| | | PU | BLIC DISCLOSURE COPY - STATE REGISTRA | | | 822 OMB No. 1545-0047 | | | | |
|--------------------------------|-----------------------------|--|--|---------------------|----------------------|-------------------------------|--|--|--|--|
| For | _ g | 90 | Return of Organization Exempt From Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code | | | | | | | |
| | | | Do not enter social security numbers on this form as it m | | | | | | | |
| Department of the freasury | | | Information about Form 990 and its instructions is at www | - | - | Open to Public Inspection | | | | |
| AF | or th | e 2015 calend | | | 0, 2016 | | | | | |
| | | | f organization | D Emp | oloyer identifi | cation number | | | | |
| a | applicable: | | | | | | | | | |
| | _Addre | | NADO SCHOOLS FOUNDATION | | | | | | | |
| | Name chang | pe Doing b | usiness as | | | 2745484 | | | | |
| F | Initial returr | | and street (or P.O. box if mail is not delivered to street address) Room/s 6TH STREET | suite E Tele | phone numbe | r 437-8059 | | | | |
| | Final return termii | n | | C Creat | s receipts \$ | 1,621,575. | | | | |
| | ated | | own, state or province, country, and ZIP or foreign postal code NADO , CA 92118 | | this a group re | | | | | |
| F | _lreturr]Appli _tion | | nd address of principal officer: CHRIS SEARLES | | r subordinates | | | | | |
| | pend | ing SAME | AS C ABOVE | | | ncluded? Yes No | | | | |
| 11 | ax-ex | empt status: | X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or | | | list. (see instructions) | | | | |
| | | | CSFKIDS.ORG | H(c) G | roup exemptio | n number 🕨 | | | | |
| ΚF | orm o | f organization: | X Corporation Trust Association Other 🕨 📘 | Year of formati | on: 1981 🖪 | A State of legal domicile: CA | | | | |
| Pa | art I | Summary | | | | | | | | |
| ġ | 1 | Briefly describ | e the organization's mission or most significant activities: THROUGH | COMMUN | ITY INV | OLVEMENT | | | | |
| Governance | | AND SUP | PORT, CORONADO SCHOOLS FOUNDATION RAI | SES AN | D MANAG | ES FUNDS TO | | | | |
| ern | 2 | Check this bo | $x \triangleright$ if the organization discontinued its operations or disposed of r | more than 25 | % of its net as | | | | | |
| Š | 3 | | ting members of the governing body (Part VI, line 1a) | | | 18 | | | | |
| <u>ه</u> | 4 | | lependent voting members of the governing body (Part VI, line 1b) | | | 18 | | | | |
| ies | 5 | | of individuals employed in calendar year 2015 (Part V, line 2a) | | | 24 | | | | |
| Activities & | 6 | | of volunteers (estimate if necessary) | | | 150 | | | | |
| Act | | | d business revenue from Part VIII, column (C), line 12 | | | 0. | | | | |
| | b | Net unrelated | business taxable income from Form 990-T, line 34 | | | | | | | |
| | | O | | | r Year 84 , 698 • | Current Year 520,873. | | | | |
| Revenue | 8 | | and grants (Part VIII, line 1h) | | 0. | 56,233. | | | | |
| ver | 9 | J. J | ce revenue (Part VIII, line 2g) | 2 | 73,254. | 176,939. | | | | |
| Be | | | come (Part VIII, column (A), lines 3, 4, and 7d) (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | 84,405. | 292,806. | | | | |
| | | | - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | | 42,357. | 1,046,851. | | | | |
| | | | nilar amounts paid (Part IX, column (A), lines 1-3) | | 51,830. | 817,189. | | | | |
| | | | to or for members (Part IX, column (A), line 4) | | 0. | 0. | | | | |
| s | | | r compensation, employee benefits (Part IX, column (A), lines 5-10) | 1 | 66,993. | 185,840. | | | | |
| Expense | | | undraising fees (Part IX, column (A), line 11e) | | 0. | 0. | | | | |
| be | | | ing expenses (Part IX, column (D), line 25) 109, 731. | | | | | | | |
| ш | | | es (Part IX, column (A), lines 11a-11d, 11f-24e) | 1 | 18,899. | 132,395. | | | | |
| | | | s. Add lines 13-17 (must equal Part IX, column (A), line 25) | 1,1 | 37,722. | 1,135,424. | | | | |
| | 19 | | expenses. Subtract line 18 from line 12 | | 4,635. | -88,573. | | | | |
| or ces | | | | Beginning o | f Current Year | End of Year | | | | |
| Net Assets or Fund Balances | 20 | Total assets (| Part X, line 16) | | 14,908. | 6,366,055. | | | | |
| t As | 21 | | (Part X, line 26) | | 05,435. | 477,149. | | | | |
| | | | fund balances. Subtract line 21 from line 20 | 6,1 | 09,473. | 5,888,906. | | | | |
| | art II | - | | | | | | | | |
| | • | | I declare that I have examined this return, including accompanying schedules and st | - | | y knowledge and belief, it is | | | | |
| true, | , corre | ct, and complete | Declaration of preparer (other than officer) is based on all information of which prep | oarer has any l | knowledge. | | | | | |
| | | | | | | | | | | |

| Sign | Signature of officer | | Date | | | | | | |
|-------------|---|---------------------------|-------------------------------|--|--|--|--|--|--|
| Here | CHRIS SEARLES, CHAIRMA | | | | | | | | |
| | Type or print name and title | | | | | | | | |
| | Print/Type preparer's name | Preparer's signature Date | Check PTIN | | | | | | |
| Paid | RICHARD HOTZ | 11/ | 15/16 self-employed P00452784 | | | | | | |
| Preparer | Firm's name 🕒 CONSIDINE & CONS | IDINE | Firm's EIN 95-2694444 | | | | | | |
| Use Only | Firm's address 1501 FIFTH AVENU | E, SUITE 400 | | | | | | | |
| | Phone no.619.231.1977 | | | | | | | | |
| May the II | May the IRS discuss this return with the preparer shown above? (see instructions) | | | | | | | | |
| 532001 12-1 | J2001 12-16-15 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2015) | | | | | | | | |

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

| | 990 (2015) CORONADO SCHOOLS FOUNDATION 94-2745484 Pa |
|-----|---|
| Par | t III Statement of Program Service Accomplishments |
| | Check if Schedule O contains a response or note to any line in this Part III |
| | Briefly describe the organization's mission: THROUGH COMMUNITY INVOLVEMENT AND SUPPORT, CORONADO SCHOOLS FOUNDATION RAISES AND MANAGES FUNDS TO PROVIDE EXCEPTIONAL LEARNING EXPERIENCES FOR ALL CORONADO UNIFIED SCHOOL DISTRICT STUDENTS. |
| | |
| | Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O. |
| | Did the organization cease conducting, or make significant changes in how it conducts, any program services? |
| | Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section $501(c)(3)$ and $501(c)(4)$ organizations are required to report the amount of grants and allocations to others, the total expenses, and |
| | revenue, if any, for each program service reported. (Code:) (Expenses \$ 774,510. including grants of \$ 750,052.) (Revenue \$ 56,23 |
| | (Code:)(Expenses 774,510. including grants of 5750,052.) (Revenue 556,23 THE PRIMARY PURPOSE OF SCHOOL SITE PROGRAM GRANTS WITHIN THE CORONADO UNIFIED SCHOOL DISTRICT (CUSD) TO ENRICH THE QUALITY OF THE CURRICULU AND PROVIDE EXCEPTIONAL LEARNING EXPERIENCES FOR ALL CUSD STUDENTS. THESE PRIORITIES ARE IDENTIFIED BY THE SITE STRATEGIC PLANS OF EACH CUSD CAMPUS WHICH HAVE BEEN APPROVED BY THE RESPECTIVE STRATEGIC PLANNING COMMITTEES, CONSISTING OF TEACHERS, STUDENTS, PARENTS, ADMINISTRATORS, AND COMMUNITY MEMBERS, AS WELL AS THE CUSD GOVERNING BOARD. THESE GRANTS FUND STEAM-RELATED (SCIENCE, TECHNOLOGY, ENGINEERING, ARTS & MATHEMATICS) PROGRAMS INCLUDING TEACHER SALARIES, EQUIPMENT, SUPPLIES, AND CURRICULUM DEVELOPMENT. |
| | |
| | DISTRICT PROGRAM FUNDING INCLUDES TELETHON EVENT SUPPORT TO CORONADO MIDDLE AND CORONADO HIGH SCHOOLS, SUMMER ENRICHMENT PROGRAM SUPPORT, AND PARENT TEACHER SUPPORT (PTO) TO THE FOUR SCHOOL CAMPUSES FOR ESCRIPT COLLABORATION AND VIRTUAL DIRECTORY SUPPORT. CORONADO SCHOOL FOUNDATION ENVISIONS A PUBLIC SCHOOL COMMUNITY THAT PROVIDES STUDENTS AN OPPORTUNITY TO LEARN, THRIVE, AND REACH THEIR HIGHEST POTENTIAL TODAY AND INTO THEIR FUTURE. |
| | (Code:)(Expenses \$ 69,957. including grants of \$ 59,057.) (Revenue \$ SCHOLARSHIPS FOR 30 GRADUATING CORONADO HIGH SCHOOL SENIORS FROM PRIVATE DONORS AS WELL AS ENDOWED SCHOLARSHIPS WITHIN CORONADO SCHOOL FOUNDATION VANGUARD INVESTMENT ACCOUNTS. THE CORONADO HIGH SCHOOL SENIOR AWARDS COMMITTEE MEMBERS MAKE THE DETERMINATION AS TO THE RECIPIENT(S) OF EACH AWARD BASED ON CRITERIA ESTABLISHED BY THE DONOR |
| | Other program services (Describe in Schedule O.) |
| | (Expenses \$ including grants of \$) (Revenue \$) |
| | |

| Form | 990 | (2015) | |
|------|-----|--------|--|

| 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? 1 1 Is the organization required to complete Schedule A 1 2 Is the organization required to complete Schedule B, Schedule of Contributors? 2 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 3 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 3 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 5 | X X X | No X X X X X X X |
|---|------------|---------------------------------------|
| If "Yes," complete Schedule A 1 Is the organization required to complete Schedule B, Schedule of Contributors? 2 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 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 4 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 4 | | x x x |
| If "Yes," complete Schedule A 1 Is the organization required to complete Schedule B, Schedule of Contributors? 2 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 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 4 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 4 | | x x x |
| 2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i>? 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</i> 3 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? <i>If</i> "Yes," <i>complete Schedule C, Part II</i> 4 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? <i>If</i> "Yes," <i>complete Schedule C, Part III</i> 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If</i> "Yes," <i>complete Schedule C, Part III</i> | X | x x x |
| public office? If "Yes," complete Schedule C, Part I 3 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 4 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 5 | | x x x |
| 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 5 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 | | x x x |
| 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 5 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 | | x x |
| 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 5 | | x x |
| similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 5 | | x |
| | | x |
| | | |
| 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to | | |
| provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I | | x |
| 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, | | X |
| the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | | |
| 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete | | |
| Schedule D, Part III | | X |
| 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for | | |
| amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? | | |
| If "Yes," complete Schedule D, Part IV | | X |
| 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent | | |
| endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V | X | |
| 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X | | |
| as applicable. | | |
| a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, | | |
| Part VI | X | |
| b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total | | |
| assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | X | |
| 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 | | X |
| 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 | | 37 |
| Part X, line 16? If "Yes," complete Schedule D, Part IX | | X |
| e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e | X | |
| f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | v | |
| the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i> | X | |
| 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete | v | |
| Schedule D, Parts XI and XII 12a | X | |
| b Was the organization included in consolidated, independent audited financial statements for the tax year? | 1 | v |
| If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12 | | X |
| 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14 Did the granization provide in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 14 | | X |
| 14a Did the organization maintain an office, employees, or agents outside of the United States? 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, | | 1 |
| investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 | | v |
| or more? If "Yes," complete Schedule F, Parts I and IV | | X |
| 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any | 1 | x |
| foreign organization? If "Yes," complete Schedule F, Parts II and IV | + | |
| 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to | | x |
| or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i> | + | <u>⊢^</u> |
| 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, | 1 | x |
| column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I</i> | + | <u> ^∧</u> |
| 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines | x | 1 |
| 1c and 8a? If "Yes," complete Schedule G, Part II 18 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 18 | ↑ ^ | + |
| 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19 complete Schedule G, Part III 19 | | x |

Form **990** (2015)

532003 12-16-15

| - | ~~~ | |
|------|-----|--------|
| ⊦orm | 990 | (2015) |

Part IV Checklist of Required Schedules (continued)

| | | | Yes | No |
|----------|---|------------------|-----|----------|
| 20a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | Х |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | |
| 21 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or | | | |
| | domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | Х | |
| 22 | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on | | | |
| | Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | 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 |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the | | | |
| | last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete | | | v |
| | Schedule K. If "No", go to line 25a | 24a | | X |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| С | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease | 040 | | |
| Ь | any tax-exempt bonds? | 24c 24d | | |
| | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit | 2 4 0 | | |
| 254 | transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | x |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and | 200 | | |
| ~ | that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete | | | |
| | Schedule L, Part I | 25b | | x |
| 26 | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or | | | |
| | former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," | | | |
| | complete Schedule L, Part II | 26 | | Х |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial | | | |
| | contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member | | | |
| | of any of these persons? If "Yes," complete Schedule L, Part III | 27 | | X |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV | | | |
| | instructions for applicable filing thresholds, conditions, and exceptions): | | | |
| а | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28a | | X |
| b | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28b | | X |
| С | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, | | | v |
| ~~ | director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | 28c | | X X |
| 29 20 | Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i> | 29 | | |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation | 20 | | x |
| 31 | contributions? <i>If "Yes," complete Schedule M</i> Did the organization liquidate, terminate, or dissolve and cease operations? | 30 | | - 23 |
| 51 | 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 | | | <u> </u> |
| | Schedule N, Part II | 32 | | x |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | | | |
| | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | 33 | | x |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and | | | |
| | Part V, line 1 | 34 | | X |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | X |
| b | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity | | | |
| | within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 35b | | <u> </u> |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? | | | |
| | If "Yes," complete Schedule R, Part V, line 2 | 36 | | X |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | | | v |
| | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | X |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? | | х | l I |
| | Note, All Form 990 filers are required to complete Schedule O | 38 | A 1 | 1 |

Form **990** (2015)

532004 12-16-15

| | 990 (2015) CORONADO SCHOOLS FOUNDATION 94-2745 | 484 | P | age 5 |
|----------|---|------------|-----|--------------|
| Pa | t V Statements Regarding Other IRS Filings and Tax Compliance | | | |
| | Check if Schedule O contains a response or note to any line in this Part V | | | |
| | | | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a | | | |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 | | | |
| с | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming | | | |
| | (gambling) winnings to prize winners? | 1c | Х | |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, | | | |
| | filed for the calendar year ending with or within the year covered by this return 2a 24 | | v | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b | Х | |
| • | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions) | • | | x |
| | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | | |
| | If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O | 3b | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a | 4- | | x |
| h | financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | | |
| D | If "Yes," enter the name of the foreign country: | | | |
| Fa | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). | Ea | | x |
| | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a 5b | | X |
| b | | 50 5c | | - 23 |
| | If "Yes," to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit | 50 | | |
| Ua | any contributions that were not tax deductible as charitable contributions? | 6a | | x |
| h | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts | Ua | | |
| | were not tax deductible? | 6b | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | 0.5 | | |
| 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 | | X |
| | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | |
| | 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 | | | |
| е | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | |
| 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 | | |
| 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. Did a donor advised fund maintained by the | | | |
| | sponsoring organization have excess business holdings at any time during the year? | 8 | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | |
| а | Did the sponsoring organization make any taxable distributions under section 4966? | 9a | | |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | | |
| 10 | Section 501(c)(7) organizations. Enter: | | | |
| а | Initiation fees and capital contributions included on Part VIII, line 12 10a | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b | | | |
| 11 | Section 501(c)(12) organizations. Enter: | | | |
| а | Gross income from members or shareholders 11a | | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against | | | |
| | amounts due or received from them.) | | | |
| | 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 | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | 40 | | |
| а | Is the organization licensed to issue qualified health plans in more than one state? | 13a | | |
| | Note. See the instructions for additional information the organization must report on Schedule O. | | | |
| 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 13b | | | |
| | Enter the amount of reserves on hand 13c | 14- | | x |
| | Did the organization receive any payments for indoor tanning services during the tax year? | 14a 14b | | - 23 |
| <u>a</u> | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O | | 000 | (2015) |

| Form 990 |) (2015) |
|----------|----------|
|----------|----------|

94-2745484 Page 6

| Part VI | Go | vernance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response |
|---------|--------|---|
| | to lii | ne 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. |

| | Check if Schedule O contains a response or note to any line in this Part VI | | | | X |
|----------|--|-------------|------------|------|----------|
| Sec | tion A. Governing Body and Management | | | | |
| | | | | Yes | No |
| 1a | Enter the number of voting members of the governing body at the end of the tax year 1a | 18 | | | |
| | If there are material differences in voting rights among members of the governing body, or if the governing | | | | |
| | body delegated broad authority to an executive committee or similar committee, explain in Schedule O. | | | | |
| b | Enter the number of voting members included in line 1a, above, who are independent 1b | 18 | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other | | | | |
| | officer, director, trustee, or key employee? | | 2 | | Х |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervisi | on | | | |
| | of officers, directors, or trustees, or key employees to a management company or other person? | | 3 | | Х |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | | 4 | | Х |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | | 5 | | Х |
| 6 | Did the organization have members or stockholders? | | 6 | | Х |
| 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 | | | | |
| | persons other than the governing body? | | 7b | | X |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | | |
| а | • • • • | | 8a | Х | |
| b | Each committee with authority to act on behalf of the governing body? | | 8b | Х | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the | | | | |
| | organization's mailing address? If "Yes," provide the names and addresses in Schedule O | | 9 | | X |
| Sec | tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) | | | | |
| | | | | Yes | No |
| | 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 | v | <u> </u> |
| | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the | form? | 11a | X | |
| | Describe in Schedule O the process, if any, used by the organization to review this Form 990. | | 10 | х | |
| | Did the organization have a written conflict of interest policy? If "No," go to line 13 | | 12a | X | |
| | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | | 12b | Λ | |
| с | | | 10- | х | |
| 10 | in Schedule O how this was done | | 12c 13 | X | |
| 13 14 | Did the organization have a written whistleblower policy? | | 13 | X | |
| | Did the organization have a written document retention and destruction policy? | | 14 | | |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | | |
| а | The organization's CEO, Executive Director, or top management official | | 15a | Х | |
| | Other officers or key employees of the organization | | 15a 15b | x | |
| U | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). | | 135 | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a | | | | |
| u | taxable entity during the year? | | 16a | | х |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation | | | | |
| | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's | | | | |
| | exempt status with respect to such arrangements? | | 16b | | |
| Sec | tion C. Disclosure | | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed $\blacktriangleright 	ext{CA}$ | | | | |
| 18 | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3 | 3)s only) a | vailab | le | |
| | for public inspection. Indicate how you made these available. Check all that apply. | | | | |
| | Own website Another's website X Upon request Other (explain in Schedule O) | | | | |
| 19 | Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest p | olicy, and | l finan | cial | |
| | statements available to the public during the tax year. | | | | |
| 20 | State the name, address, and telephone number of the person who possesses the organization's books and records: | ▶ | | | |
| | CORONADO SCHOOLS FOUNDATION - 619-437-8059 201 6TH STREET, CORONADO, CA 92118 | | | | |
| | | | Form | 000 | (0015) |
| 53200 | 6 12-16-15 6 | | LOUU | 330 | (2015) |

| Part VII | Compensation of Officers, | Directors, | Trustees, | Key Em | ployees, | Highest | Compens | ated |
|----------|---------------------------|------------|-----------|--------|----------|---------|---------|------|
| | Employees, and Independe | ent Contra | ctors | | | | | |

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (Ď), (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.

| (A) | (B) | | | (0 | C) | | | (D) | (E) | (F) |
|--|------------------------|-------------------------------|----------------------|---------|--------------|---------------------------------|--------|---------------------------------------|----------------------------------|--------------------------|
| Name and Title | Average | (do | not c | Pos | | | one | Reportable | Reportable | Estimated |
| | hours per | box | , unle cer an | ss pe | rson i | is bot | h an | compensation | compensation | amount of |
| | week | | | | | 1 | | from | from related | other |
| | (list any hours for | ndividual trustee or director | | | | - | | the organization | organizations (W-2/1099-MISC) | compensation from the |
| | related | ee or (| stee | | | nsated | | (W-2/1099-MISC) | (112/1000/11100) | organization |
| | organizations | trust | al tru | | yee | ompe | | · · · · · · · · · · · · · · · · · · · | | and related |
| | below | vidual | nstitutional trustee | er | Key employee | Highest compensated employee | Former | | | organizations |
| | line) | Indi | Inst | Officer | Key | High | Forr | | | |
| (1) TAMMY FARRIER | 4.00 | | | | | | | | | • |
| DIRECTOR | | X | | | | | | 0. | 0. | 0. |
| (2) TERRY CHAPKO | 4.00 | | | | | | | | | • |
| GOVERNANCE CHAIR | | х | | | | | | 0. | 0. | 0. |
| (3) CHRIS SEARLES | 4.00 | | | | | | | | | • |
| CHAIRMAN | | X | | X | | | | 0. | 0. | 0. |
| (4) JAIME TUCKEY | 2.00 | | | | | | | | | • |
| MARKETING COMMITTEE CHAIR | 4 00 | X | | | | | | 0. | 0. | 0. |
| (5) JIM GRADY | 4.00 | | | | | | | | 0 | 0 |
| VICE-CHAIRMAN | 2 00 | X | | X | | | | 0. | 0. | 0. |
| (6) LORENA BACA AGUIRRE | 2.00 | | | | | | | 0. | 0 | 0 |
| DIRECTOR | 4.00 | X | | | | | | 0. | 0. | 0. |
| (7) RENEE CAVANAUGH | 4.00 | v | | | | | | 0. | 0. | 0. |
| SECRETARY/PROGRAMS COMMITEE CO-CHAIR | 2.00 | X | | | | | | 0. | 0. | 0. |
| (8) TORI HEINTZELMAN | 2.00 | x | | | | | | 0. | 0. | 0. |
| DIRECTOR (9) SAM MCNEAL | 2.00 | ^ | | | | | | 0. | 0. | 0. |
| (9) SAM MCNEAL STUDENT REPRESENTATIVE | 2.00 | x | | | | | | 0. | 0. | 0. |
| (10) JIM O'CONNOR | 4.00 | ^ | | | | | | 0. | 0. | 0. |
| TREASURER/FIN. STEWARDSHIP CHAIR | 4.00 | x | | x | | | | 0. | 0. | 0. |
| (11) TOM RUDOWICZ | 2.00 | | | | | | | 0. | 0. | 0. |
| PROGRAMS COMMITTEE CO-CHAIR | 2.00 | x | | | | | | 0. | 0. | 0. |
| (12) RANDY MORGAN | 2.00 | | | | | | | 0. | • | 0. |
| FUNDRAISING COMMITTEE CHAIR | 2.00 | x | | | | | | 0. | 0. | 0. |
| (13) LIZ CASANOVA | 2.00 | | | | | | | | • | 0. |
| DIRECTOR | 2.00 | x | | | | | | 0. | 0. | 0. |
| (14) KELLEN GILL | 2.00 | | | | | | | | | |
| DIRECTOR | 2000 | x | | | | | | 0. | 0. | 0. |
| (15) KARIN MELLINA | 4.00 | | | | | | | | | |
| CUSD LIAISON | | x | | | | | | 0. | 0. | 0. |
| (16) PAM SAUTER | 2.00 | - <u>-</u> | | | | | | | | |
| DIRECTOR | | x | | | | | | 0. | 0. | 0. |
| (17) KARI URSITTI | 2.00 | | | | | | | | ••• | |
| SECRETARY | | x | | | | | | 0. | 0. | 0. |
| | | | | | | | | | | Course 000 (0015) |

532007 12-16-15

| Form 990 (2015) CORONADO | | | | | | | | | 94-27 | 45 | 484 | Pa | ge 8 |
|--|--|--------------------------------|-----------------------|---|-------------------------|---------------------------------|--------|---|--|-------|-------------|--|-------------|
| Part VII Section A. Officers, Directors, Trus | | ploy I | ees | | | ghe | st C | | | | | | |
| (A) Name and title | (B) Average hours per week | box offic | not c , unle | (C Posi heck i ss per id a di | ition more rson i | than is bot | h an | (D) Reportable compensation from | (E) Reportable compensatior from related | 1 | Est amo | (F) imated ount c other | |
| | (list any hours for related organizations below line) | Individual trustee or director | Institutional trustee | Officer | ƙey employee | Highest compensated employee | Former | the organization (W-2/1099-MISC) | organizations (W-2/1099-MIS | C) | orga and | ensat m the nizatio relate nizatio | on ed |
| (18) MIRIAM VALADES | 2.00 | | _ | 0 | × | <u>+ </u> | - | _ | | _ | | | |
| DIRECTOR | | x | | | | | | 0. | | 0. | | | 0. |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | - | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| 1b Sub-total | | | | | | | | 0. | | 0. | | | 0. |
| c Total from continuation sheets to Part V d Total (add lines 1b and 1c) | | | | | | | | 0. | | 0. | | | 0. |
| 2 Total number of individuals (including but n compensation from the organization ► | | | | | | | no re | eceived more than \$100 |),000 of reportable |) | | | 0 |
| 3 Did the organization list any former officer, line 1a? <i>If</i> "Yes," <i>complete Schedule J for</i> s | | | | | | | | | | [| 3 | Yes | No X |
| For any individual listed on line 1a, is the su and related organizations greater than \$15 | um of reportab | le co | omp | ensa | atior | n and | d otl | | the organization | | 4 | | x |
| Did any person listed on line 1a receive or a rendered to the organization? <i>If "Yes," com</i> | accrue compei | nsat | ion f | rom | any | / unr | elat | ted organization or indiv | idual for services | | 5 | | x |
| Section B. Independent Contractors | | | | | | | | | | | | | |
| Complete this table for your five highest co the organization. Report compensation for | | | | | | | | | | oensa | ation fr | om | |
| (A) Name and business | | | | | | | | (B) Description of s | | 0 | (C) | | |
| | address | INC | ONE | 5 | | | | Description of s | | 0 | ompen | Sation | l |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| 2 Total number of independent contractors (i | • | iot lii | mite | d to | | se lis 0 | stec | d above) who received n | nore than | | | | |
| \$100,000 of compensation from the organi | zation 🗩 | | | | | <u> </u> | | | | | Form 9 | 90 (2 | 015) |

8

| | | Check if Schedule O cont | tains a response | or note to any lin | e in this Part VIII | | | |
|---|------|---|------------------|--------------------|-----------------------------|--------------------------|-------------------------|---|
| | | | • | , | (A) Total revenue | (B) Related or | (C) Unrelated | (D) Revenue excluded |
| | | | | | Total Tovolido | exempt function | business | from tax under sections 512 - 514 |
| 0.0 | | | | | | revenue | revenue | 512 - 514 |
| ants | | Federated campaigns | | | | | | |
| nor Gra | | Membership dues | | 117 025 | | | | |
| fts, | | Fundraising events | | 117,925. | | | | |
| ilai | | Related organizations | | | | | | |
| Sin | | Government grants (contribut | | | | | | |
| utic | t | All other contributions, gifts, gran | | 402,948. | | | | |
| trib Otb | | similar amounts not included abo | ····· | 402,940. | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | - | Noncash contributions included in lines Total. Add lines 1a-1f | | | 520,873. | | | |
| <u> </u> | | | | Business Code | 02070701 | | | |
| e, | 2 a | SUMMER ENRICHME | INT TUIT | 611110 | 56,233. | 56,233. | | |
| ° ric | b | | | | | | | |
| Sei | c | | | | | | | |
| am | d | | | | | | | |
| Program Service Revenue | е | | | | | | | |
| P | f | All other program service reve | enue | | | | | |
| | g | Total. Add lines 2a-2f | | ► | 56,233. | | | |
| | 3 | Investment income (including | | | 100.004 | | | 1.2.5. 0.0.4 |
| | | other similar amounts) | | | 136,224. | | | 136,224. |
| | 4 | Income from investment of ta | | | | | | |
| | 5 | Royalties | | | | | | |
| | • | A | (i) Real | (ii) Personal | | | | |
| | | Gross rents | | | | | | |
| | | Less: rental expenses Rental income or (loss) | | | | | | |
| | | Net rental income or (loss) | | | | | | |
| | | Gross amount from sales of | (i) Securities | (ii) Other | | | | |
| | 7 4 | assets other than inventory | 434,154. | | | | | |
| | b | Less: cost or other basis | | | | | | |
| | | and sales expenses | 393,439. | | | | | |
| | с | Gain or (loss) | 40,715. | | | | | |
| | | Net gain or (loss) | | | 40,715. | | | 40,715. |
| e | 8 a | Gross income from fundraisin | ig events (not | | | | | |
| enu | | including \$ 117,9 | 925. of | | | | | |
| Sev | | contributions reported on line | | | | | | |
| Other Reven | | Part IV, line 18 | | 474,091. | | | | |
| Oth | | Less: direct expenses | | 181,285. | 000 000 | | | |
| | | Net income or (loss) from fund | - | ····· ► | 292,806. | | | 292,806. |
| | 9 a | Gross income from gaming ad | | | | | | |
| | | Part IV, line 19 | | | | | | |
| | | Less: direct expenses | | | | | | |
| | | Net income or (loss) from gan Gross sales of inventory, less | | | | | | |
| | iu a | and allowances | | | | | | |
| | h | Less: cost of goods sold | | | | | | |
| | | Net income or (loss) from sale | | | | | | |
| | | Miscellaneous Revenu | | Business Code | | | | |
| | 11 a | | | | | | | |
| | b | | | | | | | |
| | с | | | | | | | |
| | | All other revenue | | | | | | |
| | | Total. Add lines 11a-11d | | | | F.C. 000 | | |
| | 12 | Total revenue. See instructions. | | ► | 1,046,851. | 56,233. | υ. | 469,745. |

532009 12-16-15

Form 990 (2015)

13561115 757767 CORO97121618 2015.04020 CORONADO SCHOOLS FOUNDATION CORO9721

Form **990** (2015)

CORONADO SCHOOLS FOUNDATION Part VIII Statement of Revenue

Part IX Statement of Functional Expenses

CORONADO SCHOOLS FOUNDATION

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

| D | Check if Schedule O contains a respons not include amounts reported on lines 6b. | se or note to any line in (A) | this Part IX | (C) | (D) |
|----------|---|-------------------------------|---|---------------------------------|-------------------------|
| | not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII. | Total expenses | (B) Program service expenses | Management and general expenses | Fundraising expenses |
| 1 | Grants and other assistance to domestic organizations | | | | |
| | and domestic governments. See Part IV, line 21 | 758,132. | 758,132. | | |
| 2 | Grants and other assistance to domestic | | | | |
| | individuals. See Part IV, line 22 | 59,057. | 59,057. | | |
| 3 | Grants and other assistance to foreign | | | | |
| | organizations, foreign governments, and foreign | | | | |
| | individuals. See Part IV, lines 15 and 16 | | | | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, | | | | |
| | trustees, and key employees | | | | |
| 6 | Compensation not included above, to disqualified | | | | |
| | persons (as defined under section $4958(f)(1)$) and | | | | |
| | persons described in section 4958(c)(3)(B) | | | | |
| 7 | Other salaries and wages | 171,737. | 97,621. | 43,387. | 30,729 |
| 8 | Pension plan accruals and contributions (include | | | | |
| | section 401(k) and 403(b) employer contributions) | | | | |
| 9 | Other employee benefits | 1.1.1.0.0 | | | |
| 0 | Payroll taxes | 14,103. | 8,215. | 3,651. | 2,237 |
| 1 | Fees for services (non-employees): | | | | |
| а | Management | | | | |
| b | Legal | | | | |
| | Accounting | | | | |
| d | Lobbying | | | | |
| е | | 10.001 | | 10.001 | |
| f | e | 18,281. | | 18,281. | |
| g | | 16 505 | | | |
| | column (A) amount, list line 11g expenses on Sch 0.) | 16,507. | 5,502. | 5,502. | 5,503 31,137 |
| 12 | Advertising and promotion | 31,137. | 1 110 | | 31,137 |
| 13 | Office expenses | 21,632. | 1,118. | 2,237. | 18,277 |
| 14 | Information technology | | | | |
| 15 | Royalties | | | | |
| 6 | Occupancy | | | | |
| 17 | Travel | | | | |
| 8 | Payments of travel or entertainment expenses | | | | |
| | for any federal, state, or local public officials | | | | |
| 9 | Conferences, conventions, and meetings | 717. | 717. | | |
| 20 | Interest | | | | |
| 21 | Payments to affiliates | 0 1 1 4 | 0.00 | 425 | |
| 22 | Depreciation, depletion, and amortization | 2,174. | 978. | 435. | 761 |
| 23 | Insurance | 24,155. | 8,051. | 8,052. | 8,052 |
| 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 0.) | F 0.40 | 0.105 | | <u> </u> |
| а | | 7,249. | 2,175. | | 5,074 |
| b | | 6,501. | | | 6,501 |
| С | | 1,500. | 750. | 750. | |
| d | | 1,380. | 690. | | 690 |
| е | · · · · · · · · · · · · · · · · · · · | 1,162. | 392. | | 770 |
| 25 | Total functional expenses. Add lines 1 through 24e | 1,135,424. | 943,398. | 82,295. | 109,731 |
| 26 | 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 time if following SOP 98-2 (ASC 958-720) | | | | Form 990 (201 |

532010 12-16-15

Form **990** (2015)

13561115 757767 CORO97121618

10

| Form 990 (| 2015) | CORONADO | SCHOOLS | FOUNDATION |
|------------|---------------|----------|---------|------------|
| Part X | Balance Sheet | | | |

| ··· | | Check if Schedule O contains a response or note | to any line in this P | art X | | | |
|-----------------------------|----------|---|---------------------------------------|------------------|---------------------------------|----------|---------------------------|
| | | | | | (A) Beginning of year | | (B) |
| | | | | | 88,691. | | End of year |
| | 1 | Cash - non-interest-bearing | | | 328,793. | 1 | 109,764. 377,186. |
| | 2 | Savings and temporary cash investments | | | 520,195. | 2 | 577,100. |
| | 3 | Pledges and grants receivable, net | | | 7,640. | 3 | 15,647. |
| | 4 | Accounts receivable, net | | | /,040. | 4 | 15,047. |
| | 5 | Loans and other receivables from current and for | | | | | |
| | | trustees, key employees, and highest compensat | | | | - | |
| | | Part II of Schedule L | | | | 5 | |
| | 6 | Loans and other receivables from other disqualifie | | | | | |
| | | section 4958(f)(1)), persons described in section 4 | | | | | |
| | | employers and sponsoring organizations of section | | | | • | |
| Assets | l _ | employees' beneficiary organizations (see instr). | | F | | 6 | |
| Ass | 7 | Notes and loans receivable, net | | | | 7 | |
| | 8 | Inventories for sale or use | | | 20,591. | 8 | 9,908. |
| | 9 | Prepaid expenses and deferred charges | | ····· | 20,391. | 9 | 9,900. |
| | 10a | Land, buildings, and equipment: cost or other | 10 | 1 915 | | | |
| | | basis. Complete Part VI of Schedule D | $\frac{10a}{10b}$ $\pm \frac{1}{10b}$ | 4,915. 0,527. | 6,562. | 10- | 4,388. |
| | | Less: accumulated depreciation | | | 0,302. | 10c | 4,500. |
| | 11 | Investments - publicly traded securities | | | 6,062,631. | 11 12 | 5,849,162. |
| | 12 | Investments - other securities. See Part IV, line 11 | | | 0,002,051. | | 5,045,102. |
| | 13 | Investments - program-related. See Part IV, line 1 | | | | 13 | |
| | 14 | Intangible assets | | | | 14 15 | |
| | 15 | Other assets. See Part IV, line 11 | | | 6,514,908. | 15 16 | 6,366,055. |
| | 16 17 | Total assets. Add lines 1 through 15 (must equal | | | 23,592. | 17 | 43,576. |
| | 18 | Accounts payable and accrued expenses | | | 370,202. | 18 | 428,073. |
| | 10 | Grants payable | | | 570,202. | 19 | 420,0750 |
| | 20 | Deferred revenue | | | | 20 | |
| | 20 | Tax-exempt bond liabilities Escrow or custodial account liability. Complete Pa | | | | 20 | |
| (0 | 22 | Loans and other payables to current and former of | | | | 21 | |
| Liabilities | ~~~ | key employees, highest compensated employees | | | | | |
| liqu | | Complete Part II of Schedule L | | | | 22 | |
| Lia | 23 | Secured mortgages and notes payable to unrelate | | | | 23 | |
| | 24 | Unsecured notes and loans payable to unrelated | | | | 24 | |
| | 25 | Other liabilities (including federal income tax, paya | | | | | |
| | | parties, and other liabilities not included on lines | | | | | |
| | | Schedule D | | | 11,641. | 25 | 5,500. |
| | 26 | Total liabilities. Add lines 17 through 25 | | | 405,435. | 26 | 477,149. |
| | | Organizations that follow SFAS 117 (ASC 958), | | X and | | | |
| ŝ | | complete lines 27 through 29, and lines 33 and | | | | | |
| nce | 27 | Unrestricted net assets | | | 4,817,674. | 27 | 4,599,895. |
| ala | 28 | Temporarily restricted net assets | | | 40,984. | 28 | 37,017. |
| Б | 29 | | | | 1,250,815. | 29 | 1,251,994. |
| Fun | | Organizations that do not follow SFAS 117 (AS | | | | | |
| م م | | and complete lines 30 through 34. | | | | | |
| ets | 30 | Capital stock or trust principal, or current funds | | | | 30 | |
| SS | 31 | Paid-in or capital surplus, or land, building, or equ | | | | 31 | |
| Net Assets or Fund Balances | 32 | Retained earnings, endowment, accumulated inc | | | | 32 | |
| ž | 33 | Total net assets or fund balances | | | 6,109,473. | 33 | 5,888,906. |
| | 34 | Total liabilities and net assets/fund balances | | | 6,514,908. | 34 | 6,366,055. |
| - | | | | | | | Earren 000 (001 E) |

Form **990** (2015)

| Form | 1 990 (2015) CORONADO SCHOOLS FOUNDATION | 94-27 | 45484 | Page 12 |
|------|--|------------|-------|----------------|
| Pa | rt XI Reconciliation of Net Assets | | | |
| | Check if Schedule O contains a response or note to any line in this Part XI | | | |
| | | | | |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | | 5,851. |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | | 5,424. |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | | 3,573. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | | 9,473. |
| 5 | Net unrealized gains (losses) on investments | 5 | -131 | L,994. |
| 6 | Donated services and use of facilities | 6 | | |
| 7 | Investment expenses | 7 | | |
| 8 | Prior period adjustments | 8 | | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | | 0. |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, | | | |
| | column (B)) | 10 | 5,888 | 3,906. |
| Pa | rt XII Financial Statements and Reporting | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | <u>L</u> |
| | | | | 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 | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | 2a | X |
| | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewer | d on a | | |
| | separate basis, consolidated basis, or both: | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | |
| b | b Were the organization's financial statements audited by an independent accountant? | | | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat | e basis, | | |
| | consolidated basis, or both: | | | |
| | X Separate basis Consolidated basis Both consolidated and separate basis | | | |
| С | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the | e audit, | | |
| | review, or compilation of its financial statements and selection of an independent accountant? | | 2c | X |
| | If the organization changed either its oversight process or selection process during the tax year, explain in Sch | edule O. | | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si | ngle Audit | | |
| | Act and OMB Circular A-133? | | 3a | X |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ | ired audit | | |
| | or audits, explain why in Schedule O and describe any steps taken to undergo such audits | | | |
| | | | | |

Form **990** (2015)

532012 12-16-15

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|--|-----|-----|-----|---|

| (Form | 990 | or | 990- | ·ΕΖ |
|-------|-----|----|------|-----|
|-------|-----|----|------|-----|

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.

| 2015 | |
|------------------------------|--|
| Open to Public Inspection | |

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

| ▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at WWW.irs. | gov/form990. |
|---|--------------|
|---|--------------|

| Name of the | organization |
|-------------|--------------|
|-------------|--------------|

| Nam | Name of the organization Employer identification number | | | | | | | | |
|--------|---|---|-----------------------|------------------------------------|--------------------|----------------------|-----------------|----------------|-------------------------|
| | | | | OLS FOUNDATIO | | | | | 4-2745484 |
| Pa | rt I | Reason for Public | Charity Status | (All organizations must co | omplete th | is part.) Se | e instruction | S. | |
| The | organ | ization is not a private found | dation because it is: | (For lines 1 through 11, o | check only | one box.) | | | |
| 1 | | A church, convention of ch | urches, or associat | ion of churches describe | d in sectic | on 170(b)(1 | l)(A)(i). | | |
| 2 | | A school described in sect | ion 170(b)(1)(A)(ii). | (Attach Schedule E (Forn | n 990 or 9 | 90-EZ).) | | | |
| 3 | | A hospital or a cooperative | hospital service or | ganization described in s e | ection 170 |)(b)(1)(A)(ii | i). | | |
| 4 | | A medical research organiz | ation operated in c | onjunction with a hospita | l describe | d in sectio | n 170(b)(1)(A | .)(iii). Enter | the hospital's name, |
| | | city, and state: | | | | | | | |
| 5 | | An organization operated for | or the benefit of a c | ollege or university owne | d or opera | ted by a g | overnmental | unit describ | bed in |
| | | section 170(b)(1)(A)(iv). (0 | Complete Part II.) | | | | | | |
| 6 | | A federal, state, or local go | vernment or govern | mental unit described in | section 17 | 70(b)(1)(A) | (v). | | |
| 7 | | An organization that norma | ally receives a subst | antial part of its support | from a gov | ernmental | unit or from t | 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 | X | 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 exer | npt functions - subj | ect to certain exceptions, | , and (2) no | o more tha | n 33 1/3% of | its support | t from gross investment |
| | | income and unrelated busi | | e (less section 511 tax) fr | om busine | esses acqu | ired by the o | rganization | after June 30, 1975. |
| | | See section 509(a)(2). (Co | | | | | | | |
| 10 | | An organization organized | - | | - | | | | |
| 11 | | An organization organized | | - | | | | - | |
| | | more publicly supported or | | | | | | | Check the box in |
| | | lines 11a through 11d that | | | | • | | ° ° | |
| а | | Type I. A supporting orga | | - | • | | | •••••• | |
| | | the supported organization | | • • • • • | a majority | of the dire | ctors or truste | ees of the s | supporting |
| | | organization. You must o | - | | | | | | |
| b | | Type II. A supporting org | - | | | | - | | - |
| | | control or management of | | - | ame perso | ons that co | ontrol or mana | age the sup | ported |
| - | | organization(s). You mus | - | | | | | ll into avat. | ما |
| С | | ☐ Type III functionally inte | | • • | | | | illy integrate | ed with, |
| 4 | | its supported organizatio | | | | | | itad araani | -otion(a) |
| d | | Type III non-functionally that is not functionally int | | | | | | - | |
| | | that is not functionally int requirement (see instruct | | | - | | - | u an alleni | IVEIIESS |
| _ | | Check this box if the orga | - | - | | | | | |
| е | | functionally integrated, o | | | | | гтурет, туре | п, туре п | |
| f | Ente | er the number of supported | • • | | | | | | |
| י ת | Prov | vide the following information | | ted organization(s) | | | | | |
| 9 | | i) Name of supported | (ii) EIN | (iii) Type of organization | (iv) Is the o | | (v) Amount o | f monetary | (vi) Amount of |
| | | organization | | (described on lines 1-9 | | in your document? | support | (see | other support (see |
| | | | | above (see instructions)) | Yes | No | instruct | ions) | instructions) |
| | | | | | | | | | |
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| Tota | 1 <u> </u> | | | | | | | | |
| LHA | For F | Paperwork Reduction Act N | Notice, see the Inst | tructions for | | | Sche | dule A (For | m 990 or 990-EZ) 2015 |
| Forr | n 990 | or 990-EZ. 532021 09-23-15 | | | | | | | |

13

Schedule A (Form 990 or 990-EZ) 2015 CORONADO SCHOOLS FOUNDATION Part II Support Schedule for Organizations Described in Sections 17

94-2745484 Page 2

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.)

| See | ction A. Public Support | | | | | | |
|-------------|--|------------------------|----------------------|--------------------------|--------------------------|--------------------|--------------------|
| Cale | ndar year (or fiscal year beginning in) 🕨 | (a) 2011 | (b) 2012 | (c) 2013 | (d) 2014 | (e) 2015 | (f) Total |
| 1 | Gifts, grants, contributions, and | | | | | | |
| | membership fees received. (Do not | | | | | | |
| | include any "unusual grants.") | | | | | | |
| 2 | Tax revenues levied for the organ- | | | | | | |
| | ization's benefit and either paid to | | | | | | |
| | or expended on its behalf | | | | | | |
| 3 | The value of services or facilities | | | | | | |
| | furnished by a governmental unit to | | | | | | |
| | the organization without charge | | | | | | |
| 4 | Total. Add lines 1 through 3 | | | | | | |
| 5 | The portion of total contributions | | | | | | |
| | by each person (other than a | | | | | | |
| | governmental unit or publicly | | | | | | |
| | supported organization) included | | | | | | |
| | on line 1 that exceeds 2% of the | | | | | | |
| | amount shown on line 11, | | | | | | |
| | column (f) | | | | | | |
| | Public support. Subtract line 5 from line 4. | | | | | | |
| See | ction B. Total Support | | - | | | | |
| Cale | ndar year (or fiscal year beginning in) 🕨 | (a) 2011 | (b) 2012 | (c) 2013 | (d) 2014 | (e) 2015 | (f) Total |
| 7 | Amounts from line 4 | | | | | | |
| 8 | Gross income from interest, | | | | | | |
| | dividends, payments received on | | | | | | |
| | securities loans, rents, royalties | | | | | | |
| | and income from similar sources | | | | | | |
| 9 | Net income from unrelated business | | | | | | |
| | activities, whether or not the | | | | | | |
| | business is regularly carried on | | | | | | |
| 10 | Other income. Do not include gain | | | | | | |
| | or loss from the sale of capital | | | | | | |
| | assets (Explain in Part VI.) | | | | | | |
| 11 | Total support. Add lines 7 through 10 | | | | | | |
| 12 | Gross receipts from related activities | , etc. (see instructi | ons) | • | • | 12 | |
| 13 | First five years. If the Form 990 is fo | r the organization' | s first, second, thi | rd, fourth, or fifth t | tax year as a section | on 501(c)(3) | |
| | organization, check this box and stop | | | | | | |
| See | ction C. Computation of Publ | ic Support Pe | rcentage | | | | |
| 14 | Public support percentage for 2015 (| line 6, column (f) d | ivided by line 11, | column (f)) | | 14 | % |
| 15 | Public support percentage from 2014 | 1 Schedule A, Part | II, line 14 | | | 15 | % |
| 16 a | 33 1/3% support test - 2015. If the o | organization did no | ot check the box o | on line 13, and line | e 14 is 33 1/3% or | more, check this | box and |
| | stop here. The organization qualifies | | | | | | |
| b | 33 1/3% support test - 2014. If the o | organization did no | ot check a box on | line 13 or 16a, and | d line 15 is 33 1/39 | % or more, checl | k this box |
| | and stop here. The organization qua | lifies as a publicly : | supported organiz | zation | | | ► |
| 17a | 10% -facts-and-circumstances tes | t - 2015. If the org | anization did not | check a box on lin | ne 13, 16a, or 16b, | and line 14 is 10 | 0% or more, |
| | and if the organization meets the "fac | cts-and-circumstan | ices" test, check t | this box and stop | here. Explain in Pa | art VI how the org | ganization |
| | meets the "facts-and-circumstances" | test. The organiza | ation qualifies as a | upublicly supporte | ed organization | | |
| b | 10% -facts-and-circumstances tes | t - 2014. If the orc | anization did not | check a box on lin | ne 13, 16a, 16b, or | 17a, and line 15 | is 10% or |
| | more, and if the organization meets the | he "facts-and-circu | imstances" test, o | heck this box and | stop here. Explai | n in Part VI how | the _ |
| | organization meets the "facts-and-cire | cumstances" test. | The organization | qualifies as a publ | licly supported org | anization | |
| 18 | Private foundation. If the organization | on did not check a | box on line 13, 16 | 6a, 16b, 17a, or 17 | b, check this box | and see instruct | ions 🕨 🗌 |
| | | | | | 0.1 | adula A (Eauna O | 00 or 000 EZ) 2015 |

Schedule A (Form 990 or 990-EZ) 2015

Schedule A (Form 990 or 990-EZ) 2015 CORONADO SCHOOLS FOUNDATION

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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

| Sec | ction A. Public Support | | | | | | |
|-------------|--|----------------------|-----------------------|------------------------|---------------------|---------------------|-----------------|
| Cale | ndar year (or fiscal year beginning in) 🕨 | (a) 2011 | (b) 2012 | (c) 2013 | (d) 2014 | (e) 2015 | (f) Total |
| 1 | Gifts, grants, contributions, and | | | | | | |
| | membership fees received. (Do not | | | | | | |
| | include any "unusual grants.") | 805,860. | 509,797. | 482,850. | 584,698. | 520,873. | 2,904,078. |
| 2 | Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | | | | | 56,233. | 56,233. |
| 3 | Gross receipts from activities that | | | | | | |
| - | are not an unrelated trade or bus- | | | | | | |
| | iness under section 513 | | | | | | |
| 4 | Tax revenues levied for the organ- | | | | | | |
| | ization's benefit and either paid to | | | | | | |
| | or expended on its behalf | | | | | | |
| 5 | The value of services or facilities | | | | | | |
| | furnished by a governmental unit to | | | | | | |
| | the organization without charge | | | | | | |
| 6 | Total. Add lines 1 through 5 | 805,860. | 509,797. | 482,850. | 584,698. | 577,106. | 2,960,311. |
| | Amounts included on lines 1, 2, and | | - | - | - | - | |
| | 3 received from disqualified persons | 19,407. | 24,525. | 40,786. | 39,853. | 45,279. | 169,850. |
| 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 | | | | | | 0. |
| | amount on line 13 for the year | 19,407. | 24,525. | 40,786. | 39,853. | 45,279. | 169,850. |
| | Public support. (Subtract line 7c from line 6.) | 1371071 | 21/5251 | 10,7000 | 33,0331 | 1372731 | 2,790,461. |
| | ction B. Total Support | | | | | | 2,720,202. |
| | ndar year (or fiscal year beginning in) 🕨 | (a) 2011 | (b) 2012 | (c) 2013 | (d) 2014 | (e) 2015 | (f) Total |
| | Amounts from line 6 | 805,860. | 509,797. | 482,850. | 584,698. | 577,106. | 2,960,311. |
| | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 135,851. | 108,374. | 144,974. | 146,623. | 136,224. | 672,046. |
| b | Unrelated business taxable income | | | 7 - | | / | |
| | (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| | Add lines 10a and 10b | 135,851. | 108,374. | 144,974. | 146,623. | 136,224. | 672,046. |
| 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 VI.) | | | | | | |
| 13 | Total support. (Add lines 9, 10c, 11, and 12.) | 941,711. | 618,171. | 627,824. | 731,321. | 713,330. | 3,632,357. |
| 14 | First five years. If the Form 990 is for | r the organization's | s first, second, thir | d, fourth, or fifth ta | ix year as a sectio | n 501(c)(3) organiz | ation, |
| | | | | | | | |
| | ction C. Computation of Publ | | | | | | |
| 15 | Public support percentage for 2015 (| ine 8, column (f) di | vided by line 13, c | olumn (f)) | | 15 | 76.82 % |
| | Public support percentage from 2014 | | | | | 16 | 75.72 % |
| | ction D. Computation of Investion | | | | | | 10 50 |
| 17 | Investment income percentage for 20 | 15 (line 10c, colun | nn (f) divided by lir | ie 13, column (f)) | | 17 | 18.50 % |
| | Investment income percentage from | | | | | 18 | 22.75 % |
| 19 a | 33 1/3% support tests - 2015. If the | | | | | | |
| | more than 33 1/3%, check this box a | | | | | | |
| b | 33 1/3% support tests - 2014. If the | | | | | | |
| | line 18 is not more than 33 1/3%, che | | | | | | |
| | Private foundation. If the organization | n did not check a | box on line 14, 19 | a, or 19b, check th | | | |
| 53202 | 23 09-23-15 | | | 15 | Sche | edule A (Form 990 | or 990-EZ) 2015 |

Schedule A (Form 990 or 990-EZ) 2015 CORONADO SCHOOLS FOUNDATION

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes

No

Part IV Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If* "Yes," *answer* (*b*) *and* (*c*) *below.*
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- **c** Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," *and if you checked 11a or 11b in Part I, answer (b) and (c) below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in Part VI.*
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990 or 990-EZ).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "*Yes*," *provide detail in* **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in Part VI.*
- **c** Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If* "Yes," *provide detail in Part VI.*
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer 10b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

532024 09-23-15

Schedule A (Form 990 or 990-EZ) 2015

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Schedule A (Form 990 or 990-EZ) 2015 CORONADO SCHOOLS FOUNDATION Part IV Supporting Organizations (continued)

| | | | Vee | Na |
|-------|---|-----------|--------|------|
| | | | Yes | No |
| 11 | Has the organization accepted a gift or contribution from any of the following persons? | | | |
| а | A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) | | | |
| | below, the governing body of a supported organization? | 11a | | |
| | A family member of a person described in (a) above? | 11b | | |
| | A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. | 11c | | |
| Sec | tion B. Type I Supporting Organizations | | | |
| | | | Yes | No |
| 1 | Did the directors, trustees, or membership of one or more supported organizations have the power to | | | |
| | regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the | | | |
| | tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or | | | |
| | controlled the organization's activities. If the organization had more than one supported organization, | | | |
| | describe how the powers to appoint and/or remove directors or trustees were allocated among the supported | | | |
| | organizations and what conditions or restrictions, if any, applied to such powers during the tax year. | 1 | | |
| 2 | Did the organization operate for the benefit of any supported organization other than the supported | | | |
| | organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in | | | |
| | Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, | | | |
| | supervised, or controlled the supporting organization. | 2 | | |
| Sec | tion C. Type II Supporting Organizations | | | |
| | | | Yes | No |
| 1 | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors | | | |
| | or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control | | | |
| | or management of the supporting organization was vested in the same persons that controlled or managed | | | |
| | the supported organization(s). | 1 | | |
| Sec | tion D. All Type III Supporting Organizations | | | |
| | | | Yes | No |
| 1 | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the | | | |
| | organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax | | | |
| | year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the | | | |
| | organization's governing documents in effect on the date of notification, to the extent not previously provided? | 1 | | |
| 2 | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported | | | |
| | organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how | | | |
| | the organization maintained a close and continuous working relationship with the supported organization(s). | 2 | | |
| 3 | By reason of the relationship described in (2), did the organization's supported organizations have a | | | |
| | significant voice in the organization's investment policies and in directing the use of the organization's | | | |
| | income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's | | | |
| | supported organizations played in this regard. | 3 | | |
| Sec | tion E. Type III Functionally-Integrated Supporting Organizations | | | |
| 1 | Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions): | | | |
| а | The organization satisfied the Activities Test. Complete line 2 below. | | | |
| b | The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i> | | | |
| С | The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see insi | ructions |). | |
| 2 | Activities Test. Answer (a) and (b) below. | | Yes | No |
| а | Did substantially all of the organization's activities during the tax year directly further the exempt purposes of | | | |
| | the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify | | | |
| | those supported organizations and explain how these activities directly furthered their exempt purposes, | | | |
| | how the organization was responsive to those supported organizations, and how the organization determined | | | |
| | that these activities constituted substantially all of its activities. | 2a | | |
| b | Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more | | | |
| | of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the | | | |
| | reasons for the organization's position that its supported organization(s) would have engaged in these | | | |
| | activities but for the organization's involvement. | 2b | | |
| 3 | Parent of Supported Organizations. Answer (a) and (b) below. | | | |
| а | Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or | | | |
| | trustees of each of the supported organizations? Provide details in <i>Part VI</i> . | 3a | | |
| b | Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each | | | |
| | of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard. | 3b | | |
| 53202 | 5 09-23-15 Schedule A (Form 9 | /90 or 99 | 90-EZ) | 2015 |
| | 17 | | | |

Schedule A (Form 990 or 990-EZ) 2015 CORONADO SCHOOLS FOUNDATION

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

| roduction or ervation, or me (see instructions) n line 4) ssets (see : of year): | 1 2 3 4 5 6 7 8 | (A) Prior Year | (B) Current Year (optional) |
|---|--|--|--|
| roduction or ervation, or me (see instructions) n line 4) ssets (see : of year): | 3 4 5 6 7 8 | (A) Prior Year | |
| roduction or ervation, or me (see instructions) n line 4) ssets (see of year): | 4 5 7 8 | (A) Prior Year | |
| roduction or ervation, or me (see instructions) n line 4) ssets (see : of year): | 5 6 7 8 | (A) Prior Year | |
| roduction or ervation, or me (see instructions) n line 4) ssets (see c of year): | 6 7 8 | (A) Prior Year | |
| ervation, or me (see instructions) n line 4) ssets (see of year): | 7 8 | (A) Prior Year | |
| me (see instructions) n line 4) ssets (see of year): 1 1 1 | 7 8 | (A) Prior Year | |
| n line 4) ssets (see of year): 1 1 | 7 8 | (A) Prior Year | |
| n line 4) ssets (see of year): 1 1 | 8 | (A) Prior Year | |
| ssets (see : of year): 1 | | (A) Prior Year | |
| of year): | 1a | (A) Prior Year | |
| of year): | 1a | | 1 |
| 1 | 1a | | |
| 1 | 1a | | |
| | iu – | | |
| Γ. | 1b | | |
| 1 | 1c | | |
| 1 | 1d | | |
| | | | |
| | | | |
| use assets | 2 | | |
| | 3 | | |
| line 3 (for greater amount, | | | |
| | 4 | | |
| from line 3) | 5 | | |
| | 6 | | |
| | 7 | | |
| | 8 | | |
| | | | Current Year |
| ine 8, Column A) | 1 | | |
| | 2 | | |
| 3, line 8, Column A) | 3 | | |
| | 4 | | |
| | 5 | | |
| nless subject to | | | |
| | 6 | | |
| li | line 8, Column A) B, line 8, Column A) unless subject to | 6 7 8 line 8, Column A) 1 2 B, line 8, Column A) 3 4 5 unless subject to 6 | 6 7 8 line 8, Column A) 1 2 B, line 8, Column A) 3 4 5 unless subject to |

instructions).

Schedule A (Form 990 or 990-EZ) 2015

532026 09-23-15

Schedule A (Form 990 or 990 EZ) 2015 CORONADO SCHOOLS FOUNDATION

| Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) | | | | | | |
|--|--|-------------------------------|--|---|--|--|
| Secti | ion D - Distributions | | | Current Year | | |
| 1 | Amounts paid to supported organizations to accomplish exe | | | | | |
| 2 | Amounts paid to perform activity that directly furthers exemp | ot purposes of supported | | | | |
| | organizations, in excess of income from activity | | | | | |
| 3 | Administrative expenses paid to accomplish exempt purpose | es of supported organizatior | S | | | |
| 4 | Amounts paid to acquire exempt-use assets | | | | | |
| 5 | Qualified set-aside amounts (prior IRS approval required) | | | | | |
| 6 | Other distributions (describe in Part VI). See instructions. | | | | | |
| 7 | Total annual distributions. Add lines 1 through 6. | | | | | |
| 8 | Distributions to attentive supported organizations to which the | he organization is responsive | 9 | | | |
| | (provide details in Part VI). See instructions. | | | | | |
| 9 | Distributable amount for 2015 from Section C, line 6 | | | | | |
| 10 | Line 8 amount divided by Line 9 amount | i | | | | |
| Secti | ion E - Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributions Pre-2015 | (iii) Distributable Amount for 2015 | | |
| 1 | Distributable amount for 2015 from Section C, line 6 | | | | | |
| 2 | Underdistributions, if any, for years prior to 2015 | | | | | |
| | (reasonable cause required-see instructions) | | | | | |
| 3 | Excess distributions carryover, if any, to 2015: | | | | | |
| а | | | | | | |
| b | | | | | | |
| с | | | | | | |
| d | From 2013 | | | | | |
| e | From 2014 | | | | | |
| f | Total of lines 3a through e | | | | | |
| g | Applied to underdistributions of prior years | | | | | |
| h | Applied to 2015 distributable amount | | | | | |
| i | Carryover from 2010 not applied (see instructions) | | | | | |
| j | Remainder. Subtract lines 3g, 3h, and 3i from 3f. | | | | | |
| 4 | Distributions for 2015 from Section D, | | | | | |
| | line 7: \$ | | | | | |
| - | Applied to underdistributions of prior years | | | | | |
| - | Applied to 2015 distributable amount | | | | | |
| | Remainder. Subtract lines 4a and 4b from 4. | | | | | |
| 5 | Remaining underdistributions for years prior to 2015, if | | | | | |
| | any. Subtract lines 3g and 4a from line 2 (if amount | | | | | |
| | greater than zero, see instructions). | | | | | |
| 6 | Remaining underdistributions for 2015. Subtract lines 3h | | | | | |
| | and 4b from line 1 (if amount greater than zero, see | | | | | |
| | instructions). | | | | | |
| 7 | Excess distributions carryover to 2016. Add lines 3j | | | | | |
| | and 4c. | | | | | |
| 8 | Breakdown of line 7: | | | | | |
| <u>a</u> | | | | | | |
| <u>b</u> | Eveness from 2012 | | | | | |
| | Excess from 2013 | | | | | |
| | Excess from 2014 | | | | | |
| e | Excess from 2015 | | | | | |

Schedule A (Form 990 or 990-EZ) 2015

532027 09-23-15

| | DO SCHOOLS FOUNDATION vide the explanations required by Part II, line 10; Part I | 94 – 2745484 Pa II, line 17a or 17b; Part III, line 12; |
|--|---|---|
| Part IV, Section A, lines 1, 2, 3b, 3c, 4b, line 1; Part IV, Section D, lines 2 and 3; F Section D, lines 5, 6, and 8; and Part V, 5 | 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Secti Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, I Section E, lines 2, 5, and 6. Also complete this part for | ion B, lines 1 and 2; Part IV, Section C ine 1; Part V, Section B, line 1e; Part V |
| (See instructions.) | | |
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| | | Schedule A (Form 990 or 990-EZ |

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

 Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990. OMB No. 1545-0047

2015

Employer identification number

| Schedule B (Form 990, 990-EZ, or 990-PF) |
|--|
| Department of the Treasury Internal Revenue Service |

Name of the organization

|--|

| Organization type (check or | ne): |
|-----------------------------|--|
| Filers of: | Section: |
| Form 990 or 990-EZ | X 501(c)(3) (enter number) organization |
| | 4947(a)(1) nonexempt charitable trust not treated as a private foundation |
| | 527 political organization |
| Form 990-PF | 501(c)(3) exempt private foundation |
| | 4947(a)(1) nonexempt charitable trust treated as a private foundation |
| | 501(c)(3) taxable private foundation |

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

General Rule

X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

Employer identification number

94-2745484

CORONADO SCHOOLS FOUNDATION

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) Name, address, and ZIP + 4 No. **Total contributions** Type of contribution 1 X Person Payroll 15,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** 2 X Person Payroll 25,580. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 3 X Person Payroll 14,791. Noncash (Complete Part II for noncash contributions.) (c) (d) (a) (b) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 4 Х Person Payroll 15,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** 5 X Person Payroll 83,078. Noncash (Complete Part II for noncash contributions.) (b) (c) (d) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 6 X Person Pavroll 60,000. Noncash \$ (Complete Part II for noncash contributions.) 523452 10-26-15

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

Employer identification number

94 - 2745484

CORONADO SCHOOLS FOUNDATION

| Part I | Contributors (see instructions). Use duplicate copies of Part I if additiona | al space is needed. | |
|---------------------------|--|----------------------------|---|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 7 | | \$ <u> 10,000.</u> | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 8 | | \$ <u>12,050.</u> | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 9 | | \$11,255. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$10,000. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ <u> </u> | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| <u>12</u> 523452 10-20 | | \$9,715. | Person X Payroll Noncash (Complete Part II for noncash contributions.) 990, 990-EZ, or 990-PF) (2015 |

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Page 2

Name of organization

Employer identification number

94 - 2745484

CORONADO SCHOOLS FOUNDATION

| Part I | Contributors (see instructions). Use duplicate copies of Part I if a | dditional space is needed. | |
|--------------|---|----------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$7,000. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 14 | | \$7,000. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 15 | | \$6,600. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 16 | | \$6,323. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$5,126. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 18 | | \$\$,063. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| 523452 10-26 | ³⁻¹⁵ 24 | | 990, 990-EZ, or 990-PF) (2015 |

Page 2

Name of organization

Employer identification number

94 - 2745484

CORONADO SCHOOLS FOUNDATION

| Part I | Contributors (see instructions). Use duplicate copies of Part I if a | dditional space is needed. | |
|--------------|---|----------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 19 | | \$5,000. | Person X Payroll Noncash omplete Part II for ncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 20 | | \$5,000. | Person X Payroll Noncash omplete Part II for ncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$5,000. | Person X Payroll Noncash omplete Part II for ncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 22 | | \$5,000. | Person X Payroll Noncash O mplete Part II for ncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 23 | | \$5,000. | Person X Payroll Noncash omplete Part II for ncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$(Cc | Person Payroll Noncash omplete Part II for ncash contributions.) |
| 523452 10-26 | 6-15 | Schedule B (Form 990, | 990-EZ, or 990-PF) (2015) |

Employer identification number

94 - 2745484

CORONADO SCHOOLS FOUNDATION

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
|------------------------------|--|--|----------------------|
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |

| Name of orga | nization | | Employer identification number |
|---------------------------|---|---|---|
| CORONA | DO SCHOOLS FOUNDATION | | 94-2745484 |
| Part III | Exclusively religious, charitable, etc., contributor | ibutions to organizations described | in section 501(c)(7), (8), or (10) that total more than \$1,000 for ving line entry. For organizations |
| | completing Part III, enter the total of exclusively religious | , charitable, etc., contributions of \$1,000 or | less for the year. (Enter this info. once.) |
| (a) No. | Use duplicate copies of Part III if addition | al space is needed. | |
| from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | | |
| | | | |
| | | (e) Transfer of gift | |
| - | Transferee's name, address, ar | ud ZIP + 4 | Relationship of transferor to transferee |
| | | | |
| (a) No. from | | | |
| from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | | |
| | | | |
| | | (e) Transfer of gift | t |
| - | Transferee's name, address, ar | ud ZIP + 4 | Relationship of transferor to transferee |
| | | [| |
| (a) No | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | | |
| | | | |
| | | (e) Transfer of gift | t |
| - | Transferee's name, address, ar | Id ZIP + 4 | Relationship of transferor to transferee |
| | | | |
| | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | | |
| | | | |
| | | (e) Transfer of gift | t i i i i i i i i i i i i i i i i i i i |
| - | Transferee's name, address, ar | d ZIP + 4 | Relationship of transferor to transferee |
| | | | |
| | | | |
| 523454 10-26- | 15 | 0.5 | Schedule B (Form 990, 990-EZ, or 990-PF) (2015) |

| SCHEDULE [|) |
|------------|---|
|------------|---|

(Form 990)

532051 11-02-15

Supplemental Financial Statements ► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.



| Name of the organization Employer identification number 94 - 27 45 46 4 Part II Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 980, Part IV, line 8. Employer identification answered "Yes" on Form 980, Part IV, line 8. 1 Total number at end of year (a) Donor advised funds (b) Funds and other accounts 2 Aggregate value of contributions to (during year) (a) Donor advised funds (b) Funds and other accounts 3 Aggregate value of contributions to (during year) (a) Donor advised funds (b) Funds and other accounts 4 Aggregate value of control during year) (a) Donor advised funds (b) Funds and other accounts 5 Did the organization inform all grantes, donors, and doner advisors in writing that grant funds can be used only for charitable private barneff? Yes No 6 Did the organization inform all grantes, donors, and doner advisors in writing that grant funds can be used only for charitable private barneff? Yes No 7 Pareosevotion Cassements. Complete if the organization inform all grantes, donors, and doner advisors in writing that grant funds can be used only for charitable private barneff? Yes No 7 Pareosevotion Cassements. Complete if the organiz | | ment of the Treasury ► Attach to Form 990. I Revenue Service ► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/ | form990. | Inspection |
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| Part II Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization asserted 'Yes' on Form 980, Part IV, line 6. 1 Total number at ond of year (a) Donor advised funds (b) Funds and other accounts 1 Aggregate value of contributions to (during year) (a) Donor advised funds (b) Funds and other accounts 2 Aggregate value of contributions to (during year) (a) Donor advised funds (b) Funds and other accounts 3 Aggregate value of contributions to (during year) (a) Donor advised funds (b) Funds and other accounts 4 Aggregate value of contributions to (during year) (c) Donor advised funds (c) Funds and other accounts 5 Did the organization inform all grantese, donors, and donor advisors in writing that grant funds can be used only or the rubus purposes and nor to the bonefit of the donor of donor advisor, or any other purpose conforming impermentation and the organization inform all grantese, donors, and donor advisors in writing that grant funds can be used only of conservation assements. (b) Preservation of a historically important land area Protection of natural habitat (c) recreation or education (c) Preservation of a historically important land area 1 Preservation of a conservation easements (c) advised funds (c) (c) advised funds (c) (c | | | | identification number |
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| and section 170(h)(4)(B)(ii)? Yes No 9 In Part XIII, 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" on 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 XIII, 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, in Part XIII, 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) Revenue included in Form 990, Part X \$ 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included in Form 990, Part X b Assets included in For | | | | 0, |
| 9 In Part XIII, 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" on 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 XIII, 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, in Part XIII, 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) Revenue included on Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part X \$ b Assets included in Form 990, Part X \$ | 8 | Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(l | 3)(i) | |
| 9 In Part XIII, 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" on 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 XIII, 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, in Part XIII, 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) Revenue included on Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part X \$ b Assets included in Form 990, Part X \$ | | and section 170(h)(4)(B)(ii)? | | Yes No |
| conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on 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 XIII, 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) Revenue included on Form 990, Part VIII, line 1 \$ (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part X \$ | 9 | | | lance sheet, and |
| Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on 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 XIII, 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, in Part XIII, 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) Revenue included on Form 990, Part VIII, line 1 \$ 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part X \$ Assets included in Form 990, Part X b Assets included in Form 990, Part X \$ | | include, if applicable, the text of the footnote to the organization's financial statements that describes the or | ganization's a | accounting for |
| Complete if the organization answered "Yes" on 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 XIII, 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, in Part XIII, 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) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part X b Assets included in Form 990, Part X b Assets included in Form 990, Part X c S Assets included in Form 990, Part X c S Assets included in Form 990, Part X c S Assets included in Form 990, Part X c S Assets included in Form 990, Part X c S Assets included in Form 990, Part X c S Assets included in Form 990, Part X c S Assets included in Form 990, Part X c S Assets included in Form 990, Part X c S Assets included in Form 990, Part X c S Assets included in Form 990, Part X c S Assets included in Form 990, Part X c S Asse | | | | |
| 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 XIII, 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) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part XIII, line 1 b Assets included in Form 990, Part X | Par | | Similar As | ssets. |
| historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, 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) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part X b Assets included in Form 990, Part X | | | | |
| 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) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part X b Assets included in Form 990, Part X | 1a | | | |
| 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) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part X b Assets included in Form 990, Part X c S | | | public servic | e, provide, in Part XIII, |
| 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) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part X b Assets included in Form 990, Part X c S | | | | |
| relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 b \$ b 4ssets included in Form 990, Part X b Assets included in Form 990, Part X | b | - | | |
| (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X b \$ | | | ervice, provid | e the following amounts |
| (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 Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X \$ | | | | |
| 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 | | | | |
| the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X | ~ | | | |
| a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X \$ | 2 | | provide | |
| b Assets included in Form 990, Part X \$ | | | • | |
| | | | | |
| | | | | ulo D (Earm 000) 0045 |

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| Sche | | O SCHOOLS I | | | | 94-27 | | | age 2 |
|------------|---|----------------------------|---------------------------|-----------------------|----------------------------|--------------|-------------------|--------------------|--------------|
| Par | t III Organizations Maintaining C | ollections of A | t, Historical Tr | easures, or Ot | her Simila | ar Asse | ts (contir | nued) | |
| 3 | Using the organization's acquisition, accessi | on, and other record | s, check any of the | following that are a | significant u | use of its o | collectio | n item | IS |
| | (check all that apply): | | ┌┐. | | | | | | |
| a | Public exhibition | a | | hange programs | | | | | |
| b | Scholarly research | e | Other | | | | | | |
| c | Preservation for future generations | | | | | | | | |
| 4 | Provide a description of the organization's co | | | | | se in Pari | t XIII. | | |
| 5 | During the year, did the organization solicit o | | | | | | | | ٦ |
| Da | to be sold to raise funds rather than to be ma t IV Escrow and Custodial Arran | | | | | | Yes | | No |
| Fai | t IV Escrow and Custodial Arran reported an amount on Form 990, Pa | | ete ir the organizatio | on answered "Yes" | on Form 990 | , Part IV, | line 9, or | | |
| 1 a | Is the organization an agent, trustee, custod | ian or other intermed | liary for contribution | ns or other assets n | ot included | | | | |
| | on Form 990, Part X? | | - | | | | Yes | | No |
| b | If "Yes," explain the arrangement in Part XIII | | | | | | | | |
| | | | | | | | Amount | t | |
| с | Beginning balance | | | | 1c | | | | |
| | Additions during the year | | | | | | | | |
| | Distributions during the year | | | | | | | | |
| f | Ending balance | | | | | | | | |
| 2a | Did the organization include an amount on F | orm 990, Part X, line | 21, for escrow or c | ustodial account lia | bility? | | Yes | | No |
| b | If "Yes," explain the arrangement in Part XIII. | | | | | | | | |
| Par | t V Endowment Funds. Complete i | f the organization an | swered "Yes" on Fe | orm 990, Part IV, lin | e 10. | | | | |
| | | (a) Current year | (b) Prior year | (c) Two years back | ., , | ears back | . , | , | |
| 1a | Beginning of year balance | 1,281,846. | 1,292,353. | | · · · | 65,233. | 1 | ,171, | 927. |
| b | Contributions | | | 279,644 | _ | | | | |
| | Net investment earnings, gains, and losses | 7,375. | 46,865. | 124,307 | • - | 30,389. | | 4, | 306. |
| d | Grants or scholarships | 51,202. | | | | | | | |
| е | Other expenditures for facilities | | | | | | | | |
| | and programs | | 57,372. | 145,268 | . 1 | 00,174. | | 10, | ,000. |
| f | Administrative expenses | | | | | 1,000. | | 1, | ,000. |
| g | End of year balance | 1,238,019. | 1,281,846. | | . 1,0 | 33,670. | 1 | ,165, | 233. |
| 2 | Provide the estimated percentage of the cur | | e (line 1g, column (| a)) held as: | | | | | |
| | Board designated or quasi-endowment | .00 | _% | | | | | | |
| | Permanent endowment 98.00 | % | | | | | | | |
| С | · · · · · · · · · · · · · · · · · · · | <u>2.00</u> % | | | | | | | |
| | The percentages on lines 2a, 2b, and 2c sho | uld equal 100%. | | | | | | | |
| 3a | Are there endowment funds not in the posse | ession of the organization | ation that are held a | and administered fo | r the organiz | ation | F | | |
| | by: | | | | | | | Yes | No |
| | (i) unrelated organizations | | | | | | 3a(i) | | X |
| | (ii) related organizations | | | | | | 3a(ii) | | X |
| b | If "Yes" on line 3a(ii), are the related organization | | | • | | | 3b | | |
| 4 | Describe in Part XIII the intended uses of the | | wment funds. | | | | | | |
| Par | t VI Land, Buildings, and Equipm | | | | | | | | |
| | Complete if the organization answere | | · · · · · | | | . | () | | |
| | Description of property | (a) Cost or o | | • • | Accumulate lepreciation | d | (d) Bool | k valu | е |
| | Land | basis (investn | Dasis | (other) c | epreciation | | | | |
| | Land | | | | | | | | |
| | Buildings | | | | | -+ | | | |
| | Leasehold improvements | | | | | <u> </u> | | | |
| | Equipment | | 1 | 4,915. | 10,52 | 27 | | <u>4</u> 2 | 88. |
| | Other | | | | т о , J2 | <u> </u> | | 4,3 4,3 | |
| Tota | . Add lines 1a through 1e. (Column (d) must e | guai Γυπτι 990, Ράπ | л, сошти (<i>в),</i> иле | i uc.) | <u></u> | Schedule | | - | |
| | | | | | | Jeneuule | | 1 990) | 2013 |

| Schedule D (Form 990) 2015 CORONADO SCH | OOLS FOUND | ATION | 94-27 | 45484 Page 3 |
|---|---------------------------|--------------------------------|--------------------------|----------------------|
| Part VII Investments - Other Securities. | | | | |
| Complete if the organization answered "Yes" o | n Form 990, Part IV, li | ne 11b. See Form 990, Par | t X, line 12. | |
| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valua | ation: Cost or end-of-ye | ar market value |
| (1) Financial derivatives | | | | |
| (2) Closely-held equity interests | | | | |
| (3) Other | | | | |
| (A) CERTIFICATE OF DEPOSIT | 25,080 | | R MARKET VA | |
| (B) VARIOUS INVESTMENTS | 5,824,082 | 2. END-OF-YEA | R MARKET VA | LUE |
| (C) | | | | |
| (D) | | | | |
| (E) | | | | |
| (F) | | | | |
| (G) | | | | |
| (H) | | - | | |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) | 5,849,162 | 2. | | |
| Part VIII Investments - Program Related. | | | | |
| Complete if the organization answered "Yes" o | | | | |
| (a) Description of investment | (b) Book value | (c) Method of valua | ation: Cost or end-of-ye | ar market value |
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| (5) | | | | |
| (6) | | | | |
| (7) | | | | |
| (8) | | | | |
| (9) | | | | |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) | | | | |
| Part IX Other Assets. | | | | |
| Complete if the organization answered "Yes" o | | ne 11d. See Form 990, Par | | (b) Doold yelue |
| | escription | | | b) Book value |
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| (5) | | | | |
| (6) | | | | |
| (7) | | | | |
| (8) | | | | |
| (9) Total (Column (b) must could form 000, Port X, col. (P) line | 15) | | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. | 15.) | | ▶ | |
| Complete if the organization answered "Yes" o | n Form 000 Part IV li | no 110 or 11f Soo Form 00 | 0 Part V lina 25 | |
| (a) Describetions of Role 10th a | 111 0illi 990, Fait IV, I | (b) Book value | 0, Fait A, iii e 23. | |
| | | | | |
| (1) Federal income taxes (2) UNEARNED REVENUE | | 5,500. | | |
| | | 5,500 | | |
| (3) | | | | |
| (4) | | | | |
| (5) | | | | |
| (6) | | | | |
| (7) | | | | |
| (8) | | | | |
| (9) Total (Column (b) must actual Form 000, Part V, col. (B) line | 25.) | 5,500. | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line | | | alal akakamanta ting t | |
| 2. Liability for uncertain tax positions. In Part XIII, provide t | | | | |
| organization's liability for uncertain tax positions under F | -IN 48 (ASC 740). Che | eck here if the text of the fo | otnote has been provid | aed in Part XIII 🕰 |

Schedule D (Form 990) 2015

| Sche | dule D (Form 990) 2015 CORONADO SCHOOLS FOUNDATIO | N | | 94- | 2745484 | Page 4 |
|------|---|----------|-----------------|--------|---------|---------------|
| Par | t XI Reconciliation of Revenue per Audited Financial Stateme | ents Wit | h Revenue per R | leturi | า. | |
| | Complete if the organization answered "Yes" on Form 990, Part IV, line 12a | • | | | | |
| 1 | Total revenue, gains, and other support per audited financial statements | | | 1 | 1,058 | ,820. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | | | | |
| а | Net unrealized gains (losses) on investments | . 2a | -131,994. | | | |
| b | Donated services and use of facilities | . 2b | 18,000. | | | |
| с | Recoveries of prior year grants | . 2c | | | | |
| d | Other (Describe in Part XIII.) | 2d | 125,963. | | | |
| е | Add lines 2a through 2d | | | 2e | | <u>,969.</u> |
| 3 | Subtract line 2e from line 1 | | | 3 | 1,046 | ,851. |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | | | | |
| а | Investment expenses not included on Form 990, Part VIII, line 7b | . 4a | | | | |
| b | Other (Describe in Part XIII.) | 4b | | | | |
| С | Add lines 4a and 4b | | | 4c | | 0. |
| 5 | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | | | 5 | 1,046 | ,851. |
| Pa | rt XII Reconciliation of Expenses per Audited Financial Statem | | th Expenses per | Retu | ırn. | |
| | Complete if the organization answered "Yes" on Form 990, Part IV, line 12a | | | | 1 000 | 2017 |
| 1 | Total expenses and losses per audited financial statements | | | 1 | 1,279 | ,387. |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | 10 000 | | | |
| а | Donated services and use of facilities | . 2a | 18,000. | | | |
| b | Prior year adjustments | | | | | |
| С | Other losses | | 111 011 | | | |
| d | Other (Describe in Part XIII.) | - | 144,244. | | 1.00 | |
| е | Add lines 2a through 2d | | | 2e | | ,244. |
| 3 | Subtract line 2e from line 1 | | | 3 | 1,117 | ,143. |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | 10 001 | | | |
| а | Investment expenses not included on Form 990, Part VIII, line 7b | | 18,281. | | | |
| b | Other (Describe in Part XIII.) | 4b | | | | 0.04 |
| с | Add lines 4a and 4b | | | 4c | | ,281. |
| 5 | Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 18.</i>) | | | 5 | 1,135 | ,424. |
| Pa | rt XIII Supplemental Information. | | | | | |

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4:

| THE POLICY MANUAL OF THE FOUNDATION PRESCRIBES THAT AN ENDOWMENT FUND |
|---|
| SHALL BE MAINTAINED FOR THE PURPOSE OF ENSURING THE FOUNDATION'S CONTINUED |
| FINANCIAL VIABILITY. THE PRIMARY GOAL FOR THE MANAGEMENT OF THE ENDOWMENT |
| FUND IS TO PRESERVE THE REAL (I.E., INFLATION-ADJUSTED) PURCHASING POWER |
| OF PRINCIPAL AND INCOME AFTER ACCOUNTING FOR ENDOWMENT SPENDING, INFLATION |
| AND COSTS OF INVESTMENT MANAGEMENT. THE FINANCE COMMITTEE SHALL OVERSEE |
| THE ENDOWMENT FUND IN SUCH A MANNER AS TO, FIRST, MINIMIZE RISK OF LOSS OF |
| THE ENDOWMENT FUND'S PRINCIPAL, AND SECOND, ACHIEVE THE MAXIMUM RETURN |
| AVAILABLE CONSISTENT WITH PRUDENT INVESTMENT STANDARDS. THE PORTFOLIO |
| MANAGER SHALL BE AUTHORIZED TO INVEST THE ENDOWMENT FUND'S ASSETS AS SET |
| FORTH BY THE FOUNDATION'S APPROVED INVESTMENT POLICY. THE FOUNDATION HAS |
| 532054 09-21-15 Schedule D (Form 990) 2015 31 |
| 3561115 757767 CORO97121618 2015.04020 CORONADO SCHOOLS FOUNDATION CORO9721 |

COMMITTED TO A RETURN OF AT LEAST 4% OF ITS VALUE ANNUALLY TO THE CORONADO UNIFIED SCHOOL DISTRICT, PER ITS INVESTMENT POLICY.

PART X, LINE 2:

THE FOUNDATION FOLLOWS ACCOUNTING STANDARDS WHICH CLARIFY THE ACCOUNTING UNCERTAINTY IN INCOME TAXES RECOGNIZED IN THE FINANCIAL STATEMENTS AND PRESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE FOR THE FINANCIAL STATEMENTS AND RECOGNITION AND MEASUREMENT OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN THE TAX RETURN. IT ALSO PROVIDES GUIDANCE ON DERECOGNITION AND MEASUREMENT OF A TAX POSITION TAKEN OR TO BE TAKEN IN A TAX RETURN. AS OF JUNE 30, 2016, THE FOUNDATION HAS NOT ACCRUED INTEREST OF PENALTIES RELATED TO UNCERTAIN TAX POSITIONS.

| PART XI, LINE 2D - OTHER ADJUSTMENTS: | |
|---|----------|
| SPECIAL EVENT DIRECT BENEFIT COSTS TO DONOR | -37,041. |
| SPECIAL EVENT EXPENSES | 181,285. |
| INVESTMENT EXPENSES | -18,281. |
| TOTAL TO SCHEDULE D, PART XI, LINE 2D | 125,963. |
| | |
| PART XII, LINE 2D - OTHER ADJUSTMENTS: | |
| SPECIAL EVENT EXPENSE | 181,285. |
| SPECIAL EVENT DIRECT BENEFIT COSTS TO DONOR | -37,041. |
| TOTAL TO SCHEDULE D, PART XII, LINE 2D | 144,244. |

Schedule D (Form 990) 2015

532055 09-21-15

| (Form 990 or 990-EZ) Department of the Treasury | omplete if the o | ental Information Regardin e organization answered "Yes" or prganization entered more than Attach to Form 9 about Schedule G (Form 990 or 990-1 | on Form 9 \$15,000 990 or Fo | 990, P on Fo rm 99 | art IV, lines 17, 18, rm 990-EZ, line 6a. 0-EZ. | or 19 | 9, or if the form990. | OMB No. 1545-0047 2015 Open to Public Inspection |
|---|--|---|---|---|--|---------|---|--|
| • | CORONAD | O SCHOOLS FOUNDAT | FION | | | | 94-274 | |
| Part I Fundraising required to com | | Complete if the organization ans t. | wered "Y | es" o | n Form 990, Part IV, | line 1 | 17. Form 990- | EZ filers are not |
| a Mail solicitations b Internet and email c Phone solicitation d In-person solicita 2 a Did the organization have key employees listed in | ail solicitations ns ations ave a written c n Form 990, P ihest paid indi | f ☐ Solic g ☐ Spec or oral agreement with any individ 'art VII) or entity in connection with ividuals or entities (fundraisers) po | itation of itation of cial fundra ual (inclue h profess | non-g gover aising ding o ional f | overnment grants nment grants events fficers, directors, true undraising services? | stees | Y | |
| (i) Name and address of or entity (fundraise | | (ii) Activity | (iii) fundr have c or cor contrib | trol of | (iv) Gross receipts from activity | tò (o | Amount paid or retained by fundraiser ted in col. (i) | |
| | | | Yes | No | | | | |
| | | | | | | | | |
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| | | | | | | | | |
| Total 3 List all states in which the or licensing. | he organizatio | on is registered or licensed to solid | cit contrib | b ution: | s or has been notified | d it is | exempt from | registration |
| | | | | | | | | |
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| | | | | | | | | |
| LHA For Paperwork Reduc | ction Act Noti | ice, see the Instructions for For | m 990 or | 990- | EZ. S | Sche | dule G (Form | 990 or 990-EZ) 2015 |

532081 09-14-15

33

Schedule G (Form 990 or 990 EZ) 2015 CORONADO SCHOOLS FOUNDATION

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000

| | | (a) Event #1 DINNER AUCTION | (b) Event #2 TELETHON | (c) Other events NONE | (d) Total events (add col. (a) through |
|--|--|---|--|--|--|
| | | (event type) | (event type) | (total number) | col. (c)) |
| 1 | Gross receipts | 388,669. | 203,347. | | 592,016 |
| 2 | Less: Contributions | 117,925. | | | 117,925 |
| 3 | Gross income (line 1 minus line 2) | 270,744. | 203,347. | | 474,091 |
| 4 | Cash prizes | | | | |
| 5 | Noncash prizes | 511. | | | 511 |
| 6 | Rent/facility costs | | | | |
| 7 | Food and beverages | 34,658. | 2,105. | | 36,763 |
| | Entertainment | 7,215. | | | 7,215 |
| 8 | | | | | 400 000 |
| 8 | | | 22,088. | | 136,796 |
| 9 10 11 | Other direct expenses Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from Gaming. Complete if the organization | 114,708. gh 9 in column (d) line 3, column (d) | | ► | 181,285 |
| 9 10 11 Part | Other direct expenses Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. | 114,708. gh 9 in column (d) line 3, column (d) | | ► | 181,285 292,806 |
| 9 10 11 Part | Other direct expenses Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. | 114,708. gh 9 in column (d) ine 3, column (d) answered "Yes" on Form (a) Bingo | n 990, Part IV, line 19, or r (b) Pull tabs/instant | eported more than | 181,285 292,806 |
| 9 10 11 Part | Other direct expenses Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes | 114,708. gh 9 in column (d) in answered "Yes" on Form (a) Bingo | n 990, Part IV, line 19, or r (b) Pull tabs/instant | eported more than | 181,285 292,806 |
| 9 10 11 Part | Other direct expenses Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes | 114,708. gh 9 in column (d) in answered "Yes" on Form (a) Bingo | n 990, Part IV, line 19, or r (b) Pull tabs/instant | eported more than | 136,796 181,285 292,806 (d) Total gaming (add col. (a) through col. (c |
| 9 10 11 Part 1 2 | Other direct expenses Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes Rent/facility costs | 114,708. gh 9 in column (d) in answered "Yes" on Form (a) Bingo | n 990, Part IV, line 19, or r (b) Pull tabs/instant | eported more than | 181,285 292,806 |
| 9 10 11 2 2 3 4 | Other direct expenses Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes | 114,708. gh 9 in column (d) in answered "Yes" on Form (a) Bingo | n 990, Part IV, line 19, or r (b) Pull tabs/instant | eported more than | 181,285 292,806 |
| 9 10 11 Part 2 3 4 5 6 | Other direct expenses | 114,708. gh 9 in column (d) line 3, column (d) answered "Yes" on Form (a) Bingo (a) Bingo | b) Pull tabs/instant bingo/progressive bingo | <pre>ceported more than (c) Other gaming (c) Yes% No</pre> | 181,285 292,806 |

b If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? **b** If "Yes," explain:

532082 09-14-15

Schedule G (Form 990 or 990-EZ) 2015

| Sch | edule G (Form 990 or 990-EZ) 2015 CORONADO SCHOOLS FOUNDATION 9 | 4-27 | 454 | 84 | Page 3 |
|------|--|-------------|---------|-------|---------------|
| 11 | Does the organization conduct gaming activities with nonmembers? | [| Y | 'es | No |
| 12 | Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? | - | | 'es | No No |
| 13 | Indicate the percentage of gaming activity conducted in: | L | • | 03 | |
| | a The organization's facility | · | 13a | | % |
| | An outside facility | | 13b | | % |
| | Enter the name and address of the person who prepares the organization's gaming/special events books and records | ····· | I | | |
| | Name | | | | |
| | Address | | | | |
| 15a | a Does the organization have a contract with a third party from whom the organization receives gaming revenue? | [| Y | 'es | No No |
| t | If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$ | t | | | |
| c | c) If "Yes," enter name and address of the third party: | | | | |
| | Name | | | | |
| | Address 🕨 | | | | |
| 16 | Gaming manager information: | | | | |
| | Name | | | | |
| | | | | | |
| | Gaming manager compensation > \$ | | | | |
| | Description of services provided | | | | |
| | | | | | |
| | Director/officer Employee Independent contractor | | | | |
| 17 | Mandatory distributions: | | | | |
| a | a Is the organization required under state law to make charitable distributions from the gaming proceeds to | г | | | |
| | retain the state gaming license? | L | Y | es | └── No |
| k | • Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in t | the | | | |
| | organization's own exempt activities during the tax year > \$ | | | | |
| Pa | Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Par 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions). | t III, line | es 9, 9 | b, 10 |)b, 15b, |
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| 5320 | 83 09-14-15 Schedule G | (Form § | 990 or | 990 | -EZ) 2015 |
| | 35 | | | | |

| | | Schedule G (Form 990 or 990-EZ) |
|--------------------|----|---------------------------------|
| 532084 04-01-15 | | |
| | 36 | |
| | | |

| SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service | GC Comp | Grants and Oth vernments, ar lete if the organizatio | nd Individual n answered "Yes" Attach to Form | s in the Uni on Form 990, Pa m 990. | ted States rt IV, line 21 or 22. | 10. | OMB No. 1545-0047 2015 Open to Public Inspection |
|--|------------|--|---|--|---|--|--|
| Name of the organization | | | | | | | Employer identification number |
| | | OUNDATION | | | | | 94-2745484 |
| Part I General Information on Grants a | | | | | | | |
| Does the organization maintain records criteria used to award the grants or assis Describe in Part IV the organization's pro- | stance? | | | | | | |
| Part II Grants and Other Assistance to | | | | | anization answered " | (es" on Form 990, Par | t IV. line 21. for any |
| recipient that received more than a | - | | | | | | , |
| 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 |
| CORONADO UNIFIED SCHOOL DISTRICT 201 6TH STREET | | | | | | | TO PROVIDE FUNDING FOR TECHNOLOGY RESOURCE TEACHER AND OTHER |
| CORONADO, CA 92118 | 95-6000915 | | 750,052. | 0. | | | ESSENTIAL FUNDING. |
| CORONADO HIGH SCHOOL PTO 650 D AVENUE CORONADO, CA 92118 | 33-0880611 | 501(C)(3) | 1,796. | 0. | | | TO FURTHER GOALS OF IMPROVING SCHOOLS BY SUPPORTING TEACHERS AND SCHOOLS. |
| CORONADO MIDDLE SCHOOL PTO 550 F AVENUE CORONADO, CA 92118 | 75-2978909 | 501(C)(3) | 1,696. | 0. | | | TO FURTHER GOALS OF IMPROVING SCHOOLS BY SUPPORTING TEACHERS AND SCHOOLS. |
| SILVER STRAND PTO 1350 LYTE ROAD CORONADO, CA 92118 | 46-3398856 | 501(C)(3) | 1,596. | 0. | | | TO FURTHER GOALS OF IMPROVING SCHOOLS BY SUPPORTING TEACHERS AND SCHOOLS. |
| VILLAGE PTO 600 SIXTH STREET CORONADO, CA 92118 | 33-0472218 | 501(C)(3) | 1,796. | 0. | | | TO FURTHER GOALS OF IMPROVING SCHOOLS BY SUPPORTING TEACHERS AND SCHOOLS. |
| ISLANDER SPORTS FOUNDATION P.O. BOX 181115 CORONADO, CA 92178 | 33-0584000 | 501(C)(3) | 1,196. | 0. | | | TO FURTHER GOALS OF IMPROVING SCHOOLS BY SUPPORTING TEACHERS AND SCHOOLS. |
| 2 Enter total number of section 501(c)(3) a | 0 | • | ne line 1 table | | | | ····· <u>6.</u> |
| 3 Enter total number of other organization LHA For Paperwork Reduction Act Notice | | | | | | | |

Page 2

 Part III
 Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

 Part III can be duplicated if additional space is needed.

| (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non- cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of non-cash assistance |
|---------------------------------|--------------------------|-----------------------------|---------------------------------------|---|--|
| | | | | | |
| ARIOUS SCHOLARSHIPS | 30 | 59,057. | 0. | | |
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Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Information to Form 990 or 990-EZ

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.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at WWW.irs.gov/form990.

OMB No. 1545-0047

CORONADO SCHOOLS FOUNDATION

Employer identification number 94-2745484

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

PROVIDE EXCEPTIONAL LEARNING EXPERIENCES FOR ALL CORONADO UNIFIED

SCHOOL DISTRICT STUDENTS.

FORM 990, PART VI, SECTION B, LINE 11:

CORONADO SCHOOL'S FOUNDATION FINANCE COMMITTEE REVIEWS THE TAX RETURNS, AS PREPARED BY THE CPA AND FILED ON THE ORGANIZATION'S BEHALF, BEFORE IT IS FILLED WITH THE TAXING AUTHORITIES ON NOVEMBER 15TH ANNUALLY. THE TAX RETURNS WILL BE SENT TO THE ENTIRE BOARD AS WELL AS THE FINANCE COMMITTEE. BOARD RESOLUTION IS NOT REQUIRED IN ORDER FOR THE TAX RETURNS TO BE FILED. THE MEANS OF DELIVERY TO EACH BOARD MEMBER AND FINANCE COMMITTEE MEMBER SHALL BE VIA E-MAIL. THE CHAIRMAN FOR THE YEAR IN WHICH THE TAXES ARE APPLICABLE WILL THEN AFFIRM THE FINANCE COMMITTEE'S APPROVAL (IF APPLICABLE) BY SIGNING THE DOCUMENTS. THE FINANCE CHAIR WILL THEN APPRAISE THE FULL BOARD OF DIRECTORS THAT THE TAXES HAVE BEEN FILED OR ANY OTHER NECESSARY INFORMATION.

FORM 990, PART VI, SECTION B, LINE 12C: EACH DIRECTOR, PRINCIPAL OFFICER, AND STAFF MEMBER OF A COMMITTEE WITH BOARD OF DIRECTORS DELEGATED POWERS SIGN A STATEMENT AFFIRMING THEY HAVE RECEIVED A COPY OF THE CONFLICTS OF INTEREST POLICY; HAS READ AND UNDERSTANDS THE POLICY; HAS AGREED TO COMPLY WITH THE POLICY; AND UNDERSTANDS THE FOUNDATION IS CHARITABLE AND IN ORDER TO MAINTAIN ITS FEDERAL TAX EXEMPTION IT MUST ENGAGE PRIMARILY IN ACTIVITIES WHICH ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PURPOSES.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2015)

| Schedule O (Form 990 or 990-EZ) (2015) | Page 2 |
|---|---|
| Name of the organization CORONADO SCHOOLS FOUNDATION | Employer identification number $94-2745484$ |
| FORM 990, PART VI, SECTION B, LINE 15: | |
| CORONADO SCHOOLS FOUNDATION SECURES AN ANNUAL SURVEY COND | UCTED BY |
| NON-PROFIT MGT SOLUTIONS AS WELL AS THE USD CASTER FAMILY | NON-PROFIT |
| RESEARCH CENTER TO DETERMINE COMPARABLE SALARIES OF NONPR | OFIT |
| ORGANIZATION'S OF SIMILAR SIZE (BUDGET, NUMBER OF EMPLOYE | ES). THIS IS |
| REVIEWED BY THE BOARD OF DIRECTORS EXECUTIVE COMMITTEE; P | RESIDENT AND/OR EX |
| OFFICIO CONDUCT EMPLOYEE REVIEW FOR CHIEF EXECUTIVE OFFIC | ER AND OTHER KEY |
| EMPLOYEE'S AND DETERMINE IF AN INCREASE IN COMPENSATION I | S WARRANTED. |
| | |
| FORM 990, PART VI, SECTION C, LINE 19: | |
| ALL DOCUMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST. | |
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| 532212 09-02-15 Scher 40 | dule O (Form 990 or 990-EZ) (2015) |

^{13561115 757767} COR097121618 2015.04020 CORONADO SCHOOLS FOUNDATION COR09721

2015 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

| | SO FAGE 10 | | | | | | | 990 | | | | | | | |
|--------------|---|------------------|--------|------|---------|-------------|-----------------------------|------------------|------------------------|-----------------------|---------------------------|--|-------------------------------|---------------------------|---------------------------------------|
| Asset No. | Description | Date Acquired | Method | Life | C o n v | Line No. | Unadjusted Cost Or Basis | Bus % Excl | Section 179 Expense | Reduction In Basis | Basis For Depreciation | Beginning Accumulated Depreciation | Current Sec 179 Expense | Current Year Deduction | Ending Accumulated Depreciation |
| 7 | PRINTER | 11/13/09 | SL | 5.00 | | 16 | 363. | | | | 363. | 363. | | 0. | 363. |
| 8 | 2 COMPUTERS | 06/07/10 | SL | 5.00 | | 16 | 1,824. | | | | 1,824. | 1,824. | | 0. | 1,824. |
| 9 | APPLE COMPUTER | 09/01/10 | SL | 5.00 | | 16 | 1,656. | | | | 1,656. | 1,601. | | 55. | 1,656. |
| | PRINTER | 01/31/11 | SL | 5.00 | | 16 | 1,137. | | | | 1,137. | 1,004. | | 133. | 1,137. |
| | COMPUTER FOR OFFICE REMOTE WORKSTATION | 09/04/12 | SL | 5.00 | | 16 | 1,064. | | | | 1,064. | 604. | | 212. | 816. |
| 12 | WEBSITE DESIGN | 10/24/13 | SL | 5.00 | | 16 | 8,871. | | | | 8,871. | 2,957. | | 1,774. | 4,731. |
| | * 990 PAGE 10 TOTAL - | | | | | | 14,915. | | | | 14,915. | 8,353. | | 2,174. | 10,527. |
| | * GRAND TOTAL 990 PAGE 10 DEPR | | | | | | 14,915. | | | | 14,915. | 8,353. | | 2,174. | 10,527. |
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528111 04-01-15

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

| Form 4562 | |
|--|-----|
| Department of the Treasury Internal Revenue Service | (99 |
| Department of the Treasury | |

Depreciation and Amortization (Including Information on Listed Property)

990

Attach to your tax return.

Information about Form 4562 and its separate instructions is at www.irs.gov/form4562. Business or activity to which this form relates

Attachment Sequence No. 179 Identifying number

L

OMB No. 1545-0172

5

| | RONADO SCHOOLS FOUN | | | RM 990 P. | | | 94-2745484 |
|----------|---|--|--|------------------------|----------------|--------------------|----------------------------|
| Pa | rt I Election To Expense Certain Prop | erty Under Section 1 | 79 Note: If you have any | listed property, o | complete Part | i | |
| | Maximum amount (see instructions) | | | | | | 500,000. |
| | Total cost of section 179 property pla | | | | | | 2 000 000 |
| | Threshold cost of section 179 propert | | | | | | 2,000,000. |
| _ | Reduction in limitation. Subtract line 3 | | | | | | |
| | Dollar limitation for tax year. Subtract line 4 from li (a) Description of p | | | ee instructions | (c) Elected | * | |
| 6 | | sioperty | (b) 0031 (bu3 | | | | |
| | | | | | | | |
| | | | | | | _ | |
| | | | | | | | |
| 7 | Listed property. Enter the amount from | m line 29 | | 7 | | | |
| | Total elected cost of section 179 prop | | | | | 8 | |
| | Tentative deduction. Enter the smalle | | | | | | |
| | Carryover of disallowed deduction fro | | | | | | |
| | Business income limitation. Enter the | | | | | | |
| 12 3 | Section 179 expense deduction. Add | lines 9 and 10, but | t do not enter more than | line 11 | | 12 | |
| | Carryover of disallowed deduction to | | | 🕨 13 | | | |
| | e: Do not use Part II or Part III below f | , | | | | | |
| | rt II Special Depreciation Allow | | | | | | |
| 14 : | Special depreciation allowance for qu | alified property (ot | her than listed property) | placed in service | e during | | |
| | | | | | | | |
| | Property subject to section 168(f)(1) e | | | | | | <u> </u> |
| | Other depreciation (including ACRS) rt III MACRS Depreciation (Do n | | | | | 16 | 2,174. |
| Га | rt III MACRS Depreciation (Do n | iot include listed p | Section A | 5.) | | | |
| 17 / | MACRS deductions for seasts placed | in convice in toy w | - | 16 | | 17 | |
| | MACRS deductions for assets placed f you are electing to group any assets placed in se | | | | | "" " | |
| 10 | | | e During 2015 Tax Year | | | - I ation Syste | m |
| | (a) Classification of property | (b) Month and year placed in service | (c) Basis for depreciation (business/investment use only - see instructions) | (d) Recovery period | (e) Convention | | (g) Depreciation deduction |
| 19a | 3-year property | | | | | | |
| <u>b</u> | 5-year property | - | | | | | |
| c | 7-year property | - | | | | | |
| | 10-year property | - | | | | | |
| e | 15-year property | - | | | | | |
| f | 20-year property | - | | | | | |
| g | 25-year property | | | 25 yrs. | | S/L | |
| | Desidential vental avenuety | / | | 27.5 yrs. | MM | S/L | |
| h | Residential rental property | / | | 27.5 yrs. | MM | S/L | |
| i | Nonroeidential real property | / | | 39 yrs. | MM | S/L | |
| | Nonresidential real property | / | | | MM | S/L | |
| | Section C - Assets | Placed in Service | During 2015 Tax Year I | Jsing the Altern | native Depred | iation Syst | tem |
| 20a | Class life | _ | | | | S/L | |
| b | 12-year | | | 12 yrs. | | S/L | |
| C | | / | | 40 yrs. | MM | S/L | |
| | rt IV Summary (See instructions.) | | | | | | |
| | Listed property. Enter amount from lir | | | | | 21 | |
| | Total. Add amounts from line 12, lines | | | | | | 0 174 |
| | Enter here and on the appropriate line | | | ations - see inst | r | 22 | 2,174. |
| | For assets shown above and placed i | - | • | | | | |
| 51625 | portion of the basis attributable to see | | | 23 | | | Earm AECO (0015 |
| 12-28 | 15 LHA For Paperwork Reduction | MACL NOTICE, SEE | separate instructions. | | | | Form 4562 (2015 |

| Part W Listed Property (include automobile, certain alread, certain alread, certain computers, and property used for although a submit of based and an although a submit of based and an although a submit of based and although a submit of based and although a submit of based and although and although and although a submit of based and although and although a submit of based and although and although a submit of based and although | Form 4562 (2015) CORONADO S | CHOOLS | FOUN | DATIC | N | | | | 94-2 | 27454 | 484 | Page 2 |
|---|---|-------------------|------------|-----------------------------|----------|-------------|------------|-------------|------------------|-----------------|------------------|-------------|
| Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete and 2.4.2.4b, columns (a) through (c) of Sector A. Depreciation and Other Information (Caution: See the instructions for limits for passanger automobiles): Section A.: Depreciation and Other Information (Caution: See the instructions for limits for passanger automobiles): More Table (1) the section of the information (Caution: See the instructions for limits for passanger automobiles): More Table (1) the section of the information (Caution: See the instructions for limits for passanger automobiles): Section 2: Depreciation allowance for qualified business use: (a) the section of the section o | | ertain other veh | nicles, ce | ertain airc | raft, ce | ertain com | outers, ar | nd prope | | | | |
| 64) through (b) velocition A, and of Section P, A and Section C.f. applicable. Section A - Deprecision and Other Information (Gauticoticons for limits for passenger automobiles.) Vag. Do yut have weldere its support the business/investment user claime? Yes No 24b it 7*Yes, 1's the evidence with response to the instructions for limits for passenger automobiles.) Vag. Do yut have weldere its support the business/investment user claime? Yes No 24b it 7*Yes, 1's the evidence with response to the instructions for limits for passenger automobiles.) S5 Special depreciation allowance for qualified business use: 25 1 56 Special depreciation allowance for qualified business use: 25 27 Property used more than 50% in a qualified business use: 28 28 27 Property used 50% for less in a qualified business use: 28 28 28 Acid amounts in column (b), lines 25 through 27. Entor have and on line 21, page 1 28 28 29 Acid amounts in column (b), line 25 through 27. Entor have and on line 7, page 1 28 28 29 Acid amounts in column (b), line 25 through 27. Entor have and on line 7, page 1 28 28 29 Acid amounts in column (b), line 25 through 27. Entor have and on line 7, page 1 28 28 28 | | using the stand | ard mile | age rate o | or dedu | ucting leas | e expens | e, comp | olete onl | v 24a, 2 | 4b, colu | mns |
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| 36 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% Ymmetric the policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners Yes No 39 Do you reat all use of vehicles, and retain the information received? Immetrize Immetrize Immetrize 10 Do you meet the requirements concerning qualified automobile demonstration use? Immetrize Immetrize Immetrize 11 Do you rest the vequirements concerning qualified automobile demonstration use? Immetrize Immetrize Immetrize 12 Amortization Code section Amortization for this year Amortization for this year Immetrize 13 Amortization of costs that begins during your 2015 tax year: Immetrize Immetrize Immetrize Immetrize 13 | | | | | | | | | | | | |
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