California Exempt Organization 2019 Business Income Tax Return

FORM

109

Calendar \	/ear 2019 or fiscal year beginning (mm/dd/yyyy)	, and ending (mm/dd/	[′] yyyy)					
Corporation	/Organization name		С	California corporation number				
Additional in	nformation. See instructions.	F	FEIN					
Street addre	ess (suite/room no.)		P	MB no.				
City (If the o	corporation has a foreign address, see instructions.)		State Z	IP code				
Foreign cou	ntry name Foreign province/	state/county	F	Foreign postal code				
B Is this a R&TC S C Is the o in a pric D Final Re Di Enter da E Amende F Account G Nature of	Assolved Surrendered (Withdrawn) Merged/Reorganized ate(mm/dd/yyyy)							
Corpora- tion	Apportionment Formula Worksheet, Part A, line 2 or Part B, line 3 Enter the lesser amount from line 1 or line 2. If the unrelated bus and Schedule R was not completed, enter the amount from line 1	ılifornia		00				
Trust Tax Computation	 4 Unrelated business taxable income from Side 2, Part II, line 30. 5 Unrelated business taxable income from line 3 or line 4 6 EZ, LARZ, LAMBRA, or TTA NOL carryover deduction 7 Net Operating Loss deduction. See General Information N 8 Add line 6 and line 7 9 Net unrelated business taxable income. Subtract line 8 from line 9. 10 Tax% x line 9. See General Information J 11 Tax credits from Schedule B. See instructions 		5 6 7 8 9 10	00 00 00 00 00 00 00				
Total Tax	 Balance. Subtract line 11 from line 10. If line 11 is greater than line Alternative minimum tax. See General Information 0	ne 10, enter -0		12	00 00 00			
Payments	 15 Overpayment from a prior year allowed as a credit	15 16 17 18	00)))	00			
Use Tax/ Tax Due/ Overpay- ment	 20 Use tax. See instructions. 21 Payments balance. If line 19 is more than line 20, subtract line 20 22 Use tax balance. If line 20 is more than line 19, subtract line 19 23 Tax due. Subtract line 21 from line 14. Pay entire amount with ret 24 Overpayment. Subtract line 14 from line 21. See instructions 	of from line 19		20 21 22 22 23 24	00 00 00 00 00			
	25 Enter amount of line 24 to be applied to 2020 estimated tax		25	00				

	2	6 Refund. If line 25 is less than line 24, then subtract line	25 from line 24.		<u>.</u> •	26	00
		a Fill in the account information to have the refund dir					
	fund or nount	b Type: Checking ●□ Savings ●□ c Account					
Du	ie 2	7 Penalties and interest. See General Information M					00
		8 • Check if estimate penalty computed using Excep					
-		9 Total amount due. Add line 22, line 23, line 25, and line	27, then subtrac	t line 24	<u></u>	29	00
_		I Business Taxable Income related Trade or Business Income					
_					- Delever	4.	00
		receipts or gross sales b Less return				1c	00
		oods sold and/or operations (Schedule A, line 7)				2	00
		fit. Subtract line 2 from line 1c				3	00
4		gain net income. See Specific Line Instructions – Trusts				4a	00
		in (loss) from Part II, Schedule D-1				4b	00
_		l loss deduction for trusts				4c	00
5		or loss) from partnerships, limited liability companies, or				_	00
•		hedule K-1 (565, 568, or 100S) or similar schedule				5	00
		come (Schedule C)				6	00
		debt-financed income (Schedule D)				7	00
		nt income of an R&TC Section 23701g, 23701i, or 23701i		·		8	00
		Annuities, Royalties and Rents from controlled organization	,			9	00
		exempt activity income (Schedule G)				10	00
		ng income (Schedule H, Part III, Column A)				11	00
		ome. Attach schedule				1 1	00
		elated trade or business income. Add line 3 through line 1					00
		eductions Not Taken Elsewhere (Except for contributions					
		ation of officers, directors, and trustees from Schedule I $$					00
		nd wages					00
	•					16	00
		8				17	00
		Attach schedule				18	00
		ach schedule				19	00
		ions. See instructions and attach schedule					00
21		ciation (Corporations and Associations – Schedule J) (Trusts – fo			00		
		depreciation claimed on Schedule A. See instructions		-	, , ,	21	00
		n. Attach schedule					00
23		butions to deferred compensation plans					00
	b Emplo	yee benefit programs. See instructions				23b	00
		ductions. Attach schedule				24	00
		luctions. Add line 14 through line 24				25	00
		d business taxable income before allowable excess advert	•			26	00
		dvertising costs (Schedule H, Part III, Column B)				27	00
28	Unrelate	d business taxable income before specific deduction. Sub	tract line 27 from	line 26	•	28	00
29	•	deduction. See instructions				29	00
30	Unrelate	d business taxable income. Subtract line 29 from line 28.					00
	gn ere	To learn about your privacy rights, how we may use your infor and search for 1131. To request this notice by mail, call 800.8 Under penalties of perjury, I declare that I have examined this belief, it is true, correct, and complete. Declaration of prepare	return, including a	ccompanying sche	edules and statements	. and to the	e best of my knowledge and as any knowledge.
		Signature of officer	1			·	
De	.i.d	Preparer's signature		Date	Check if self- employed ▶ □	● PTIN	
Pr	iid eparer's se Only	Firm's name (or yours, if self-employed)				● Firm's	FEIN
_		and address				● Teleph	
		May the FTR discuss this return with the preparer shown ab	■ □ Ves □ No				

Sc	chedule A Cost of Goods Sold and/or Operations.		
Me	ethod of inventory valuation (specify)		
1	Inventory at beginning of year	1	00
2	Purchases		00
3	Cost of labor.		00
4	a Additional IRC Section 263A costs, Attach schedule.		00
•	b Other costs. Attach schedule.		00
5	Total. Add line 1 through line 4b.		00
6	Inventory at end of year		00
7	Cost of goods sold and/or operations. Subtract line 6 from line 5. Enter here and on Side 2, Part I, line 2		00
'	Do the rules of IRC Section 263A (with respect to property produced or acquired for resale) apply to this organization		
Sc	chedule B Tax Credits.	1: 🗆 103 🗀 1	10
1	Enter credit namecode ● ■ 1	00	
2	Enter credit name code Code 2	00	
3	Enter credit name code ● ■ 3	00	
4	Total. Add line 1 through line 3. If claiming more than 3 credits, enter the total of all claimed credits,	100	
4	on line 4. Enter here and on Side 1, line 11	4	00
-	chedule K Add-On Taxes or Recapture of Tax. See instructions.	4	00
1	Interest computation under the look-back method for completed long-term contracts. Attach form FTB 3834	. 1	00
2	Interest on tax attributable to installment: a Sales of certain timeshares or residential lots		00
2	b Method for non-dealer installment obligations		00
2	IRC Section 197(f)(9)(B)(ii) election to recognize gain on the disposition of intangibles		00
3			00
4	Credit recapture. Credit name		
5_	Total. Combine the amounts on line 1 through line 4. See instructions	5	00
_	chedule R Apportionment Formula Worksheet. Use only for unrelated trade or business amounts.	l	
Pa	urt A. Standard Method – Single-Sales Factor Formula. Complete this part only if the corporation uses the single-sa	les tactor form (b)	uia.
	Total within and	Total within	Percent within
	outside California	California	California [(b) ÷ (a)] x 100
1	Total Sales)	
2	Apportionment percentage. Divide total sales column (b) by total sales column (a) and		
	multiply the result by 100. Enter the result here and on Form 109, Side 1, line 2		•
Pa	Irt B. Three Factor Formula. Complete this part only if the corporation uses the three-factor formula.		
	(a) Total within and	(b) Total within	(c) Percent within
	outside California	California	California [(b) ÷ (a)] x 100
1	Property factor: See instructions		•
2	Payroll factor: Wages and other compensation of employees)	•
3	Sales factor: Gross sales and/or receipts less returns and allowances)	•
4	Total percentage: Add the percentages in column (c)		
5	Average apportionment percentage: Divide the factor on line 4 by 3 and enter the		
	result here and on Form 109, Side 1, line 2. See instructions for exceptions.		
Sc	chedule C Rental Income from Real Property and Personal Property Leased with Real Property		
For	r rental income from debt-financed property, use Schedule D, R&TC Section 23701g, Section 23701i, and Section 23701n organization		
1 [Description of property 2 Rent received or accrued		je of rent attributable al property
_			%
_			/0 %
_			/0
4 (Complete if any item in column 3 is more than 50%, or for any item if the rent is determined on the basis of profit or income	50%	70_

(a) Gross income reportable,

column 2 x column 3

(a) Deductions directly connected (attach schedule)

(b) Income includible, column 2 less column 4(a)

Add columns 4(b) and column 5(c). Enter here and on Side 2, Part I, line 6.

3643193 Form 109 2019 **Side 3**

(b) Deductions directly connected with personal property (attach schedule)

(c) Net income includible, column 5(a)

less column 5(b)

Schedule D Unrelate	ed Debt-Financed	l Income											
1 Description of debt-financed property				allocable to debt financed			3 Deductions directly connected with or allocable to debt-financed property						
							(a) Straight-line depreciation (attach schedule)			(b) Other deductions (attach schedule)			
4 Amount of average acquisition indebtedness on or allocable to debt-financed property (attach schedule) 5 Average adjusted allocable to debt-foreign acquisition property (attach schedule)		bt-financed percentage,			7 Gross income reportable, column 2 x column 6			8 Allocable deductions, total of columns 3(a) and 3(b) x column 6			9 Net income (or loss) includible, column 7 less column 8		
			%	,									
			%										
			%										
Total. Enter here and on S	Side 2. Part I. line	7		_									
Schedule E Investm													
	2 Amount	1	directly connected		4 Net investme column 2 les	nt income	е,	5 Set-aside: (attach sc	S			nvestment income, ss column 5	
Total. Enter here and on S	Side 2, Part I, line	8											
Enter gross income from													
Schedule F Interest	. Annuities. Rova	Ities and Re	nts from Cont	rolled	l Organizatio	 1S				ļ.			
	· · · · · ·				ontrolled Orga		ns						
1 Name of controlled organizations		2 Emplo Identit Numb	oloyer 3 Net otification (loss		unrelated income 4 Total o				included in the	5 Part of column (4) that is included in the controlling organization's gross income			
1													
2													
3	,												
Nonexempt Controlled Or	ganizations												
7 Taxable Income			8 Ne	t unrela	ated income (loss	9 Total mad		ified payments	10 Part of column included in the organization's income	e controlling	g con	uctions directly nected with income in mn (10)	
1													
2													
2													
4 Add columns 5 and 10									-				
									L				
5 Add columns 6 and 11	'												
6 Subtract line 5 from line 4. Ent													
more than one unrelated activity is exploiting the same exempt activity) business income from trade or produc business of unre		d 3 Expenses di	d directly d with unrelated trade or business, column 2 less column 3		activi unrela	Gross income from activity that is not unrelated business income Expenses attributable column 5		7 Excess exempt expense, colur 6 less column but not more t column 4		8 Net income includible, column 4 less column 7 but not less than zero			
Total. Enter here and on S	Side 2, line 10												

Schedule H Advertising Income and Excess Advertising Costs Part I Income from Periodicals Reported on a Consolidated Basis 5 Circulation 1 Name of periodical 2 Gross advertising 6 Readership 7 If column 5 is greater than column 6, enter the income 3 Direct 4 Advertising income advertising or excess advertising income costs costs costs. If column 2 is shown in column 4, in Part III, column A(b). If greater than column 3 complete columns 5, column 6 is greater than 6, and 7. If column 3 column 5, subtract the sum is greater than of column 6 and column 3 column 2, enter the from the sum of column 5 excess in Part III, and column 2. Enter amount column B(b). Do not in Part III. column A(b). If the complete columns 5, amount is less than zero, Totals Part II Income from Periodicals Reported on a Separate Basis Part III Column A - Net Advertising Income Part III Column B - Excess Advertising Costs (b) Enter total amount from Part I, columns 4 or (a) Enter "consolidated periodical" and/or (b) Enter total amount from Part I, column 4, (a) Enter "consolidated periodical" and/or names of non-consolidated periodicals 7, and amount listed in Part II, columns 4 or 7 names of non-consolidated periodicals and amounts listed in Part II, column 4 Enter total here and on Side 2, Part I, line 11 Enter total here and on Side 2, Part II, line 27 Schedule I Compensation of Officers, Directors, and Trustees 2 SSN or ITIN 3 Title 1 Name of Officer 4 Percent of time devoted 5 Compensation attributable 6 Expense account allowances to unrelated business to business % % % % % Total. Enter here and on Side 2, Part II, line 14. Schedule J Depreciation (Corporations and Associations only. Trusts use form FTB 3885F.) Depreciation for 1 Group and guideline class or description 2 Date acquired (dd/mm/yyyy) 3 Cost or other basis 4 Depreciation allowed 5 Method of computing 6 Life or rate of property or allowable in prior depreciation this year vears Other depreciation: Buildings Furniture and fixtures..... Transportation equipment Machinery and other equipment. . . Other (specify) 3 4 5 Amount of depreciation claimed elsewhere on return Balance. Subtract line 5 from line 4. Enter here and on Side 2, Part II, line 21a.....

3645193 Form 109 2019 **Side 5**