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Form 990

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► The organization may have to use a copy of this return to satisfy state reporting requirements 2012 For the 2011 calendar year, or tax year beginning , 2011, and ending D Employer Identification Number Check if applicable Address change THE OXNARD COLLEGE FOUNDATION 77-0003378 4000 SOUTH ROSE AVE. Telephone number Name change OXNARD, CA 93033 805-986-5833 Initial return Terminated G Gross receipts \$ 1,060,055. Amended return H(a) Is this a group return for affiliates? Application pending F Name and address of principal officer Yes X No H(b) Are all affiliates included? If 'No,' attach a list (see instructions) X 501(c)(3) 4947(a)(1) or Tax-exempt status 501(c) () ◀ (insert no.) WWW.OXNARDCOLLEGE.EDU Website: ► H(c) Group exemption number Form of organization | X | Corporation | Trust | Association L Year of Formation 1983 M State of legal domicile CA Part I Summary Briefly describe the organization's mission or most significant activities: <u>PROMOTION_AND_SUPPORT_OF_THE_GENERAL</u> WELFARE OF OXNARD COLLEGE IN ATTAINING EDUCATIONAL, SCIENTIFIC, AND CULTURAL GOALS Expense NOW 10 2012 activities a Governance OF THE SCHOOL. Check this box ► I if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 4 15 Total number of individuals employed in calendar year 2011 (Part V, line 2a). 5 0 **6** Total number of volunteers (estimate if necessary) 6 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 7 a **b** Net unrelated business taxable income from Form 990, T, line 7b 0. **Prior Year Current Year** 340,198Contributions and grants (Part VIII, line 1h) 185,169. OS O Program service revenue (Part VIII, line 2g) 2,365 1,930. Investment income (Part VIII. column (A). lines 3, 4. and 7d) NOV 0 5 2012 39,542. 56,913. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 550,102. 563,804. Total revenue - add lines 8 through 11 (must equal Part Vith column 932,207 807,816. 242,270 Grants and similar amounts paid (Part IX, column (A), lines 44,021. Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 36,509. 28,992. 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 289,020. 413,083. 567,799. Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 486,096. 364,408 Revenue less expenses Subtract line 18 from line 12 321,720. Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 3,555,767. 3,704,186. 181,235. 21 Total liabilities (Part X, line 26) 354,536. Fet 3,201,231. 22 Net assets or fund balances Subtract line 21 from line 20 3,522,951. Signature Block . 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 reparer (other than officer) is based on all information of which preparer has any knowledge Signature of officer Dàte Sign Here FLORENCE LAMANNO **SECRETARY** Type or print name and title Print/Type preparer's name 10-16-12 P00710385 SHARON ILER ROBERTS self-employed Paid SOARES, SANDALL, BERNACCHI AND PETROVICH, LLP Preparer **Use Only** Firm's address ► 405 E ESPLANADE DR STE 300 Firm's EIN ► 95-1888001 OXNARD, CA 93036-2116 (805) 485-7965 Phone no

X Yes

No

Form 990 (2011)

TEEA0113L 08/18/11

May the IRS discuss this return with the preparer shown above? (see instructions)

Form 990 (2011) THE OXNARD COLI	EGE FOUNDATION	77-000	03378		Page 2
	ervice Accomplishments				
Check if Schedule O contains	a response to any question in this Part III				
	ssion: F THE GENERAL WELFARE OF OXNARD COLLEGE , AND CULTURAL GOALS OF THE SCHOOL.	IN ATTAI	NING _		
2 Did the organization undertake any si Form 990 or 990-EZ?	gnificant program services during the year which were not listed	on the prior		es X	No
If 'Yes,' describe these new services	on Schedule O.		⊔ '	c3 <u>M</u>	110
•	g, or make significant changes in how it conducts, any program	services?	_ Y	es X	No
If 'Yes,' describe these changes on S 4 Describe the organization's program s	corrupt accomplishments for each of its three largest program of	anucae ae me	ascurad	by exper	neae
Section 501(c)(3) and 501(c)(4) organ others, the total expenses, and reven	nizations and section 4947(a)(1) trusts are required to report the ue, if any, for each program service reported	amount of gr	ants an	d allocati	ons to
	428,195. including grants of \$))
PROVIDE SUPPORT FOR SCH	OLARSHIPS AND SUPPORT FOR OXNARD COMMUNI	TY_COLLE	GE		
				- -	
		· 			- -
4b (Code: Expenses \$	including grants of \$)	(Revenue \$	 S		
		. – – – – –			
	·				
	· 	· -			
4c (Code:) (Expenses \$	including grants of \$)	(Revenue \$	\$)
	·	. – – – – –			
	·	. -			
		- 			
-					
	·	· – – – – –			
				- -	
	·			 	
4d Other program services (Describe in					
(Expenses \$ 4e Total program service expenses ▶	including grants of \$) (Revenue 428, 195.	\$)	
BAA	TEEA0102L 07/05/11			Form 99 0	(2011)

Part IV Checklist of Required Schedules

Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes.' complete 1 Х Schedule A X 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I. 3 X Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II4 Х Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III 5 Х Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Х Part I 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? *If 'Yes,' complete Schedule D, Part II* . . . 7 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III . 8 X 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 'Yes,' complete X Schedule D, Part IV 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V Х 10 If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule Х D, Part VI 11 a b Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 167 If 'Yes,' complete Schedule D, Part VII X 11b c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII Х 11 c **d** Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If 'Yes,' complete Schedule D, Part IX* Х 11 d X e Did the organization report an amount for other liabilities in Part X, line 25° If 'Yes,' complete Schedule D, Part X 11 e f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses Х the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X 11 f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII Х 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional. 12b Х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 13 Х X 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV 14b X 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 'Yes,' complete Schedule F, Parts II and IV 15 Х Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV Х 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions) 17 X Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII. lines 1c and 8a? If 'Yes,' complete Schedule G, Part II 18 Х Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes.' complete Schedule G, Part III 19 Х X 20 aDid the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H 20 b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? 20 b

Form 990 (2011) THE OXNARD COLLEGE FOUNDATION

Park IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? 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 2? If 'Yes,' complete Schedule I, Parts I and III .	22	Х	
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		X
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and 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		
25 a	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		Х
t	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		ş\$\$	
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		<u> </u>
	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		<u>x</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If 'Yes,' complete Schedule R, Part I</i>	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 I	34	Х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
t	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b	_	Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
BAA		Form	990 ((2011)

	n 990 (2011) THE OXNARD COLLEGE FOUNDATION 77-00033	78	F	age !
Pai	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
	· · · · · · · · · · · · · · · · · · ·	2		
ı	b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b (긱		
•	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Х	
2;	a 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.			
	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b		
•	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			-
3	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O .	3 b		
	a 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)? b If 'Yes,' enter the name of the foreign country:	4a		X
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts	1		
5 8	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5с		
6	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		x
	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were			
7	not tax deductible? Organizations that may receive deductible contributions under section 170(c).	6b		
,	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?	7a		Х
	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b	<u></u>	
•	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	_		.,
		7c	-	X
	d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d			v
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		^
,	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
ı	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the			
-	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
i	a Did the organization make any taxable distributions under section 4966?	9a		
ı	b Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter	ŀ		
i	a Initiation fees and capital contributions included on Part VIII, line 12			
ı	b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	4		
11	Section 501(c)(12) organizations. Enter			
	a Gross income from members or shareholders 11 a	4		
,	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).			
12	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b	_		1
	Section 501(c)(29) qualified nonprofit health insurance issuers.		<u> </u>	
	a Is the organization licensed to issue qualified health plans in more than one state?	13a		ļ
	Note. See the instructions for additional information the organization must report on Schedule O	1		
ı	b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
•	c Enter the amount of reserves on hand			
148	a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X

b If 'Yes,' has it filed a Form 720 to report these payments? *If 'No,' provide an explanation in Schedule O*

14b

Form 990 (2011) THE OXNARD COLLEGE FOUNDATION 77-0003378 Page 6 Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. X Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 15 1a Enter the number of voting members of the governing body at the end of the tax year 1 a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O 15 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 X officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors or trustees, or key employees to a management company or other person?. Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X 4 5 Х Did the organization become aware during the year of a significant diversion of the organization's assets? X Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a X **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? 7b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8a X b Each committee with authority to act on behalf of the governing body? 8ь Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O 9 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Did the organization have local chapters, branches, or affiliates? 10a X b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Х 11 a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 SEE SCHEDULE O X 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12a b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Х 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done SEE SCHEDULE O 12c Х 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? Х 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official SEE SCHEDULE Q X 15 a **b** Other officers of key employees of the organization Х 15b If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ► NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Another's website Upon request Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. SEE SCHEDULE O

► JEAN MARLETTI 4000 SOUTH ROSE AVE. OXNARD CA 93033 805-986-5889

State the name, physical address, and telephone number of the person who possesses the books and records of the organization

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

Check if Schedule O contains a response to any question in this Part VII

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

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

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

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee												
				((C)							
(A) Name and title	(B) Average hours per week	unles	ss per	rson is	s boti	nan one h an offi rustee)	box, cer	(D) Reportable compensation from	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation		
	(describe hours for related organiza- tions in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations		
(1) JOSEPH MILLIGAN		,,						0	0			
PRESIDENT (2) ROBERT ENGLAND	3	X	├		-	 -		0.	0.	0.		
PRESIDENT EL	- - 3	X						0.	0.	0.		
(3) EDMUND SOTELO			\vdash					0.	0.	<u> </u>		
PAST PRESIDENT	3	X						o.	0.	0.		
(4) RICHARD REGNIER												
COUNSEL	3	Х			<u> </u>			0.	0.	0.		
(5) PATRICIA MAKI												
VP FINANCE	3	X					ļ.,.	0.	0.	0.		
_(6)_FLORENCE_LAMANNO	- 🚽				Ì							
SECRETARY	3	X		<u> </u>	_	ļ	ļ	0.	0.	0.		
_(7)_IRMA_LOPEZ												
DIRECTOR	3	X					_	0.	0.	0.		
_(8)_ROBERT_CABRAL DIRECTOR	٠- م	v	1				ļ		0	0		
(9) TONY GREY	3	Х		-	_			0.	0.	0.		
DIRECTOR	3	X						0.	0.	0.		
(10) KRISTIE ELZINGA	+ -						<u> </u>	· · · · · · · · · · · · · · · · · · ·		<u> </u>		
DIRECTOR	3	X						0.	0.	0.		
(11) ANTHONY VOLANTE										<u>.</u>		
DIRECTOR	3	Х						0.	0.	0.		
(12) NINA DUARTE												
DIRECTOR	3	Х	_					0.	0.	0.		
(13) LARRY KENNEDY	- 🗐		1									
VP OF DEVELOPME	3	Х	_	_		<u> </u>	L	0.	0.	0.		
(14) GEORGE LAUTERBACH								_	_	_		
<u>DIRECTOR</u>	3	X	<u> </u>		<u> </u>			0.	0.	<u> </u>		

Part VII Section A. Officers, Directors, Trust	ees, k	(ey	Em	ıplo	ye	es,	and	l Highest Com	pensated Emp	loyees (cont)
(A) Name and title	(B) Average hours	offic	er an	Pos heck ss pe	rson	than is both or/trus	n an tee)	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other compensation
	per week (describ e hours for related organi- zations in Sch O)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(15) DR. RICHARD DURAN DIRECTOR	3	х						0.	0.	0.
(16)										
(17)										
(8)										
<u>(19)</u>										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1 b Sub-total c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)							 	0. 0. 0.	0. 0. 0.	0.
2 Total number of individuals (including but not limite from the organization ► 0	d to the	ose I	ıste	d ab	oove) wh	o re	ceived more than	\$100,000 of report	
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such it			key	em	ploy	ee,	or h	ighest compensat	ed employee	Yes No
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater t such individual	portab han \$1	e co 50,0	mpe 00?	ensa If 'Y	atior Yes'	and corr	d oth	er compensation e Schedule J for	from	4 X
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,' or services rendered to the organization of the services rendered to the	ompen comple	satio	on fr chec	om dule	any <i>J f</i> c	unre or su	elate ch p	ed organization or erson	ındıvıdual	5 X
1 Complete this table for your five highest compensation from the organization. Report compe	ed ind	epen	den	t co	ntra	ctors	s tha	it received more t	han \$100,000 of	's tay year
(A) Name and business addres		1 101	uie	Calc	ziluz	ır ye	ai E	(B Description)	(C) Compensation
2 Total number of independent contractors (including \$100,000 in compensation from the organization ►		t lım	ited	to t	hos	e list	ted a	above) who receiv	red more than	

Part VIII Statement of Revenue (A) Total revenue (C) Unrelated (D) (B) Related or Revenue exempt business excluded from tax under sections 512, 513, or 514 revenue function revenue 1a Federated campaigns 1 a GIFTS, GRANTS LAR AMOUNTS **b** Membership dues 1 b c Fundraising events 1 c 1 d d Related organizations e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1 f 185,169. q Noncash contributions included in Ins 1a-1f. 185,169. h Total. Add lines 1a-1f PROGRAM SERVICE REVENUE Business Code 900099 1,930 1,930 2a ADOPT-A-COMPUTER f All other program service revenue 1,930. g Total. Add lines 2a-2f Investment income (including dividends, interest and 56,913. 56,913 other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 811,783 6a Gross rents 237,146. b Less: rental expenses. 574,637 c Rental income or (loss) 574,637. 574,637. d Net rental income or (loss) (i) Securities (II) Other 7a Gross amount from sales of assets other than inventory **b** Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events OTHER REVENUE (not including \$ of contributions reported on line 1c) See Part IV, line 18 4,190 15,093 b Less: direct expenses -10,903. c Net income or (loss) from fundraising events -10,903 9a Gross income from gaming activities See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11a MISCELLANEOUS INCOME 900099 70. 70. d All other revenue 70. e Total. Add lines 11a-11d 807,816. 2,000. 0. 620,647. Total revenue. See instructions

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)

	Check if Schedule O contains a response to any question in this Part IX								
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21		·	•					
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.	44,021.	44,021.						
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16								
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.				
7	Other salaries and wages	28,992.		28,992.					
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)								
9	Other employee benefits								
10	Payroll taxes				· · · · · · · · · · · · · · · · · · ·				
11	Fees for services (non-employees)								
á	Management								
t	Legal				· -				
•	Accounting	21,563.		21,563.					
	i Lobbying								
•	Professional fundraising services. See Part IV, line 17								
f	Investment management fees								
ç) Other								
12	Advertising and promotion								
13	Office expenses	2,208.		2,208.					
14	Information technology		,						
15	Royalties								
16	Occupancy								
17	Travel	2,269.		2,269.					
18	Payments of travel or entertainment expenses for any federal, state, or local public officials								
19	Conferences, conventions, and meetings								
20	Interest								
21	Payments to affiliates								
22	Depreciation, depletion, and amortization			···					
	Insurance	2,530.		2,530.					
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)	:		·					
á	OXNARD COLLEGE PROGRAMS	248,138.	248,138.						
	COLLEGE CONTRACT	89,567.	89,567.						
	OTHER PROGRAM EXPENSES	26,796.	26,796.						
	PRESIDENT'S FUND	19,673.	19,673.						
	All other expenses	339.		339.					
	Total functional expenses Add lines 1 through 24e	486,096.	428,195.	57,901.	0.				
	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here								
	SOP 98-2 (ASC 958-720)								
	JOI 30-2 (MJC 330-720)								

Pa	ırt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing	718,367.	1	448,209.
	2	Savings and temporary cash investments .	2,498,287.	2	1,707,679.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	650.	4	500.
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
Ą	7	Notes and loans receivable, net		7	
A S E T S	8	Inventories for sale or use.		8	
	9	Prepaid expenses and deferred charges.		9	
,	-			-	
	10 a 	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D.			
	b	Less: accumulated depreciation 10b		10 c	
	11	Investments — publicly traded securities		11	1,193,457.
	12			12	
	13	Investments – program-related See Part IV, line 11		13	
	14	Intangible assets.		14	
	15	Other assets. See Part IV, line 11	338,463.	15	354,341.
	16	Total assets. Add lines 1 through 15 (must equal line 34).	3,555,767.	16	3,704,186.
	17	Accounts payable and accrued expenses	10,362.	17	8,697.
	18	Grants payable .		18	
	19	Deferred revenue	61,139.	19	64,930.
L	20	Tax-exempt bond liabilities		20	
A B I	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
I L I	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	··	22	
Ī	23	Secured mortgages and notes payable to unrelated third parties		23	
E S	24	Unsecured notes and loans payable to unrelated third parties.		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	283,035.	25	107,608.
	26	Total liabilities. Add lines 17 through 25	354,536.	26	181,235.
N		Organizations that follow SFAS 117, check here X and complete lines			101/200.
N E T		27 through 29 and lines 33 and 34.			
Ą	27	Unrestricted net assets.	1,879,330.	27	2,104,998.
ASSETS	28	Temporarily restricted net assets	1,213,090.	28	1,303,996.
Š	29	Permanently restricted net assets.	108,811.	29	113,957.
Q R		Organizations that do not follow SFAS 117, check here ► and complete			
FUZD		lines 30 through 34.			
Ŋ	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
î A	32	Retained earnings, endowment, accumulated income, or other funds		32	
BALAZCES	33	Total net assets or fund balances	3,201,231.	33	3,522,951.
Š	34	Total liabilities and net assets/fund balances	3,555,767.	34	3,704,186.

BAA

Form **990** (2011)

Form 990 (2011) THE OXNARD COLLEGE FOUNDATION	<u>0003378 </u>		Pa	ge 12			
Part XI Reconciliation of Net Assets							
Check if Schedule O contains a response to any question in this Part XI							
	i 1						
1 Total revenue (must equal Part VIII, column (A), line 12)	1	_	07,8				
2 Total expenses (must equal Part IX, column (A), line 25).	2		86,0 21,7				
3 Revenue less expenses. Subtract line 2 from line 1							
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,2	01,2	31.			
5 Other changes in net assets or fund balances (explain in Schedule O)	5			0.			
6 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	3,5	22,9	51.			
Part XII Financial Statements and Reporting							
Check if Schedule O contains a response to any question in this Part XIL	•						
	r		Yes	No			
1 Accounting method used to prepare the Form 990: Cash X Accrual Other		- [
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.							
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X			
b Were the organization's financial statements audited by an independent accountant?		2b	Х				
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of t review, or compilation of its financial statements and selection of an independent accountant?	he audit,	2c		х			
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O							
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue separate basis, consolidated basis, or both:	ed on a						
X Separate basis Consolidated basis Both consolidated and separate basis	-						
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Audit Act and OMB Circular A-133?	Single	3a		X			
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the req or audits, explain why in Schedule O and describe any steps taken to undergo such audits	uired audit	3b					
BAA		Form	990 (2011)			

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service **Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Employer identification number Name of the organization 77-0003378 THE OXNARD COLLEGE FOUNDATION 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) 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. 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) 5 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(bX1)(Complete Part II.) 7 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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 9 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 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 II Type III - Functionally integrated Type III - Other 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 If the organization received a written determination from the IRS that 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? Yes No A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) (i) below, the governing body of the supported organization? 11 g (i) A family member of a person described in (i) above? 11 g (ii) A 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) h Provide the following information about the supported organization(s) (iii) Type of organization (described on lines 1-9 above or IRC section (v) Did you notify the organization in column (i) of (i) Name of supported organization (ii) EIN (iv) Is the (vi) Is the organization in (vii) Amount of support organization in column (i) listed in column (i) organized in the US? your governing document? (see instructions)) your support? Yes No Yes No Yes No (D) (E)

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

Schedule A (Form 990 or 990-EZ) 2011

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

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

Sec	tion A. Public Support						
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	195,850.	304,790.	215,735.	221,957.	151,645.	1,089,977.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	195,850.	304,790.	215,735.	221,957.	151,645.	1,089,977.
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)						0.
	Public support. Subtract line 5 from line 4						1,089,977.
<u>Sec</u>	tion B. Total Support						
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	195,850.	304,790.	215,735.	221,957.	151,645.	1,089,977.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	77,551.	45,869.	35,569.	39,542.	56,913.	255,444.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) SEE PART IV	4,940.	3,505.	5,912.	2,375.	2,000.	18,732.
11	Total support. Add lines 7 through 10						1,364,153.
12	Gross receipts from related active	rities, etc (see inst	tructions)			12	2,699,513.
	First five years. If the Form 990 organization, check this box and	stop here		nd, third, fourth, o	r fifth tax year as	a section 501(c)(3) ▶ □
Sec	tion C. Computation of Pu						
14	· · · · · · · · · · · · · · · · · · ·			e 11, column (f))		14	79.90%
15	Public support percentage from					15	80.38 %
16 a	33-1/3% support test — 2011. If and stop here. The organization	the organization d qualifies as a pub	id not check the b licly supported or	oox on line 13, ar ganization	id the line 14 is 3	3-1/3% or more, o	theck this box
t	33-1/3% support test – 2010. If and stop here. The organization	the organization d qualifies as a pub	id not check a bo licly supported or	x on line 13 or 16 ganization	a, and line 15 is	33-1/3% or more,	check this box
17 a	n 10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	meets the 'facts-a	ind-circumstances	s' test, check this	box and stop her	re. Explain in Part	IV how
	o 10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-an	meets the 'facts-a d-circumstances' t	ind-circumstances lest. The organiza	s' test, check this ition qualifies as a	box and stop her a publicly support	r e. Explain in Part ed organization	IV how the ►
18 BAA	Private foundation. If the organi	zation did not che	ck a box on line 1	13, 16a, 16b, 17a			structions > 0 90 or 990-EZ) 2011

Schedule A (Form 990 or 990-EZ) 2011 THE OXNARD COLLEGE FOUNDATION

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

_		-					
(Co	mplete only if you chec	ked the box on li	ne 9 of Part I or if the	e organization f	failed to qualify unde	r Part II If th	e organization fails
to a	malify under the tests li	sted below inlead	e complete Part II)	_			

Sec	tion A. Public Support		<u></u>	• •			
	dar year (or fiscal yr beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants.')	1 -1/2					
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						
	Total. Add lines 1 through 5 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 \$5,000 or 1% of the amount on line 13 for the year						
c	: Add lines 7a and 7b .						
	Public support (Subtract line 7c from line 6.)	, , , , , , ,	, « .				
	tion B. Total Support			T	,		
Calen	dar year (or fiscal yr beginning in)►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b 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 Ins 9, 10c, 11, and 12)						
14	First five years. If the Form 990 organization, check this box and			nd, third, fourth,	or fifth tax year as	a section 501(c)(3	3) ▶ □
Sec	tion C. Computation of Pu	blic Support P	ercentage				<u> </u>
15	Public support percentage for 20	11 (line 8, colum	n (f) divided by li	ne 13, column (f)		15	%
	Public support percentage from		•		·	16	%
Sec	tion D. Computation of Inv	estment Incor	ne Percentag	е	-		
17	Investment income percentage f	or 2011 (line 10c,	column (f) divide	ed by line 13, col	umn (f))	17	%
18	Investment income percentage f	rom 2010 Schedu	le A, Part III, line	e 17		18	%
	33-1/3% support tests — 2011. If is not more than 33-1/3%, check	this box and sto	p here. The orga	nization qualifies	as a publicly supp	orted organization	. ▶ [_]
b	33-1/3% support tests — 2010. If line 18 is not more than 33-1/3%	, check this box a	and stop here. Th	ne organization q	ualifies as a public	ly supported orgar	3-1/3%, and ►
20	Private foundation. If the organi	zation did not che	eck a box on line	14, 19a, or 19b,	check this box and	see instructions	▶ []

schedule A	(Form 990 or s	990-EZ) 2011	IRE OXNA	KD COLLEGE	FOUNDATION		77-0003378	Page 4
Part IV	Supplement Part II, line (See instruc	tal Informa 17a or 17b; tions).	tion. Comple ; and Part III	te this part to , line 12. Also	provide the exponential provid	xplanations requ part for any add	ired by Part II, ditional informa	line 10; tion.
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

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

OMB No 1545-0047

2011

Open to Public Inspection

Employer identification number

THE OXNARD COLLEGE FOUNDATION 77-0003378 Part lo Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? No Yes Part II Conservation Easements. Complete if the organization answered 'Yes' to Form 990, 1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2<u>a</u> b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2 c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? No 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 ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? No In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art. historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items. a Revenues included in Form 990. Part VIII. line 1 >\$ b Assets included in Form 990, Part X

Part III Organizations Mainta	ining Collect	<u>ions of Ar</u>	<u>t, Historic</u>	al Treasures, c	or Othe	<u>er Similar Ass</u>	ets (c	ontınu	ed)
3 Using the organization's acquisitiems (check all that apply).	ion, accession, a	nd other red	cords, check	any of the following	ng that a	are a significant u	se of its	s collect	tion
a Public exhibition		d [Loan or e	xchange programs	5				
b Scholarly research		e [Other _						
c Preservation for future gener	ations								
4 Provide a description of the orga Part XIV	nization's collec	tions and ex	plain how the	ey further the orga	anızatıor	n's exempt purpos	e in		
5 During the year, did the organiza assets to be sold to raise funds r							Yes		No
Part IV Escrow and Custodia line 9, or reported an	I Arrangemei amount on Fo	nts. Comp orm 990, F	lete if the Part X, line	organization a e 21.	nswere	ed 'Yes' to For	m 990), Part	. IV,
1 a Is the organization an agent, trus included on Form 990, Part X?	stee, custodian,	or other inte	rmediary for	contributions or o	ther ass	sets not . [Yes		No
b If 'Yes,' explain the arrangement	in Part XIV and	complete th	ne following t	able					
							Amoun	<u>t</u>	
c Beginning balance					<u> </u>	1c			
d Additions during the year	•	•			⊢	1 d			
e Distributions during the year .					_	1 e			
f Ending balance .					L.	1f			
2a Did the organization include an a		990, Part X,	line 21?	•		L	Yes	L	_ No
b If 'Yes,' explain the arrangement						0.0.1071	10		
Part V Endowment Funds. Co							7		
1 a Danmana of ware belows	(a) Current yea) Prior year	(c) Two years ba		(d) Three years back	(e)	Four years	s back
1 a Beginning of year balance	108,8		108,227			91,712.			
b Contributions	5,0	00.		5,00	00.	10,936.			
c Net investment earnings, gains, and losses	1	46.	584	. 4:	27.	162.			
d Grants or scholarships									
 Other expenditures for facilities and programs 						0.			
f Administrative expenses							ļ		
g End of year balance	113,9		108,811			102,810.	<u> </u>		
Provide the estimated percentage	e of the current	year end bal	ance (line 1	g, column (a)) held	d as				
a Board designated or quasi-endown	vment ►	. <u></u> 8							
b Permanent endowment ►	%								
c Temporarily restricted endowmer		%							
The percentages in lines 2a, 2b,	and 2c should e	qual 100%							
3a Are there endowment funds not a	in the possession	n of the orga	nization that	are held and adn	nınıstere	ed for the	-		
organization by							\longrightarrow	Yes	No
(i) unrelated organizations							3a(i)	Х	
(ii) related organizations.					•		3a(ii)	Х	
b If 'Yes' to 3a(ıı), are the related of	•	•					3b		X
4 Describe in Part XIV the intended					RT XI	<u>v</u>			
Part VI Land, Buildings, and					1 4.5		40.5		
Description of property	(a)	Cost or othe (investme		b) Cost or other basis (other)		Accumulated epreciation	(a) E	Book va	lue ———
1 a Land	<u> </u>				 	·			
b Buildings	-			····	+				
c Leasehold improvements	\vdash				+				
d Equipment	 				 				
e Other	an (d) must as	I Form 000	Post V ast	mn (P) / 10(-)	<u> </u>	>			
Total. Add lines 1a through 1e. (Colum	iii (u) iiiust equa	יירטוווו 990,	rait A, colu	iiii (b), iine iU(c)			ulo P /	000	0.
DAA						Scried	uie u (F	של ווווט	0) 2011

77-0003378

Page 2

Schedule D (Form 990) 2011 THE OXNARD COLLEGE FOUNDATION

(a) Description of liability
(b) Book value

(1) Federal income taxes
(2) SCHOLARSHIPS PAYABLE
107, 608.

(3)
(4)
(5)
(6)
(7)
(8)
(9)
(10)
(11)

Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)

107, 608.

2 FIN 48 (ASC 740) 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 (ASC 740)

SEE PART XIV

Part XIV Supplemental Information (continued)	77-0003376	rage 5
DADTY FIN 40 FOOTNOTE (OONTINUED)		
PART X - FIN 48 FOOTNOTE (CONTINUED)		
INTEREST OR PENALTIES FOR THE YEARS ENDED JUNE 30, 2012 AND 20	11. THE HOSPICE 20	011,
2010 AND 2009 TAX YEARS REMAIN SUBJECT TO EXAMINATION BY THE I	NTERNAL REVENUE	
SERVICE AND THE CALIFORNIA FRANCHISE TAX BOARD.		
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Schedule D (Form 990) 2011 THE OXNARD COLLEGE FOUNDATION Part XIV Supplemental Information (continued)	77-0003378	Page 5
Part XIV Supplemental Information (continued)		
		-
		
		
		
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SCHEDULE 1 (Form 990)

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

OMB No 1545-0047

201

Open to Publicate Inspection

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 21 or 22. ► Attatch to Form 990.

Department of the Treasury Internal Revenue Service	Complete it the organization answered Tes to Form 930, Part IV, lines ∠1 of ∠∠. ► Attatch to Form 990.	Open to Publicate Inspection	Public.
Name of the organization		Employer identification number	
THE OXNARD COL		77-0003378	
Part General In	Part I General Information on Grants and Assistance		
1 Does the organize the selection crite	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?		Yes X No
2 Describe in Part I	2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States]]
Part II Grants and	Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to	answered 'Yes' to	
L			

Part II can be duplicated if additional space is needed	f additional space	ıs needed		-		•	X
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(η)							
(2)							
(3)							
(4)							
(5)							
<u></u>							
<u>(8)</u>							
	3) and government or	ganizations listed ii	n the line 1 table				0
3 Enter total number of other organizations listed in the line 1 table	ions listed in the line	1 table			-	•	0
BAA For Paperwork Reduction Act Notice, see the Instructions for Form 9	e, see the Instructions	s for Form 990.		TEEA3901L	06/01/11	Schedul	Schedule I (Form 990) (2011)

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. 77-0003378 THE OXNARD COLLEGE FOUNDATION Schedule I (Form 990) (2011)

[Rent] [[]

Page 2

(f) Description of non-cash assistance Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance 44,021. (c) Amount of cash grant (b) Number of recipients SCHOLARSHIPS FOR STUDENTS ATTENDING OXNARD COLLEGE (a) Type of grant or assistance 7 ന 2 9 4

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Related Organizations and Unrelated Partnerships

Complete if the organization answered 'Yes' to Form 990, Part IV, line 33, 34, 35, 36, or 37.
 Attach to Form 990.

201

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

(f)
Direct controlling
entity 77-0003378 (e) End-of-year assets Part I Identification of Disregarded Entities (Complete of the organization answered 'Yes' to Form 990, Part IV, line 33.) **(d)** Total income (c)
Legal domicile (state or foreign country) (b) Primary activity (a) Name, address, and EIN of disregarded entity THE OXNARD COLLEGE FOUNDATION

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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.)

Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section 501(c)(3))	Direct controlling entity	Sec 512(b)(13) controlled entity?	b)(13) entity?
						Yes	Š
OLLEGE - VCCCF SOUTH ROSE AVE							
ς¦ -	EDUCATION			•	N/A		×

Schedule R (Form 990) 2011

TEEA5001L 09/08/11

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

77-0003378

Schedule R (Form 990) 2011 THE OXNARD COLLEGE FOUNDATION

Schedule **R** (Form 990) 2011 (k) Percentage ownership (h) Percentage ownership Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) 34 **Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered 'Yes' to Form 990, Part IV, line because it had one or more related organizations treated as a partnership during the tax year.) General or managing partner? Share of total income Share of end-of-year ŝ Yes Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Dispropor-tionate allocations? ŝ ϵ Yes (C corp, S corp, or trust) (g) Share of end-of-year assets (c) (d)
Legal domicile Direct
(state or foreign controlling entity (f) Share of total income (e)
Predominant
income (related,
unrelated, excluded
from tax under
sections 512-514) (b) Primary activity (d) Direct controlling entity (c) Legal domicile (state or foreign country) Name, address, and EIN of related organization (b) Primary activity (a)
Name, address, and EIN of related organization BAA 8 ଫ୍ର ල 5 ଔ ල

TEEA5002L 05/24/11

77-0003378

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Yes	l۰
1 During the tax year did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	tions listed in Parts II	-ا٨		<u> </u>	
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity			1a	×	v
b Gift, grant, or capital contribution to related organization(s)			1 b	X	¥
c Gift, grant, or capital contribution from related organization(s)			10	×	v
d Loans or loan guarantees to or for related organization(s) .			ρι	×	<u>ب</u>
e Loans or loan guarantees by related organization(s)			-1 -	×	l_
f Sale of assets to related organization(s)			-	×	~
g Purchase of assets from related organization(s)			10	×	Iپ
h Exchange of assets with related organization(s)			무	×	l.
i Lease of facilities, equipment, or other assets to related organization(s)			ï	×	I۰
j Lease of facilities, equipment, or other assets from related organization(s)			1j	X	. .
k Performance of services or membership or fundraising solicitations for related organization(s)		•	1 x	X	v
I Performance of services or membership or fundraising solicitations by related organization(s)		:	1	X	ᅵᆈ
m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			1m	X	v
n Sharing of paid employees with related organization(s)		•	1n	X	Ų.
 Reimbursement paid to related organization(s) for expenses 		-	10	×	V
p Reimbursement paid by related organization(s) for expenses			10	×	\sim
				_	
q Other transfer of cash or property to related organization(s)			1	×	اير.
r Other transfer of cash or property from related organization(s)			11	×	Ų.
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.	ig covered relationshi	ps and transaction three	sholds.		
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved) eterminir nvolved	Ð
	:				
6					1
(3)					- 1
(4)					
(9)					
(9)					
BAA 1755A50031 05/24/11		Scher	Schedule R (Form 990) 2011	.02 (066	ΙΞ

Part VI Unrelated Organizations Taxable as a Partnership (Complete of the organization answered 'Yes' to Form 990, Part IV, line 37.)

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.

		,								
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(related, unre-	(e) Are all partners section 501(c)(3)	S Share of total income	(g) Share of end-of-year assets	(h) Dispropor- tionate allocations?	Code V-UBI amount in box	(i) General or managing partner?	(k) · Percentage ownership
			from tax under	organizations	<u>.</u>			Rorm (1065)		
			section 512-514)	Yes No			Yes No	,	Yes No	
(1)										
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_(2)										
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(4)										
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ВАА		:	1 H	TEEA5004L 05/24/11	11/		-	Schec	lule R (Forr	Schedule R (Form 990) 2011

Schedule R	(Form 990) 2011	Page 5
Part VII	Supplemental Information	
	Complete this part to provide additional information for responses to questions on Schedule R (see instructions).	
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2011

Open to Public

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

77-0003378 THE OXNARD COLLEGE FOUNDATION SCHEDULE O - ADDITIONAL INFORMATION THE FOUNDATION HAS A TWENTY YEAR RESTRICTION ON THE CORPUS OF FUNDS SET ASIDE FOR THE TITLE V ENDOWMENT FUND, THE PURPOSE OF WHICH IS TO ESTABLISH MATCHING FUNDS OF ONE DOLLAR OF NON-FEDERAL FUNDS FOR EVERY ONE DOLLAR OF FEDERAL GRANT FUNDS, AS REQUIRED BY THE FEDERAL ENDOWMENT CHALLENGE GRANT PROGRAM. AT THE END OF THE GRANT PERIOD, THE FOUNDATION MAY USE THE ENDOWMENT FUND CORPUS FOR ANY EDUCATIONAL PURPOSE. FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS FOUNDATION PROVIDES COPIES OF THE FORM 990 RETURN TO THE GOVERNING BODY BEFORE IT IS FILED. FORM 990, PART VI. LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS A CONFLICT OF INTEREST FORM IS DISTRIBUTED AT THE ANNUAL RETREAT FOR ALL FOUNDATION BOARD MEMBERS TO COMPLETE AND RETURN. WHEN NECESSARY, CONFLICT OF INTEREST STATEMENT IS WRITTEN AND APPROVED BY THE BOARD. IN ADDITION, THAT BOARD MEMBER EXCUSES HIMSELF/HERSELF FROM TAKING ACTION ON THE ISSUE. FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS FOR CEO, EXEC. DIR., OR TOP MG COMMUNITY DEVELOPMENT & INSTITUTIONAL ADVANCEMENT SPECIALIST GOES THROUGH ANNUAL COMPENSATION EVALUATION. FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE THE FOUNDATION MAKES ITS MONTHLY AGENDA, GOVERNING DOCUMENTS, POLICIES AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

2011 SCHEDULE D, PART XIV - SUPPLEMENTAL INFORMATION PAGE 4 **CLIENT 9806** THE OXNARD COLLEGE FOUNDATION 77-0003378 10/16/12 SCHEDULE D, PART XII, LINE 2D OTHER REVENUE INCLUDED IN F/S BUT NOT INCLUDED ON FORM 990 237,146. 237,146. MARKETPLACE EXPENSES TOTAL \$ SCHEDULE D, PART XIII, LINE 2D OTHER EXPENSES AND LOSSES PER AUDITED F/S MARKETPLACE EXPENSES 237,146. 237,146. TOTAL \$

03 34PM

011	SCF	IEDUL	ΕA,	PART	IV -	- SUPPL	.EN	MENTAL II	NFORM	OITA	N PAGE
LIENT 9806			TH	E OXNA	RD C	OLLEGE F	OUI	NDATION		_	77-00033
/16/12					·——						03.34
PART II, LINE	10 - 01	THER INC	OME								
NATURE AND	SOURC	E	20	011		2010		2009	2008		2007
OTHER PROGR	AM & I	MISCELL <i>A</i> TOTAL	ANEOUS	INCOM 2,000. 2,000.	E \$	2,375. 2,375.	\$	5,912. 5,912.	3,50 3,50	15. 15. \$	4,940. 4,940.
				<u> </u>							