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IRS FORM 8868 FILED ON 11/12/2009 TO REQUEST ADDITIONAL EXTENSION

Form **990-EZ**

Department of the Treasury
Internal Revenue Service

Short Form 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)

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990 All other organizations with gross receipts less than $1,000,000 and total assets less than $2,500,000 at the end of the year may use this form

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

OMB No 1545-1150

2008

Open to Public Inspection

A For the 2008 calendar year, or tax year beginning APR 1, 2008 and ending MAR 31, 2009

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Termination
- ☐ Amended return
- ☐ Application pending

Please use IRS label or print or type See Specific Instructions

C Name of organization
CNPA FOUNDATION

Number and street (or P O box, if mail is not delivered to street address) Room/suite
708 10TH STREET

City or town, state or country, and ZIP + 4
SACRAMENTO, CA 95814

D Employer identification number
68-0313934

E Telephone number
(916) 288-6000

F Group Exemption Number ▶

- **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).**

G Accounting method ☐ Cash ☒ Accrual Other (specify) ▶

I Website: ▶ WWW.CNPA.COM/FOUND/ABOUT.HTM

H Check ▶ ☐ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

J Organization type (check only one)— ☒ 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

K Check ▶ ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than $25,000 A return is not required, but if the organization chooses to file a return, be sure to file a complete return

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if $1,000,000 or more, file Form 990 instead of Form 990-EZ ▶ $ 59,721.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	44,400.
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	
	4	Investment income	4	15,321.
	5a	Gross amount from sale of assets other than inventory 5a		
	b	Less cost or other basis and sales expenses 5b		
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach schedule)	5c	
	6	Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here ▶ ☐		
	a	Gross revenue (not including $ _____ of contributions reported on line 1) 6a		
	b	Less direct expenses other than fundraising expenses 6b		
	c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	
	7a	Gross sales of inventory, less returns and allowances 7a		
	b	Less cost of goods sold 7b		
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
	8	Other revenue (describe ▶)	8	
	9	**Total revenue.** Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 ▶	9	59,721.
Expenses	10	Grants and similar amounts paid (attach schedule) STMT 3	10	21,950.
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	
	16	Other expenses (describe ▶ SEE STATEMENT 1)	16	50,240.
	17	**Total expenses.** Add lines 10 through 16 ▶	17	72,190.
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	<12,469.>
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	588,533.
	20	Other changes in net assets or fund balances (attach explanation)	20	
	21	Net assets or fund balances at end of year Combine lines 18 through 20 ▶	21	576,064.

SCANNED FEB 10 2010

RECEIVED FEB 01 2010 OGDEN, UT 3835 RS-OSC

Part II Balance Sheets. If Total assets on line 25, column (B) are $2,500,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II)

		(A) Beginning of year		(B) End of year
22	Cash, savings, and investments	601,873.	22	563,169.
23	Land and buildings		23	
24	Other assets (describe ▶ ACCOUNTS RECEIVABLE)	2,160.	24	15,468.
25	**Total assets**	604,033.	25	578,637.
26	**Total liabilities** (describe ▶ SEE STATEMENT 2)	15,500.	26	2,573.
27	**Net assets or fund balances** (line 27 of column (B) must agree with line 21)	588,533.	27	576,064.

84 9

Part III Statement of Program Service Accomplishments (See the instructions for Part III)

What is the organization's primary exempt purpose? SEE STATEMENT 7

Describe what was achieved in carrying out the organization's exempt purposes In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title

Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others)

28 SEE STATEMENT 5

(Grants $) If this amount includes foreign grants, check here ▶ ☐ 28a 48,550.

29 PROVIDED EQUIPMENT GRANTS TO HIGH SCHOOLS AND COLLEGES ENABLING THEM TO IMPROVE THEIR JOURNALISM EDUCATION COURSES. ALSO AWARDED A HIGH SCHOOL ADVISOR GRANT.

(Grants $ 20,250.) If this amount includes foreign grants, check here ▶ ☐ 29a 20,250.

30 SEE STATEMENT 6

(Grants $ 1,500.) If this amount includes foreign grants, check here ▶ ☐ 30a 1,500.

31 Other program services (attach schedule) SEE STATEMENT 8

(Grants $ 200.) If this amount includes foreign grants, check here ▶ ☐ 31a 200.

32 **Total program service expenses** (add lines 28a through 31a) ▶ 32 70,500.

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated (See the instructions for Part IV)

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
BECKY CLARK, C/O 708 10TH STREET, SACRAMENTO, CA 95814	CHAIR 1.00	0.	0.	0.
MARTY WEYBRET, C/O 708 10TH STREET, SACRAMENTO, CA 95814	VICE-CHAIR 1.00	0.	0.	0.
ANTHONY ALLEGRETTI, C/O 708 10TH STREET, SACRAMENTO, CA 95814	DIRECTOR 1.00	0.	0.	0.
BILL BREHM, JR., C/O 708 10TH STREET, SACRAMENTO, CA 95814	DIRECTOR 1.00	0.	0.	0.
CHERYL BROWN, C/O 708 10TH STREET, SACRAMENTO, CA 95814	DIRECTOR 1.00	0.	0.	0.
JOHN BURNS, C/O 708 10TH STREET, SACRAMENTO, CA 95814	DIRECTOR 1.00	0.	0.	0.
DEAN ECKENROTH, C/O 708 10TH STREET, SACRAMENTO, CA 95814	DIRECTOR 1.00	0.	0.	0.
GENE LIEB, C/O 708 10TH STREET, SACRAMENTO, CA 95814	DIRECTOR 1.00	0.	0.	0.
PAUL NYBERG, C/O 708 10TH STREET, SACRAMENTO, CA 95814	DIRECTOR 1.00	0.	0.	0.
MELANIE POLK, C/O 708 10TH STREET, SACRAMENTO, CA 95814	DIRECTOR 1.00	0.	0.	0.
MIKE TABORSKI, C/O 708 10TH STREET, SACRAMENTO, CA 95814	DIRECTOR 1.00	0.	0.	0.
JIM WEBB, C/O 708 10TH STREET, SACRAMENTO, CA 95814	DIRECTOR 1.00	0.	0.	0.
JOHN BATES, C/O 708 10TH STREET, SACRAMENTO, CA 95814	PRESIDENT 1.00	0.	0.	0.
JOE WIRT, C/O 708 10TH STREET, SACRAMENTO, CA 95814	SECRETARY/TREASUER 1.00	0.	0.	0.

Part V Other Information (Note the statement requirements in the instructions for Part VI.)

			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	34		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T			
a	Did the organization have unrelated business gross income of $1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?	35a		X
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	35b	N/A	
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Sch N	36		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a 0.			
b	Did the organization file **Form 1120-POL** for this year?	37b		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b N/A			
39	Section 501(c)(7) organizations Enter			
a	Initiation fees and capital contributions included on line 9 39a N/A			
b	Gross receipts, included on line 9, for public use of club facilities 39b N/A			
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under. section 4911 ▶ 0. , section 4912 ▶ 0. , section 4955 ▶ 0.			
b	Section 501(c)(3) and (4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I	40b		X
c	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0.			
d	Enter amount of tax on line 40c reimbursed by the organization ▶ 0.			
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		X
41	List the states with which a copy of this return is filed ▶ CA			
42a	The books are in care of ▶ ERIK GUNDERSEN, CONTROLLER Telephone no ▶ (916) 288-6008 Located at ▶ 708 10TH STREET, SACRAMENTO, CA ZIP + 4 ▶ 95814			
b	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)? If "Yes," enter the name of the foreign country ▶ See the instructions for exceptions and filing requirements for **Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.**	42b		X
c	At any time during the calendar year, did the organization maintain an office outside of the U S ? If "Yes," enter the name of the foreign country ▶	42c		X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041** - Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43 N/A			
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44		X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45		X

Part VI Section 501(c)(3) organizations only. All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51.

			Yes	No
46	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	46		X
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47		X
48	Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48		X
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a		X
b	If "Yes," was the related organization(s) a section 527 organization?	49b		

50 Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than $100,000 of compensation from the organization If there is none, enter "None "

(a) Name and address of each employee paid more than $100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
NONE				
Total number of other employees paid over $100,000 ▶				

51 Complete this table for the five highest compensated independent contractors who each received more than $100,000 of compensation from the organization If there is none, enter "None "

NONE

(a) Name and address of each independent contractor paid more than $100,000	(b) Type of service	(c) Compensation
Total number of other independent contractors each receiving over $100,000 ▶		

Sign Here

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

▶ Signature of officer — Date

▶ Type or print name and title — 1-27-10

Paid Preparer's Use Only

Preparer's signature ▶	Date	Check if self-employed ▶ X	Preparer's Identifying Number (See instr)
	01/25/10		

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ PIERINI ACCOUNTANCY
9845 HORN ROAD, SUITE 280
SACRAMENTO, CA 95827

EIN ▶

Phone no (916)363-1010

May the IRS discuss this return with the preparer shown above? See instructions ▶ X Yes ☐ No

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions.**

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization	Employer identification number
CNPA FOUNDATION	68-0313934

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: (Please check only **one** organization.)

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).** (Attach Schedule H.)

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete the Part III.)

10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).** (see instructions)

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.

a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐

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

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

h Provide the following information about the organizations the organization supports.

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

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	313,117.	155,395.	189,452.	143,051.		801,015.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 - 3	313,117.	155,395.	189,452.	143,051.		801,015.
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)						392,446.
6 **Public Support.** Subtract line 5 from line 4						408,569.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	313,117.	155,395.	189,452.	143,051.		801,015.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	15,705.	19,693.	22,644.	23,573.		81,615.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 **Total support.** Add lines 7 through 10						882,630.

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

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	46.29 %
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	41.64 %

16a **33 1/3% support test - 2008.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3% support test - 2007.** 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 - 2008.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

b **10% -facts-and-circumstances test - 2007.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

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

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 - 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or $5,000						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 **Total support** (Add lines 9, 10c, 11, and 12)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2008** (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from **2007** Schedule A, Part IV-A, line 27h	18	%

19a **33 1/3% support tests - 2008.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests - 2007.** 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 A — Identification of Excess Contributions Included on Part II, Line 5 — 2008

** Do Not File **
*** Not Open to Public Inspection ***

Contributor's Name	Total Contributions	Excess Contributions
THE PADRE FOUNDATION	150,000.	132,347.
FORD MOTOR COMPANY	112,600.	94,947.
WELLS FARGO FOUNDATION	64,350.	46,697.
VERIZON	40,000.	22,347.
STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY	30,000.	12,347.
FIRST AMERICAN FINANCIAL FOUNDATION	35,000.	17,347.
NEWS FOR STUDENT FOUNDATION	26,900.	9,247.
ANAHEIM SPORTS MANAGEMENT, LLC	32,626.	14,973.
FORD FOUNDATION	22,500.	4,847.
PHILANTROPHIC VENTURES FOUNDATION	55,000.	37,347.

Total Excess Contributions to Schedule A, Part II, Line 5 — 392,446.

FORM 990-EZ OTHER EXPENSES STATEMENT 1

DESCRIPTION	AMOUNT
NEWSPAPER EDUCATION PROGRAMS	48,550.
MISCELLANEOUS ADMINISTRATIVE EXPENSES	1,690.
TOTAL TO FORM 990-EZ, LINE 16	50,240.

FORM 990-EZ OTHER LIABILITIES STATEMENT 2

DESCRIPTION	BEG. OF YEAR	END OF YEAR
GRANTS PAYABLE	15,500.	2,000.
ACCOUNTS PAYABLE	0.	573.
TOTAL TO FORM 990-EZ, LINE 26	15,500.	2,573.

FORM 990-EZ CASH GRANTS AND ALLOCATIONS STATEMENT 3

CLASS OF ACTIVITY/DONEE'S NAME AND ADDRESS	DONEE'S RELATIONSHIP	AMOUNT
STUDENT INTERNSHIP SAMANTHA BRAVO 8611 ARDENDALO AVENUE SAN GABRIEL, CA 91775	NONE	1,500.
HIGH SCHOOL ADVISOR GRANT SUZANNE NEWMAN 1766 TARA WAY SAN MARCOS, CA 92078	NONE	200.
EQUIPMENT GRANTS AMERICAN RIVER COLLEGE 4700 COLLEGE OAK DRIVE SACRAMENTO, CA 95841	NONE	750.
EQUIPMENT GRANTS AMOS ALONZO STAGG HIGH SCHOOL 1621 BROOKSIDE ROAD STOCKTON, CA 95207	NONE	1,250.
EQUIPMENT GRANTS ARROYO GRANDE HIGH SCHOOL 495 VALLEY ROAD ARROYO GRANDE, CA 93420	NONE	600.
EQUIPMENT GRANTS BAKERSFIELD COLLEGE 1801 PANORAMA DRIVE BAKERSFIELD, CA 93305	NONE	750.
EQUIPMENT GRANTS BRET HARTE UNION HIGH SCHOOL P.O. BOX 208 ATTAVILLE, CA 95221	NONE	1,500.
EQUIPMENT GRANTS BULLARD HIGH SCHOOL 5445 N. PALM FRESNO, CA 93704	NONE	600.
EQUIPMENT GRANTS COLFAX HIGH SCHOOL 24995 BEN TAYLOR ROAD COLFAX, CA 95713	NONE	750.

EQUIPMENT GRANTS COLLEGE OF SAN MATEO 1700 W. HILLSDALE BOULEVARD SAN MATEO, CA 94402	NONE	1,500.
EQUIPMENT GRANTS CONSUMNES RIVER COLLEGE 8401 CENTER PARKWAY SACRAMENTO, CA 95823	NONE	750.
EQUIPMENT GRANTS CALIFORNIA STATE UNIVERSITY LONG BEACH 1250 BELLFLOWER BOULEVARD, SSPA 003 LONG BEACH, CA 90840	NONE	750.
EQUIPMENT GRANTS CYPRESS COLLEGE 9200 VALLEY VIEW STREET CYPRESS, CA 90630	NONE	1,000.
EQUIPMENT GRANTS ETIWANDA HIGH SCHOOL 13500 VICTORIA AVENUE ETIWANDA, CA 91739	NONE	750.
EQUIPMENT GRANTS FALL RIVER JUNIOR/SENIOR HIGH SCHOOL P.O. BOX 340 MCARTHUR, CA 96056	NONE	800.
EQUIPMENT GRANTS FRESNO CITY COLLEGE 1101 E. UNIVERSITY AVENUE FRESNO, CA 93741	NONE	750.
EQUIPMENT GRANTS JEFFERSON HIGH SCHOOL 6996 MISSION STREET DALY CITY, CA 94014	NONE	750.
EQUIPMENT GRANTS LOS ANGELES HARBOR COLLEGE 1111 FIGUEROA PLACE WILMINGTON, CA 90744	NONE	1,250.
EQUIPMENT GRANTS LOYOLA MARYMOUNT UNIVERSITY 1 LMU DRIVE #8470 LOS ANGELES, CA 90045	NONE	400.

EQUIPMENT GRANTS NOTRE DAME DE NAMUR UNIVERSITY 1500 RALSTON #614 BELMONT, CA 94002	NONE	600.
EQUIPMENT GRANTS ROCKLIN HIGH SCHOOL 5301 VICTORY LANE ROCKLIN, CA 95765	NONE	500.
EQUIPMENT GRANTS SAN DIEGO MESA COLLEGE 7250 MESA COLLEGE DRIVE SAN DIEGO, CA 92111	NONE	750.
EQUIPMENT GRANTS SAN JOSE CITY COLLEGE 2100 MOORPARK AVENUE SAN JOSE, CA 95128	NONE	500.
EQUIPMENT GRANTS SANTA ROSA JUNIOR COLLEGE 1501 MENDOCINO AVENUE SANTA ROSA, CA 95401	NONE	750.
EQUIPMENT GRANTS THEODORE ROOSEVELT HIGH SCHOOL 456 S. MATTHEWS STREET LOS ANGELES, CA 90033	NONE	750.
EQUIPMENT GRANTS U.C. BERKELEY 600 ESHLEMAN HALL BERKELEY, CA 94701	NONE	750.
EQUIPMENT GRANTS DAILY CALIFORNIAN P.O. BOX 1949 BERKELEY, CA 94701	NONE	750.
TOTAL INCLUDED ON FORM 990-EZ, LINE 10		21,950.

FORM 990-EZ INFORMATION REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS STATEMENT 4

A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT? . . . . . [ ] YES [X] NO

B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT? . . [ ] YES [X] NO

CONDUCTED NEWSPAPER EDUCATION PROGRAMS - PARTICIPATED IN CALIFORNIA NEWSPAPER IN EDUCATION PROGRAM PROJECTS ASSISTING HIGH SCHOOL STUDENTS AT ALL GRADE LEVELS USE THE NEWSPAPER AS A VITAL PART OF THEIR DAILY STUDIES. ALSO CONTINUED WITH A CALIFORNIA SCHOLASTIC JOURNALISM INITIATIVE OF PROVIDING PROGRAM TRAINING AND SUPPORT.

AWARDED EDUCATIONAL INTERNSHIP GRANTS FOR COLLEGE JOURNALISM STUDENTS, PROVIDING THEM WITH A JOURNALISM INTERNSHIP POSITION TO ASSIST THEM IN THEIR COLLEGE EDUCATION.

THE CNPA FOUNDATION RAISES FUNDS THROUGH TAX DEDUCTIBLE CONTRIBUTIONS FOR EDUCATIONAL PURPOSES RELATED TO THE PUBLISHING AND INFORMATION DISSEMINATION BUSINESS. IT'S MISSION, REVISED IN FEBRUARY 2007, IS TO SERVE CALIFORNIA'S NEWSPAPER READERS BY SUPPORTING AND FINANCIALLY ASSISTING CALIFORNIA HIGH SCHOOLS AND COLLEGES TO TEACH QUALITY JOURNALISM THAT IS ALSO RESPONSIVE TO CHANGING TECHNOLOGY AND CONSUMER PREFERENCES.

THE CNPA FOUNDATION PROVIDES FINANCIAL ASSISTANCE TO COLLEGE STUDENTS SEEKING CAREERS IN JOURNALISM, ADVERTISING OR MARKETING, AND TO CAMPUS NEWSPAPERS THAT DESPERATELY NEED NEW PRODUCTION EQUIPMENT. THE CNPA FOUNDATION ALSO SUPPORTS EDUCATIONAL SERVICES INCLUDING NEWSPAPER IN EDUCATION PROGRAMS AND TRAINING PROGRAMS RELATED TO THE CALIFORNIA NEWSPAPER BUSINESS.

FORM 990-EZ OTHER PROGRAM SERVICES STATEMENT 8

DESCRIPTION	GRANTS	EXPENSES
AWARDED A HIGH SCHOOL ADVISOR GRANT.	200.	200.
TOTAL TO FORM 990-EZ, LINE 31	200.	200.