

Form **990**

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

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2009 calendar year, or tax year beginning and ending

<p>B Check if applicable:</p> <p><input type="checkbox"/> Address change</p> <p><input type="checkbox"/> Name change</p> <p><input type="checkbox"/> Initial return</p> <p><input type="checkbox"/> Terminated</p> <p><input type="checkbox"/> Amended return</p> <p><input type="checkbox"/> Application pending</p>	<p>Please use IRS label or print or type.</p> <p>See Specific Instructions.</p>	<p>C Name of organization COLLEGE ACCESS FOUNDATION OF CALIFORNIA</p> <p>Doing Business As</p> <p>Number and street (or P.O. box if mail is not delivered to street address) Room/suite ONE FRONT STREET 1325</p> <p>City or town, state or country, and ZIP + 4 SAN FRANCISCO, CA 94111</p> <p>F Name and address of principal officer: JULIA I. LOPEZ SAME AS C ABOVE</p>	<p>D Employer identification number 94-2618667</p> <p>E Telephone number (415) 287-1800</p> <p>G Gross receipts \$ 332,324,612.</p> <p>H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)</p> <p>H(c) Group exemption number ▶</p>
<p>I Tax-exempt status: <input checked="" type="checkbox"/> 501(c) (3) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527</p>		<p>J Website: ▶ WWW.COLLEGEACCESSFOUNDATION.ORG</p>	
<p>K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶</p>		<p>L Year of formation: 2005 M State of legal domicile: CA</p>	

Part I Summary

	<p>1 Briefly describe the organization's mission or most significant activities: *** SEE SCHEDULE O FOR MISSION STATEMENT ***</p>			
	<p>2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.</p>			
Activities & Governance	<p>3 Number of voting members of the governing body (Part VI, line 1a)</p>	3	9	
	<p>4 Number of independent voting members of the governing body (Part VI, line 1b)</p>	4	9	
	<p>5 Total number of employees (Part V, line 2a)</p>	5	11	
	<p>6 Total number of volunteers (estimate if necessary)</p>	6	0	
	<p>7a Total gross unrelated business revenue from Part VIII, column (C), line 12</p>	7a	0.	
	<p>b Net unrelated business taxable income from Form 990-T, line 34</p>	7b	0.	
	Revenue		Prior Year	Current Year
<p>8 Contributions and grants (Part VIII, line 1h)</p>				
<p>9 Program service revenue (Part VIII, line 2g)</p>		668,630.	578,357.	
<p>10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)</p>		22,143,195.	-5,752,394.	
<p>11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</p>		155,004.	143,473.	
<p>12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)</p>		22,966,829.	-5,030,564.	
Expenses		<p>13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)</p>	9,913,686.	11,855,494.
		<p>14 Benefits paid to or for members (Part IX, column (A), line 4)</p>		
		<p>15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)</p>	1,754,908.	1,520,022.
		<p>16a Professional fundraising fees (Part IX, column (A), line 11e)</p>		
	<p>b Total fundraising expenses (Part IX, column (D), line 25) ▶</p>			
	<p>17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)</p>	3,937,096.	2,784,951.	
	<p>18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)</p>	15,605,690.	16,160,467.	
<p>19 Revenue less expenses. Subtract line 18 from line 12</p>	7,361,139.	-21,191,031.		
Net Assets or Fund Balances		Beginning of Current Year	End of Year	
	<p>20 Total assets (Part X, line 16)</p>	331,498,877.	400,215,159.	
	<p>21 Total liabilities (Part X, line 26)</p>	23,977,214.	21,874,724.	
	<p>22 Net assets or fund balances. Subtract line 21 from line 20</p>	307,521,663.	378,340,435.	

Part II Signature Block

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

Sign Here	<p>Signature of officer _____</p> <p>JULIA I. LOPEZ, PRESIDENT & CEO</p> <p>Type or print name and title</p>	Date _____
Paid Preparer's Use Only	<p>Preparer's signature ▶ DEBORAH KAMINSKI</p> <p>Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ BURR PILGER MAYER, INC. 600 CALIFORNIA STREET, SUITE 1300 SAN FRANCISCO, CA 94108</p>	<p>Date _____</p> <p>Check if self-employed <input type="checkbox"/></p> <p>Preparer's identifying number (see instructions) _____</p> <p>EIN ▶ _____</p> <p>Phone no. ▶ 415.421.5757</p>

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission: SEE SCHEDULE O FOR CONTINUATION COLLEGE ACCESS FOUNDATION OF CALIFORNIA HELPS QUALIFIED STUDENTS PRIMARILY IN CALIFORNIA WHO HAVE FINANCIAL NEED ATTEND AND GRADUATE FROM COLLEGE. THE FOUNDATION PROVIDES GRANTS FOR SCHOLARSHIPS TO COMMUNITY-BASED PROGRAMS THAT COUNSEL STUDENTS ON HOW TO PREPARE FOR

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No [X] No

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

SEE SCHEDULE O FOR CONTINUATION(S)

4a (Code:) (Expenses \$ 13848185. including grants of \$ 11855494.) (Revenue \$ 578,357.) COLLEGE ACCESS FOUNDATION OF CALIFORNIA WAS FOUNDED IN 2005 TO HELP LOW-INCOME AND UNDER-REPRESENTED STUDENTS IN CALIFORNIA REACH AND SUCCEED IN COLLEGE. THE FOUNDATION AWARDS GRANTS TO COMMUNITY-BASED COLLEGE ADVISING AND ACADEMIC PREPARATION PROGRAMS, WHICH USE THE FUNDS TO OFFER COLLEGE SCHOLARSHIPS TO THE STUDENTS THEY SERVE. THE FOUNDATION RECOGNIZES THAT FINANCIAL AID IS CRUCIAL FOR LOW-INCOME STUDENTS BUT BELIEVES THAT FINANCIAL AID IS MORE EFFECTIVE WHEN COUPLED WITH THE ADVICE AND SUPPORT THAT GRANTEE PROGRAMS OFFER.

WITH AN ENDOWMENT OF ALMOST \$400 MILLION, THE FOUNDATION IS ONE OF THE LARGEST INDEPENDENT COLLEGE SCHOLARSHIP PROVIDERS IN CALIFORNIA. SINCE ITS FOUNDED, THE FOUNDATION HAS AWARDED APPROXIMATELY \$50 MILLION IN

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses \$ 13,848,185.

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>	N/A	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11	Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	X	
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>		
	• 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? <i>If "Yes," complete Schedule D, Part VII.</i>		
	• 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? <i>If "Yes," complete Schedule D, Part VIII.</i>		
	• 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? <i>If "Yes," complete Schedule D, Part IX.</i>		
	• Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>		
	• 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? <i>If "Yes," complete Schedule D, Part X.</i>		
12	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i>		X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional</i>	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
14b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>		X
17	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? <i>If "Yes," complete Schedule G, Part I</i>		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
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? <i>If "Yes," complete Schedule J</i>	X	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
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? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		X
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):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
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? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	X	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	X	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
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? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
	1a 0		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	1b 0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
	1c		
2a	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 11		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	X	
4a	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)?	X	
b	If "Yes," enter the name of the foreign country: SEE SCHEDULE O See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
	5c		
6a	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?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
	6b		
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 partly for goods and services provided to the payor?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
	7g		
	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? N/A		
	8		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966? N/A		
b	Did the organization make a distribution to a donor, donor advisor, or related person? N/A		
	9a		
	9b		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12 N/A	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders N/A	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	

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.

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body		
1b	Enter the number of voting members that are independent		
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?		X
3	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?	X	
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?		X
6	Does the organization have members or stockholders?		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	X	
8b	Each committee with authority to act on behalf of the governing body?	X	
9	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

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	X	
10b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	X	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
12b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13	Does the organization have a written whistleblower policy?	X	
14	Does the organization have a written document retention and destruction policy?	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?		
15a	The organization's CEO, Executive Director, or top management official	X	
15b	Other officers or key employees of the organization	X	
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 taxable entity during the year?		X
16b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the 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**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **PHILLIPPE WALLACE - (415) 287-1800**
ONE FRONT STREET, SUITE 1325, SAN FRANCISCO, CA 94111

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

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

1a 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. Use Schedule J-2 if additional space is needed.

- 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. 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 the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
CARLENE M. ELLIS BOARD MEMBER	2.00	X					0.	0.	0.	
RUSSELL GOULD BOARD MEMBER	2.00	X					12,000.	0.	0.	
WILLIAM D. HANSEN BOARD MEMBER THRU 2/2010	2.00	X					7,333.	0.	0.	
N. ROSS MATTHEWS BOARD MEMBER	1.00	X					14,467.	0.	0.	
TOBY ROSENBLATT BOARD MEMBER	1.00	X					12,000.	0.	0.	
JOHN T. SHANAHAN BOARD MEMBER	1.00	X					14,673.	0.	0.	
JOSEPH W. WATSON BOARD MEMBER	1.00	X					14,000.	0.	0.	
JAMES E. CANALES BOARD MEMBER	4.00	X					0.	0.	0.	
JOHN GORSICH CFO & TREASURER	40.00			X			196,446.	0.	31,258.	
JAY SHERWIN VICE PRES: PROGRAMS	40.00			X			162,012.	0.	37,894.	
LORRAINE O'HARA CORPORATE SECRETARY	40.00			X			88,186.	0.	18,698.	
JULIA I. LOPEZ PRESIDENT/CEO	40.00			X			276,311.	0.	24,103.	

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f				
	g	Noncash contributions included in lines 1a-1f: \$					
	h	Total. Add lines 1a-1f					
	Program Service Revenue	2 a	CALEDGE STUDENT LOAN I	Business Code 522100	578,357.	578,357.	
b							
c							
d							
e							
f		All other program service revenue					
g		Total. Add lines 2a-2f		578,357.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		4607740.		4,607,740.	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	Gross Rents	(i) Real	(ii) Personal			
		b	Less: rental expenses				
		c	Rental income or (loss)				
		d	Net rental income or (loss)				
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
		b	Less: cost or other basis and sales expenses				
		c	Gain or (loss)				
		d	Net gain or (loss)				
	8 a	Gross income from fundraising events (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					
10 a	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					
Miscellaneous Revenue			Business Code				
11 a	MISCELLANEOUS INCOME	900099	129,968.			129,968.	
b	OTHER INVESTMENT INC.	900003	13,505.			13,505.	
c							
d	All other revenue						
e	Total. Add lines 11a-11d		143,473.				
12	Total revenue. See instructions.		-5,030,564.	578,357.	0.	-5,608,921.	

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) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 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 governments and organizations in the U.S. See Part IV, line 21	11,855,494.	11,855,494.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	633,471.	344,926.	288,545.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	565,719.	147,641.	418,078.	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	118,851.	47,955.	70,896.	
9 Other employee benefits	123,875.	74,144.	49,731.	
10 Payroll taxes	78,106.	35,483.	42,623.	
11 Fees for services (non-employees):				
a Management				
b Legal	104,930.		104,930.	
c Accounting	83,514.		83,514.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	1,260,724.	643,053.	617,671.	
g Other	75,220.	16,698.	58,522.	
12 Advertising and promotion				
13 Office expenses	72,432.	37,005.	35,427.	
14 Information technology				
15 Royalties				
16 Occupancy	343,619.	175,246.	168,373.	
17 Travel	43,250.	32,426.	10,824.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	53,018.	49,806.	3,212.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	58,726.	22,234.	36,492.	
23 Insurance	78,883.	40,230.	38,653.	
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a CALEDGE STUDENT LOAN PR	292,713.	292,713.		
b COMMUNICATION	148,614.	19,802.	128,812.	
c BOARD OF DIRECTORS	143,174.		143,174.	
d COMPUTER SYSTEM	19,729.	10,062.	9,667.	
e OTHER TAXES	6,180.	3,152.	3,028.	
f All other expenses	225.	115.	110.	
25 Total functional expenses. Add lines 1 through 24f	16,160,467.	13,848,185.	2,312,282.	0.
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation ...				

Part X Balance Sheet

		(A)		(B)	
		Beginning of year		End of year	
Assets	1 Cash - non-interest-bearing	5,268,723.	1	2,681,643.	
	2 Savings and temporary cash investments		2		
	3 Pledges and grants receivable, net		3		
	4 Accounts receivable, net	6,258.	4	114,852,094.	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5		
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6		
	7 Notes and loans receivable, net	7,383,930.	7	6,472,161.	
	8 Inventories for sale or use		8		
	9 Prepaid expenses and deferred charges	161,841.	9	48,829.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 389,056.			
	b Less: accumulated depreciation	10b 272,421.	157,309.	10c 116,635.	
	11 Investments - publicly traded securities	217,540,306.	11	100,676,799.	
	12 Investments - other securities. See Part IV, line 11	100,763,694.	12	174,954,690.	
	13 Investments - program-related. See Part IV, line 11		13		
	14 Intangible assets		14		
	15 Other assets. See Part IV, line 11	216,816.	15	412,308.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	331,498,877.	16	400,215,159.		
Liabilities	17 Accounts payable and accrued expenses	599,336.	17	605,786.	
	18 Grants payable	15,110,209.	18	14,021,269.	
	19 Deferred revenue		19		
	20 Tax-exempt bond liabilities	7,610,000.	20	6,590,000.	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22 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. Complete Part X of Schedule D	657,669.	25	657,669.	
	26 Total liabilities. Add lines 17 through 25	23,977,214.	26	21,874,724.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27 Unrestricted net assets	307,521,663.	27	378,340,435.	
	28 Temporarily restricted net assets		28		
	29 Permanently restricted net assets		29		
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
	30 Capital stock or trust principal, or current funds		30		
	31 Paid-in or capital surplus, or land, building, or equipment fund		31		
	32 Retained earnings, endowment, accumulated income, or other funds		32		
	33 Total net assets or fund balances	307,521,663.	33	378,340,435.	
34 Total liabilities and net assets/fund balances	331,498,877.	34	400,215,159.		

Part XI Financial Statements and Reporting

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
2b	Were the organization's financial statements audited by an independent accountant?	X	
2c	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?	X	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
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?		X
3b	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.		

Form **990** (2009)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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. ▶ See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization COLLEGE ACCESS FOUNDATION OF CALIFORNIA	Employer identification number 94-2618667
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Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 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: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization 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.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 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 and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 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 that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III - Functionally integrated d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)	
(ii) A family member of a person described in (i) above?	11g(ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	
- h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule A (Form 990 or 990-EZ) 2009

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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 IV.)						
11 Total support. Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) **12**

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ►

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) **14** %

15 Public support percentage from 2008 Schedule A, Part II, line 14 **15** %

16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ►

b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ►

17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ►

b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ►

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ►

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	18,275,124.	8,290,181.	791,487.	668,630.	708,324.	28,733,746.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	18,275,124.	8,290,181.	791,487.	668,630.	708,324.	28,733,746.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
b Amounts included on lines 2 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.
c Add lines 7a and 7b						0.
8 Public support (Subtract line 7c from line 6.)						28,733,746.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	18,275,124.	8,290,181.	791,487.	668,630.	708,324.	28,733,746.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	7,896,580.	9,621,918.	12,604,470.	8,450,998.	4,621,245.	43,195,211.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	7,896,580.	9,621,918.	12,604,470.	8,450,998.	4,621,245.	43,195,211.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12.)	26,171,704.	17,912,099.	13,395,957.	9,119,628.	5,329,569.	71,928,957.

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	39.95 %
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	74.17 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	60.05 %
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	25.83 %

19a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization

COLLEGE ACCESS FOUNDATION OF CALIFORNIA

Employer identification number

94-2618667

Part I 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
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 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?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 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?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 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
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

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

Yes No

9 In Part XIV, 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 conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116, 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) Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

(ii) Assets included in Form 990, Part X

▶ \$ _____

2 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 relating to these items:

a Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

b Assets included in Form 990, Part X

▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIV and complete the following table:
- | | Amount |
|---------------------------------|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21? Yes No
- b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the year end balance held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment _____ %
 - c Term endowment _____ %
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|---------------|----|
| (i) unrelated organizations | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
| b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		123,174.	76,545.	46,629.
d Equipment		158,688.	131,222.	27,466.
e Other		107,194.	64,654.	42,540.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				116,635.

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements			
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	-5,030,564.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	16,160,467.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-21,191,031.
4	Net unrealized gains (losses) on investments	4	90,009,806.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	1,999,998.
9	Total adjustments (net). Add lines 4 through 8	9	92,009,804.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	70,818,773.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return			
1	Total revenue, gains, and other support per audited financial statements	1	84,049,000.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	90,009,806.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	330,482.
e	Add lines 2a through 2d	2e	90,340,288.
3	Subtract line 2e from line 1	3	-6,291,288.
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	4a	1,260,723.
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	1,260,723.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	-5,030,565.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return			
1	Total expenses and losses per audited financial statements	1	16,258,000.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	1,358,736.
e	Add lines 2a through 2d	2e	1,358,736.
3	Subtract line 2e from line 1	3	14,899,264.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1,260,723.
b	Other (Describe in Part XIV.)	4b	480.
c	Add lines 4a and 4b	4c	1,261,203.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	16,160,467.

Part XIV Supplemental Information

Complete this part to 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 X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART XI, LINE 8 - OTHER ADJUSTMENTS:

INTERCOMPANY TRANSFER FROM CEFI: 1999998.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

CEFI INCOME & ADJUSTMENTS: 330328.

ROUNDING: 154.

Part XIV Supplemental Information (continued)

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

CEFI EXPENSES & ADJUSTMENTS: 1358736.

PART XIII, LINE 4B - OTHER ADJUSTMENTS:

ROUNDING: 480.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
▶ **Attach to Form 990.**

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Name of the organization
COLLEGE ACCESS FOUNDATION OF CALIFORNIA

Employer identification number
94-2618667

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ...

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
A PLACE CALLED HOME 2830 SOUTH CENTRAL AVE. LOS ANGELES, CA 90011	95-4427291	501(C)(3)	10,500.	0.			PROGRAM SUPPORT
A PLACE CALLED HOME 2830 SOUTH CENTRAL AVE. LOS ANGELES, CA 90011	95-4427291	501(C)(3)	52,500.	0.			SCHOLARSHIPS
AVID CENTER 9246 LIGHTWAVE AVENUE, SUITE 200 SAN DIEGO, CA 92123	33-0522594	501(C)(3)	15,000.	0.			PROGRAM SUPPORT
AVID CENTER 9246 LIGHTWAVE AVENUE, SUITE 200 SAN DIEGO, CA 92123	33-0522594	501(C)(3)	150,000.	0.			SCHOLARSHIPS
BARRIO LOGAN COLLEGE INSTITUTE 1807 MAIN STREET SAN DIEGO, CA 92113	33-0771222	501(C)(3)	40,000.	0.			SCHOLARSHIPS
BAY AREA COUNCIL 201 CALIFORNIA STREET, SUITE 1450 SAN FRANCISCO, CA 94111	23-7325853	501(C)(3)	50,000.	0.			SCHOLARSHIPS

- 2** Enter total number of section 501(c)(3) and government organizations ▶ **201.**
- 3** Enter total number of other organizations ▶

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2009

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)
**▶ Attach to Form 990 to list additional information for
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OMB No. 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

COLLEGE ACCESS FOUNDATION OF CALIFORNIA

Employer identification number

94-2618667

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRIGHAM YOUNG UNIVERSITY D-346 ASB PROVO, UT 94602	87-0217280	501(C)(3)	25,000.	0.			DIRECTOR
BRIGHAM YOUNG UNIVERSITY - IDAHO KIMBALL BUILDING 220 REXBURG, ID 83460	82-0207699	501(C)(3)	15,000.	0.			DIRECTOR
BRIGHT PROSPECT 281 SOUTH THOMAS STREET, SUITE 302 POMONA, CA 91766	52-2363234	501(C)(3)	50,000.	0.			SCHOLARSHIPS
BRIGHT PROSPECT 282 SOUTH THOMAS STREET, SUITE 302 POMONA, CA 91766	52-2363234	501(C)(3)	100,000.	0.			SCHOLARSHIPS
CALIFORNIA CASH FOR COLLEGE 350 S BIXEL STREET 201 LOS ANGELES, CA 90017	95-2597392	501(C)(3)	150,000.	0.			SCHOLARSHIPS
CALIFORNIA CASH FOR COLLEGE 350 S BIXEL STREET 201 LOS ANGELES, CA 90017	95-2597392	501(C)(3)	300,000.	0.			SCHOLARSHIPS
CALIFORNIA DOLLARS FOR SCHOLARS 17581 IRVINE BLVD., SUITE 120 TUSTIN, CA 92780	04-2296967	501(C)(3)	6,000.	0.			OPERATING SUPPORT
CALIFORNIA DOLLARS FOR SCHOLARS 17581 IRVINE BLVD., SUITE 120 TUSTIN, CA 92780	04-2296967	501(C)(3)	6,250.	0.			OPERATING SUPPORT

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Schedule I-1 (Form 990) 2009

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)
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Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CALIFORNIA DOLLARS FOR SCHOLARS 17581 IRVINE BLVD., SUITE 120 TUSTIN, CA 92780	04-2296967	501(C)(3)	14,000.	0.			PROGRAM SUPPORT
CALIFORNIA DOLLARS FOR SCHOLARS 17581 IRVINE BLVD., SUITE 120 TUSTIN, CA 92780	04-2296967	501(C)(3)	62,500.	0.			SCHOLARSHIPS
CALIFORNIA DOLLARS FOR SCHOLARS 17581 IRVINE BLVD., SUITE 120 TUSTIN, CA 92780	04-2296967	501(C)(3)	75,000.	0.			SCHOLARSHIPS
CALIFORNIA INSTITUTE OF TECHNOLOGY MC110-87, 1200 E CALIFORNIA ROAD PASADENA, CA 91125	95-1643307	501(C)(3)	26,000.	0.			DIRECTOR
CALIFORNIA STATE SUMMER SCHOOL FOR MATHEMATICS AND SCIENCE (COSMOS) - 1111 FRANKLIN STREET, 9TH FLOOR - OAKLAND, CA 94607	94-3067788	501(C)(3)	24,000.	0.			DIRECTOR
CALIFORNIA STATE SUMMER SCHOOL FOR MATHEMATICS AND SCIENCE (COSMOS) - 1112 FRANKLIN STREET, 9TH FLOOR - OAKLAND, CA 94607	94-3067788	501(C)(3)	200,000.	0.			SCHOLARSHIPS
CAL-SOAP CENTRAL COAST 800 SOUTH COLLEGE DRIVE SANTA MARIA, CA 93454-6399	95-3143396	501(C)(3)	30,000.	0.			PROGRAM SUPPORT
CAL-SOAP CENTRAL COAST 800 SOUTH COLLEGE DRIVE SANTA MARIA, CA 93454-6399	95-3143396	501(C)(3)	150,000.	0.			SCHOLARSHIPS

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Schedule I-1 (Form 990) 2009

**SCHEDULE I-1
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Department of the Treasury
Internal Revenue Service

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAL-SOAP EAST BAY 121 E. 11TH STREET, PORTABLE 13-B OAKLAND, CA 92123	94-2908730	501(C)(3)	45,000.	0.			PROGRAM SUPPORT
CAL-SOAP EAST BAY 121 E. 11TH STREET, PORTABLE 13-B OAKLAND, CA 92123	94-2908730	501(C)(3)	305,000.	0.			SCHOLARSHIPS
CAL-SOAP LONG BEACH REGIONAL CONSORTIUM - 6300 STATE UNIVERSITY DR., SUITE 332 - LONG BEACH, CA 90815	95-6106695	501(C)(3)	25,000.	0.			PROGRAM SUPPORT
CAL-SOAP LONG BEACH REGIONAL CONSORTIUM - 6300 STATE UNIVERSITY DR., SUITE 332 - LONG BEACH, CA 90815	95-6106694	501(C)(3)	128,000.	0.			SCHOLARSHIPS
CAL-SOAP LOS ANGELES 5151 STATE UNIVERSITY DR., RM 210 LOS ANGELES, CA 90032	95-4044252	501(C)(3)	38,000.	0.			PROGRAM SUPPORT
CAL-SOAP LOS ANGELES 5151 STATE UNIVERSITY DR., RM 210 LOS ANGELES, CA 90032	95-4044252	501(C)(3)	252,000.	0.			SCHOLARSHIPS
CAL-SOAP MERCED 3600 M STREET MERCED, CA 95348	23-7385578	501(C)(3)	8,000.	0.			PROGRAM SUPPORT
YUBA COMMUNITY COLLEGE DISTRICT 2088 NORTH BEALE RD. MARYSVILLE, CA 95901	68-0447767	501(C)(3)	250,000.	0.			SCHOLARSHIPS

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Schedule I-1 (Form 990) 2009

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAL-SOAP NORTHCOAST 7351 TOMPKINS HILL ROAD EUREKA, CA 95501	94-1603509	501(C)(3)	17,400.	0.			PROGRAM SUPPORT
CAL-SOAP NORTHCOAST 7351 TOMPKINS HILL ROAD EUREKA, CA 95501	94-1603509	501(C)(3)	145,000.	0.			SCHOLARSHIPS
CAL-SOAP SACRAMENTO CONSORTIUM 10474 MATHER BOULEVARD SACRAMENTO, CA 95655		501(C)(3)	33,600.	0.			PROGRAM SUPPORT
CAL-SOAP SACRAMENTO CONSORTIUM 10474 MATHER BOULEVARD SACRAMENTO, CA 95655		501(C)(3)	217,000.	0.			SCHOLARSHIPS
CAL-SOAP SAN DIEGO AND IMPERIAL COUNTIES - 6735 GIFFORD WAY, ROOM 14 - SAN DIEGO, CA 92111	95-2872494	501(C)(3)	27,000.	0.			OPERATING SUPPORT
CAL-SOAP SAN DIEGO AND IMPERIAL COUNTIES - 6736 GIFFORD WAY, ROOM 14 - SAN DIEGO, CA 92111	95-2872494	501(C)(3)	27,000.	0.			PROGRAM SUPPORT
CAL-SOAP SAN DIEGO AND IMPERIAL COUNTIES - 6737 GIFFORD WAY, ROOM 14 - SAN DIEGO, CA 92111	95-2872494	501(C)(3)	348,000.	0.			SCHOLARSHIPS
CAL-SOAP SAN FRANCISCO COLLEGE ACCESS CENTER - 1596 POST ST - SAN FRANCISCO, CA 94109	23-7092514	501(C)(3)	24,000.	0.			PROGRAM SUPPORT

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Schedule I-1 (Form 990) 2009

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)
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Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAL-SOAP SAN FRANCISCO COLLEGE ACCESS CENTER - 1596 POST ST - SAN FRANCISCO, CA 94109	23-7092514	501(C)(3)	121,000.	0.			SCHOLARSHIPS
CAL-SOAP SANTA BARBARA CONSORTIUM 721 CLIFF DRIVE SANTA BARBARA, CA 93109	95-3234551	501(C)(3)	75,000.	0.			SCHOLARSHIPS
YUBA COMMUNITY COLLEGE DISTRICT 7810 ARROYO CIRCLE DR GILROY, CA 95020	68-0447767	501(C)(3)	20,000.	0.			PROGRAM SUPPORT
YUBA COMMUNITY COLLEGE DISTRICT 7810 ARROYO CIRCLE DR GILROY, CA 95020	68-0447767	501(C)(3)	160,000.	0.			SCHOLARSHIPS
CAMPAIGN FOR COLLEGE OPPORTUNITY 900 WILSHIRE BLVD. STE. 924 LOS ANGELES, CA 90017	20-0427622	501(C)(3)	50,000.	0.			OPERATING SUPPORT
CAMPAIGN FOR COLLEGE OPPORTUNITY 900 WILSHIRE BLVD. STE. 924 LOS ANGELES, CA 90017	20-0427622	501(C)(3)	150,000.	0.			SCHOLARSHIPS
CANAL ALLIANCE 91 LARKSPUR STREET SAN RAFAEL, CA 94901	94-2832648	501(C)(3)	7,500.	0.			OPERATING SUPPORT
CANAL ALLIANCE 91 LARKSPUR STREET SAN RAFAEL, CA 94901	94-2832648	501(C)(3)	50,000.	0.			SCHOLARSHIPS

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Schedule I-1 (Form 990) 2009

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)
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Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CARROLL COLLEGE 1601 N. BENTON AVENUE HELENA, MT 59625	81-0231774	501(C)(3)	5,000.	0.			MATCHING
CATCH THE DREAM C/O PALM DESERT NATIONAL BANK, 73-745 EL PASEO - PALM DESERT, CA 92260	33-0763298	501(C)(3)	35,000.	0.			PROGRAM SUPPORT
CENTRO LEGAL DE LA RAZA 3022 INTERNATIONAL BLVD, SUITE 410 OAKLAND, CA 94601	23-7181456	501(C)(3)	5,000.	0.			PROGRAM SUPPORT
CENTRO LEGAL DE LA RAZA 3022 INTERNATIONAL BLVD, SUITE 410 OAKLAND, CA 94601	23-7181456	501(C)(3)	70,000.	0.			SCHOLARSHIPS
CERRITOS COLLEGE FOUNDATION 11110 ALONDRA BLVD. NORWALK, CA 90650	95-3387108	501(C)(3)	12,000.	0.			OPERATING SUPPORT
CERRITOS COLLEGE FOUNDATION 11110 ALONDRA BLVD. NORWALK, CA 90650	95-3387108	501(C)(3)	50,000.	0.			SCHOLARSHIPS
COACHELLA VALLEY ECONOMIC PARTNERSHIP - 73-710 FRED WARING DRIVE, SUITE 106 - PALM DESERT, CA 92260-2574	33-0642485	501(C)(3)	12,500.	0.			SCHOLARSHIPS
COACHELLA VALLEY ECONOMIC PARTNERSHIP - 73-710 FRED WARING DRIVE, SUITE 106 - PALM DESERT, CA 92260-2574	33-0642485	501(C)(3)	418,000.	0.			PROGRAM SUPPORT

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Schedule I-1 (Form 990) 2009

**SCHEDULE I-1
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Department of the Treasury
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)
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Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COACHELLA VALLEY ECONOMIC PARTNERSHIP - 73-710 FRED WARING DRIVE, SUITE 106 - PALM DESERT, CA 92260-2574	33-0642485	501(C)(3)	650,000.	0.			SCHOLARSHIPS
COLLEGE BOUND - DOLLARS FOR ACHIEVERS - 17777 CENTER COURT DRIVE, SUITE 750 - CERRITOS, CA 90703	95-4604550	501(C)(3)	9,000.	0.			PROGRAM SUPPORT
COLLEGE BOUND - DOLLARS FOR ACHIEVERS - 17777 CENTER COURT DRIVE, SUITE 750 - CERRITOS, CA 90703	95-4604550	501(C)(3)	10,000.	0.			OPERATING SUPPORT
COLLEGE BOUND - DOLLARS FOR ACHIEVERS - 17777 CENTER COURT DRIVE, SUITE 750 - CERRITOS, CA 90703	95-4604550	501(C)(3)	45,000.	0.			SCHOLARSHIPS
COLLEGE BOUND - DOLLARS FOR ACHIEVERS - 17777 CENTER COURT DRIVE, SUITE 750 - CERRITOS, CA 90703	95-4604550	501(C)(3)	75,000.	0.			SCHOLARSHIPS
COLLEGE MATCH 1000 NORTH ALAMEDA STREET, SUITE 24 LOS ANGELES, CA 90012	95-4302067	501(C)(3)	5,040.	0.			PROGRAM SUPPORT
COLLEGE MATCH 1000 NORTH ALAMEDA STREET, SUITE 24 LOS ANGELES, CA 90012	95-4302067	501(C)(3)	45,500.	0.			SCHOLARSHIPS
COLLEGE MATCH 1000 NORTH ALAMEDA STREET, SUITE 24 LOS ANGELES, CA 90012	95-4302067	501(C)(3)	45,500.	0.			SCHOLARSHIPS

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Schedule I-1 (Form 990) 2009

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)
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COLLEGE MATCH 1000 NORTH ALAMEDA STREET, SUITE 24 LOS ANGELES, CA 90012	95-4302067	501(C)(3)	48,000.	0.			SCHOLARSHIPS
COLLEGE OPTIONS UNIVERSITY OF CALIFORNIA, DAVIS, P.O. BOX 989062 - WEST SACRAMENTO, CA 95798	94-6036494	501(C)(3)	10,000.	0.			SCHOLARSHIPS
COLLEGE TRACK 436 14TH STREET, SUITE 500 OAKLAND, CA 94612	94-3279613	501(C)(3)	6,750.	0.			PROGRAM SUPPORT
COLLEGE TRACK 436 14TH STREET, SUITE 500 OAKLAND, CA 94612	94-3279613	501(C)(3)	32,125.	0.			SCHOLARSHIPS
COLLEGE TRACK 436 14TH STREET, SUITE 500 OAKLAND, CA 94612	94-3279613	501(C)(3)	40,462.	0.			SCHOLARSHIPS
COMMUNITY BUILD, INC. 4305 DEGNAN BLVD, SUITE 105 LOS ANGELES, CA 90008	95-4375255	501(C)(3)	13,500.	0.			OPERATING SUPPORT
COMMUNITY BUILD, INC. 4305 DEGNAN BLVD, SUITE 105 LOS ANGELES, CA 90008	95-4375255	501(C)(3)	75,000.	0.			SCHOLARSHIPS
COMMUNITY FOUNDATION OF THE VERDUGOS - 330 ARDEN AVENUE, #130 - GLENDALE, CA 91203	95-6068137	501(C)(3)	261,500.	0.			SCHOLARSHIPS

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**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)
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OMB No. 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

COLLEGE ACCESS FOUNDATION OF CALIFORNIA

Employer identification number

94-2618667

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONCERNED PARENTS ALLIANCE 13626 TWIN PEAKS RD. POWAY, CA 92064-0010	27-0046936	501(C)(3)	8,200.	0.			OPERATING SUPPORT
CONCERNED PARENTS ALLIANCE 13626 TWIN PEAKS RD. POWAY, CA 92064-0010	27-0046936	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
CONCERNED PARENTS ALLIANCE 13626 TWIN PEAKS RD. POWAY, CA 92064-0010	27-0046936	501(C)(3)	41,000.	0.			SCHOLARSHIPS
CURRY UNIVERSITY OF VIRGINIA 405 EMMET STREET SOUTH, P.O. BOX 40 CHARLOTTESVILLE, VA 22904	51-0201344	501(C)(3)	10,000.	0.			DIRECTOR
DELTA GAMMA FOUNDATION PO BOX 21397 COLUMBUS, OH 43221-0397	31-6034001	501(C)(3)	50,000.	0.			DIRECTOR
DIABLO VALLEY COLLEGE 321 GOLF CLUB ROAD PLEASANT HILL, CA 94523	68-0342035	501(C)(3)	8,100.	0.			OPERATING SUPPORT
DIABLO VALLEY COLLEGE 321 GOLF CLUB ROAD PLEASANT HILL, CA 94523	68-0342035	501(C)(3)	40,500.	0.			SCHOLARSHIPS
DIOCESE OF PATTERSON DIOCESAN CENTER 777 VALLEY ROAD CLIFTON, NJ 07013	22-1493174	501(C)(3)	25,000.	0.			DIRECTOR

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DOMINICAN UNIVERSITY OF CALIFORNIA 50 ACACIA AVENUE SAN RAFAEL, CA 94901	94-1156525	501(C)(3)	50,000.	0.			DIRECTOR
EAST BAY COLLEGE FUND 6114 LA SALLE AVENUE, #314 OAKLAND, CA 94611	54-2103707	501(C)(3)	6,000.	0.			OPERATING SUPPORT
EAST BAY COLLEGE FUND 6114 LA SALLE AVENUE, #314 OAKLAND, CA 94611	54-2103707	501(C)(3)	6,000.	0.			PROGRAM SUPPORT
EAST BAY COLLEGE FUND 6114 LA SALLE AVENUE, #314 OAKLAND, CA 94611	54-2103707	501(C)(3)	32,000.	0.			SCHOLARSHIPS
EAST BAY COLLEGE FUND 6114 LA SALLE AVENUE, #314 OAKLAND, CA 94611	54-2103707	501(C)(3)	32,000.	0.			SCHOLARSHIPS
EAST OAKLAND YOUTH DEVELOPMENT CENTER - 8200 INTERNATIONAL BLVD. - OAKLAND, CA 94621	23-7334590	501(C)(3)	7,500.	0.			PROGRAM SUPPORT
EAST OAKLAND YOUTH DEVELOPMENT CENTER - 8200 INTERNATIONAL BLVD. - OAKLAND, CA 94621	23-7334590	501(C)(3)	25,000.	0.			SCHOLARSHIPS
EASTERN ILLINOIS UNIVERSITY 600 LINCOLN AVENUE CHARLESTON, IL 61920	37-6031320	501(C)(3)	50,000.	0.			DIRECTOR

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EASTSIDE COLLEGE PREPARATORY SCHOOL - 1041 MYRTLE STREET - EAST PALO ALTO, CA 94303	94-3187806	501(C)(3)	6,250.	0.			OPERATING SUPPORT
EASTSIDE COLLEGE PREPARATORY SCHOOL - 1041 MYRTLE STREET - EAST PALO ALTO, CA 94303	94-3187806	501(C)(3)	6,250.	0.			PROGRAM SUPPORT
EASTSIDE COLLEGE PREPARATORY SCHOOL - 1041 MYRTLE STREET - EAST PALO ALTO, CA 94303	94-3187806	501(C)(3)	50,000.	0.			SCHOLARSHIPS
EASTSIDE COLLEGE PREPARATORY SCHOOL - 1041 MYRTLE STREET - EAST PALO ALTO, CA 94303	94-3187806	501(C)(3)	62,500.	0.			SCHOLARSHIPS
EDUCATING YOUNG MINDS, INC. 3325 WILSHIRE BLVD., SUITE 400 LOS ANGELES, CA 90010	95-4489511	501(C)(3)	100,000.	0.			SCHOLARSHIPS
EDUCATION AND LEADERSHIP FOUNDATION - 4950 N. WOODROW AVE., SUITE 201 - FRESNO, CA 93726	26-0417563	501(C)(3)	8,000.	0.			PROGRAM SUPPORT
EDUCATIONAL PARTNERSHIP CENTER, UC SANTA CRUZ - 2440 W. EL CAMINO REAL, SUITE 300 - MOUNTAIN VIEW, CA 94040-1498	20-5205488	501(C)(3)	18,000.	0.			PROGRAM SUPPORT
EDUCATIONAL PARTNERSHIP CENTER, UC SANTA CRUZ - 2440 W. EL CAMINO REAL, SUITE 300 - MOUNTAIN VIEW, CA 94040-1498	20-5205488	501(C)(3)	114,750.	0.			SCHOLARSHIPS

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FIRST GRADUATE PRESIDIO OF SAN FRANCISCO, P.O. BOX 29415 - SAN FRANCISCO, CA 94129	94-3381171	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
FIRST GRADUATE PRESIDIO OF SAN FRANCISCO, P.O. BOX 29416 - SAN FRANCISCO, CA 94129	94-3381171	501(C)(3)	127,000.	0.			SCHOLARSHIPS
FOUNDATION FOR A COLLEGE EDUCATION 2160 EUCLID AVENUE EAST PALO ALTO, CA 94303	77-0401635	501(C)(3)	37,500.	0.			SCHOLARSHIPS
FRANKLIN HIGH SCHOOL 300 NORTH GERTRUDE AVENUE STOCKTON, CA 95215	94-6002661	501(C)(3)	24,000.	0.			PROGRAM SUPPORT
FRANKLIN HIGH SCHOOL 300 NORTH GERTRUDE AVENUE STOCKTON, CA 95215	94-6002661	501(C)(3)	160,000.	0.			SCHOLARSHIPS
FULFILLMENT FUND 6100 WILSHIRE BLVD., SUITE 600 LOS ANGELES, CA 90048	95-3180934	501(C)(3)	20,000.	0.			OPERATING SUPPORT
FULFILLMENT FUND 6100 WILSHIRE BLVD., SUITE 600 LOS ANGELES, CA 90048	95-3180934	501(C)(3)	130,000.	0.			SCHOLARSHIPS
FUTURE FOUNDATION OF SACRAMENTO 3455 AMERICAN RIVER DRIVE, SUITE B SACRAMENTO, CA 95825	80-0025786	501(C)(3)	7,500.	0.			PROGRAM SUPPORT

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HEART OF LOS ANGELES YOUTH 2701 WILSHIRE BLVD., SUITE 100 LOS ANGELES, CA 90057	95-4397418	501(C)(3)	8,000.	0.			PROGRAM SUPPORT
HEART OF LOS ANGELES YOUTH 2701 WILSHIRE BLVD., SUITE 100 LOS ANGELES, CA 90057	95-4397418	501(C)(3)	70,000.	0.			SCHOLARSHIPS
HISPANIC SCHOLARSHIP FUND 55 SECOND STREET, SUITE 1500 SAN FRANCISCO, CA 94105	52-1051044	501(C)(3)	15,000.	0.			PROGRAM SUPPORT
HISPANIC SCHOLARSHIP FUND 55 SECOND STREET, SUITE 1500 SAN FRANCISCO, CA 94105	52-1051044	501(C)(3)	75,000.	0.			SCHOLARSHIPS
HISPANIC SCHOLARSHIP FUND 55 SECOND STREET, SUITE 1500 SAN FRANCISCO, CA 94105	52-1051044	501(C)(3)	170,000.	0.			SCHOLARSHIPS
INLAND EMPIRE SCHOLARSHIP FUND 1340 CAHUILLA STREET COLTON, CA 92324	33-0822559	501(C)(3)	7,200.	0.			OPERATING SUPPORT
INLAND EMPIRE SCHOLARSHIP FUND 1340 CAHUILLA STREET COLTON, CA 92324	33-0822559	501(C)(3)	60,000.	0.			SCHOLARSHIPS
JUMA VENTURES 131 STEUART ST., #201 SAN FRANCISCO, CA 94105	94-3203203	501(C)(3)	10,000.	0.			PROGRAM SUPPORT

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JUMA VENTURES 131 STEUART ST., #201 SAN FRANCISCO, CA 94105	94-3203203	501(C)(3)	90,000.	0.			SCHOLARSHIPS
KERN COUNTY HISPANIC CHAMBER OF COMMERCE FOUNDATION - P.O. BOX 9051 - BAKERSFIELD, CA 93389-9051	77-0398516	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
KLAMATH RIVER EARLY COLLEGE OF THE REDWOODS - 168 KLAMATH BLVD. - KLAMATH, CA 95548	20-3416976	501(C)(3)	7,000.	0.			PROGRAM SUPPORT
KLAMATH RIVER EARLY COLLEGE OF THE REDWOODS - 168 KLAMATH BLVD. - KLAMATH, CA 95548	20-3416976	501(C)(3)	25,000.	0.			SCHOLARSHIPS
LARKIN STREET YOUTH SERVICES 701 SUTTER STREET SAN FRANCISCO, CA 94109	94-2917999	501(C)(3)	11,500.	0.			PROGRAM SUPPORT
LARKIN STREET YOUTH SERVICES 701 SUTTER STREET SAN FRANCISCO, CA 94109	94-2917999	501(C)(3)	76,500.	0.			SCHOLARSHIPS
LEADERSHIP HIGH SCHOOL 241 ONEIDA AVENUE, SUITE 301 SAN FRANCISCO, CA 94134	94-3278658	501(C)(3)	56,250.	0.			SCHOLARSHIPS
LEVEL PLAYING FIELD INSTITUTE 543 HOWARD STREET, 5TH FLOOR SAN FRANCISCO, CA 94105	91-2088635	501(C)(3)	85,000.	0.			SCHOLARSHIPS

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MARCUS A. FOSTER EDUCATIONAL INSTITUTE - 1203 PRESERVATION PARK WAY, SUITE 303 - OAKLAND, CA 94612	23-7357906	501(C)(3)	6,250.	0.			OPERATING SUPPORT
MARCUS A. FOSTER EDUCATIONAL INSTITUTE - 1203 PRESERVATION PARK WAY, SUITE 303 - OAKLAND, CA 94612	23-7357906	501(C)(3)	56,250.	0.			SCHOLARSHIPS
MARIN EDUCATION FUND 781 LINCOLN AVE., SUITE 140 SAN RAFAEL, CA 94903	95-3667812	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
MARIN EDUCATION FUND 781 LINCOLN AVE., SUITE 140 SAN RAFAEL, CA 94903	95-3667812	501(C)(3)	12,600.	0.			OPERATING SUPPORT
MARIN EDUCATION FUND 781 LINCOLN AVE., SUITE 140 SAN RAFAEL, CA 94903	95-3667812	501(C)(3)	126,000.	0.			SCHOLARSHIPS
MDRC 475 14TH STREET, SUITE 750 OAKLAND, CA 94612	23-7379473	501(C)(3)	145,075.	0.			OPERATING SUPPORT
MDRC 475 14TH STREET, SUITE 750 OAKLAND, CA 94612	23-7379473	501(C)(3)	425,007.	0.			OPERATING SUPPORT
MDRC 475 14TH STREET, SUITE 750 OAKLAND, CA 94612	23-7379473	501(C)(3)	859,333.	0.			SCHOLARSHIPS

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MERITUS COLLEGE FUND P.O. BOX 29024 SAN FRANCISCO, CA 94129-0024	94-3257076	501(C)(3)	5,400.	0.			OPERATING SUPPORT
MERITUS COLLEGE FUND P.O. BOX 29024 SAN FRANCISCO, CA 94129-0024	94-3257076	501(C)(3)	5,400.	0.			PROGRAM SUPPORT
MERITUS COLLEGE FUND P.O. BOX 29024 SAN FRANCISCO, CA 94129-0024	94-3257076	501(C)(3)	24,000.	0.			SCHOLARSHIPS
MERITUS COLLEGE FUND P.O. BOX 29024 SAN FRANCISCO, CA 94129-0024	94-3257076	501(C)(3)	36,000.	0.			SCHOLARSHIPS
MISSION GRADUATES 3040 16TH STREET SAN FRANCISCO, CA 94103	23-7172909	501(C)(3)	5,000.	0.			PROGRAM SUPPORT
MOTIVATING OUR STUDENTS THROUGH EXPERIENCE - 6601 CENTER DRIVE WEST, SUITE 544 - LOS ANGELES, CA 90045	95-4289410	501(C)(3)	7,500.	0.			OPERATING SUPPORT
MOTIVATING OUR STUDENTS THROUGH EXPERIENCE - 6601 CENTER DRIVE WEST, SUITE 544 - LOS ANGELES, CA 90045	95-4289411	501(C)(3)	11,000.	0.			PROGRAM SUPPORT
MOTIVATING OUR STUDENTS THROUGH EXPERIENCE - 6601 CENTER DRIVE WEST, SUITE 544 - LOS ANGELES, CA 90045	95-4289412	501(C)(3)	50,000.	0.			OPERATING SUPPORT

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MOTIVATING OUR STUDENTS THROUGH EXPERIENCE - 6601 CENTER DRIVE WEST, SUITE 544 - LOS ANGELES, CA 90045	95-4289413	501(C)(3)	55,000.	0.			SCHOLARSHIPS
MOUNTAIN VIEW - LOS ALTOS COMMUNITY SCHOLARS - 183 HILLVIEW AVE - LOS ALTOS, CA 94022	77-0273721	501(C)(3)	15,000.	0.			SCHOLARSHIPS
MOUNTAIN VIEW - LOS ALTOS COMMUNITY SCHOLARS - 183 HILLVIEW AVE - LOS ALTOS, CA 94022	77-0273721	501(C)(3)	15,000.	0.			SCHOLARSHIPS
NORTHERN CALIFORNIA GRANTMAKERS 625 MARKET STREET, 15TH FLOOR SAN FRANCISCO, CA 94105	942761355	501(C)(3)	12,000.	0.			MEMBERSHIP
OMEGA BOYS CLUB 1060 TENNESSEE STREET SAN FRANCISCO, CA 94107	94-3171846	501(C)(3)	5,000.	0.			OPERATING SUPPORT
OMEGA BOYS CLUB 1060 TENNESSEE STREET SAN FRANCISCO, CA 94107	94-3171846	501(C)(3)	100,000.	0.			SCHOLARSHIPS
ONE VOICE 1228 15TH STREET, SUITE C SANTA MONICA, CA 90404	95-3900124	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
ONE VOICE 1228 15TH STREET, SUITE C SANTA MONICA, CA 90404	95-3900124	501(C)(3)	15,000.	0.			OPERATING SUPPORT

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ONE VOICE 1228 15TH STREET, SUITE C SANTA MONICA, CA 90404	95-3900124	501(C)(3)	65,000.	0.			SCHOLARSHIPS
ONE VOICE 1228 15TH STREET, SUITE C SANTA MONICA, CA 90404	95-3900124	501(C)(3)	100,000.	0.			SCHOLARSHIPS
ORANGE COUNTY ASIAN AND PACIFIC ISLANDER COMMUNITY ALLIANCE - 12900 GARDEN GROVE BLVD., STE 214A - GARDEN GROVE, CA 92843	91-2047245	501(C)(3)	11,200.	0.			PROGRAM SUPPORT
ORANGE COUNTY BAR FOUNDATION 313 N. BIRCH STREET, 2ND FLOOR SANTA ANA, CA 92701	23-7068923	501(C)(3)	30,000.	0.			SCHOLARSHIPS
P.F. BRESEE FOUNDATION 184 S. BIMINI PLACE LOS ANGELES, CA 90004	95-3797363	501(C)(3)	9,900.	0.			PROGRAM SUPPORT
P.F. BRESEE FOUNDATION 184 S. BIMINI PLACE LOS ANGELES, CA 90004	95-3797363	501(C)(3)	42,500.	0.			SCHOLARSHIPS
PASADENA CITY COLLEGE UPWARD BOUND PROGRAM - 1570 EAST COLORADO BLVD., ROOM D 203 - PASADENA, CA 91106-2003	95-3434226	501(C)(3)	14,400.	0.			PROGRAM SUPPORT
PASADENA EDUCATIONAL FOUNDATION 351 S. HUDSON AVENUE, ROOM 219 PASADENA, CA 91109	95-7149451	501(C)(3)	40,000.	0.			SCHOLARSHIPS

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PASADENA EDUCATIONAL FOUNDATION 351 S. HUDSON AVENUE, ROOM 219 PASADENA, CA 91109	95-7149451	501(C)(3)	50,000.	0.			SCHOLARSHIPS
PENINSULA COLLEGE FUND 1222 PRESERVATION PARKWAY OAKLAND, CA 94612-1201	94-3136771	501(C)(3)	30,000.	0.			SCHOLARSHIPS
PRINCETON THEOLOGICAL SEMINARY OFFICE OF SEMINARY RELATIONS, PO BOX PRINCETON, NJ 08542-0803	210635010	501(C)(3)	10,000.	0.			DIRECTOR
PROJECT BEST 5801 SUNDALE AVENUE BAKERSFIELD, CA 93309-2924	77-0235452	501(C)(3)	8,000.	0.			OPERATING SUPPORT
PROJECT BEST 5801 SUNDALE AVENUE BAKERSFIELD, CA 93309-2924	77-0235452	501(C)(3)	50,000.	0.			SCHOLARSHIPS
PROJECT GRAD LOS ANGELES 10625 ERWIN STREET NORTH HOLLYWOOD, CA 91606	95-4724314	501(C)(3)	75,000.	0.			SCHOLARSHIPS
PROVIDENCE COLLEGE 549 RIVER AVENUE, HARKINS HALL, #109 PROVIDENCE, RI 02918-0002	05-0258932	501(C)(3)	25,000.	0.			DIRECTOR
RUTGERS UNIVERSITY FOUNDATION WINANTS HALL, 7 COLLEGE AVENUE NEW BRUNSWICK, NJ 08901-1261	23-7318742	501(C)(3)	15,000.	0.			DIRECTOR

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I-1 (Form 990) 2009

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)
▶ Attach to Form 990 to list additional information for
Schedule I (Form 990), Part II or Part III.**

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

COLLEGE ACCESS FOUNDATION OF CALIFORNIA

**Employer identification number
94-2618667**

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SALVADORAN AMERICAN LEADERSHIP AND EDUCATIONAL FUND - 1625 W. OLYMPIC BLVD., SUITE 718 - LOS ANGELES, CA 90015	95-4702001	501(C)(3)	6,750.	0.			OPERATING SUPPORT
SALVADORAN AMERICAN LEADERSHIP AND EDUCATIONAL FUND - 1625 W. OLYMPIC BLVD., SUITE 718 - LOS ANGELES, CA 90015	95-4702001	501(C)(3)	11,000.	0.			PROGRAM SUPPORT
SALVADORAN AMERICAN LEADERSHIP AND EDUCATIONAL FUND - 1625 W. OLYMPIC BLVD., SUITE 718 - LOS ANGELES, CA 90015	95-4702001	501(C)(3)	45,000.	0.			SCHOLARSHIPS
SAN DIEGO EDUCATION FUND 4100 NORMAL STREET, #3251 SAN DIEGO, CA 92103	95-6095413	501(C)(3)	50,000.	0.			SCHOLARSHIPS
SAN DIEGO FOUNDATION 2508 HISTORIC DECATUR ROAD, SUITE 2 SAN DIEGO, CA 92106	95-2942582	501(C)(3)	22,000.	0.			OPERATING SUPPORT
SAN DIEGO FOUNDATION 2508 HISTORIC DECATUR ROAD, SUITE 2 SAN DIEGO, CA 92106	95-2942582	501(C)(3)	50,000.	0.			DIRECTOR
SAN DIEGO FOUNDATION 2508 HISTORIC DECATUR ROAD, SUITE 2 SAN DIEGO, CA 92106	95-2942582	501(C)(3)	188,000.	0.			SCHOLARSHIPS
SAN FRANCISCO THEOLOGICAL SEMINARY 105 SEMINARY ROAD SAN ANSLELMO, CA 94960	94-1156302	501(C)(3)	15,000.	0.			DIRECTOR

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Schedule I-1 (Form 990) 2009

**SCHEDULE I-1
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SCHOLARSHIP FOUNDATION OF SANTA BARBARA - PO BOX 3620 - SANTA BARBARA, CA 93130	23-0708774	501(C)(3)	200,000.	0.			SCHOLARSHIPS
SHASTA UNIFIED HIGH SCHOOL DISTRICT - 2200 EUREKA WAY, SUITE B - REDDING, CA 96001	68-0242276	501(C)(3)	6,686.	0.			OPERATING SUPPORT
SHASTA UNIFIED HIGH SCHOOL DISTRICT - 2200 EUREKA WAY, SUITE B - REDDING, CA 96001	68-0242276	501(C)(3)	6,686.	0.			OPERATING SUPPORT
SHASTA UNIFIED HIGH SCHOOL DISTRICT - 2200 EUREKA WAY, SUITE B - REDDING, CA 96001	68-0242276	501(C)(3)	60,000.	0.			SCHOLARSHIPS
STANFORD UNIVERSITY/THE STANFORD FUND - 326 GALVEZ - STANFORD, CA 94305 6105	94-1156365	501(C)(3)	75,000.	0.			DIRECTOR
STILES HALL UNIVERSITY OF CALIFORNIA, BERKELEY, 2400 BANCROFT WAY - BERKELEY, CA 94704	94-1156636	501(C)(3)	10,000.	0.			PROGRAM SUPPORT
STILES HALL UNIVERSITY OF CALIFORNIA, BERKELEY, 2400 BANCROFT WAY - BERKELEY, CA 94704	94-1156636	501(C)(3)	120,000.	0.			SCHOLARSHIPS
STUDENTS RISING ABOVE P.O. BOX 29174 SAN FRANCISCO, CA 94129	81-0615887	501(C)(3)	10,000.	0.			OPERATING SUPPORT

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Schedule I-1 (Form 990) 2009

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STUDENTS RISING ABOVE P.O. BOX 29174 SAN FRANCISCO, CA 94129	81-0615887	501(C)(3)	16,000.	0.			PROGRAM SUPPORT
STUDENTS RISING ABOVE P.O. BOX 29174 SAN FRANCISCO, CA 94129	81-0615887	501(C)(3)	60,000.	0.			SCHOLARSHIPS
SUMMER SEARCH 500 SANSOME STREET, SUITE 350 SAN FRANCISCO, CA 94111	68-0200138	501(C)(3)	200,000.	0.			SCHOLARSHIPS
THE COLLEGE OF NEW JERSEY P.O. BOX 7718 EWING, NJ 08628-0718	22-2448189	501(C)(3)	10,000.	0.			DIRECTOR
THE HANNAH PROJECT 630 DRAKE AVENUE MARIN CITY, CA 94965	94-2657360	501(C)(3)	8,000.	0.			OPERATING SUPPORT
THE HANNAH PROJECT 630 DRAKE AVENUE MARIN CITY, CA 94965	94-2657360	501(C)(3)	50,000.	0.			SCHOLARSHIPS
THE WOODEN FLOOR (AKA SAINT JOSEPH BALLEY) - 1810 NORTH MAIN STREET - SANTA ANA, CA 92706	33-0299356	501(C)(3)	7,000.	0.			PROGRAM SUPPORT
UC CALTEACH INITIATIVE 1111 FRANKLIN STREET, ROOM 9401 OAKLAND, CA 94607	94-3067788	501(C)(3)	11,250.	0.			OPERATING SUPPORT

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Schedule I-1 (Form 990) 2009

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)
**▶ Attach to Form 990 to list additional information for
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OMB No. 1545-0047

2009

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94-2618667

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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UC CALTEACH INITIATIVE 1111 FRANKLIN STREET, ROOM 9401 OAKLAND, CA 94607	94-3067788	501(C)(3)	27,600.	0.			SCHOLARSHIPS
UNITED FRIENDS OF THE CHILDREN 1055 WILSHIRE BLVD., SUITE 1955 LOS ANGELES, CA 90017	95-3665186	501(C)(3)	90,000.	0.			SCHOLARSHIPS
UNITE-LA 350 S. BIXEL STREET, SUITE 160 LOS ANGELES, CA 90017	82-0576380	501(C)(3)	50,000.	0.			SCHOLARSHIPS
UNITE-LA 350 S. BIXEL STREET, SUITE 160 LOS ANGELES, CA 90017	82-0576380	501(C)(3)	71,900.	0.			PROGRAM SUPPORT
UNITE-LA 350 S. BIXEL STREET, SUITE 160 LOS ANGELES, CA 90017	82-0576380	501(C)(3)	250,000.	0.			SCHOLARSHIPS
UNIVERSITY OF CALIFORNIA BERKELEY FOUNDATION - 2080 ADDISON STREET #4200 - BERKELEY, CA 94720	94-6090626	501(C)(3)	50,000.	0.			DIRECTOR
USC CHEPA 3470 TROUSDALE PARKWAY-WPH701 LOS ANGELES, CA 90089-4037	95-1642394	501(C)(3)	20,000.	0.			PROGRAM SUPPORT
USC MEDCOR 1540 ALCAZAR STREET, CENTER FOR HEALTH PROFESSIONS 100 - LOS ANGELES, CA 900	91-1642394	501(C)(3)	23,400.	0.			SCHOLARSHIPS

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Schedule I-1 (Form 990) 2009

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)
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OMB No. 1545-0047

2009

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Name of the organization

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94-2618667

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USC MEDCOR 1541 ALCAZAR STREET, CENTER FOR HEALTH PROFESSIONS 100 - LOS ANGELES, CA 900	91-1642394	501(C)(3)	30,000.	0.			SCHOLARSHIPS
USC NEIGHBORHOOD ACADEMIC INITIATIVE - 3375 SOUTH HOOVER STREET, SUITE F-206 - LOS ANGELES, CA 90089-7795	95-1642394	501(C)(3)	11,800.	0.			PROGRAM SUPPORT
USC NEIGHBORHOOD ACADEMIC INITIATIVE - 3375 SOUTH HOOVER STREET, SUITE F-206 - LOS ANGELES, CA 90089-7795	95-1642394	501(C)(3)	104,400.	0.			SCHOLARSHIPS
WALKING SHIELD, INC. 22622 LAMBERT STREET, #303 LAKE FOREST, CA 92630	33-0209754	501(C)(3)	15,000.	0.			PROGRAM SUPPORT
WATSONVILLE COLLEGE SUCCESS SCHOLARSHIP FUND - 243 CORRALITOS ROAD - WATSONVILLE, CA 95076	94-2624585	501(C)(3)	15,000.	0.			PROGRAM SUPPORT
WATSONVILLE COLLEGE SUCCESS SCHOLARSHIP FUND - 243 CORRALITOS ROAD - WATSONVILLE, CA 95076	94-2624585	501(C)(3)	100,000.	0.			SCHOLARSHIPS
YALE UNIVERSITY OFFICE OF DEVELOPMENT, P.O. BOX 203 NEW HAVEN, CT 06521-2038	06-0646973	501(C)(3)	50,000.	0.			DIRECTOR
YOUTH TREATMENT AND EDUCATION CENTER - P.O. BOX 27278 - SAN FRANCISCO, CA 94127	65-1232572	501(C)(3)	12,000.	0.			PROGRAM SUPPORT

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Schedule I-1 (Form 990) 2009

Name of the organization

COLLEGE ACCESS FOUNDATION OF CALIFORNIA

Employer identification number

94-2618667

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YOUTH TREATMENT AND EDUCATION CENTER - P.O. BOX 27278 - SAN FRANCISCO, CA 94127	65-1232572	501(C)(3)	24,000.	0.			SCHOLARSHIPS
YOUTH TREATMENT AND EDUCATION CENTER - P.O. BOX 27278 - SAN FRANCISCO, CA 94127	65-1232572	501(C)(3)	56,000.	0.			SCHOLARSHIPS
YWCA SANTA MONICA / WESTSIDE 2019 - 14TH STREET SANTA MONICA, CA 90405	95-1643398	501(C)(3)	15,000.	0.			SCHOLARSHIPS

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization

COLLEGE ACCESS FOUNDATION OF CALIFORNIA

Employer identification number

94-2618667

Part I Questions Regarding Compensation

	Yes	No								
<p>1a 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.</p> <table border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input checked="" type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax indemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use	<input checked="" type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use									
<input checked="" type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
<p>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</p>	X									
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?</p>	X									
<p>3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.</p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> Compensation committee</td> <td><input type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input checked="" type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract	<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study	<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract									
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study									
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
<p>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:</p> <p>a Receive a severance payment or change-of-control payment?</p>		X								
<p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p>		X								
<p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>		X								
<p>Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.</p>										
<p>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:</p> <p>a The organization?</p>	5a	X								
<p>b Any related organization?</p> <p>If "Yes" to line 5a or 5b, describe in Part III.</p>	5b	X								
<p>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:</p> <p>a The organization?</p>	6a	X								
<p>b Any related organization?</p> <p>If "Yes" to line 6a or 6b, describe in Part III.</p>	6b	X								
<p>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</p>	7	X								
<p>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 Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III</p>	8	X								
<p>9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	9									

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Schedule J (Form 990) 2009

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 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) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
JOHN GORSICH	(i)	196,446.	0.	0.	20,500.	10,758.	227,704.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
JAY SHERWIN	(i)	162,012.	0.	0.	20,100.	17,794.	199,906.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
JULIA I. LOPEZ	(i)	276,311.	0.	0.	22,000.	2,103.	300,414.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

PART I, LINE 1A: SPOUSE TRAVEL WAS FOR A SINGLE BOARD MEETING, AND THE
EXPENSE WAS TREATED AS TAXABLE INCOME FOR THE DIRECTOR/EMPLOYEE.

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No. 1545-0047

2009

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Employer identification number

94-2618667

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

COLLEGE ACCESS FOUNDATION OF CALIFORNIA HELPS QUALIFIED STUDENTS
PRIMARILY IN CALIFORNIA WHO HAVE FINANCIAL NEED ATTEND AND GRADUATE
FROM COLLEGE. THE FOUNDATION PROVIDES GRANTS FOR SCHOLARSHIPS TO
COMMUNITY-BASED PROGRAMS THAT COUNSEL STUDENTS ON HOW TO PREPARE FOR
AND APPLY FOR COLLEGE, AND HOW TO OBTAIN FINANCIAL AID. THE
FOUNDATION AND ITS SUBSIDIARY, CEFI CORPORATION (CEFI), WHICH MANAGES
STUDENT LOANS, ARE THE SURVIVING ENTITIES AFTER A SERIES OF CORPORATE
RESTRUCTURINGS THAT ARE DESCRIBED MORE FULLY IN THE FOUNDATION'S
AUDITED FINANCIAL STATEMENTS.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

AND APPLY FOR COLLEGE, AND HOW TO OBTAIN FINANCIAL AID.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

GRANTS TO OVER 100 ORGANIZATIONS, WHICH IN TURN HAVE AWARDED NEARLY
20,000 SCHOLARSHIPS TO LOW-INCOME CALIFORNIA STUDENTS.

FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES:

CANADA, CAYMAN ISLANDS, BRITISH VIRGIN IS, UNITED KINGDOM

FORM 990, PART VI, SECTION A, LINE 3: ALL HR FUNCTIONS INCLUDING PAYROLL
ARE DELEGATED TO TRINET CORP.

ALL STUDENT LOAN CORPORATION ADMINISTERS THE OUTSTANDING STUDENT LOANS
UNDER THE CALEDGE STUDENT LOAN PROGRAM.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule O (Form 990) 2009

932211
02-03-10

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
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FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS FIRST REVIEWED IN
DETAIL BY THE CFO WORKING WITH THE TAX PREPARER AT THE AUDIT FIRM AND ANY
CHANGES OR CORRECTIONS ARE MADE. THE CFO THEN REVIEWS THE 990 WITH THE
CEO. UPON CEO APPROVAL, THE 990 IS GIVEN TO THE CHAIR OF THE AUDIT
COMMITTEE FOR HIS APPROVAL.

FORM 990, PART VI, SECTION B, LINE 12C: ON AN ANNUAL BASIS, EVERY BOARD
MEMBER, OFFICER AND EMPLOYEE ARE REQUIRED TO FILE A STATEMENT WITH THE
PRESIDENT AND CHIEF EXECUTIVE OFFICER LISTING THE AFFILIATIONS THAT INVOLVE
OR COULD REASONABLY BE EXPECTED TO INVOLVE A CONFLICT OF INTEREST. THE
CORPORATE SECRETARY COMPILES A LIST OF ALL SUCH AFFILIATIONS FOR USE BY
OFFICERS AND EMPLOYEES DURING THE YEAR TO REVEAL CONFLICTS WITH RESPECT TO
GRANT APPLICATIONS, CONTRACTUAL ARRANGEMENTS AND MATERIAL PURCHASES OR
PROCUREMENTS. WITH REGARD TO THE ONGOING RESPONSIBILITY OF BOARD MEMBERS,
OFFICERS AND EMPLOYEES, THE FOUNDATION'S CONFLICT OF INTEREST POLICY
CLEARLY STATES THAT:

IF CONFRONTED WITH A CHOICE BETWEEN THE INTERESTS OF THE FOUNDATION
AND PERSONAL ECONOMIC INTERESTS, OBLIGATIONS OR DUTIES TO OTHERS, IT IS
EXPECTED THAT BOARD MEMBERS, OFFICERS, AND EMPLOYEES WILL ACT IN THE
INTERESTS OF THE FOUNDATION.

BOARD MEMBERS, OFFICERS AND EMPLOYEES HAVE AN OBLIGATION TO PROMPTLY
DISCLOSE TO THE PRESIDENT AND CHIEF EXECUTIVE OFFICER ALL CONFLICTS COVERED
UNDER THE POLICY.

BOARD MEMBERS, OFFICERS AND EMPLOYEES MUST RECUSE THEMSELVES FROM
DECISIONS IN WHICH THERE IS A CONFLICT OF INTEREST OR POTENTIAL CONFLICT OF

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization

COLLEGE ACCESS FOUNDATION OF CALIFORNIA

Employer identification number

94-2618667

INTEREST.

FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION FOR THE CEO IS DETERMINED BY THE FINANCE AND ADMINISTRATION COMMITTEE OF THE BOARD, WHICH IS COMPOSED ENTIRELY OF INDEPENDENT INDIVIDUALS. THE COMMITTEE DETERMINES THE LEVEL OF COMPENSATION BASED ON A PERFORMANCE REVIEW AND REVIEW OF COMPARABILITY DATA FROM INDUSTRY REPORTS AND SPECIAL STUDIES. THE COMMITTEE THEN MAKES ITS RECOMMENDATION TO THE BOARD OF DIRECTORS FOR APPROVAL. COMPENSATION FOR THE CFO IS DETERMINED BY THE CEO AND RECOMMENDED TO THE FINANCE AND ADMINISTRATION COMMITTEE FOR APPROVAL. THE CEO'S RECOMMENDATION IS BASED ON A PERFORMANCE REVIEW AND REVIEW OF COMPARABILITY DATA FROM INDUSTRY REPORTS AND SPECIAL STUDIES. THE FINANCE AND ADMINISTRATION COMMITTEE MAKES ITS RECOMMENDATION TO THE BOARD OF DIRECTORS FOR APPROVAL.

FORM 990, PART VI, SECTION C, LINE 19: THE FOUNDATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND INTERIM FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST EITHER BY SENDING A PDF FILE VIA EMAIL OR A HARD COPY VIA USPS. THE AUDITED FINANCIAL STATEMENTS ARE PUBLISHED ON THE FOUNDATION'S WEB SITE AND ALSO MADE AVAILABLE UPON REQUEST.

FORM 990, PART XI, LINE 2C:
THE ORGANIZATION HAS A AUDIT COMMITTEE THAT ASSUMES RESPONSIBILITY OF THE FINANCIAL STATEMENTS, AND TO WHICH THE INDEPENDENT AUDITORS REPORT.

Related Organizations and Unrelated Partnerships

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.**
▶ **Attach to Form 990.** ▶ **See separate instructions.**

Name of the organization COLLEGE ACCESS FOUNDATION OF CALIFORNIA **Employer identification number** 94-2618667

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to other organization(s)		X
c Gift, grant, or capital contribution from other organization(s)		X
d Loans or loan guarantees to or for other organization(s)		X
e Loans or loan guarantees by other organization(s)		X
f Sale of assets to other organization(s)		X
g Purchase of assets from other organization(s)		X
h Exchange of assets		X
i Lease of facilities, equipment, or other assets to other organization(s)		X
j Lease of facilities, equipment, or other assets from other organization(s)		X
k Performance of services or membership or fundraising solicitations for other organization(s)		X
l Performance of services or membership or fundraising solicitations by other organization(s)		X
m Sharing of facilities, equipment, mailing lists, or other assets	X	
n Sharing of paid employees	X	
o Reimbursement paid to other organization for expenses		X
p Reimbursement paid by other organization for expenses	X	
q Other transfer of cash or property to other organization(s)		X
r Other transfer of cash or property from other organization(s)	X	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of other organization(s)	(b) Transaction type (a-r)	(c) Amount involved
(1) CEFI CORPORATION	N	234,363.
(2) EMPLOYEE SALARY REIMBURSEMENT DESCRIBED IN N.	P	234,363.
(3) INTERCOMPANY TRANSFER FROM CEFI	R	1,999,998.
(4)		
(5)		
(6)		

