></b>		Н							
(20)		1								
(21)					<del> </del>	-		UK.		
	{	1								
(22)										
		_	Ш							
(23)										
			Ш		<u> </u>					
(24)										
(AP)		Ш	Ш				L			
(25)										
1 b Sub-total.		Ш	Ш				<u> </u>	1,043,798.	0.	59,327.
c Total from continuation sheets to Part VII, Secti							•	1,043,798.	0.	0.
d Total (add lines 1b and 1c)							▶	1,043,798.	0.	59,327.
Total number of individuals (including but not limited										
from the organization > 7				, .						
										Yes No
3 Did the organization list any former officer, direc	tor, or tru	stee	kev	em /	nday	/ee .	or h	ighest compensat	ed employee	
on line 1a? If 'Yes,' complete Schedule J for suc	h individu	al						······		. 3 X
4 For any individual listed on line 1a, is the sum of	reportabl	e co	mpe	nsa	tion	and	oth	er compensation t	from	
the organization and related organizations greate such individual	r than \$1	50,00	00'?	If 'Y	es,	com	ple	te Schèdule J for		4 X
5 Did any person listed on line 1a receive or accru							 Into	d arabilanta	in alicializad	
for services rendered to the organization? If 'Yes	, comple	te Sc	hea	lule	J fo	r suc	h p	erson		. 5 X
Section B. Independent Contractors										
1 Complete this table for your five highest compen- compensation from the organization. Report compen										
The second secon		110 00	al Cit	uui j	Jour	CHQU				(C)
(A) Name and business add	ess							(B) Description of	of services	Compensation
Barbara Baran 640 34th Street Sac	rament	.0	С	A :	958	16		Consulting		135,874.
Rona Sherriff 5720 Classic Place C		_	_			608	3	Consulting		150,322.
				111						
541 - 2C. (67) - 10 - 67										
2 Total number of independent contractors (including b		ted to	tho	se l	isted	abo	ve)	who received more	than	Company of the
\$100,000 of compensation from the organization									273	
BAA	-	TEEA0	108L	08/0	3/18					Form <b>990</b> (2018)

0	Check if Schedule O contains a response	inse or note to any			(C)	
			<b>(A)</b> Total revenue	(B) Related or exempt function revenue	Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ats st	1 a Federated campaigns 1 a				UUUU S T	
3rants ounts	b Membership dues			The said to		
S, G	c Fundraising events		Contract of			
S F	d Related organizations 1 d		The second second			
, E	e Government grants (contributions) 1 e					
Contributions, Gifts, Grants and Other Similar Amounts	f All other contributions, gifts, grants, and similar amounts not included above 1 f	124,993.				
# P	g Noncash contributions included in lines 1a-1f: \$_					
0 4	h Total. Add lines 1a-1f		124,993.		September 1	
Program Service Revenue	l <u>.</u> -	Business Code				
2		900099	2,657,561.	2,657,561.		
ě		41900		1,568,999.		
ξi		41900		1,387,699.		
3		41800	129,850.		99,130.	30,720.
E		41800	9,621.	4,771.	4,850.	
\$	f All other program service revenue					
<u>~</u>	g Total. Add lines 2a-2f		5,753,730.			
	Investment income (including dividends, other similar amounts)	interest and	07 600			07 603
	4 Income from investment of tax-exempt I		97,623.	-		97,623.
	5 Royalties					
	(i) Real	(ii) Personal				
	6a Gross rents	(4) 1 0 10 0 11 11				THE REPORT OF
	b Less: rental expenses	<del>                                     </del>				
	c Rental income or (loss)					
	d Net rental income or (loss)	<u> </u>				
	( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( (	(ii) Other				
	assets other than inventory	( ) Calle				
	b Less: cost or other basis and sales expenses					THE REPORT OF
	d Net gain or (loss)					
	_ , ,					
Revenue	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c).					
ě	See Part IV, line 18 a			WEST STREET		Kee In Land
_						
Other	b Less: direct expenses b c Net income or (loss) from fundraising ex					
0	9a Gross income from gaming activities. See Part IV, line 19a	vents				May 15
	b Less: direct expenses b	$\vdash$	AMESON ST			CONTRACTOR
	c Net income or (loss) from gaming activit				-	
	10a Gross sales of inventory, less returns					
	and allowances					
	c Net income or (loss) from sales of inven					- Secondari
	Miscellaneous Revenue	Business Code				
	11 a					-
	р					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d					
	12 Total revenue. See instructions		5.976.346.	5,619,030.	103,980.	128,343.

Part IX | Statement of Functional Expenses

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 any line in this Part IX..... (B) Program service (D) (A) Total expenses Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. Management and general expenses Fundráising expenses expenses Grants and other assistance to domestic organizations and domestic governments.
See Part IV, line 21..... Grants and other assistance to domestic individuals. See Part IV, line 22 . . . . . . . Grants and other assistance to foreign organizations, foreign governments, and for-eign individuals. See Part IV, lines 15 and 16 Compensation of current officers, directors, 403,391 287,641 115,750 0. trustees, and key employees ...... 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. 888,030 7 Other salaries and wages ...... 1,245,383 357,353 Pension plan accruals and contributions (include section 401(k) and 403(b) 200,276 80,593 280,869. 313,885 223,818. 90,067. 36,138. 125,943. 89,805. 11 Fees for services (non-employees): c Accounting..... d Lobbying..... e Professional fundraising services. See Part IV, line 17... f Investment management fees ...... g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.). . . . . 51,514. 179,526. 128,012. 11,300. 8,058. 3,242. Office expenses ..... 182,898. 73,600. 256,498. 14 Information technology..... Royalties..... 15 **16** Occupancy..... 17 Travel..... Payments of travel or entertainment expenses for any federal, state, or local public officials..... 19 Conferences, conventions, and meetings.... 940,358. 670.530 269,828 20 Interest ..... 21 Payments to affiliates..... 22 Depreciation, depletion, and amortization ... 3,212. 2,290 922 23 Insurance..... 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.)..... a Athletics\_\_\_\_\_ 1,336,684. 953, 133. 383,551. b District Services 235,462 167,898. 67,564. 75,904. 54,124. 21,780. 14,270. 49,730. 35,460. d Rental Expense - Interfund 217,021. 154,750. 62,271. e All other expenses..... 5,675,166. 4,046,723. 1,628,443. 0. 25 Total functional expenses. Add lines 1 through 24e. . . . 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).....

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14,160,499.

12,665,108.

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year (B) End of year Cash — non-interest-bearing..... 2,804,444 1 4,927,890. 2 Savings and temporary cash investments..... 1,189,008 2 820,856. Pledges and grants receivable, net..... 3 3 Accounts receivable, net ..... 1,932,337 4 1,156,683. Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.... 5 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 Notes and loans receivable, net..... 7 Inventories for sale or use..... 8 Prepaid expenses and deferred charges..... 9 160,481 178,566. 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D..... 10a 1,057,055. 742,142. 298,111 10 c 314,913. 1,433,212 11 1,798,805. 12 Investments – other securities. See Part IV, line 11..... 12 4,847,515. 4,962,785. Investments - program-related. See Part IV, line 11..... 13 13 Intangible assets..... 14 15 Other assets. See Part IV, line 11..... 15 Total assets. Add lines 1 through 15 (must equal line 34).... 16 16 12,665,108. 14,160,499. Accounts payable and accrued expenses..... 17 17 451,469. 446,966. 18 Grants payable ..... 18 19 108,926. 19 81,688. 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D..... 21 21 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 24 Unsecured notes and loans payable to unrelated third parties..... 24 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. 25 8,942,713. 7,701,202 Total liabilities. Add lines 17 through 25. 8,261,597. 26 9,471,367. Organizations that follow SFAS 117 (ASC 958), check here ▶ X and complete Net Assets or Fund Balances lines 27 through 29, and lines 33 and 34. Unrestricted net assets..... 4,403,511 27 4,689,132. Temporarily restricted net assets..... 28 Permanently restricted net assets..... 29 Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34. Capital stock or trust principal, or current funds..... 30 Paid-in or capital surplus, or land, building, or equipment fund..... 31 Retained earnings, endowment, accumulated income, or other funds...... 32 33 Total net assets or fund balances..... 33 4,689,132. 4,403,511.

Total liabilities and net assets/fund balances..... TEEA0111L 08/03/18 BAA Form 990 (2018)

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Forr		0224448		Pa	ge <b>12</b>		
Pa	rt XI Reconciliation of Net Assets	VA.					
	Check if Schedule O contains a response or note to any line in this Part XI		0.00		. П		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,9	76,3	46.		
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,6	75,1	66.		
3	Revenue less expenses. Subtract line 2 from line 1	3	3	01,1	80.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	4	4,4	03,5	11.		
5	Net unrealized gains (losses) on investments	5	-	15,5	59.		
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
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	4,6	<u>89,1</u>	<u>32.</u>		
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII				. П		
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				-		
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.						
2:	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х		
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis	ed on a					
- 1	Were the organization's financial statements audited by an independent accountant?		2 b	X			
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separabasis, consolidated basis, or both:    X	ate			HIS		
•	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?						
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.						
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?							
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits						
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