**PUBLIC DISCLOSURE COPY**

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) 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 **JUL 1, 2009** and ending **JUN 30, 2010**

B Check if applicable:

- [ ] Address change
- [ ] Name Change
- [ ] Initial Return
- [X] Amended Return
- [ ] Revocation pending

C Name of organization

SAN FRANCISCO STATE UNIVERSITY FOUNDATION

D Employer Identification number

26-1169717

E Telephone number

415-405-4061

F Name and address of principal officer:

ROBERT J. NAVA
1600 HOLLOWAY AVENUE, SAN FRANCISCO, CA 94132-4028

G Gross receipts &

18,547,650.

H(a) Is this a group return for affiliates? [X] No

H(b) Are all affiliates included? [ ] Yes [X] No

If "No," attach a list. (see instructions)

J Website:

HTTP://WWW.SFSU.EDU/~SFSUFN/

K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other

L Year of formation: 2007

M State of legal domicile: CA

Part I: Summary

1 Briefly describe the organization's mission or most significant activities: TO PROVIDE PRIVATE FINANCIAL SUPPORT TO ASSIST THE UNIVERSITY IN MEETING ITS EDUCATIONAL MISSION.

Activities & Governance

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a) 3

4 Number of independent voting members of the governing body (Part VI, line 1b) 4

5 Total number of employees (Part V, line 2a) 5

6 Total number of volunteers (estimate if necessary) 6

7a Total gross unrelated business revenue from Part VIII, column (C), line 12 7a

7b Net unrelated business taxable income from Form 990-T, line 34 7b

Revenue

8 Contributions and grants (Part VIII, line 1a) 8

9 Program service revenue (Part VIII, line 2a) 0

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 0

11 Other revenue (Part VIII, column (A), lines 5, 6d, 6c, 9c, 10c, and 11e) 0

12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 4,871,739

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0

14 Benefits paid to or for members (Part IX, column (A), line 4) 0

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0

16 Total fundraising expenses (Part IX, column (D), line 25) 5,051

17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 0

18 Total expenses, Add lines 13-17 (must equal Part IX, column (A), line 25) 5,051

19 Revenue less expenses. Subtract line 18 from line 12 4,816,688

Net Assets or Fund Balances

20 Total assets (Part X, line 16) 47,327,278

21 Total liabilities (Part X, line 26) 5,051

22 Net assets or fund balances. Subtract line 21 from line 20 46,778,227

Part II: Signature Block

I, the preparer of this return, 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.

Signature of Officer

DON W. SCoble, CHAIR

Type or print name and title

Preparer's signature

Preparer's identifying number

Preparer's address

100 FIRST STREET, 14TH FLOOR
SAN FRANCISCO, CA 94105

Preparer's identification number

EIN

Phone no. (415) 781-0793

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

Form 990 (2009)

LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.
Part III | Statement of Program Service Accomplishments

1 Briefly describe the organization's mission:
TO FOSTER PRIVATE FINANCIAL SUPPORT TO ASSIST THE SAN FRANCISCO STATE UNIVERSITY IN MEETING ITS EDUCATIONAL MISSION.

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
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?
☐ Yes ☐ No
If "Yes," describe these changes on Schedule O.

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.

4a (Code:  ) (Expenses $ Including grants of $ ) (Revenue $ 553,710.)

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 ➪ $
### Part IV | Checklist of Required Schedules

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Is the organization described in section 501(c)(3) or 4947(a)(1)?</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>If &quot;Yes,&quot; complete Schedule A</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Is the organization required to complete Schedule B, Schedule of Contributors?</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>3. Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If &quot;Yes,&quot; complete Schedule C, Part I</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If &quot;Yes,&quot; complete Schedule C, Part II</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>5. Section 501(c)(4), 501(c)(6), and 501(e)(6) organizations. Is the organization subject to the section 6033(a) notice and reporting requirement and proxy tax? If &quot;Yes,&quot; complete Schedule C, Part III</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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? If &quot;Yes,&quot; complete Schedule D, Part I</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If &quot;Yes,&quot; complete Schedule D, Part II</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>8. Did the organization maintain collections of works of art, historical treasures, or other similar assets? If &quot;Yes,&quot; complete Schedule D, Part III</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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? If &quot;Yes,&quot; complete Schedule D, Part IV</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>10. Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If &quot;Yes,&quot; complete Schedule D, Part V</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Is the organization's answer to any of the following questions &quot;Yes&quot;? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If &quot;Yes,&quot; complete Schedule D, Part VI</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If &quot;Yes,&quot; complete Schedule D, Part VII</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If &quot;Yes,&quot; complete Schedule D, Part VIII</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If &quot;Yes,&quot; complete Schedule D, Part IX</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Did the organization report an amount for other liabilities in Part X, line 25? If &quot;Yes,&quot; complete Schedule D, Part X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• 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? If &quot;Yes,&quot; complete Schedule D, Part XI</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Did the organization obtain separate, independent audited financial statements for the tax year? If &quot;Yes,&quot; complete Schedule D, Parts XI, XII, and XIII</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. Was the organization included in consolidated, independent audited financial statements for the tax year? If &quot;Yes,&quot; completing Schedule D, Parts XI, XII, and XIII is optional</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>13. Is the organization a school described in section 170(b)(1)(A))? If &quot;Yes,&quot; complete Schedule E</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>14. Did the organization maintain an office, employees, or agents outside of the United States?</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>a. 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? If &quot;Yes,&quot; complete Schedule F, Part I</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>b. 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? If &quot;Yes,&quot; complete Schedule F, Part II</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>15. Did the organization report on Part IX, column (A), line 6, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? If &quot;Yes,&quot; complete Schedule F, Part III</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>16. Did the organization report on Part IX, column (A), lines 5 and 11? If &quot;Yes,&quot; complete Schedule G, Part I</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>17. Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 5 and 11? If &quot;Yes,&quot; complete Schedule G, Part I</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>18. Did the organization report more than $15,000 of fundraising event gross income and contributions on Part IX, line 1c and 8a? If &quot;Yes,&quot; complete Schedule G, Part II</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>19. Did the organization report more than $15,000 of gross income from gaming activities on Part IX, line 9a? If &quot;Yes,&quot; complete Schedule G, Part III</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>20. Did the organization operate one or more hospitals? If &quot;Yes,&quot; complete Schedule H</td>
<td></td>
<td>0</td>
</tr>
</tbody>
</table>
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 17? If "Yes," complete Schedule I, Parts I and II ................................................................. 21 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 21? If "Yes," complete Schedule I, Parts I and III ......................................................................................... 22 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? If "Yes," complete Schedule J ........................................................................... 23 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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25 ........................................................................ 24a X

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? ......................................................... 24b

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? ........................................................................... 24c

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .................................................................... 24d

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? If "Yes," complete Schedule L, Part I .................................................................................. 25a 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? If "Yes," complete Schedule L, Part I .................................................................................. 25b X

26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employees, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II .................................................................................. 26 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? If "Yes," complete Schedule L, Part III .................................................................................. 27 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? If "Yes," complete Schedule L, Part IV ................................................................. 28a X

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV .................................................................................. 28b X

c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV .................................................................................. 28c X

29 Did the organization receive more than $25,000 in non-cash contributions? If "Yes," complete Schedule M .................................................................................. 29 X

30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M .................................................................................. 30 X

31 Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I .................................................................................. 31 X

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II .................................................................................. 32 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? If "Yes," complete Schedule R, Part I .................................................................................. 33 X

34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 .................................................................................. 34 X

35 Is any related organization a controlled entity within the meaning of section 512(b)(19)?  If "Yes," complete Schedule R, Part V, line 2 .................................................................................. 35 X

36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  If "Yes," complete Schedule R, Part V, line 2 .................................................................................. 36 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? If "Yes," complete Schedule R, Part VI .................................................................................. 37 X

38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?  .................................................................................. 38 X

Note. All Form 990 filers are required to complete Schedule O.
**SAN FRANCISCO STATE UNIVERSITY**

**FOUNDATION**

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b Enter the number of Forms W-2G included in line 1a. Enter 0 if not applicable.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2a Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gambling (gambling) winnings to prize winners?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2b 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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3a Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3b If &quot;Yes,&quot; has it filed a Form 990-T for this year? If &quot;No,&quot; provide an explanation in Schedule O.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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)?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6a Did 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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6b If &quot;Yes,&quot; did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6c Organizations that may receive deductible contributions under section 170(c).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Did the organization notify the donor of the value of the goods or services provided?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d If &quot;Yes,&quot; indicate the number of Forms 8282 filed during the year.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Sponsoring organizations maintaining donor advised funds.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Did the organization make any taxable distributions under section 4966?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Did the organization make a distribution to a donor, donor advisor, or related person?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Section 501(c)(7) organizations. Enter:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Initiation fees and capital contributions included on Part VIII, line 12</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Section 501(c)(12) organizations. Enter:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Gross Income from members or shareholders</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Gross Income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b If &quot;Yes,&quot; enter the amount of tax-exempt interest received or accrued during the year.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Section A. Governing Body and Management

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a. Enter the number of voting members of the governing body</td>
<td>21</td>
<td></td>
</tr>
<tr>
<td>1b. Enter the number of voting members that are independent</td>
<td>13</td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>4. Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>5. Did the organization become aware during the year of a material divestment of the organization’s assets?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>6. Does the organization have members or stockholders?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>7a. Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>7b. Are any decisions of the governing body subject to approval by members, stockholders, or other persons?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>8. Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>a. The governing body</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Each committee with authority to act on behalf of the governing body</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

### Section B. Policies

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

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>10a. Does the organization have local chapters, branches, or affiliates?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>b. If &quot;Yes,&quot; 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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>11A. Describes in Schedule O the process, if any, used by the organization to review this Form 990.</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>12a. Does the organization have a written conflict of interest policy? If &quot;No,&quot; go to line 13</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>b. Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>c. Does the organization regularly and consistently monitor and enforce compliance with the policy? If &quot;Yes,&quot; describe in Schedule O how this is done</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>13. Does the organization have a written whistleblower policy?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>14. Does the organization have a written document retention and destruction policy?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>15. Did the process for determining compensation of the following persons include a review by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>a. The organization's CEO, Executive Director, or top management official</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Other officers or key employees of the organization</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes&quot; to line 15a or 15b, describe the process in Schedule O. (See instructions.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>b. If &quot;Yes,&quot; 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?</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Disclosure

<table>
<thead>
<tr>
<th>Question</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>17. List the states with which a copy of this Form 990 is required to be filed</td>
<td>CA</td>
</tr>
<tr>
<td>18. Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3) only) available for public inspection. Indicate how you make these available. Check all that apply.</td>
<td>X Own website   X Another's website   X Upon request</td>
</tr>
<tr>
<td>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.</td>
<td></td>
</tr>
<tr>
<td>20. State the name, physical address, and telephone number of the person who possesses the books and records of the organization:</td>
<td>DON W. SCOBLE - 415-405-4061</td>
</tr>
<tr>
<td>1600 HOLLOWAY AVE., ADM 154C, SAN FRANCISCO, CA 94132-4028</td>
<td></td>
</tr>
</tbody>
</table>

---
**SAN FRANCISCO STATE UNIVERSITY FOUNDATION**  
26-1169717 Page 7

### 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, 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.

[X] Check this box if the organization did not compensate any current officer, director, or trustee.

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Average hours per week</th>
<th>(C) Position (check all that apply)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ken Bastida</td>
<td>0.30 X</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>Liss Bittch</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>President/Director</td>
<td>3.00 X</td>
<td>X</td>
<td>0.</td>
<td>224,107.</td>
<td>39,569.</td>
</tr>
<tr>
<td>Leona Bridges</td>
<td>0.30 X</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>Peter Casey</td>
<td>0.10 X</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>Mabel Chan</td>
<td>0.30 X</td>
<td></td>
<td>0.</td>
<td>61,030.</td>
<td>26,337.</td>
</tr>
<tr>
<td>Robert A. Corriag</td>
<td>0.10 X</td>
<td></td>
<td>0.</td>
<td>365,665.</td>
<td>60,947.</td>
</tr>
<tr>
<td>Dana Corvin</td>
<td>0.30 X</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>John Gemillo</td>
<td>0.30 X</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>Michael Grace</td>
<td>0.30 X</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>John Gunas</td>
<td>0.30 X</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>Vick Chair/Director</td>
<td>0.50 X</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>Phil King</td>
<td>1.00 X</td>
<td></td>
<td>0.</td>
<td>118,839.</td>
<td>29,924.</td>
</tr>
<tr>
<td>Larry Morishita</td>
<td>0.30 X</td>
<td></td>
<td>0.</td>
<td>229,742.</td>
<td>53,519.</td>
</tr>
<tr>
<td>Don Nassir</td>
<td>0.30 X</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>Neda Nobari</td>
<td>0.30 X</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>Sue Rossner</td>
<td>0.10 X</td>
<td></td>
<td>0.</td>
<td>76,881.</td>
<td>12,344.</td>
</tr>
<tr>
<td>David Sacks</td>
<td>0.30 X</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>Don Scoble</td>
<td>2.00 X</td>
<td>X</td>
<td>0.</td>
<td>76,638.</td>
<td>0.</td>
</tr>
</tbody>
</table>
### Part VII

**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)**

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week</th>
<th>(C) Position (check all that apply)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>DAVID SERRANO SEWELL, DIRECTOR</td>
<td>0.30 X</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>CAMILLA SMITH, DIRECTOR</td>
<td>0.30 X</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>YAN-LING TSE, DIRECTOR</td>
<td>0.30 X</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>WILL WEINSTEIN, DIRECTOR</td>
<td>0.30 X</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DBHbir CHAW, SECRETARY AND TREASURER</td>
<td>5.00 X</td>
<td></td>
<td>0.</td>
<td>115,217.</td>
<td>25,885.</td>
</tr>
</tbody>
</table>

1b Total: 0.1,268,119. 248,525.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization: 0

3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual: Yes  X

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? If "Yes," complete Schedule J for such individual: Yes  X

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person: Yes  X

### Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization.

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>SFSU ACCOUNTING OFFICE, 1600 HOLLOWAY AVENUE, SAN FRANCISCO, CA 94132</td>
<td>PROGRAM RELATED ADMIN EXPENSES</td>
<td>287,757.</td>
</tr>
</tbody>
</table>

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization: 1

Form 990 (2009)
### Statement of Revenue

<table>
<thead>
<tr>
<th>Contributions, gifts, grants and other similar amounts</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512, 513, or 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Federated campaigns</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b Membership dues</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1c Fundraising events</td>
<td>515</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1d Related organizations</td>
<td>1437361</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1e Government grants (contributions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1f All other contributions, gifts, grants, and similar amounts not included above</td>
<td>1754140</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1g Noncash contributions included in lines 1a-1f, $</td>
<td>582,400</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h Total, Add lines 1a-1f</td>
<td>3192016</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Program Service Revenue</th>
<th>Business Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a ADMINISTRATIVE FEES</td>
<td>611710</td>
</tr>
<tr>
<td></td>
<td>553,710</td>
</tr>
<tr>
<td></td>
<td>553,710</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Investment Income (including dividends, Interest, and other similar amounts)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>295,369</td>
</tr>
<tr>
<td></td>
<td>295,369</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Royalties</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Royalties</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Other Revenue</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Gross Rents</th>
<th>(i) Real</th>
<th>(ii) Personal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gross Rents</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less: Rental expenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rental Income or (loss)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Net Rental Income or (loss)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>7a Gross amount from sales of assets other than inventory</th>
<th>14,506,500</th>
</tr>
</thead>
<tbody>
<tr>
<td>b Less: cost or other basis and sales expenses</td>
<td>13,675,911</td>
</tr>
<tr>
<td>c Gain or (loss)</td>
<td>830,589</td>
</tr>
<tr>
<td>d Not gain or (loss)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>8a Gross income from fundraising events (not including $ 515 of contributions reported on line 1c). See Part IV, line 18</th>
<th>0</th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
</tr>
<tr>
<td>c Net Income or (loss) from fundraising events</td>
<td>0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>9a Gross income from gaming activities. See Part IV, line 19</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>10a Gross sales of inventory, less returns and allowances</th>
<th>0</th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Miscellaneous Revenue</th>
<th>Business Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>11a MISCELLANEOUS INCOME</td>
<td>611710</td>
</tr>
<tr>
<td></td>
<td>55</td>
</tr>
<tr>
<td></td>
<td>55</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>12 Total revenue. See instructions.</th>
<th>4871739</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total, Add lines 11a-11d</td>
<td>55</td>
</tr>
<tr>
<td>Total revenue. See instructions.</td>
<td>55</td>
</tr>
<tr>
<td>Total revenue. See instructions.</td>
<td>55</td>
</tr>
<tr>
<td>Total revenue. See instructions.</td>
<td>55</td>
</tr>
<tr>
<td>Total revenue. See instructions.</td>
<td>55</td>
</tr>
</tbody>
</table>

### Form 990 (2009)
### 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).

<table>
<thead>
<tr>
<th>Do not include amounts reported on lines 6b, 7b, 8a, 9b, and 10b of Part VIII.</th>
<th>(A) Total expenses</th>
<th>(B) Program service expenses</th>
<th>(C) Management and general expenses</th>
<th>(D) Fundraising expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Grants and other assistance to individuals in the U.S. See Part IV, line 22</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Benefits paid to or for members</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Compensation of current officers, directors, trustees, and key employees</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Other salaries and wages</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Other employee benefits</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Payroll taxes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Fees for services (non-employees):</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Management</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Legal</td>
<td>450</td>
<td>450</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Accounting</td>
<td>294,557</td>
<td>294,557</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Lobbying</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Professional fundraising services, See Part IV, line 17</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f Investment management fees</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Advertising and promotion</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Office expenses</td>
<td>1,981</td>
<td>1,981</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14 Information technology</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15 Royalties</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16 Occupancy</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17 Travel</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18 Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19 Conferences, conventions, and meetings</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20 Interest</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21 Payments to affiliates</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22 Depreciation, depletion, and amortization</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23 Insurance</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a OTHER EXPENSES</td>
<td>11,530</td>
<td>11,530</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b HOSPITALITY</td>
<td>592</td>
<td>592</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f All other expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

25 Total functional expenses. Add lines 1 through 24f

<table>
<thead>
<tr>
<th></th>
<th>(A) Total expenses</th>
<th>(B) Program service expenses</th>
<th>(C) Management and general expenses</th>
<th>(D) Fundraising expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>309,110</td>
<td>0</td>
<td>309,110</td>
<td>0</td>
</tr>
</tbody>
</table>

26 Joint costs. Check here ▶ if following SOP 99-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.
### Balance Sheet

<table>
<thead>
<tr>
<th>Item</th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Cash - non-interest-bearing</td>
<td></td>
<td>280,656</td>
</tr>
<tr>
<td>2. Savings and temporary cash investments</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Pledges and grants receivable, net</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Accounts receivable, net</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Receivables from other disqualified persons (as defined under section 4958(f)(11) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Notes and loans receivable, net</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Inventories for sale or use</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Prepaid expenses and deferred charges</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a. Loss: accumulated depreciation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Investments - publicly traded securities</td>
<td></td>
<td>44,800,209</td>
</tr>
<tr>
<td>12. Investments - other securities. See Part IV, line 11</td>
<td></td>
<td>700,726</td>
</tr>
<tr>
<td>13. Investments - program-related. See Part IV, line 11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14. Intangible assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15. Other assets. See Part IV, line 11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16. Total assets. Add lines 1 through 15 (must equal line 34)</td>
<td>0.0</td>
<td>47,327,278</td>
</tr>
<tr>
<td>17. Accounts payable and accrued expenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18. Grants payable</td>
<td></td>
<td></td>
</tr>
<tr>
<td>19. Deferred revenue</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20. Tax-exempt bond liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21. Escrow or custodial account liability. Complete Part IV of Schedule D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22. Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23. Secured mortgages and notes payable to unrelated third parties</td>
<td></td>
<td></td>
</tr>
<tr>
<td>24. Unsecured notes and loans payable to unrelated third parties</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25. Other liabilities. Complete Part X of Schedule D</td>
<td>5,051.0</td>
<td>1,120,855</td>
</tr>
<tr>
<td>26. Total liabilities. Add lines 17 through 25</td>
<td>5,051.0</td>
<td>1,148,816</td>
</tr>
<tr>
<td>27. Organizations that follow SFAS 117, check here □ and complete lines 27 through 29, and lines 33 and 34.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>28. Unrestricted net assets</td>
<td>-5,051.0</td>
<td>244,655</td>
</tr>
<tr>
<td>29. Temporarily restricted net assets</td>
<td>28</td>
<td>16,870,958</td>
</tr>
<tr>
<td>30. Permanently restricted net assets</td>
<td>29</td>
<td>29,062,849</td>
</tr>
<tr>
<td>31. Capital stock or trust principal, or current funds</td>
<td>30</td>
<td></td>
</tr>
<tr>
<td>32. Paid-in or capital surplus, or land, building, or equipment fund</td>
<td>31</td>
<td></td>
</tr>
<tr>
<td>33. Retained earnings, endowment, accumulated income, or other funds</td>
<td>32</td>
<td></td>
</tr>
<tr>
<td>34. Total net assets or fund balances</td>
<td>-5,051.0</td>
<td>46,178,462</td>
</tr>
<tr>
<td>35. Total liabilities and net assets/fund balances</td>
<td>0.0</td>
<td>47,327,278</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>-----</td>
</tr>
<tr>
<td>1</td>
<td>Accounting method used to prepare the Form 990:</td>
<td>Cash</td>
</tr>
<tr>
<td>2a</td>
<td>Were the organization's financial statements compiled or reviewed by an independent accountant?</td>
<td>X</td>
</tr>
<tr>
<td>2b</td>
<td>Were the organization's financial statements audited by an independent accountant?</td>
<td>X</td>
</tr>
<tr>
<td>2c</td>
<td>If &quot;Yes&quot; 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?</td>
<td>X</td>
</tr>
<tr>
<td>2d</td>
<td>If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.</td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td>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?</td>
<td>X</td>
</tr>
<tr>
<td>3b</td>
<td>If &quot;Yes,&quot; 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.</td>
<td></td>
</tr>
</tbody>
</table>
**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.

Name of the organization: SAN FRANCISCO STATE UNIVERSITY FOUNDATION

Employer identification number: 26-1169717

---

**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. [X] 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)(vii). (Complete Part II.)
8. [ ] A community trust described in section 170(b)(1)(A)(vii). (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.
   - [ ] Type I
   - [ ] Type II
   - [ ] Type III - Functionally Integrated
   - [ ] Type III - Otherwise

   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).

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. [ ]

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

   (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? [ ]
   (ii) A family member of a person described in (i) above? [ ]
   (iii) A 35% controlled entity of a person described in (i) or (ii) above? [ ]

Provide the following information about the supported organization(s).

<table>
<thead>
<tr>
<th>(i) Name of supported organization</th>
<th>(ii) EIN</th>
<th>(iii) Type of organization (described on lines 1-9 above or IRC section 509(a)(1) or IRC section 509(a)(2))</th>
<th>(iv) Is the organization in col. (i) listed in your governing document?</th>
<th>(v) Did you notify the organization in col. (i) of your support?</th>
<th>(vi) Is the organization in col. (i) organized in the U.S.?</th>
<th>(vii) Amount of support</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total

---

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
## Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2005</th>
<th>(b) 2006</th>
<th>(c) 2007</th>
<th>(d) 2008</th>
<th>(e) 2009</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>3,192,531.</td>
</tr>
<tr>
<td>2 Tax revenues levied for the organization’s benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>3,192,531.</td>
</tr>
<tr>
<td>3 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>3,192,531.</td>
</tr>
<tr>
<td>4 Total. Add lines 1 through 3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>3,192,531.</td>
</tr>
<tr>
<td>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)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2,794,765.</td>
</tr>
<tr>
<td>6 Public support. Subtract line 5 from line 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>397,766.</td>
</tr>
</tbody>
</table>

## Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2005</th>
<th>(b) 2006</th>
<th>(c) 2007</th>
<th>(d) 2008</th>
<th>(e) 2009</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7 Amounts from line 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>3,192,531.</td>
</tr>
<tr>
<td>8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>295,369.</td>
</tr>
<tr>
<td>9 Net income from unrelated business activities, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>295,369.</td>
</tr>
<tr>
<td>10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>55.958</td>
</tr>
<tr>
<td>11 Total support. Add lines 7 through 10</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>3,497,955.</td>
</tr>
<tr>
<td>12 Gross receipts from related activities, etc. (see instructions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>553,710.</td>
</tr>
<tr>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>![X]</td>
</tr>
</tbody>
</table>

## 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.

### 16b 33 1/3% support test - 2006
- 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.

### 17b 10% -facts-and-circumstances test - 2006
- 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.
### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2005</th>
<th>(b) 2006</th>
<th>(c) 2007</th>
<th>(d) 2008</th>
<th>(e) 2009</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Total. Add lines 1 through 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a Amounts included on lines 1, 2, and 3 received from disqualified persons</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b Amounts included on lines 1, 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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Public support (subject to limitation)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2005</th>
<th>(b) 2006</th>
<th>(c) 2007</th>
<th>(d) 2008</th>
<th>(e) 2009</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 Amounts from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Total support (add lines 9, 10a, 11, and 12)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

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

### Section D. Computation of Investment Income Percentage

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

**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.

**19b 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 B
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors
Attach to Form 990, 990-EZ, or 990-PF.

Name of the organization
SAN FRANCISCO STATE UNIVERSITY FOUNDATION

Employer identification number
26-1169717

Organization type (check one):

<table>
<thead>
<tr>
<th>Filers of</th>
<th>Section</th>
</tr>
</thead>
<tbody>
<tr>
<td>Form 990 or 990-EZ</td>
<td>501(c)(3) (enter number) organization</td>
</tr>
<tr>
<td>4947(a)(1) nonexempt charitable trust not treated as a private foundation</td>
<td></td>
</tr>
<tr>
<td>527 political organization</td>
<td></td>
</tr>
<tr>
<td>Form 990-PF</td>
<td>501(c)(3) exempt private foundation</td>
</tr>
<tr>
<td>4947(a)(1) nonexempt charitable trust treated as a private foundation</td>
<td></td>
</tr>
<tr>
<td>501(c)(3) taxable private foundation</td>
<td></td>
</tr>
</tbody>
</table>

Check if your organization is covered by the General Rule or a Special Rule.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

[X] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, $5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) $5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than $1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of $5,000 or more during the year. 

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.
## Part I: Contributors

<table>
<thead>
<tr>
<th>(a) No.</th>
<th>(b) Name, address, and ZIP + 4</th>
<th>(c) Aggregate contributions</th>
<th>(d) Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>$225,000</td>
<td>Person X, Payroll, Noncash</td>
</tr>
<tr>
<td>2</td>
<td></td>
<td>$10,000</td>
<td>Person X, Payroll, Noncash</td>
</tr>
<tr>
<td>3</td>
<td></td>
<td>$5,000</td>
<td>Person X, Payroll, Noncash</td>
</tr>
<tr>
<td>4</td>
<td></td>
<td>$65,214</td>
<td>Person X, Payroll, Noncash</td>
</tr>
<tr>
<td>5</td>
<td></td>
<td>$50,000</td>
<td>Person X, Payroll, Noncash</td>
</tr>
<tr>
<td>6</td>
<td></td>
<td>$1,650,000</td>
<td>Person X, Payroll, Noncash</td>
</tr>
<tr>
<td>No.</td>
<td>Name, address, and ZIP + 4</td>
<td>Aggregate contributions</td>
<td>Type of contribution</td>
</tr>
<tr>
<td>-----</td>
<td>---------------------------</td>
<td>-------------------------</td>
<td>---------------------</td>
</tr>
<tr>
<td>7</td>
<td></td>
<td>$5,000.</td>
<td>Person X, Payroll, Noncash</td>
</tr>
<tr>
<td>8</td>
<td></td>
<td>$5,000.</td>
<td>Person X, Payroll, Noncash</td>
</tr>
<tr>
<td>9</td>
<td></td>
<td>$25,000.</td>
<td>Person X, Payroll, Noncash</td>
</tr>
<tr>
<td>10</td>
<td></td>
<td>$35,000.</td>
<td>Person X, Payroll, Noncash</td>
</tr>
<tr>
<td>11</td>
<td></td>
<td>$25,000.</td>
<td>Person X, Payroll, Noncash</td>
</tr>
<tr>
<td>12</td>
<td></td>
<td>$6,700.</td>
<td>Person X, Payroll, Noncash</td>
</tr>
</tbody>
</table>
### Part I Contributors
(see instructions)

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Aggregate contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>13</td>
<td></td>
<td>$582,400.</td>
<td>Noncash X</td>
</tr>
<tr>
<td>14</td>
<td></td>
<td>$10,000.</td>
<td>Payroll X</td>
</tr>
<tr>
<td>15</td>
<td></td>
<td>$50,000.</td>
<td>Payroll X</td>
</tr>
<tr>
<td>16</td>
<td></td>
<td>$501,160.</td>
<td>Payroll X</td>
</tr>
<tr>
<td>17</td>
<td></td>
<td>$185,000.</td>
<td>Payroll X</td>
</tr>
<tr>
<td>18</td>
<td></td>
<td>$25,000.</td>
<td>Payroll X</td>
</tr>
<tr>
<td>No.</td>
<td>Name, address, and ZIP + 4</td>
<td>Aggregate contributions</td>
<td>Type of contribution</td>
</tr>
<tr>
<td>-----</td>
<td>----------------------------</td>
<td>-------------------------</td>
<td>---------------------</td>
</tr>
<tr>
<td>19</td>
<td></td>
<td>$6,500.</td>
<td>Person X</td>
</tr>
</tbody>
</table>

(Complete Part II if there is a noncash contribution.)
<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Description of noncash property given</th>
<th>(c) FMV (or estimate) (see instructions)</th>
<th>(d) Date received</th>
</tr>
</thead>
<tbody>
<tr>
<td>13</td>
<td>80,000 SH - BEBE STORES INC</td>
<td>$582,400</td>
<td>10/07/09</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)
**Schedule B (Form 990, 990-EZ, or 990-PF) (2009)**

Name of organization: SAN FRANCISCO STATE UNIVERSITY FOUNDATION

Employer identification number: 26-1169717

### Part III

Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than $1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this information once. See Instructions.) ➤ $.

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

<table>
<thead>
<tr>
<th>Relationship of transferor to transferee</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

<table>
<thead>
<tr>
<th>Relationship of transferor to transferee</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

<table>
<thead>
<tr>
<th>Relationship of transferor to transferee</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

<table>
<thead>
<tr>
<th>Relationship of transferor to transferee</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>
# Schedule D (Form 990) Supplemental Financial Statements

**Department of the Treasury**

**Internal Revenue Service**

**2009**

**Open to Public Inspection**

**OMB No. 1545-0047**

---

**Name of the organization**

SAN FRANCISCO STATE UNIVERSITY FOUNDATION

**Employer Identification number**

26-1169717

---

## 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.

<table>
<thead>
<tr>
<th></th>
<th>(a) Donor advised funds</th>
<th>(b) Funds and other accounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total number at end of year</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Aggregate contributions to (during year)</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Aggregate grants from (during year)</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Aggregate value at end of year</td>
<td></td>
</tr>
</tbody>
</table>

**Questions:**

- 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? (Answer "Yes" or "No")
- Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? (Answer "Yes" or "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)
   - Protection of natural habitat
   - Preservation of open space
   - Preservation of an historically important land area
   - Preservation of a certified historic structure

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.

<table>
<thead>
<tr>
<th></th>
<th>Held at the End of the Tax Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td>Total number of conservation easements</td>
</tr>
<tr>
<td>b</td>
<td>Total acreage restricted by conservation easements</td>
</tr>
<tr>
<td>c</td>
<td>Number of conservation easements on a certified historic structure included in (a)</td>
</tr>
<tr>
<td>d</td>
<td>Number of conservation easements included in (c) acquired after 8/17/06</td>
</tr>
</tbody>
</table>

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? (Answer "Yes" or "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(c) above satisfy the requirements of section 170(h)(4)(B)(i)

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.

1. 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.

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

---

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

Schedule D (Form 990) 2009

---

13240809 758661 76655 2009.06010 SAN FRANCISCO STATE UNIVER 766552
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

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:

<table>
<thead>
<tr>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1c</td>
</tr>
<tr>
<td>1d</td>
</tr>
<tr>
<td>1e</td>
</tr>
<tr>
<td>1f</td>
</tr>
</tbody>
</table>

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

1a Beginning of year balance
   b Contributions 42,921,552.00
   c Net investment earnings, gains, and losses 3012255.
   d Grants or scholarships
   e Other expenditures for facilities and programs
   f Administrative expenses
   g End of year balance 45,933,807.

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:
   (i) unrelated organizations [ ]
   (ii) related organizations [ ]

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? [ ] Yes [ ] No

Part VI | Investments - Land, Buildings, and Equipment

<table>
<thead>
<tr>
<th>Description of Investment</th>
<th>(a) Cost or other basis (Investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Accumulated depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Land</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Buildings</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Leasehold Improvements</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Equipment</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total, Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c)). [ ] 0.

Schedule D (Form 990) 2009

993012 02-01-10

13240809 758661 76655 2009.06010 SAN FRANCISCO STATE UNIVERSITY 766552
**Part VII Investments - Other Securities.** See Form 990, Part X, line 12.

<table>
<thead>
<tr>
<th>(a) Description of security or category</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end of year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial derivatives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Closely-held equity interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)

**Part VIII Investments - Program Related.** See Form 990, Part X, line 13.

<table>
<thead>
<tr>
<th>(a) Description of investment type</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end of year market value</th>
</tr>
</thead>
</table>

Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)

**Part IX Other Assets.** See Form 990, Part X, line 15.

<table>
<thead>
<tr>
<th>(a) Description</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total. (Column (b) must equal Form 990, Part X, col (B) line 15.)

**Part X Other Liabilities.** See Form 990, Part X, line 25.

1. (a) Description of liability | (b) Amount
   Federal income taxes         | DUE TO UNIVERSITY 1,120,855.

Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) 1,120,855.

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.
## 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) | 4,871,739 |
| 2 | Total expenses (Form 990, Part IX, column (A), line 25) | 3,091,110 |
| 3 | Excess (or deficit) for the year. Subtract line 2 from line 1 | 1,780,629 |
| 4 | Net unrealized gains (losses) on investments | 1,749 |
| 5 | Donated services and use of facilities | |
| 6 | Investment expenses | |
| 7 | Prior period adjustments | 5,051 |
| 8 | Other (Describe in Part XIV) | |
| 9 | Total adjustments (net). Add lines 4 through 8 | 41,620,884 |
| 10 | Excess (or deficit) for the year per audited financial statements. Combine lines 3 and 9 | 46,183,513 |

## Part XII | Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

| 1 | Total revenue, gains, and other support per audited financial statements | 4,873,488 |
| 2a | Net unrealized gains on investments | 1,749 |
| 2b | Donated services and use of facilities | |
| 2c | Recoveries of prior year grants | |
| 2d | Other (Describe in Part XIV) | |
| 2e | Add lines 2a through 2d | 1,749 |
| 3 | Subtract line 2e from line 1 | 4,871,739 |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | |
| 4a | Investment expenses not included on Form 990, Part VIII, line 7b | |
| 4b | Other (Describe in Part XIV) | |
| 4c | Add lines 4a and 4b | 0 |
| 5 | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | 4,871,739 |

## Part XIII | Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

| 1 | Total expenses and losses per audited financial statements | 309,110 |
| 2a | Donated services and use of facilities | |
| 2b | Prior year adjustments | |
| 2c | Other expenses | |
| 2d | Other (Describe in Part XIV) | |
| 2e | Add lines 2a through 2d | 0 |
| 3 | Subtract line 2e from line 1 | 309,110 |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | |
| 4a | Investment expenses not included on Form 990, Part VIII, line 7b | |
| 4b | Other (Describe in Part XIV) | |
| 4c | Add lines 4a and 4b | 0 |
| 5 | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 16.) | 309,110 |

## 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 V, LINE 4: THE FOUNDATION'S INVESTMENT POLICY DURING FISCAL YEAR 2009-2010 ALLOWED A 4% ANNUAL PAYOUT BASED ON QUARTERLY AVERAGE DAILY BALANCE OF THE FUND. THE 4% ANNUAL PAYOUT WAS NOT CHANGED DURING THE YEAR AND DISBURSEMENTS WERE ALLOWED IF THE PARTICULAR ENDOWMENT WAS NOT UNDERWATER. THE FOUNDATION'S ENDOWMENT FUNDS HAD APPROXIMATELY $1.7 MILLION OF UNDERWATER ENDOWMENTS AT JUNE 30, 2010.**

**PART X: THE FOUNDATION IS A NOT-FOR-PROFIT FOUNDATION AND IS**

| 820054 | 03-01-10 |

13240809 758661 76655 2009.06010 SAN FRANCISCO STATE UNIERS 766552
EXEMPT FROM FEDERAL AND STATE INCOME TAXES UNDER PROVISIONS OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND THE CALIFORNIA TAX CODE.

CONTINUANCE OF SUCH EXEMPTION IS SUBJECT TO COMPLIANCE WITH LAWS AND REGULATIONS OF THE TAXING AUTHORITIES. CERTAIN ACTIVITIES CONSIDERED UNRELATED TO THE TAX EXEMPT PURPOSES OF THE FOUNDATION MAY GENERATE INCOME THAT IS TAXABLE. NO PROVISION HAS BEEN RECORDED FOR INCOME TAXES, AS THE NET INCOME, IF ANY, FROM UNRELATED BUSINESS IN THE OPINION OF MANAGEMENT IS NOT MATERIAL TO THE BASIC FINANCIAL STATEMENTS TAKEN AS A WHOLE.

PART XI, LINE 8 - OTHER ADJUSTMENTS:

TRANSFER FROM THE UNIVERSITY CORPORATION, SF STATE: 42921552.

TRANSFER TO THE UNIVERSITY CORPORATION, SF STATE: -186613.

TRANSFER TO THE UNIVERSITY: -1120855.
## SCHEDULE J (Form 990)

**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.

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer Identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAN FRANCISCO STATE UNIVERSITY FOUNDATION</td>
<td>26-1169717</td>
</tr>
</tbody>
</table>

### Part I Questions Regarding Compensation

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.

- [ ] First-class or charter travel
- [ ] Housing allowance or residence for personal use
- [ ] Travel for companions
- [ ] Payments for business use of personal residence
- [ ] Tax indemnification and gross-up payments
- [ ] Health or social club dues or initiation fees
- [ ] Discretionary spending account
- [ ] Personal services (e.g., maid, chauffeur, chef)

1b. 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.

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?

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.

- [ ] Compensation committee
- [ ] Written employment contract
- [ ] Independent compensation consultant
- [ ] Compensation survey or study
- [ ] Form 990 of other organizations
- [ ] Approval by the board or compensation committee

4. During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

   a. Receive a severance payment or change-of-control payment? **X**

   b. Participate in, or receive payment from, a supplemental nonqualified retirement plan? **X**

   c. Participate in, or receive payment from, an equity-based compensation arrangement? **X**

   If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

5. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

   a. The organization? **X**

   b. Any related organization? **X**

   If "Yes" to line 5a or 5b, describe in Part III.

6. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

   a. The organization? **X**

   b. Any related organization? **X**

   If "Yes" to line 6a or 6b, describe in Part III.

7. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

   **X**

8. Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III

   **X**

9. If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

   **X**

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

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.

<table>
<thead>
<tr>
<th>(A) Name</th>
<th>(B) Breakdown of W-2 and/or 1099-MISC compensation</th>
<th>(C) Retirement and other deferred compensation</th>
<th>(D) Nontaxable benefits</th>
<th>(E) Total of columns (B)(i)-(D)</th>
<th>(F) Compensation reported in prior Form 990 or Form 990-EZ</th>
</tr>
</thead>
<tbody>
<tr>
<td>LEE BLITCH</td>
<td>(i) 0.</td>
<td>(ii) 0.</td>
<td>(iii) 0.</td>
<td>(iv) 0.</td>
<td>(v) 0.</td>
</tr>
<tr>
<td></td>
<td>224,107.</td>
<td>0.</td>
<td>37,137.</td>
<td>2,432.</td>
<td>263,676.</td>
</tr>
<tr>
<td>ROBERT A. CORRIGAN</td>
<td>(i) 355,665.</td>
<td>(ii) 0.</td>
<td>(iii) 48,237.</td>
<td>(iv) 12,710.</td>
<td>(v) 426,612.</td>
</tr>
<tr>
<td>LEROY MORISHITA</td>
<td>(i) 229,742.</td>
<td>(ii) 0.</td>
<td>(iii) 37,137.</td>
<td>(iv) 16,382.</td>
<td>(v) 283,261.</td>
</tr>
</tbody>
</table>

920112 02-02-10

Page 2
## Noncash Contributions

**2009**

**Name of the organization**: SAN FRANCISCO STATE UNIVERSITY FOUNDATION

**Employer identification number**: 26-1169717

### Part I: Types of Property

<table>
<thead>
<tr>
<th></th>
<th>(a) Check if applicable</th>
<th>(b) Number of contributions</th>
<th>(c) Revenues reported on Form 990, Part VIII, line 1g</th>
<th>(d) Method of determining revenues</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Art · Works of art</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Art · Historical treasures</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Art · Fractional interests</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Books and publications</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Clothing and household goods</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Cars and other vehicles</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Boats and planes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Intellectual property</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Securities · Publicly traded</td>
<td>X</td>
<td>1</td>
<td>582,400.</td>
</tr>
<tr>
<td>10</td>
<td>Securities · Closely held stock</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Securities · Partnership, L.L.C., or trust interests</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Securities · Miscellaneous</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Qualified conservation contribution · Historic structures</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Qualified conservation contribution · Other</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Real estate · Residential</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Real estate · Commercial</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>Real estate · Other</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Collectibles</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Food inventory</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Drugs and medical supplies</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Taxidermy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Historical artifacts</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Scientific specimens</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>Archeological artifacts</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>Other</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>26</td>
<td>Other</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>27</td>
<td>Other</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>28</td>
<td>Other</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

29. Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donor Acknowledgment 29

30a. During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? Yes X

31. Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? Yes X

32a. Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? Yes X

33. If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II.

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

**Schedule M (Form 990) 2009**

**932141** 03-12-10

**13240809 758661 76655** 2009.06010 SAN FRANCISCO STATE UNIVERS 766552
SCHEDULE M, PART I, COLUMN (B): THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTORS, NOT THE NUMBER OF ITEMS RECEIVED.
FORM 990, PART VI, SECTION B, LINE 11: HOOD & STRONG WILL FORWARD FORM 990 TO THE DIRECTOR AND FINANCE MANAGER OF AUXILIARY BUSINESS SERVICES FOR REVIEW BEFORE FORWARDING TO THE TREASURER FOR REVIEW. THE TREASURER WILL FORWARD THE FORM 990 TO THE BOARD OF DIRECTORS FOR THEIR REVIEW PRIOR TO FILING THE FORM 990. BOARD MEMBERS WILL BE ENCOURAGED TO REVIEW FROM 990 AND TO FORWARD ANY QUESTIONS TO THE TREASURER. THE TREASURER, DIRECTOR OF AUXILIARY BUSINESS SERVICES OR HOOD & STRONG WILL ADDRESS THE QUESTIONS FROM THE BOARD.

FORM 990, PART VI, SECTION B, LINE 12C: AT ITS OCTOBER BOARD MEETING, THE BOARD OF DIRECTORS ARE REQUIRED TO REVIEW THE POLICY AND SIGN THE POLICY STATEMENT. AN ANNUAL COMPLIANCE REPORT IS PROVIDED TO THE UNIVERSITY'S CFO.

ANY POTENTIAL CONFLICTS ARE BROUGHT TO THE ATTENTION OF THE FOUNDATION'S PRESIDENT AND TREASURER AND IS DISCUSSED WITH THE FOUNDATION'S GENERAL COUNSEL FOR ADVICE. ANY BOARD MEMBER HAVING A CONFLICT OF INTEREST MUST RECUSE HIM/HERSELF FROM ANY VOTING OR DECISION MAKING.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC ON THEIR WEBSITE AND UPON REQUEST.

FORM 990, PART XI, QUESTION 2C

AUDIT COMMITTEE OVERSIGHT

THE FOUNDATION HAD NO SIGNIFICANT ACTIVITY UNTIL THE CURRENT FISCAL YEAR. THE AUDIT COMMITTEE WAS FORMED AND FULLFILLED ITS DUTIES OF PROVIDING OVERSIGHT OF THE ANNUAL AUDIT.
FORM 990, BOX J HAS BEEN AMENDED TO REFLECT A CHANGE IN THE ORGANIZATION'S WEBSITE.

FORM 990, PART VI, SECTION C, QUESTION 20 HAS BEEN AMENDED TO REFLECT A CHANGE IN THE PERSON IN CHARGE OF THE ORGANIZATION'S BOOKS AND RECORDS.

FORM 990, PART VII, COLUMNS (E) & (F) HAVE BEEN AMENDED TO REFLECT COMPENSATION CHANGES FOR THE FOLLOWING OFFICERS AND DIRECTORS:

LEE BLITCH
MABEL CHAN
DEBBIE CHAW
ROBERT A. CORRIGAN
PHIL KING
LEROY MORISHITA
SUE ROSSEK

SCHEDULE J, PART II HAS BEEN AMENDED TO REFLECT COMPENSATION CHANGES FOR THE FOLLOWING OFFICERS AND DIRECTORS:

LEE BLITCH
ROBERT A. CORRIGAN
LEROY MORISHITA
**Part I: Identification of Disregarded Entities** (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of disregarded entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Total income</th>
<th>(e) End-of-year assets</th>
<th>(f) Direct controlling entity</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**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.)

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Exempt Code section</th>
<th>(e) Public charity status (if section 501(c)(3))</th>
<th>(f) Direct controlling entity</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAN FRANCISCO STATE UNIVERSITY - 93-1137247</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1600 HOLLOWAY AVENUE</td>
<td>SUPPORT</td>
<td>CALIFORNIA</td>
<td>501(C)(3)</td>
<td>LINE 2</td>
<td></td>
</tr>
<tr>
<td>SAN FRANCISCO, CA 94132</td>
<td>UNIVERSITY</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>UNIVERSITY CORPORATION, SAN FRANCISCO STATE</td>
<td>SUPPORT</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- 94-1384645, 1600 HOLLOWAY AVENUE, SAN</td>
<td>SAN FRANCISCO STATE</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FRANCISCO, CA 94132</td>
<td>UNIVERSITY</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>SUPPORT</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>UNIVERSITY</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

LHA  For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part III
**Identification of Related Organizations Taxable as a Partnership**

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocations?</th>
<th>(i) Code V:UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Yes/No</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part IV
**Identification of Related Organizations Taxable as a Corporation or Trust**

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Type of entity (C corp, S corp, or trust)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Percentage ownership</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Part V  Transactions With Related Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.)

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>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?</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity</td>
<td>1a X</td>
</tr>
<tr>
<td>b</td>
<td>Gift, grant, or capital contribution to other organization(s)</td>
<td>1b X</td>
</tr>
<tr>
<td>c</td>
<td>Gift, grant, or capital contribution from other organization(s)</td>
<td>1c X</td>
</tr>
<tr>
<td>d</td>
<td>Loans or loan guarantees to or for other organization(s)</td>
<td>1d X</td>
</tr>
<tr>
<td>e</td>
<td>Loans or loan guarantees by other organization(s)</td>
<td>1e X</td>
</tr>
<tr>
<td>f</td>
<td>Sale of assets to other organization(s)</td>
<td>1f X</td>
</tr>
<tr>
<td>g</td>
<td>Purchase of assets from other organization(s)</td>
<td>1g X</td>
</tr>
<tr>
<td>h</td>
<td>Exchange of assets</td>
<td>1h X</td>
</tr>
<tr>
<td>i</td>
<td>Lease of facilities, equipment, or other assets to other organization(s)</td>
<td>1i X</td>
</tr>
<tr>
<td>j</td>
<td>Lease of facilities, equipment, or other assets from other organization(s)</td>
<td>1j X</td>
</tr>
<tr>
<td>k</td>
<td>Performance of services or membership or fundraising solicitations for other organization(s)</td>
<td>1k X</td>
</tr>
<tr>
<td>l</td>
<td>Performance of services or membership or fundraising solicitations by other organization(s)</td>
<td>1l X</td>
</tr>
<tr>
<td>m</td>
<td>Sharing of facilities, equipment, mailing lists, or other assets</td>
<td>1m X</td>
</tr>
<tr>
<td>n</td>
<td>Sharing of paid employees</td>
<td>1n X</td>
</tr>
<tr>
<td>o</td>
<td>Reimbursement paid to other organization for expenses</td>
<td>1o X</td>
</tr>
<tr>
<td>p</td>
<td>Reimbursement paid by other organization for expenses</td>
<td>1p X</td>
</tr>
<tr>
<td>q</td>
<td>Other transfer of cash or property to other organization(s)</td>
<td>1q X</td>
</tr>
<tr>
<td>r</td>
<td>Other transfer of cash or property from other organization(s)</td>
<td>1r X</td>
</tr>
</tbody>
</table>

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.

<table>
<thead>
<tr>
<th></th>
<th>Name of other organization(s)</th>
<th>Transaction type (a-f)</th>
<th>Amount involved</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Are all partners section 501(c)(3) organizations?</th>
<th>(e) Share of end-of-year assets</th>
<th>(f) Disproportionate allocations?</th>
<th>(g) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(h) General or managing partner?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Schedule R (Form 990) 2009