| | Fo | rm 990 | I | | | | | | | | OMB No. 1545-0047 |
|--------------------------------|---------------------|--|--|---|----------------------------------|---|--|---------------|------------------------------------|-------------------------|------------------------------|
| | 10 | | | | | | cempt From Inc mal Revenue Code (except | | | | 2016 |
| Dep Inter | artment mai Rev | of the Treasury venue Service | | Do not e | nter social s | ecurity numbers a | n this form as it may be ma uctions is at www.irs.go v | de public. | | | Open to Fablic Inspection |
| Α | For t | he 2016 calen | dar year, or ta | ix year begi | nning 7 | /01 | , 2016, and endin | g 6/ | /30 | | 2017 |
| В | Check | if applicable: | С | | | | | | D Employ | /er identif | ication number |
| | L A | ddress change | | | | FOOTHILL | S | | | 38862 | |
| | L N | ame change | 847 E. O | | | | | | E Teleph | | |
| | L Ir | nitial return | MONROVIA | , CA 910 | 910 | | | | 626 | -357- | -4974 |
| | Fi | nal return/torminated | | | | | | | | | |
| | Ц^ | mended return | _ | | | | | | G Gross | | |
| | L A | pplication pending | F Name and ac | | al officer: | | | | s a group retu | | |
| | | | Same As | · · · · · · · · · · · · · · · · · · · | | | | H (D) Are a | ll subordinate ,' attach a list | s included (see inst | ? Yes No |
| <u> </u> | | -exempt status | X 501(c)(3) | 501(c) (|)< | (insert no.) | 4947(a)(1) or 527 | | | | |
| <u> </u> | | bsite: N/ | | | 1 | | - | ., | exemption n | | |
| K | | n of organization: | X Corporation | Trust | Associatio | n Other 🏲 | L Year of format | ion: 198 | 33 M: | State of le | gal domicile: CA |
| | art I | Summar | y | -atia ala miar | | at air aifi a ant a | 1. Store DRAWTDING | | | | |
| | 1 | Briefly descrit | be the organiz | zation's miss | | st significant a | tivities: PROVIDING | CABLE | USAGE | | |
| 6 | | | | | | | | | | | |
| nar | | | | | | | | | | | |
| Ner | 2 | Check this bo | x► if th | e organizatio | on discont | inued its operation | tions or disposed of ma | ore than : | 25% of its | net ass | |
| ୁ | 3 | | | | | | 1a) | | | 3 | 8 |
| Activities & Governance | 4 | | | | | | (Part VI, line 1b) | | | 4 | 7 |
| itie | 5 | | | | | | rt V, line 2a) | | | 5 | 7 |
| Cti | 73 | | | | | | e 12 | | | 6 7a | 0. |
| 4 | | | | | | | £ | | | 7b | 0. |
| | <u> </u> | | | | | | | - | Prior Year | · · · · | Current Year |
| | 8 | Contributions | and grants (F | Part VIII, lin∉ | e 1h) | | | | 2 | 25. | |
| Revenue | 9. | | | | | | | | 275,2 | | 212,520. |
| eve | 10 | | | | | | | | | | |
| ĉ | 11 | | | | | | nd 11e) | | | | |
| | 12 | | | _ | | | olumn (A), line 12) | | 275,4 | 72. | 212,520. |
| | 13 | | | | | |) | | | | |
| | 14 | | | | | | nn (A), lines 5-10) | | 4 19 4 4 | | 100.000 |
| 9 | 15 | | | | | • | | | 174,5 | 35. | 138,079. |
| Expense | 16a | | | | | | | | | - | |
| ž | 6 | Total fundrais | | | | | | | | | |
| | 17 | | | | | | | | 101,9 | | 91,752. |
| | 18 | - | | | - | | .), line 25) | | 276,5 | 519. | 229,831. |
| | 19 | Revenue less | expenses. Si | ubtract line | 18 from lir | ie 12 | | | -1,(| | -17,311. |
| Net Assets or Fund Balancee | | Talal const | (D V II 1 | C) | | | | Beginni | ing of Currer | | End of Year |
| aa ot Jala | 20 | | • | • | | | | | 327,3 | | |
| A P | 21 | | - | - | | | | | 27,9 | | 25,152. |
| _ | | | | s. Subtract I | ine 21 fro | m line 20 | | • | 299,3 | 96. | 282,085. |
| <u></u> | art II | Signatur | ·· · - · | | | | | | | | |
| Und | er pena plete. D | Ities of perjury, I de leclaration of prepa | eclare that I have e rer (other than offi | <pre>xamined this ret icer) is based on</pre> | urn, including all informatio | accompanying sche on of which preparer | edules and statements, and to has any knowledge. | the best of r | my knowledge | and belie | f, it is true, correct, and |
| | | | | _ | | | | | | | |
| <u></u> | | Signatu | re of officer | | | | | D | ate | · · · | |

| <u> </u> | Signature of officer | | D | ate | | | |
|--------------|--|---------------------------------|-------------------------|---------------|---------------------|------|--|
| Sign Here | ANTHONY CLEGG Type or print name and title | | Executive Director | | | | |
| | Print/Type preparer's name | Preparer's signature | Date | Check X if | PTIN | | |
| Paid | James_F. Hundshamer | James F. Hundshamer | | self-employed | P00227096 | | |
| Preparer | Firm's name > James F. Hund | dshamer, C.P.A. | | | | | |
| Use Only | Firm's address * 223 So. Glen | | Firm's EIN 🕨 95-4062512 | | | | |
| | Glendora, CA | 91741 | | Phone no. 626 | -963-1222 | | |
| May the IRS | discuss this return with the preparer | shown above? (see instructions) | | | X Yes N | 0 | |
| BAA For Pa | perwork Reduction Act Notice, see | the separate instructions. | TEEA0113L 11 | /16/16 | Form 990 (20 |)16) | |

TEEA0113L 11/16/16

Form 990 (2016)

| Form 990 (2016) COMMUNITY | MEDIA OF THE FOOTHILLS | 953886210 | Page |
|--|---|---|-------------------|
| | gram Service Accomplishments | | |
| Check if Schedule O c | ontains a response or note to any line in this Part III | <u></u> | |
| 1 Briefly describe the organizat | | | - |
| PROVIDING CABLE US | AGE | | |
| | | | |
| | | | |
| | | | |
| 2 Did the organization undertake | any significant program services during the year which were not listed on | the prior | |
| Form 990 or 990-EZ? | | ····· Yes | X No |
| If 'Yes,' describe these new s | | _ | |
| 3 Did the organization cease co | onducting, or make significant changes in how it conducts, any progra | am services? Yes | X No |
| If 'Yes,' describe these chang | | | _ |
| 4 Describe the organization's pr Section 501(c)(3) and 501(c)(and revenue, if any, for each | rogram service accomplishments for each of its three largest program (4) organizations are required to report the amount of grants and allo program service reported. | n services, as measured by exp ications to others, the total exp | penses. enses, |
| 4a (Code:) (Expense | es \$ 216, 925. including grants of \$ |) (Revenue \$ | |
| | Y SERVICES BY PROVIDING CABLE SERVICE TO RE | | 0.0 |
| MONROVIA. | T DERVICED DI TROVIDING CADEL SERVICE TO RE | SIDENIS OF THE CITY | _0r |
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| b (Code:) (Expense | as \$ including grants of \$ | \ (D | |
| | es \$ including grants of \$ |) (Revenue \$ | |
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| c (Code:) (Expense | es \$ including grants of \$ |) (Revenue \$ | .) |
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| d Other program services (Descr | ribe in Schedule O.) | | |
| (Expenses \$ | including grants of \$) (Revenue | s \$ | |
| e Total program service expense | | , , , | |
| A | TEFA0102 11/16/16 | Form 99 | 0 (0010) |

953886210

Form 990 (2016) COMMUNITY MEDIA OF THE FOOTHILLS

| | | | Yes | No |
|----|---|-------------|-----|----------|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A | 1 | х | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? | 2 | | Х |
| 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 | | х |
| 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 | | х |
| 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 |
| 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. | 6 | | x |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II | 7 | | х |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III | 8 | _ | 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. | 9 | | <u>x</u> |
| 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. | 10 | | 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. | 11 a | х | |
| | 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. | 11 b | | Х |
| | 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 | 11 c | | 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 Part X, line 16? If 'Yes,' complete Schedule D, Part IX | 11 d | | Х |
| | e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X | 11 e | Х | |
| | f Did the crganization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X | 11 f | | Х |
| 12 | a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII. | 12a | х | |
| | b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional | 12 b | | X |
| | Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E | 13 | | X |
| | a Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | <u>X</u> |
| | b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV | 14Ь | | х |
| 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 foreign organization? If 'Yes,' complete Schedule F, Parts !! and IV. | 15 | | х |
| 16 | Did the crganization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV | 16 | | X |
| 17 | Did the crganization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (Å), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions) | 17 . | | х |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If 'Yes,' complete Schedule G, Part II</i> . | 18 | | X |
| 19 | complete Schedule G, Part III | 19 | | x |
| | | - F | | 2016 |

Form 990 (2016) COMMUNITY MEDIA OF THE FOOTHILLS 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 | | X |
| t | 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 | | x |
| 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 | | x |
| 23 | Did the organization answer 'Yes' to Part VII, Section A, line 3. 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J. | 23 | | x |
| 24 a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a | 24a | | x |
| ł | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24c | | |
| C | Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? | 24d | | |
| 25 a | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I | 25a | | x |
| ł | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I. | 25b | | x |
| 26 | 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? <i>If 'Yes,' complete Schedule L, Part II</i> | 26 | | x |
| 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 cf these persons? <i>If 'Yes,' complete Schedule L, Part III.</i> | 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): | | | |
| ŧ | A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV. | 28a | | X |
| t | A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV.</i> | 28b | | x |
| C | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV | 28c | | x |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M | 29 | | X |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i> | 30 | | x |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part 1 | 31 | | X |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II | 32 | | x |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I | 33 | | x |
| 34 | Was the crganization 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 |
| 35 a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | X |
| t | 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 | | |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2 | 36 | | x |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i> | 37 | | x |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O | 38 | | x |
| BAA | | Form | 990 | (2016) |

| Form | 990 (2016) COMMUNITY MEDIA OF THE FOOTHILLS | 953886210 | | Р | age 5 |
|--------|---|--|------------|--------|-------|
| Par | 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 |
| | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable | 1a 6 | Ì | | |
| Ľ | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | 1b 0 | | - | |
| C | Did the organization comply with backup withholding rules for reportable payments to vendors and re (gambling) winnings to prize winners? | eportable gaming | 1 c | | х |
| 2 a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State- ments, filed for the calendar year ending with or within the year covered by this return | 2a 7 | | | |
| | If at least one is reported on line 2a, did the organization file all required federal employmen | | 2b | X | |
| | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see ins | | | | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the yea | | 3a | | х |
| | If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule Q | | 3b | | _ |
| 4 a | At any time during the calendar year, did the organization have an interest in, or a signature or othe financial account in a foreign country (such as a bank account, securities account, or other fi | r authority over, a nancial account)? | 4a | | х |
| Ŀ | If 'Yes,' enter the name of the foreign country: > | | | | |
| | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial | Accounts (FBAR). | | | |
| 5 a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax | <pre>vear?</pre> | 5 a | | Х |
| | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelt | | 5 b | | Х |
| c | If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? | | 5 C | _ | |
| 6 a | Does the organization have annual gross receipts that are normally greater than \$100,000, and solicit any contributions that were not tax deductible as charitable contributions? | nd did the organization | 6a | | х |
| b | If 'Yes,' did the organization include with every solicitation an express statement that such contributi not tax deductible? | | 6 b | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | ſ | 1 | | |
| a | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly as a c | artly for goods and | 7 a | | x |
| н | If 'Yes,' did the organization notify the donor of the value of the goods or services provided?. | | 7 b | - | |
| | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w | | 7 10 | | |
| | Form 8282? | | 7 c | | Х |
| d | If 'Yes,' indicate the number of Forms 8282 filed during the year | 7 d | | | |
| е | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal | benefit contract? | 7 e | | Х |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal bene | efit contract? | 7 f | | Х |
| ç | If the organization received a contribution of qualified intellectual property, did the organization file F as required? | orm 8899 | 7 g | | |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C? | organization file a | | | |
| 8 | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained | by the sponsoring | 7 h | | |
| • | organization have excess business holdings at any time during the year? | | 8 | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | - | | |
| , , | Did the sponsoring organization make any taxable distributions under section 4966? | | 9a | 1 | |
| | Did the sponsoring organization make a distribution to a conor, donor advisor, or related pers | | 9b | | |
| 10 | Section 501(c)(7) organizations. Enter: | Control Control Control of Contro | | | |
| | | 10 a | | | |
| | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | 10b | | | |
| | Section 501(c)(12) organizations. Enter: | | | | |
| | | 11 a | | | |
| | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) | 11 Б | | | |
| 12 a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of | | 12a | j | |
| | | 12b | | | |
| | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | | |
| | 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 | | | | |
| h | • | | | | |
| | | 13b 13c | | | |
| | Did the organization receive any payments for indoor tanning services during the tax year? | | 14a | | х |
| | If 'Yes, has it filed a Form 720 to report these payments? If 'No,' provide an explanation in S | | 14a 14b | | |
| BAA | TEEA0105L 11/16/16 | | | 990 (ž | 2016) |
| | | | | (* | / |

| 953886210 | 9 | 5 | 3 | 8 | 8 | 6 | 2 | 1 | 0 | |
|-----------|---|---|---|---|---|---|---|---|---|--|
|-----------|---|---|---|---|---|---|---|---|---|--|

...........

| Pa | rt VI | Governance, Management, and Disclosure For each 'Yes' response a 'No' response to line 8a, 8b, or 10b below, describe the circumstance Schedule O. See instructions. | to lines 2 through 7b b ces, processes, or cha | elow, nges i | and n | for |
|-----|--------------------|--|---|-----------------|----------|------------|
| | | Check if Schedule O contains a response or note to any line in this Part VI | | | | X |
| Sec | tion A | A. Governing Body and Management | | | | |
| | | | | | Yes | No |
| 1 | If ther | the number of voting members of the governing body at the end of the tax year e are material differences in voting rights among members governing body, or if the governing body delegated broad ity to an executive committee or similar committee, explain in Schedule O. | 1a ; | 3 | | |
| 1 | | the number of voting members included in line 1a, above, who are independent | 1b | 7 | | |
| 2 | | y officer, director, trustee, or key employee have a family relationship or a business relations , director, trustee, or key employee? | | 2 | | x |
| 3 | Did the | e organization delegate control over management duties customarily performed by or under th cers, directors, or trustees, or key employees to a management company or other pers | e direct supervision | 3 | | x |
| 4 | | e organization make any significant changes to its governing documents | | | | |
| | since | the prior Form 990 was filed? | | 4 | | Х |
| 5 | | e organization become aware during the year of a significant diversion of the organiza | | 5 | | Х |
| 6 | | e organization have members or stockholders? | | 6 | | Х |
| 7 (| | e organization have members, stockholders, or other persons who had the power to elect or a ers of the governing body? | | 7 a | | х |
| I | | ny governance decisions of the organization reserved to (or subject to approval by) me clders, or persons other than the governing body? | | 7 b | | х |
| 8 | Did the the fol | organization contemporaneously document the meetings held or written actions undertaken lowing: | during the year by | | | |
| é | The g | overning body? | | 8a | Х | |
| E B | Each (| committee with authority to act on behalf of the governing body? | | 8 b | | Х |
| 9 | | e any officer, director, trustee, or key employee listed in Part VII, Section A, who can ration's mailing address? <i>If 'Yes,' provide the names and addresses in Schedule O</i> | | 9 | | х |
| Sec | tion E | B. Policies (This Section B requests information about policies not requests) | uired by the Internal R | leveni | ie Co | ode.) |
| | | 12 | | _ | Yes | No |
| | | e organization have local chapters, branches, or affiliates? | | 10 a | | Х |
| | operatio | did the organization have written policies and procedures governing the activities of such chapters, affiliates, a ns are consistent with the organization's exempt purposes? | | 10 b | | |
| | | organization provided a complete copy of this Form 990 to all members of its governing body before filing the | | 11 a | | X |
| | | be in Schedule O the process, if any, used by the organization to review this Form 990 | | | | |
| | | e organization have a written conflict of interest policy? If 'No,' go to line 13 | | 1 2 a | Х | |
| | to con | fficers, directors, or trustees, and key employees required to disclose annually interests that flicts? | | 12 b | х | |
| | Sched | organization regularly and consistently monitor and enforce compliance with the policy? If ') ule O how this was doneSee. Schedule. O. | | 12 c | х | |
| 13 | | e organization have a written whistleblower policy? | | 13 | | X |
| 14 | | e organization have a written document retention and destruction policy? | | 14 | | X |
| 15 | persor | process for determining compensation of the following persons include a review and approva is, comparability data, and contemporaneous substantiation of the deliberation and de | cision? | | | |
| | | ganization's CEO, Executive Director, or top management official | | 15a | | X |
| Ľ | | officers or key employees of the organization. | | 15 b | _ | _ <u>X</u> |
| 10. | | ' to line 15a or 15b, describe the process in Schedule O (see instructions). | | | | |
| | taxabl | e organization invest in, contribute assets to, or participate in a joint venture or similar e entity during the year? | | 16 a | _ | х |
| t | nartici | ' did the organization follow a written policy or procedure requiring the organization to evalua pation in joint venture arrangements under applicable federal tax law, and take steps t zation's exempt status with respect to such arrangements? | o safeguard the | 16 b | | |
| Sec | | . Disclosure | | | | |
| | | e states with which a copy of this Form 990 is required to be filed | | | | |
| 18 | Sectio for pub | n 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a lic inspection. Indicate how you made these available. Check all that apply. | nd 990-T (Section 501(c)(3) | s only) | availa | ble |
| | L_1 | | er (explain in Schedule O) | | | |
| 19 | the publ | in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest point of utring the tax year. See Schedule O | | able to | | |
| 20 | State t | he name, address, and telephone number of the person who possesses the organization's bo | oks and records: | | | |

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

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

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

 List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

.....

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

| | | | | (C) |) | | | | |
|-----------------------------|--|-----------------------------------|-----------------------|---------|--------------|------------------------------|-------------------------------------|--|--|
| (A) Name and Title | (B) Average hours per | | dire | ector/ | /trust | | compensation from | (E) Reportable compensation from | (F) Estimated amount of other compensation |
| | per week (list any hours for related organiza- tions below dotted line) | individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | the organization (W-2/1099-MISC) | related organizations (W-2/1099-MISC) | from the organization and related organizations |
| (1) SCOTT AUSTIN | 0 | | | | | | | | |
| Treasurer / | 0 | Х | | Х | | | 0. | 0. | 0. |
| (2) RYANN BLACHSHERE VARGAS | 0 | | | | | | | | |
| BOARD MEMBER | 0 | Х | | | | | 0. | 0. | 0. |
| (3) CHARLES CLAY | 0 | | | | | | | | |
| BOARD MEMBER | 0 | X | | | | | 0. | 0. | 0. |
| (4) JULIE GAMBERG | 0 | | | | | | | | |
| BOARD MEMBER | 0 | X | | | | | 0. | 0. | 0. |
| (5) SHANOAH HARDY | 0 | | | | | | | | |
| BOARD MEMBER | 0 | Х | | | | | 0. | 0. | 0. |
| (6) MEREDITH LUITEN | 0 | | | | | | | | |
| BOARD MEMBER | 0 | X | | | | | 0. | 0. | 0. |
| (7) WARD_CALAWAY | 0 | | | | | | | | |
| Director | 0 | X | | | | | 0. | 0. | 0. |
| (8) RENA DELGADO | 0 | | | | | | | | |
| Chairman | 0 | X | | x | | | 0. | 0. | 0. |
| (9) LAQUETTE SHAMBLEE | 0 | | | | | | | | |
| Secretary | 0 | X | | | | | 0. | ο. | 0. |
| (10) LANCE MUNGIA | 40 | | | | | | | | |
| Executive Dir. | 0 | | | X | | | 46,613. | ο. | 0. |
| (11) | | | | | | | | | |
| (12) | | | | _ | | | | | |
| (13) | | | | | | | | | |
| (14) | | | | - | | | | | |
| BAA | TEEA01 | 07L | 11/16 | /16 | | | | | Form 990 (2016) |

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Form 990 (2016) COMMUNITY MEDIA OF THE FOOTHILLS 953886210 Page 8 Part Vil Section A. Officers. Directors. Trustees. Key Employees. and Highest Compensated Employees (continued)

| (A) Name and title | (B) Average hours per week | (do box | not c | Po: Po: check | sition more erson direct | e than is bott or/trus | one h an tee) | (D) Reportable compensation from | (E) Reportable compensation from | am | (F) Estimated | d |
|---|---|-----------------------------------|-----------------------|---------------------|-----------------------------------|------------------------------|---------------------|--|--|---------|--|----------|
| | (list any hours for related organiza tions below dotted line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | the organization (W-2/1099-MISC) | related organizations (W-2/1099-MISC) | o a | mpensati from the rganizatio nd relate ganizatio | on ed |
| (15) | | | | | | | | | | | | |
| (16) | | | | | | | | | | | | |
| (17) | | - | | | | | | | | | | |
| (18) | | | | | | | | | | | | |
| (19) | | | | | | | | | | | | |
| (20) | | | | | | | | | | | | _ |
| (21) | <u>+</u> | | | | | | | | | | | _ |
| (22) | + | | | | | | | | | | | |
| (23) | | | | | | | | | | • | | |
| (24) | | | | | | | | | | | | |
| (25) | | | | | | | | | | | | • |
| 1 b Sub-total | | | | | | L | • | 46,613. | 0. | | | 0. |
| c Total from continuation sheets to Part VII, Sect | | | | | | | • | 0. | 0. | | | 0. |
| d Total (add lines 1b and 1c) | | | | | | | <u> </u> | 46,613. | 0. | | _ | 0. |
| 2 Total number of individuals (including but not limite from the organization ► 0 | d to those I | isted | abov | /e) v | who | recen | ved | more than \$100,00 | 0 of reportable comp | ensatio | | |
| 3 Did the organization list any former officer, dire | ctor, or tru | istee, | key | en en | nploy | /ee, | or h | ighest compensat | ted employee | | Yes | No |
| on line 1a? If 'Yes,' complete Schedule J for su For any individual listed on line 1a, is the sum of | of reportab | le co | mpe | ensa | tion | and | oth | er compensation | | . 3 | | X |
| the organization and related organizations great such individual | er than \$1: | 50,00 | 20? | <i>lf '</i> Υ | /es, | ' com | iple: | te Schedule J for | | . 4 | | Х |
| 5 Did any person listed on line 1a receive or accru for services rendered to the organization? If 'Ye | ue comper s,' <i>comple</i> | isatio ete Sc | n fro ched | om lule | any <i>J fo</i> | unre r suc | late h p | d organization or erson | individual | . 5 | | x |
| Section B. Independent Contractors Complete this table for your five highest comper- compensation from the organization. Report compe | nsated ind | epend | dent | t cor | ntrae | ctors endi | tha | t received more the or | nan \$100,000 of | | | |
| (A) Name and business add | | | | | <u>,</u> | <u>orrain</u> | .9 | (B) Description o | | | (C) ensatic | n |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| • Tatal number of independent contractors /industry | hut not limi | ind t | . +6 | | into- | laha | | who reactived mean | thop | | | _ |
| 2 Total number of independent contractors (including \$100,000 of compensation from the organization | | neu to | J (110) | sel | ISLEC | 1 900, | vej | who received more | uidti | | | |

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| | | Check if Schedule O contains a resp | onse or note to any | line in this Part V | 10 | | |
|---|--------|--|---------------------|---------------------------------------|--|---|--|
| | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 |
| ants unts | | Federated campaigns 1 a Membership dues 1 b | | | | | |
| <u> </u> | | Fundraising events | | | | | |
| ifts ar A | | Related organizations 1d | | | | | |
| nii G | е | Government grants (contributions) 1 e | | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | f | All other contributions, gifts, grants, and similar amounts not included above 1 f | | | | | |
| Ξŏ | | Noncash contributions included in lines 1a-1f: \$ | | | | | |
| an Co | h | Total. Add lines 1a-1f | ▶ | | | | |
| ne. | | | Business Code | | | | |
| ¥e1 | | CONTRACT_REVENUE | | 211,507. | <u>211,507.</u> | | |
| ě | | OTHER_VIDEO_PROJECTS | | 1,013. | 1,013. | | |
| No | C | _ | | | | | |
| Š | a | | | | | | |
| nan Tar | e f | All other program service revenue | | | | | |
| Program Service Revenue | | Total. Add lines 2a-2f. | ► | 212,520. | | | |
| <u> </u> | 3 | | | 212, 520. | | | |
| | 5 | Investment income (including dividends other similar amounts) | | | | | |
| | 4 | Income from investment of tax-exempt | · · · | | | | |
| | 5 | Royalties | | | | | |
| | | (i) Real | (ii) Personal | | | | |
| | | | <u> </u> | | | | |
| | | Less: rental expenses Rental income or (loss) | | | | | |
| | | | ▶ | | | | 1 |
| | | Gross amount from sales of (i) Securities | (ii) Other | | ····· | | |
| | 1 d | assets other than inventory | <u> </u> | | | | |
| | b | Less: cost or other basis and sales expenses | | | | | |
| | с | Gain or (loss) | | | | | |
| | d | Net gain or (loss) | | | | | |
| nue | 8 a | Gross income from fundraising events (not including. \$ | | | | | |
| Ne | | of contributions reported on line 1c). | | | | | |
| Other Revenu | | See Part IV, line 18 a | | | | | |
| hei | | Less: direct expenses | | | | | |
| δ | | Net income or (loss) from fundraising e | | | | | |
| | | Grcss income from gaming activities. See Part IV, line 19a | | | | | |
| | | Less: direct expenses | | | | | |
| | | Net income or (loss) from gaming activi | | | | | |
| | 10a | Gross sales of inventory, less returns and allowancesa | | | | | 1 |
| | | Less: cost of goods sold | | | | | |
| | | Net income or (loss) from sales of inver | | | | | |
| | | Miscellaneous Revenue | Business Code | | | | |
| | 11 a | | | | | | |
| | b | | | | · · · · · · · · · · · · · · · · · · · | | |
| | с | | | · · · · · · · · · · · · · · · · · · · | | | |
| | | All other revenue | | | | | |
| | | Total. Add lines 11a-11d | | | | | |
| | 12 | Total revenue. See instructions | •••••• | 212,520. | 212,520. | 0. | 0. |

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX.....

| Description Total expenses Program service Program service Management and puncal expenses Fundralism expenses 1 Grants and other assistance to domestic See Per IV, line 21 | | Check if Schedule O contains a re | | | | |
|--|----|--|------------------------------|---------|--|----|
| organizators and domestic governments. See Part V Ine 20. 2 Organizators and other services on foreign eign flavious. See Part V, lines 15 and 16. 3 Grafts and Other services to foreign eign flavious. See Part V, lines 15 and 16. 4 Benefits paid to or tor members. 5 Compensation of neuroted bows. Is section 4858(0)(3). 6 Compensation of neuroted bows. Is section 4858(0)(3). 7 Other salaries and wages. 9 Other salaries and wages. 9 Pencis passed and contributions (neuros beends). 9 Other amployee beends. 10 Fees for services (non-employees): 11 Fees for services (on employees): 12 Manatign and promotion on Stackiel 0. 13 Office expenses. | | | (A) Total expenses | | (C) Management and general expenses | |
| individuals. See Part IV, line 22 | 1 | organizations and domestic governments. See Part IV, line 21 | | | | |
| argin ziturs, foreign goverments, and for- eign individuals. See Part V. lines 15 and 16 Benefits paid to or for members. Compensation of current of fores, directors, trasfees, and key employees. Compensation of current offices, directors, sector 4355(f)(1) and persons described in sector 4956(c)(3)(2). Pension particles, directors, (nickde sector 40(f) and 403(0)) employer contributions. 9 Other employee benefits. 10 Payofit taxes. 11 Fees for services (non-employees): a Management. b Logal. 12 Advertising and promotion. 13 Fees for services (from-employees): a Management. b Logal. 14 Interstation taxes. 15 Fees for services (from-employees): a Management. b Logal. 14 Interstation technology. 15 Fees for services (from-employees): a Management. 16 Occupancy. 17 Taxet 18 Pension promotion 19 Other employee been fits. 10 Other employee been fits. 10 Other employee been fits. 11 Fees for services (for employees): 14 Information technology. 15 Advertising and promotion 16 Occupancy. 17 Tavel. 18 Paymen | 2 | Grants and other assistance to domestic individuals. See Part IV, line 22 | | | | |
| c Compensation of current officers, itrustees, and key employees. 46,613. 34,960. 11,653. c Compensation not included above, to discutted persons (as defined under section 4950(5)(0). 0. 0. 0. 0. 7 Other statics and wages. 91,466. 91,466. 91,466. 91,466. 9 Pension pension described 0. 0. 0. 0. 9 Other statics and contributions (include section 400(0) and 435(0) 91,466. 91,466. 91,466. 9 Pension pension described 0. 0. 0. 0. 9 Other employee benefits 0. 0. 0. 0. 9 Provide statistics 0. 0. 0. 0. 9 Other employee benefits 0. 0. 0. 0. 9 Other enginge sections (non-employees): 3. 3. 3. 0. 0. 0. 9 Other enginge sections of Statile 0. 0. 3. 3. 0. 0. 10 Advertising and promotion 3.3,600. 3.600. 1. 1. 1. 10 Advertising and promotion | 3 | organizations, foreign governments, and for- | | | | |
| trustees, and key employees. 46, 613. 34, 960. 11, 653. 6 Compensation not include above, to displatified persons desoftled 0. 0. 0. 7 Other statistics and wages 91, 466. 91, 466. 91, 466. 8 Persion plan accruates and contributions employer contributions 91, 466. 91, 466. 91, 466. 9 Other employee benefits. 91, 466. 91, 466. 91, 466. 9 Other employee benefits. 90 90 90 90 90 90 90 9 Other employee benefits. 90 | 4 | | | | | |
| disqualified persons (as defined under section 4958((7)) are persons described in section 4958((3)(8)(8). 0. <td< td=""><td>5</td><td>Compensation of current officers, directors, trustees, and key employees</td><td>46,613.</td><td>34,960.</td><td>11,653.</td><td>0.</td></td<> | 5 | Compensation of current officers, directors, trustees, and key employees | 46,613. | 34,960. | 11,653. | 0. |
| g Pension plan accuals and contributions (nectude section 4010 (vol 4030)) employer contributions). 10 Payroll taxes. 11 Fees for services (non-employees): a Management. | 6 | disqualified persons (as defined under | 0. | 0. | 0. | 0. |
| g Pension plan accuals and contributions (nectude section 4010 (vol 4030)) employer contributions). 10 Payroll taxes. 11 Fees for services (non-employees): a Management. | 7 | Other salaries and wages | | | | |
| 10 Payroll taxes. 11 Fees for services (non-employees): a Management. | 8 | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | 51,100. | 5271007 | | |
| 11 Fees for services (non-employees): a Management. | 9 | | | | | - |
| a Management. b legal. | 10 | Payroli taxes | | | | |
| b Legal | 11 | Fees for services (non-employees): | | | | |
| c Accounting. 1,597. 1,198. 399. d Lobbying. | | a Management. | | | | |
| c Accounting. 1,597. 1,198. 399. d Lobbying. | | b Legal | | | | |
| d Lobbying. e Professinal fundraising services. See Part IV, line 17 e Professinal fundraising services. See Part IV, line 17 investment management fees. g Other, (f) line 11 ganout exceeds 10% of line 25 column (A) amount, list line 11 genomes on Schedule 0.). 370 | | | 1,597. | 1,198. | 399. | |
| e Professicnal fundraising services. See Part IV, line 17 f Investment management fees. g Other, (I'line 11) annual seceeds 10% of line 25, column (A) annunt, list line 11g expenses on Schedule 0 370. 12 Advertising and promotion 370. 13 Office expenses. 5, 149. 14 Information technology. 5, 149. 15 Royatties 3, 600. 16 Occupancy. 3, 600. 17 Travel 84. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials. 20, 781. 19 Conferences, conventions, and meetings 20, 781. 21 Depreciation, depletion, and amortization 20, 781. 22 Depreciation, depletion, and amortization 28, 585. 24 Other expenses, Itemize expenses on to cover above (List Im scellaneous expenses on Schedule O.) 7, 413. a REPAIRS 7, 413. 7, 413. b BOOKKERPINC SERVICE 5, 586. 566. c UTLINTIES 4, 457. 4, 457. d PAYNOLL SERVICE 4, 040. 3, 701. 339. e All other expenses. 10, 090. 10, 09 | | | | | | |
| f Investment management fees | | | | | | |
| 9 Oher. (f) firs 11g amount exceeds 10% of line 25 column (A) amount, list line 11g accesses on Schedule 0.) | | | ĺ | | | |
| 12 Advertising and promotion 370. 370. 13 Office expenses 5,149. 4,634. 515. 14 Information technology. 5,149. 4,634. 515. 14 Information technology. 3,600. 3,600. | | Other. (If line 11g amount exceeds 10% of line 25, column | | | - | |
| 14 Information technology. 15 Royalties 16 Occupency. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials. 19 Conferences, conventions, and meetings. 19 Conferences, conventions, and meetings. 20 Interest. 21 Payments to affiliates. 22 Depreciation, depletion, and amortization. 23 Insurance. 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O). a REPAIRS 7, 413. 7, 413. b BOOKKEEPING SERVICE 5, 586. 5, 586. c UTILITIES 4, 457. 4, 457. c UTILITIES 4, 400. 3, 701. 25 Total functional expenses. Add lines 1 through 24e. 26 Joint costs from a combined educational campaign and fundraising solicitation. Chere here - If if following If allowing | 12 | | 370. | 370. | | |
| 15 Royalties 3, 600 3, 600 16 Occupancy 3, 600 3, 600 17 Travel 84 84 18 Payments of travel or entertainment expenses for any federal, state, or local public officials. 84 84 19 Conferences, conventions, and meetings 1 1 1 19 Conferences, conventions, and meetings 1 1 1 21 Payments to affiliates 20, 781. 20, 781. 20, 781. 22 Depreciation, depletion, and amortization 28, 585. 28, 585. 28, 585. 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. 24, 585. 28, 585. 24 Other expenses on Schedule O.) 2 7, 413. 7, 413. 7, 413. 28 BOOKKEEPING_SERVICE 5, 586. 5, 586. 5, 586. 5, 586. 5 4 BOTH expenses. 10, 090. 10, 090. 339. 2 4 Al 57. 4, 457. 4, 457. 4, 457. 4, 457. 4, 457. 5 5 5 5 5 5 5 | 13 | Office expenses | 5,149. | 4,634. | 515. | |
| 16 Occupancy | 14 | Information technology. | | | | |
| 17 Travel 84. 84. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials. 1 19 Conferences, conventions, and meetings 1 19 Conferences, conventions, and meetings 1 20 Interest. 20, 781. 20, 781. 21 Payments to affiliates. 20, 781. 20, 781. 22 Depreciation, depletion, and amortization 20, 781. 20, 781. 23 Insurance. 28, 585. 28, 585. 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e are provided educe 0.) 28, 585. 28, 585. 24 Other expenses on Schedule O.) 28, 586. 5, 586. 5, 586. 25 J.Sint Cots. Column (A) amount, list line 24e expenses on Schedule O.) 7, 413. 7, 413. 7, 413. a REPAIRS 7, 413. 7, 413. 1.457. 4 d PAYROLL SERVICE 4, 457. 4, 457. 4 45. 10, 090. 10, 090. 12, 906. 25 Total functional expenses. Add lines 1 through 24e 229, 831. | 15 | Royalties | | | | |
| 17 Travel 84. 84. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 1 19 Conferences, conventions, and meetings 1 20 Interest. 1 21 Payments to affiliates. 20, 781. 22 Depreciation, depletion, and amortization 20, 781. 23 Insurance. 28, 585. 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses) in line 24e. If line 24e expenses on Schedule O. 28, 585. 25 Column (A) amount, list line 24e expenses on Schedule O. 27, 413. a REPAIRS 7, 413. 7, 413. b BOORKEEPTING SERVICE 5, 586. 5, 586. c UTILITIES 4, 457. 4, 457. d PAYROLL SERVICE 4, 040. 3, 701. 339. e All other expenses. Add lines 1 through 24e 229, 831. 216, 925. 12, 906. 25 Total functional expenses. Add lines 1 through 24e 229, 831. 216, 925. 12, 906. 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 he | 16 | Occupancy | 3,600. | 3,600. | - | |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials. 19 Conferences, conventions, and meetings 20 Interest. 21 Payments to affiliates. 22 Depreciation, depletion, and amortization 23 Insurance. 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount, list line 24e expenses on Schedule O.) a REPAIRS b BOOKKEEPING SERVICE c JUTILITIES d Additional expenses. 10 Optic expenses. 11 Deported above (List miscellaneous expenses in line 24e. If line 24e amount, exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) a REPAIRS f Addition and amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) a REPAIRS f 7, 413. h BOOKKEEPING SERVICE c UTILITIES d Additional expenses. Add lines 1 through 24e 229, 831. 216, 925. 23 Joint costs. Complete this line only if the organization reported in column (B) j | 17 | Travel | | | | |
| 20 Interest | 18 | expenses for any federal, state, or local | | | | |
| 21 Payments to affiliates | 19 | Conferences, conventions, and meetings | | | | |
| 22 Depreciation, depletion, and amortization 20,781. 20,781. 23 Insurance | 20 | Interest | | | | |
| 23 Insurance | 21 | Payments to affiliates | | | | |
| 23 Insurance | 22 | Depreciation, depletion, and amortization | 20,781. | 20,781. | | |
| 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.) Image: Column (A) amount, list line 24e expenses on Schedule 0.) a REPAIRS 7, 413. 7, 413. b BOOKKEEPING SERVICE 5, 586. 5, 586. c UTILLITIES 4, 457. 4, 457. d PAYROLL SERVICE 4, 040. 3, 701. 339. e All other expenses. Add lines 1 through 24e 229, 831. 216, 925. 12, 906. 25 Total functional expenses. Add lines 1 through 24e 229, 831. 216, 925. 12, 906. 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 ▶ if following if following | | 5.5 | | | | |
| b BOOKKEEPING SERVICE 5,586. 5,586. c UTILITIES 4,457. 4,457. d PAYROLL SERVICE 4,040. 3,701. 339. e All other expenses 10,090. 10,090. 25 Total functional expenses. Add lines 1 through 24e 229,831. 216,925. 12,906. 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 ► if if following if following | 24 | covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e | | | | |
| b BOOKKEEPING SERVICE 5,586. 5,586. c UTILITIES 4,457. 4,457. d PAYROLL SERVICE 4,040. 3,701. 339. e All other expenses. 10,090. 10,090. 25 Total functional expenses. Add lines 1 through 24e 229,831. 216,925. 12,906. 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 ▶ if following if following | i | a REPAIRS | 7.413. | 7.413 | 1. | |
| c UTILITIES 4,457. 4,457. d PAYROLL SERVICE 4,040. 3,701. e All other expenses. 10,090. 10,090. 25 Total functional expenses. Add lines 1 through 24e 229,831. 216,925. 12,906. 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 ▶ if following | | | | | | |
| d PAYROLL SERVICE 4,040. 3,701. 339. e All other expenses. 10,090. 10,090. 25 Total functional expenses. Add lines 1 through 24e 229,831. 216,925. 12,906. 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 ► if following | | | | | | |
| e All other expenses. 10,090. 10,090. 25 Total functional expenses. Add lines 1 through 24e 229,831. 216,925. 12,906. 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 ► if if following if following if following | | | | | 220 | |
| 25 Total functional expenses. Add lines 1 through 24e 229,831. 216,925. 12,906. 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 ► if if following 12,906. | | | | | | |
| 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 ► if if following | | · · · | | | 12 906 | 0. |
| SUF 98-2 (ASU 936-720) | 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 ► ☐ if following SOP 98-2 (ASC 958-720) | | | 12,500. | |

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Part X Balance Sheet

| | | (A) | | (B) |
|--|--|--------------------------|------|--------------------|
| | | (A) Beginning of year | | (B) End of year |
| 1 | Cash - non-interest-bearing | 34,858. | 1 | 36,068 |
| 2 | Savings and temporary cash investments | | 2 | |
| 3 | Pledges and grants receivable, net | | 3 | |
| 4 | Accounts receivable, net | 95,622. | 4 | 115,30 |
| 5 | Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L. | | 5 | |
| 6 | | | 6 | |
| 7 | | | 7 | |
| 8 | Inventories for sale or use | | 8 | |
| 9 | | | 9 | 5,20 |
| 10 | a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | | | |
| | b Less: accumulated depreciation | | 10 c | 150,66 |
| 11 | | | 11 | 130,00 |
| 12 | | | 12 | |
| 13 | | | 13 | |
| 14 | | | 14 | |
| 15 | | | 15 | |
| 16 | | | 16 | 307,23 |
| 17 | Accounts payable and accrued expenses | 25,893. | 17 | 22,55 |
| 18 | Grants payable | | 18 | |
| 19 | | | 19 | |
| 20 | Tax-exempt bond liabilities | | 20 | |
| 21 | Escrow or custodial account liability. Complete Part IV of Schedule D. | | 21 | |
| 21 22 | Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L | | 22 | |
| 23 | • • • • • • • • • • • • • • • | | 23 | |
| 24 | | | 24 | · · · |
| 25 | | | 25 | 2,59 |
| 26 | Total liabilities. Add lines 17 through 25 | 27,909. | 26 | 25,15 |
| | Organizations that follow SFAS 117 (ASC 958), check here ► X and complete | | | |
| | lines 27 through 29, and lines 33 and 34. | | | |
| 27 | Unrestricted net assets | ===/=+++ | 27 | 282,08 |
| 28 | Temporarily restricted net assets | | 28 | |
| 29 | | | 29 | |
| | Organizations that do not follow SFAS 117 (ASC 958), check here ► | | | |
| | and complete lines 30 through 34. | | | |
| 27 28 29 30 31 32 33 | | | 30 | |
| 31 | Paid-in or capital surplus, or land, building, or equipment fund. | | 31 | |
| 32 | • | | 32 | |
| 33 | Total net assets or fund balances | | 33 | 282,085 |
| 34 | Total liabilities and net assets/fund balances | 327, 305. | 34 | 307,237 |

| Form | Form 990 (2016) COMMUNITY MEDIA OF THE FOOTHILLS 9538 | | F | | age 1 2 |
|------|--|---------|------|-------|-----------------|
| 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 | 2 | 12. | 520. |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | | | 831. |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | | | 311. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | | | <u></u> 396. |
| 5 | Net unrealized gains (losses) on investments. | 5 | | | |
| 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 | 2 | 82,(| <u> 285.</u> |
| Pa | t XII Financial Statements and Reporting | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII. | | | | . П |
| | | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990: Cash X Accrua! Other | | | | |
| | If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O. | | | | |
| 28 | 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 review separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis | ed on a | | | |
| t | Were the organization's financial statements audited by an independent accountant? | | 2 b | Х | 1 |
| | If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separ basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis | ate | | | |
| c | If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit review, or compilation of its financial statements and selection of an independent accountant? | , | 2c | | х |
| | If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. | | | | |
| 38 | a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? | | 3a | | х |
| | If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits | | 3 b | | |
| BAA | | | Form | 990 (| (2016) |

| SCHEDULE A | |
|----------------------|---|
| (Form 990 or 990-EZ) | l |

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.

Department of the Treasury Internal Revenue Service

| structions is | Open to Public Inspection |
|---------------|------------------------------|
|---------------|------------------------------|

OMB No. 1545-0047 2016

Information about Schedule A (Form 990 or 990-EZ) and its ins at www.irs.gov/form990.

| Name of the organization | | | | | Employer identifica | tion number | | | | |
|---|---|---|--|---|--|--|--|--|--|--|
| COMMUNITY MEDIA OF THE | | | | | 953886210 | | | | | |
| Part I Reason for Public Cha | | | | | | ions. | | | | |
| The organization is not a private found | | | | - | | | | | | |
| | A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). | | | | | | | | | |
| 2 A school described in section | | | | - | | | | | | |
| 3 A hospital or a cooperative h | | | | | | | | | | |
| 4 A medical research organiza name, city, and state: | A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) . Enter the hospital's name, city, and state: | | | | | | | | | |
| 5 An organization operated for section 170(b)(1)(A)(iv). (Co | An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) | | | | | | | | | |
| 6 A federal, state, or local gov | | ental unit described in s | ection 1 | 70(b)(1) | (A)(v). | | | | | |
| 7 X An organization that normally in section 170(b)(1)(A)(vi). | receives a substantial p (Complete Part II.) | part of its support from a | governm | ental unit | or from the general pub | lic described | | | | |
| 8 A community trust described | in section 170(b)(1) | A)(vi). (Complete Part I | II.) | | | | | | | |
| 9 An agricultural research organ or university or a non-land-gra university: | | | | | | | | | | |
| 10 An organization that normally from activities related to its investment income and unre June 30, 1975. See section | exempt functions—su | bject to certain exception | ons, and | (2) no n | nore than 33-1/3% of it | s support from aross | | | | |
| 11 An organization organized a | nd operated exclusive | ely to test for public saf | ety. See | section | 509(a)(4). | | | | | |
| 12 An organization organized a or more publicly supported o lines 12a through 12d that d a Type I. A supporting organizatio organization(s) the power to re complete Part IV, Sections A | organizations describe escribes the type of s on operated, supervise gularly appoint or elect | ed in section 509(a)(1) a supporting organization id, or controlled by its sur | or sectio and com poorted o | n 509(a) iplete lin roanizatio | (2). See section 509(a) es 12e, 12f, and 12g. on(s). typically by giving | (3). Check the box in the supported | | | | |
| b Type II. A supporting organiz management of the supporting must complete Part IV, Sect | zation supervised or o | controlled in connection the same persons that c | with its ontrol or | supporte manage | ed organization(s), by t the supported organization | naving control or on(s). You | | | | |
| c Type III functionally integrated organization(s) (see instruct | . A supporting organizations). You must com | tion operated in connectio | n with, ar A. D. an | nd functio | nally integrated with, its s | supported | | | | |
| d Type III non-functionally integrated. The instructions). You must com | rated. A supporting orgonization generally | janization operated in cor must satisfy a distribu | nnection ition regi | with its si | upported organization(s) and an attentiveness i | that is not requirement (see | | | | |
| Check this box if the organiz | ation received a writt | en determination from | the IRS | that it is | a Type I, Type II, Type | III functionally | | | | |
| f Enter the number of supported g Provide the following information | organizations | | | | | | | | | |
| | | <u> </u> | | . . | (v) Amount of monetary | 6-D 4 | | | | |
| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1-10 above (see instructions)) | (iv) la organizat in your g docur | ion listed | support (see instructions) | . (vi) Amount of other support (see instructions) | | | | |
| | | | Yes | No | | | | | | |
| (A) | | | | | | | | | | |
| (B) | | | | | | | | | | |
| (C) | | | | | | | | | | |
| (D) | | _ | - | | | | | | | |
| (E) | | | | | | | | | | |
| Total | | | | | | | | | | |
| BAA For Paperwork Reduction Act N | otice, see the Instruc | tions for Form 990 or 9 | 990-EZ. | - fr f | Schedule A (For | m 990 or 990-EZ) 2016 | | | | |

Schedule A (Form 990 or 990-EZ) 2016 COMMUNITY MEDIA OF THE FOOTHILLS

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

| Sec | tion A. Public Support | | | | | | |
|--------------|--|--|--|---|---|--------------------------------------|---------------------------|
| Cale begi | ndar year (or fiscal year nning in) ► | (a) 2012 | (b) 2013 | (c) 2014 | (d) 2015 | (e) 2016 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.) | 2,047. | 525. | 4,344. | 225. | | 7,141. |
| 2. | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | 0. |
| 3 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | 0. |
| 4 5 | Total. Add lines 1 through 3 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 | 2,047. | 525. | 4,344. | 225. | 0. | 7,141. |
| 6 | shown on line 11, column (f) Public support. Subtract line 5 from line 4 | | | | | | 0. |
| Sec | tion B. Total Support | | | | | | 7,141. |
| Cale | ndar year (or fiscal year nning in) ► | (a) 2012 | (b) 2013 | (c) 2014 | (d) 2015 | (e) 2016 | (f) Total |
| 7 | Amounts from line 4 | 2,047. | 525. | 4,344. | 225. | 0. | 7,141. |
| 8 | Gross income from interest, dividends, payments received on securities loans, rents, royatties and income from similar sources. | 362. | 109. | | | | 471. |
| 9 | Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | 0. |
| 10 | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | | | 0. |
| | Total support. Add lines 7 through 10 | | | | | | 7,612. |
| | Gross receipts from related activ | | , | | | 12 | 1,199,910. |
| | First five years. If the Form 990 is organization, check this box and | stop here | ••••• | | | | • |
| | tion C. Computation of Pul | | | 14 1 (2) | | | |
| | Public support percentage for 20 Public support percentage from 3 | | | | | | <u>93.81 %</u> 89.59 % |
| | 33-1/3% support test — 2016. If the and stop here. The organization | ne organization di | d not check the bo | ox on line 13, and | t line 14 is 33-1/3 | % or more, check | this box |
| b | 33-1/3% support test—2015. If th and stop here. The organization | e organization did qualifies as a put | not check a box blicly supported or | on line 13 or 16a ganization | , and line 15 is 33 | -1/3% or more, c | |
| 17a | 10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts | meets the 'facts-a | nd-circumstances | test check this | box and stop her | Explain in Part | VI how |
| | 10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and | meets the 'facts-a d-circumstances' t | nd-circumstances est. The organizat | ' test, check this tion qualifies as a | box and stop here a publicly supported | e. Explain in Part d organization | VI how the |
| 18 | Private foundation. If the organiz | zation did not che | ck a box on line 1 | 3, 16a, 16b, 17a, | or 17b, check this | s box and see ins | tructions 🏲 📘 |

COMMUNITY MEDIA OF THE FOOTHILLS

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Page 3

| Par | t III Support Schedule for (Complete only if you check | r Organizatio | ns Described i | n Section 509 | (a)(2) | | |
|-------|--|---------------------------------|--|----------------------|----------------------|-----------------------|----------------|
| | fails to qualify under the te | | | | in failed to quality | under Part II. If the | e organization |
| | tion A. Public Support | | | | | | |
| Calen | dar year (or fiscal year beginning in) ► Gifts, grants, contributions, | (a) 2012 | (b) 2013 | (c) 2014 | (d) 2015 | (e) 2016 | (f) Total |
| | and membership fees received. (Do not include any 'unusual grants.') | | | | | | |
| 2 | Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 | Gross receipts from activities that are not an unrelated trade or business under section 513. | | | | | | |
| 4 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. | | | | | | |
| 5 | The value of services or facilities furnished by a governmental unit to the organization without charge | · · | | | | | |
| | Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | |
| b | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | | |
| С | Add lines 7a and 7b | | | | | | |
| 8 | Public support. (Subtract line 7c from line 6.) | | | | | | |
| Sec | tion B. Total Support | | | | | | |
| | dar year (or fiscal year beginning in) 🕨 | (a) 2012 | (b) 2013 | (c) 2014 | (d) 2015 | (e) 2016 | (f) Total |
| 10a | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 | | | | | | |
| ~ | taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b | | | | | | |
| | Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. | | · · | | | | |
| 12 | Other income. Do not include gain or lcss from the sale of capital assets (Explain in Part VI.) | | | | | | |
| 13 | Total support. (Add lines 9, 10c, 11, and 12.) | | | | | | |
| 14 | | is for the organiz stop here | ation's first, seco | nd, third, fourth, o | or fifth tax year as | a section 501(c)(3) | |
| Sec | tion C. Computation of Pul | <u> </u> | | | | | |
| 15 | Public support percentage for 20 | | | | | | 00 |
| 16 | | | | | | 16 | 8 |
| | tion D. Computation of Inv | | | | | | |
| 17 | Investment income percentage for | | | | | | |
| 18 | Investment income percentage fi | | | | | | 8 |
| 198 | 33-1/3% support tests-2016. If t is not more than 33-1/3%, check | this box and sto | ond not check the b here. The organ | pox on line 14, an | id line 15 is more | trian 33-1/3%, and | line I / |

b 33-1/3% support tests—2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

►

►

Schedule A (Form 990 or 990-EZ) 2016 COMMUNITY MEDIA OF THE FOOTHILLS

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Page 4

No

Yes

1

2

3a

3b

30

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

90

10a

10b

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d 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 12a or 12b 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 cetail in **Part VI**.
- c Did a discualified 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.)

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Schedule A (Form 990 or 990-EZ) 2016 COMMUNITY MEDIA OF THE FOOTHILLS

| | | Yes | No |
|---|-----|-----|----|
| 11 Has the organization accepted a gift or contribution from any of the following persons? | | | |
| a 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 | _ | |
| b A family member of a person described in (a) above? | 11b | | |
| c 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 | | |
| Section B. Type I Supporting Organizations | | | |

- 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.
- 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.

Section C. Type II Supporting Organizations

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).

Section D. All Type III Supporting Organizations

- 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?
- 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).
- **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.*

Section 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 year (see instructions).
 - a The organization satisfied the Activities Test. Complete line 2 below.
 - b The organization is the parent of each of its supported organizations. Complete line 3 below.
 - c The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions).

2 Activities Test. Answer (a) and (b) below.

- a 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 V 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.
- 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.
- 3 Parent of Supported Organizations. Answer (a) and (b) below.
- a 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 Part VI.*
- **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.

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1

2

1

2

3

Yes

Yes

No

No

Page 5

Yes No

Schedule A (Form 990 or 990-EZ) 2016 COMMUNITY MEDIA OF THE FOOTHILLS 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 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

| Sec | tion A – Adjusted Net Income | | (A) Prior Year | (B) Current Year (optional) |
|-----|--|----|----------------|--------------------------------|
| 1 | Net short-term capital gain | 1 | | |
| 2 | Recoveries of prior-year distributions | 2 | | |
| 3 | Other gross income (see instructions) | 3 | | |
| 4 | Add lines 1 through 3. | 4 | | |
| 5 | Depreciation and depletion | 5 | | |
| 6 | Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | 6 | | |
| 7 | Other expenses (see instructions) | 7 | | |
| 8 | Adjusted Net Income (subtract lines 5, 6, and 7 from line 4). | 8 | | |
| Sec | tion B – Minimum Asset Amount | _ | (A) Prior Year | (B) Current Yea (optional) |
| 1 | Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): | | | |
| | a Average monthly value of securities | 1a | | |
| | Average monthly cash balances | 1b | | |
| | c Fair market value of other non-exempt-use assets | 1c | | |
| | 1 Total (add lines 1a, 1b, and 1c) | 1d | | |
| • | e Discount claimed for blockage or other factors (explain in detail in Part VI): | | | |
| 2 | Acquisition indebtedness applicable to non-exempt-use assets | 2 | | ÷ |
| 3 | Subtract line 2 from line 1d. | 3 | | |
| 4 | Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). | 4 | | |
| 5 | Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | | |
| 6 | Multiply line 5 by .035. | 6 | | |
| 7 | Recoveries of prior-year distributions | 7 | | |
| 8 | Minimum Asset Amount (add line 7 to line 6) | 8 | | |
| Sec | tion C – Distributable Amount | | | Current Year |
| 1 | Adjusted net income for prior year (from Section A, line 8, Column A) | 1 | | |
| 2 | Enter 85% of line 1. | 2 | | |
| 3 | Minimum asset amount for prior year (from Section B, line 8, Column A) | 3 | | |
| 4 | Enter greater of line 2 or line 3. | 4 | | |
| 5 | Income tax imposed in prior year | 5 | | |
| 6 | Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). | 6 | | |
| | | | | |

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

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Schedule A (Form 990 or 990-EZ) 2016

953886210

| Schedule A (Form 990 or 990-EZ) 2016 | COMMUNITY | MEDIA | OF | THE | FOOTHILLS | |
|--------------------------------------|-----------|-------|----|-----|-----------|--|
| | | | | | | |

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| Par | | upporting Organiza | ations (continuea) | |
|-----|---|--------------------------------|--|---|
| Sec | tion D – Distributions | | <u>[]</u> | Current Year |
| 1 | Amounts paid to supported organizations to accomplish exempt pu | urposes | | |
| 2 | Amounts paid to perform activity that directly furthers exempt purposes in excess of income from activity | | | |
| 3 | Administrative expenses paid to accomplish exempt purposes of s | upported organizations | | |
| 4 | Amounts paid to acquire exempt-use assets | | | |
| | 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 organization Part VI). See instructions. | ion is responsive (provide | details | |
| 9 | Distributable amount for 2016 from Section C, line 6 | | | |
| 10 | Line 8 amount divided by Line 9 amount | | | |
| Sec | tion E – Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributions Pre-2016 | (iii) Distributable Amount for 2016 |
| 1_ | Distributable amount for 2016 from Section C, line 6 | | | |
| 2 | Underdistributions, if any, for years prior to 2016 (reasonable cause required – explain in Part VI). See instructions. | | | |
| 3 | Excess distributions carryover, if any, to 2016: | | | |
| а | | | | |
| b | | | | |
| | From 2013 | | | |
| | From 2014 | | | |
| е | From 2015 | | | |
| f | Total of lines 3a through e | | | |
| g | Applied to underdistributions of prior years | | | |
| h | Applied to 2016 distributable amount | | | |
| I | Carryover from 2011 not applied (see instructions) | | | |
| j | Remainder. Subtract lines 3g, 3h, and 3i from 3f. | | | |
| 4 | Distributions for 2016 from Section D, line 7: \$ | | | |
| а | Applied to underdistributions of prior years | | | |
| | Applied to 2016 distributable amount | | | |
| C | Remainder. Subtract lines 4a and 4b from 4. | | | |
| 5 | Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. | | | |
| 6 | Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. | | | |
| 7 | Excess distributions carryover to 2017. Add lines 3j and 4c. | | | |
| 8 | Breakdown of line 7: | | | |
| a | | | | |
| b | Excess from 2013 | | | |
| с | Excess from 2014 | | | |
| d | Excess from 2015 | | | |
| е | Excess from 2016 | | | |
| _ | | | | (|

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Schedule A (Form 990 or 990-EZ) 2016

Part VI

COMMUNITY MEDIA OF THE FOOTHILLS

953886210

Page 8 **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

| SCHEDULE D Supplemental Financial Statements | | | | | | OMB No. 1545-0047 | | | |
|--|---|--|--|--|--------------------------|------------------------------|---------------------------|----------------|----|
| | orm 990) | ► Complet | te if the organization answere 5. 7. 8. 9. 10. 11a. 11b. 11c. 11 | ed 'Yes' on Form 9 d. 11e. 11f. 12a. o | 990. | | 20 | 16 | |
| Depa Interr | Attach to Form 990. Attach to Form 990. Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. | | | | | Open to Public Inspection | | | |
| Name | e of the organization | | | | | Employer i | dentification n | | |
| | | Y MEDIA OF THE FOO | | | | 953886 | 210 | | |
| Pa | Complete | if the organization answ | or Advised Funds or Oth wered 'Yes' on Form 990 | o, Part IV, line | 1 ds or Acc 6. | ounts. | | | |
| | <u> </u> | | (a) Donor advised | funds | (b) F | unds and | other accou | unts | |
| 1 | | end of year | | | | | | _ | _ |
| 2 | | ntributions to (during year) | | | | | | | |
| 4 | | at end of year | | | | | | | |
| 5 | Did the organizati | ion inform all donors and dor ion's property, subject to the | or advisors in writing that the organization's exclusive legal | e assets held in do | onor advised | funds | Yes | No | _ |
| 6 | Did the organizati | ion inform all grantees, dono poses and not for the benefit | rs, and donor advisors in writ of the donor or donor adviso | ing that grant fund r, or for any other | ds can be use | ⊢ d only ferring |] Yes | | |
| Pa | | tion Easements. | | | | ····· | Tes | No | |
| 1 44 | Complete | if the organization answ | wered 'Yes' on Form 990 | | 7. | | | | |
| 1 | | | y the organization (check all t | | | | | | |
| | | of land for public use (e.g., r natural habitat | ecreation or education) | Preservation of | | | | a | |
| | | of open space | | Preservation of | a certified r | nistoric str | ucture | | |
| 2 | | through 2d if the organization h | neld a qualified conservation cor | ntribution in the form | m of a conserv | ation ease | ment on the | 1 | |
| | Tabal an arban of a | | | | | eld at the | End of the | Tax Yea | ar |
| | | | nents | | | | - | | _ |
| | | | fied historic structure included | | | | | | _ |
| | Number of conser | rvation easements included in | n (c) acquired after 8/17/06, a | ind not on a histor | | | | _ | |
| 3 | Number of conserv tax year ► | ration easements modified, tran | sferred, released, extinguished, | or terminated by th | ne organization | n during th | e | | |
| 4 | | where property subject to conse | | | _ | | | | |
| 5 | Does the organiza and enforcement | ation have a written policy re- of the conservation easemen | garding the periodic monitorir nts it holds? | ng, inspection, har | ndling of viola | ations, | Yes | No | |
| 6 | Staff and volunteer | r hours devoted to monitoring, i | nspecting, handling of violations | s, and enforcing cor | nservation eas | ements du | ring the yea | r | |
| 7 | Amount of expense | es incurred in monitoring, inspe | cting, handling of violations, and | d enforcing conserv | ation easeme | nts during | the year | | |
| 8 | Does each conser and section 170(h | rvation easement reported or i)(4)(B)(ii)? | n line 2(d) above satisfy the re | equirements of se | ction 170(h)(4 | ¹)(B)(i) | Yes | No | |
| 9 | include, if applica conservation ease | ble, the text of the footnote t ements. | conservation easements in its i the organization's financial | statements that d | escribes the | organizati | on's accour | d nting for | |
| Par | t III Organizat Complete | ions Maintaining Collection if the organization answ | ctions of Art, Historical wered 'Yes' on Form 990 | Treasures, or D, Part IV, line | Other Sim 8. | ilar Ass | ets. | | |
| | art, historical treasi in Part XIII, the te | ures, or other similar assets he ext of the footnote to its finan | SFAS 116 (ASC 958), not to Id for public exhibition, education icial statements that describes | n, or research in fu s these items. | irtherance of p | ublic servi | ce, provide, | | 5 |
| I | following amounts | , or other similar assets held to s relating to these items: | SFAS 116 (ASC 958), to rep or public exhibition, education, o | r research in furthe | rance of public | c service, p | sheet work provide the | s of art, | , |
| | | | line 1 | | | | | | |
| 2 | | | istorical tractures, or other simi | | | | awing | | _ |
| | | | istorical treasures, or other simi 116 (ASC 953) relating to the | | | | GMING | | |
| | | | 1 | | | | | | |
| | Assets included in | 1 Form 990, Part X | | | | ► Ş | | | |

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

TEEA3301L 08/15/16

| Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part line 9, or reported an amount on Form 990. Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?. Image: Complete if the organization or other assets not included or Form 990, Part X?. b If 'Yes,' explain the arrangement in Pert XIII and complete the following table: Image: Complete if the organization and the perturbation of perturbation answered 'Yes' on Form 990, Part X, line 21, for escrow or custodial account liability? If yes b If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part IV, line 10. Part IV Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part IV, line 10. Part IV Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part IV, line 10. I a Beginning of year balance | Schedule D (Form 990) 2016 COMMUNITY | | | 953880 | | | Page 2 |
|--|---|---|---|-----------------------------|--------------|---------|--------|
| iem (check all that apply): a b b c c c c c c c c c c c <td></td> <td></td> <td></td> <td></td> <td></td> <td>ntinu</td> <td>ed)</td> | | | | | | ntinu | ed) |
| b Scholarly research b Other c Provide a description of hubure generations Provide a description of the organization solicit or receive donations of art, historical treasures, or other similar assets Yes Partyl Escrow and Custodial Arrangements. Complete if the organization assets in the organization answered Yes' on Form 990, Part X Partyl Escrow and Custodial Arrangements. Complete if the organization assets not included in form 990, Part X, line 21. 1 at set organization angement in Part XII and complete the following table: Amount c Engine balance. 1c d Additions during the year. 1c Amount 1 at bit organization angement in Part XII and complete the following table: 1c Amount c Ending balance. 1c 1c 1c d Additions during the year. 1e 1e 1e 1e 1e c Ending balance. 1d 1d </td <td>items (check all that apply):</td> <td></td> <td></td> <td>re a significant use of its</td> <td>collection</td> <td></td> <td></td> | items (check all that apply): | | | re a significant use of its | collection | | |
| e Preservation for future generations 4 Provide a feetorption of the organization solections and explain how they further the organization's exempt purpose in 5 During the sear did the organization solections of art, historical resource, or other similar assets 1 During the year, did the organization solections of art, historical resource, or other similar assets 1 During the year, did the organization solections of art, historical resource, or other similar assets 1 The second of the organization and perform 1000, Part X, line 9, or reported an amount on Form 990, Part X, line 9. 1 The the organization and agent, trustee, custodian or other intermediary for contributions or other assets not included on form 990, Part X, line 21, for escrew or custodial account liability? 2 Bit Moditions during the year. 1c 2 Did the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability? Yes 2 Did the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability? Yes 2 Did the organization include an amount on Form 990, Part X, line 21, for escrew on Custodial account liability? Yes 2 Did the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability? Yes 2 Dif Yes or aparization size (| | | | | | | |
| Provide a description of the organization solicit or receive donations of art, historical treasures, or other similar assets to be solid to raise tude staffer than to be minilarid as grain of the organization answered 'Yes' on Form 990, Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the erganization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X1. Is the erganization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X1. Is the erganization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X1. Is the erganization and gent, trustee, custodial account liability? Uves bit Yves 'explain the arrangement in Part XIII and complete the following table: C Beginning balance. C Id difficus during the year. C Id Distributions during the year. Contributions. Contr | | | | | | | |
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| [Part W] [Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part I's'. 1a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X. Ives bit 'Yes', explain the arrangement in Part XIII and complete the following table: Amount c Beginning balance. 1c d Additions during the year. 1d e Distributions during the year. 1e 1 Ending balance. 1t 2 Bit Me organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes bit Yes', explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Yes bit Yes', explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Yes b Contributions. (a) Durrent year (b) Prior year b Contributions. (b) Durrent year (b) Prior year (c) Three years back c Net investment earnings, gains, and customed and administered for the organization and unswered for the organization by: c) Our expenditures for facilities and programs. c Temporarily restricted endowment > % % b Permenent endowment + % g End of year babance. 10% | | it or receive donations of ar maintained as part of the c | t, historical treasures, c organization's collection | or other similar assets | Yes | Г | No |
| 1a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form '990, Part X. Image: Contribution of the organization include an amount on Form '990, Part X, line 21, for escrew or custodial account liability? Image: Contribution of the organization include an amount on Form '990, Part X, line 21, for escrew or custodial account liability? Image: Contribution of the organization include an amount on Form '990, Part X, line 21, for escrew or custodial account liability? Image: Contribution of Contributions of the organization answered 'Yes' on Form '990, Part XII. Image: Contributions of Contributions of the organization answered 'Yes' on Form '990, Part XII. Image: Contributions. Image: Co | Part IV Escrow and Custodial Arran | gements. Complete if 1 | the organization an | swered 'Yes' on Fo | orm 990, | Par | |
| on Form 990, Part X/. | line 9, or reported an amount | on Form 990, Part X, | line 21. | | | | , |
| b If Yes,' explain the arrangement in Part XIII and complete the following table: Image: Complete in the arrangement in Part XIII and complete the following table: c Beginning balance. Image: Complete in the arrangement in Part XIII and complete the following table: Image: Complete in the arrangement in Part XIII and complete the following table: 2 a Did the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability? Yes 2 a Did the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability? Yes b Contributions. Image: Complete if the organization answered 'Yes' on Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part IV, line 10. b Contributions. Image: Complete if the organization answered 'Yes' on Form 990, Part IV, line 10. c Net investment earnings, gains, and losses Image: Complete if the organization answered 'Yes' on Form 990, Part IV, line 10. c Other expenditures for facilities Image: Complete if the organization answered 'Yes' on Form 990, Part IV, line 10. c Other expenditures for facilities Image: Complete if the organization answered 'Yes' on Form 990, Part IV, line 10. c Temporarily restricted endowment * % b Permanent endowment * % b Permanent endowment * % c Temporarily restricted end | 1 a Is the organization an agent, trustee, cust on Form 990, Part X? | odian or other intermediary | for contributions or oth | er assets not included | Yes | | No |
| c Beginning balance | | | | | | | |
| d Additions during the year. Id e Distributions during the year. Id 1 Ending balance. It 2 a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custoded on Part XIII. Yes b If Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Yes Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part IV, line 10. 1 a Beginning of year balance. (a) Current year b Contributions. (b) Prior year c Net investment earnings, gains, and losses. (b) Prior year and programs. (c) Two years back g End of year balance. * | | | | | Amount | | |
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| f Ending balance. 11 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Yes Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part IV, line 10. 1a Beginning of year balance. (a) Current year (b) Prior year (c) Two years back (e) Fur years back b Contributions. (a) Current year (b) Prior year (c) Two years back (e) Fur years back c Net investment earnings, gains, and losses. (a) Current year (b) Prior year (c) Two years back (e) Fur years back e Other expenditures for facilities and programs. (a) Current year end balance (line 1g, column (a)) held as: (a) Card expenditures for facilities and programs. (a) Column (a) held as: a Board designated or quasi-endowment * % % % (b) Permanent endowment * % C Temporarily restricted endowment * % % % (f) related organizations (| | | | | | | |
| 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? | e Distributions during the year | | · · · · · · · · · · · · · · · · · · · | 1e | | | |
| b If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part IV, line 10. 1 a Beginning of year balance. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back b Contributions. a (b) Prior year (c) Two years back (d) Three years back (e) Four years back b Contributions. a a a (b) Prior year (c) Two years back (e) Four years back b Contributions. a a a a a a c Net investment entrings, gains, and losses. a a a a a c Other expenditures for facilities and programs. a a a a a a g End of year balance. a <td< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td></td<> | | | | | | | |
| Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part IV, line 10. 1 a Beginning of year balance | | | | | | | No |
| 1 a Beginning of year balance | b If 'Yes,' explain the arrangement in Part X | (III. Check here if the explanation of the explanation) | nation has been provide | d on Part XIII | | | |
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| and losses and losses and losses and losses and losses e Other expenditures for facilities and programs and programs and programs and programs gEnd of year balance and losses and losses and losses and losses and losses 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment > % b Permanent endowment > % % % % c Temporarily restricted endowment > % % % in the programs % % % (i) urelated organizations in the possession of the organization that are held and administered for the organization by: (i) urelated organizations in the possession of the organization is endowment funds 4 Describe in Part XIII the intended uses of the organization's endowment funds. in the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line basis (other) (c) Accumulated (d) Book value (investment) a Land | b Contributions | | | _ | | | |
| e Other expenditures for facilities and programs | c Net investment earnings, gains, and losses | | | | | | |
| and programs | | | | | | | _ |
| g End of year balance | and programs | | | | | | _ |
| 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations. (i) unrelated organizations. 3a(i) (ii) related organizations. 3a(ii) 4 Describe in Part XIII the intended uses of the organization's endowment funds. 3a Part VI Land, Buildings, and Equipment. Cost or other basis (b) Cost or other (c) Accumulated depreciation (d) Book value depreciation b Buildings. 1 1 1 1 | | | | | | | |
| a Board designated or quasi-endowment ▶% b Permanent endowment ▶% c Temporarily restricted endowment ▶% The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations | - | <u> </u> | | | | | |
| b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations. (ii) related organizations. b If 'Yes' on line 3a(ii), are the related organizations listed as required on Schedule R?. 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line Description of property (a) Cost or other basis (b) Cost or other (investment) basis (other) depreciation b Buildings. c Leasehold improvements. d Equipment. c Other. c Under the completed of the organization of the cost of | | | ie 1g, column (a)) held | as: | | | |
| c Temporarily restricted endowment ▶ % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations (ii) related organizations (iii) related organizations (ii) related organizations (iii) related organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line (iii) Description of property (a) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (investment) (i) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (investment) (i) 0, 962. (i) 04, 148. (i) 0, 86, 8 (i) 0, 962. (i) 0, 104 | - · | | | | | | |
| The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations. b If 'Yes' on line 3a(ii), are the related organizations listed as required on Schedule R? | | — · | | | | | |
| 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: Yes (i) unrelated organizations. 3a(i) (ii) related organizations. 3a(i) b If 'Yes' on line 3a(ii), are the related organizations listed as required on Schedule R?. 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. 3b Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line Description of property (a) Cost or other basis (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land 1a Land 190, 962. 104, 148. 86, 8 d Equipment. 190, 962. 104, 148. 86, 8 d Equipment. 1. 1. 1. | | | | | | | |
| Yes (i) unrelated organizations 3a(i) (ii) related organizations 3a(i) b If 'Yes' on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. 3b Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line Description of property (a) Cost or other basis (b) Cost or other depreciation b Buildings | The percentages on lines 2a, 2b, and 2c should | ild equal 100%. | | | | | |
| (i) unrelated organizations 3a(i) (ii) related organizations 3a(ii) b If 'Yes' on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. 3b Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line Description of property (a) Cost or other basis (other) (c) Accumulated depreciation b Buildings. 1a Land 4000000000000000000000000000000000000 | 3a Are there endowment funds not in the posses | sion of the organization that a | re held and administered | for the | r | | |
| (ii) related organizations. 3a(ii) b If 'Yes' on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line Description of property (a) Cost or other basis (b) Cost or other basis (other) I a Land | • | | | | | es | No |
| b If 'Yes' on line 3a(ii), are the related organizations listed as required on Schedule R? | | | | | | | |
| 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line Description of property (a) Cost or other basis (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value depreciation 1 a Land | | | | | | | |
| Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1 a Land | | | | | . <u>3</u> b | | |
| Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, lineDescription of property(a) Cost or other basis (investment)(b) Cost or other basis (other)(c) Accumulated depreciation(d) Book value1a Land | | | ent funds. | · | | | |
| 1a Land (investment) basis (other) depreciation b Buildings 190,962. 104,148. 86,8 d Equipment 457,561. 393,715. 63,8 e Other 1. 1. 1. | | | n 990, Part IV, line | 11a. See Form 99 |)0, Part > | <, lin | ie 10. |
| 1a Land b Buildings b Buildings 190,962. c Leasehold improvements. 190,962. d Equipment. 457,561. 9 Other. 1. 1. 1. | | (a) Cost or other basis | (b) Cost or other | (c) Accumulated | | | |
| c Leasehold improvements 190,962. 104,148. 86,8 d Equipment 457,561. 393,715. 63,8 e Other 1. 1. 1. | 1 a Land | terest f | | | | | - |
| d Equipment 101/1101 00/0 e Other 1. 1. | • | | | | | | |
| d Equipment 457,561. 393,715. 63,8 e Other 1. 1. | c Leasehold improvements. | | 190,962. | 104,148. | | 86, | 814. |
| e Other | d Equipment | 100 | | | | | |
| | e Other | 1.23 | | | | / | 0. |
| | Total. Add lines 1a through 1e. (Column (d) mus | st equal Form 990, Part X, c | column (B), line 10c.) | | 1 | 50. | 660. |

Schedule **D** (Form 990) 2016

953886210 Page 3

| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation: Cost or end-of-year market valuation | alue |
|--|--------------------|---|---------------|
| (1) Financial derivatives | | | |
| (2) Closely-held equity interests | | | _ |
| (3) Other | | | |
| A) | | | |
| B) | | | |
| C) | | | |
| D) | | | |
| E) | | | |
| F) | | | |
| G) | | | |
| (H) | | | |
| () | | | |
| otal. (Column (b) must equal Form 990, Part X, column (B) line 12.) 🕨 | - | | |
| Part VIII Investments – Program Related. | | | |
| Complete if the organization answered | | 00, Part IV, líne 11c. See Form 990, Part X | |
| (a) Description of investment | (b) Book value | (c) Method of valuation: Cost or end-of-year mar | Ket value |
| (1) | | <u> </u> | |
| (2) | · · · | | |
| (3) | · | | |
| (4) | | | |
| (5) | | · · · · · · · · · · · · · · · · · · · | |
| (6) | | | |
| (7) | | | |
| (8) | | | _ |
| (9) | ····- | | |
| (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) ► | | | |
| Part IX Other Assets. | N/2 | Δ | |
| Complete if the organization answered | l 'Yes' on Form 99 | 0, Part IV, line 11d. See Form 990, Part X | , line 15 |
| | scription | (b) Book | <u>va</u> lue |
| (1) | | | |
| (2) | | | |
| (3) | | · · · · · · · · · · · · · · · · · · · | |
| (4) (5) (5) | | | _ |
| (6) | | | |
| (7) | | | _ |
| (8) | | | _ |
| (9) | | | |
| (10) | | | |
| otal. (Column (b) must equal Form 990, Part X, column (| B) lire 15.) | | |
| Part X Other Liabilities. | | | |
| Complete if the organization answered 'Yes' on F | | | |
| (a) Description of liability | (b) Book value | 3 | |
| (1) Federal income taxes | | | |
| | 41 | 83. | |
| (2) ACCRUED PAYROLL TAXES | | | |
| (3) ACCRUED WAGES | 2,1 | 12. | |
| (3) ACCRUED WAGES (4) | | <u>12.</u> | |
| (3) ACCRUED WAGES (4) (5) | | <u></u> | |
| (3) ACCRUED WAGES (4) (5) (6) | | | |
| (3) ACCRUED WAGES (4) (5) (6) (7) | | | |
| (3) ACCRUED WAGES (4) (5) (6) (7) (8) | | | |
| (3) ACCRUED WAGES (4) (5) (6) (7) (8) (9) | | | |
| (3) ACCRUED WAGES (4) (5) (6) (7) (8) (9) (10) | | | |
| (3) ACCRUED WAGES (4) (5) (6) (7) (8) | | | |

| Schedule D (Form 990) 2016 COMMUNITY MEDIA OF THE FOOTHILLS | 95 | 3886210 | Page 4 |
|---|-----------------------|---------|----------|
| Part XI Reconciliation of Revenue per Audited Financial Statement | s With Revenue per Re | eturn. | |
| Complete if the organization answered 'Yes' on Form 990, Pa | art IV, line 12a. | | |
| 1 Total revenue, gains, and other support per audited financial statements | | 1 | 212,520. |
| 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | | ŕ |
| a Net unrealized gains (losses) on investments | 2 a | | |
| b Donated services and use of facilities. | 2b | | |
| c Recoveries of prior year grants | 2c | | |
| d Other (Describe in Part XIII.) | 2 d | | |
| e Add lines 2a through 2d | | 2e | |
| 3 Subtract line 2e from line 1 | | 3 | 212,520. |
| 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | | |
| a Investment expenses not included on Form 990, Part VIII, line 7b. | 4a | | |
| b Other (Describe in Part XIII.) | 4b | | |
| c Add lines 4a and 4b | | 4 c | |
| 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | | 5 | 212,520. |
| Part XII Reconciliation of Expenses per Audited Financial Statemen | | Return. | // |
| Complete if the organization answered 'Yes' on Form 990, Pa | art IV, line 12a. | | |
| 1 Total expenses and losses per audited financial statements | | 1 | 229,831. |
| 2 Amounts included on line 1 but not on Form 990, Part IX, tine 25: | | | |
| a Donated services and use of facilities | 2a | Î. | |
| b Prior year adjustments. | 2b | | |
| c Other losses | 2c | | |
| d Other (Describe in Part XIII.). | 2d | | |
| e Add lines 2a through 2d | - I | 2 e | |
| 3 Subtract line 2e from line 1 | | 3 | 229,831. |
| 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: | . | | 12070011 |
| a Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | |
| b Other (Describe in Part XIII.) | 4 b | | |
| c Add lines 4a and 4b | | 4 c | |
| 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.). | | 5 | 229,831. |
| Part 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.

SCHEDULE O (Form 990 or 990-EZ)

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.

| 2016 |
|------------------------------|
| Open to Public Inspection |

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

COMMUNITY MEDIA OF THE FOOTHILLS

Employer identification number 953886210

Form 990, Part VI, Line 11b - Form 990 Review Process

Reviewed by executive director.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

Attorney on retainer to review any issues.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

No other documents available to the public.

Attachment B

California Tax Return

TAXABLE YEARCalifornia Exempt Organization2016Annual Information Return

| FORM |
|------|
|------|

| 201 | 16 | Annual Information F | | | | | | | | 199 |
|-----------------------------|--------------------------|---|------------------------------|------------|--|---------------------|---|-------------|--|------------|
| | | or fiscal year beginning (mm/dd/yyyy) | | 16, | and ending (r | mm/dd/y | yyy) 6/30/ | /20: | | |
| Corporation/O | | | | | | | _ | | California corporation r | number |
| | | BDIA OF THE FOOTHILLS | | | | | | | 1240607 FEIN | |
| | | | | | | | | | 953886210 | |
| Street address | | | | | | | | | PMB no. | |
| 847 E. City | OLIV | E AVE | | | | State | | | Zip code | |
| MONROV | IA | | | | | CA | | | 91016 | |
| Foreign countr | ry name | | | | | Foreign pi | rovince/state/county | | Foreign postal code | |
| | | | | . | | | | | | |
| | | ····· | Yes X No | | | | tion 23701d, has the litical activities? | e | | |
| | | • | Yes XX No Yes XX No | | | | ••••• | | 📖 💿 🕒 Yes | X No |
| C IRC Secti D Final Info | |)(1) trust | Yes 🗽 No | | | | | | | |
| • 🗌 D | Dissolved | • Surrendered (Withdrawn) • Mer | ged/Rebrganized | 1 | F'Vos ' antor tha | arose ros | | | 01 <u>g?</u> • Yes | X No |
| E Check ac | | | | | f organization is | exempt u | nder R&TC Section eption, check box. | 23701 | d | |
| | | | Sch H (990) | | | | ····· | | • 🗌 | |
| | her 990 ser | | | M (| s the organizatio | in a Limite | d Liability Compan | y? | 🔸 🔄 Yes | X No |
| G is this a | group filin | g? See instructions • | Yes X No | N C t | oid the organizat axable income? . | ion file Fo | rm 100 or Form 10 | 9 to re | port 🕢 🖌 Yes | X No |
| | | in a group exemption? | Yes 🗶 No | O I: a | s the organizatio udited in a prior | n under a ryear? | udit by the IRS or h | has the | e IRS | X No |
| | | | | P k | s federal Form 1 | 023/1024 | pending? | | Yes | No |
| Did the o | organization | have any changes to its guidelines | | | ate filed with IR | s | | | | |
| | | | Yes X No | ŀ | 1 | | | | CACA1112L | 11/30/16 |
| Part I | 7 | ete Part I unless not required to file this | | - | | | | 1 | | |
| | | ross sales or receipts from other source | | , | | | | | 212 | 2,520. |
| Receipts | | ross dues and assessments from memb ross contributions, gifts, grants, and sim | | | | | | 3 | | |
| and Revenues | | otal gross receipts for filing requirement | | | | | | - | | _ |
| ine rendes | | nis line must be completed. If the result | | | | ral Instr | uction B | 4 | 212 | ,520. |
| | | ost of goods sold | | | | | | | | , |
| | 6 C | ost or other basis, and sales expenses o | of assets sold. | | . • 6 | | | [| | |
| | 7 7 | otal costs. Add line 5 and line 6 | | | | | | 7 | | |
| | | otal gross income. Subtract line 7 from l | | | | | | 8 | 212 | ,520. |
| Expenses | | otal expenses and disbursements. From | | | | | _ | 9 | - | ,831. |
| • | | ccess of receipts over expenses and dis | | | | | | 10 | -17 | ,311. |
| | | otal payments | | | | | | 11 | | |
| | | se tax. See General Instruction K ayments balance. If line 11 is more thar | | | | | the second se | 12 | | |
| | | se tax balance. If line 12 is more than li | | | | | | 14 | <u> </u> | |
| Filing Fee | | | | | | | | 15 | + | 10 |
| | | ling fee \$10 or \$25. See General Instruct enalties and Interest. See General Instru | | | | | 2012/01/01/01 | 16 | + | 10. |
| | | | | - | | | 0 | _ | <u> </u> | |
| | | lance due. Add line 12, line 15, and line 16. Then | | | | | | _ 17 | knowledge and balliof | 10. |
| Sign Here | | alties of perjury, I declare that I have examined this in ad complete. Declaration of preparer (other than taxp. | ayer) is based on a Title | all inform | nation of which p | | is any knowledge. Date | i vi ing | | n is true, |
| TICIC . | Signature of officer | | | TTVE | DIRECTO | | Dale | | Telephone 626-357-497 | 14 |
| · | | · · · · · · · · · · · · · · · · · · · | | | Date | | Check if | _ 1 | PTIN | <u> </u> |
| Paid | Pieparer' signature | JAMES F. HUNDSHAMER | | | | | self- employed | ۲ <u>ا</u> | P00227096 | |
| Preparer's Use Only | Film's na | 17 No. 1 | - | | | | | | FEIN | |
| + my | (or yours, self-emple | oyed) 223 BU. GIENDORA A | VENUE #1 | 01 | · · · | | | | 95-4062512 | |
| | and addre | GLENDORA, CA 91741 | | | | | | | Telephone 626-963-122 | 2 |
| | May th | e FTB discuss this return with the prepa | arer shown ab | ove? | See instructiv | 005 | <u> </u> | | | No |
| | L more th | or the algoage and retain muture prepe | | | | | | | - 10A 10O 1 | 110 |

ſ

COMMUNITY MEDIA OF THE FOOTHILLS Part II Organizations with gross receipts of more than \$50,000 and private foundations 953886210

| Assets | | | (a) | (b) | (c) | _ | (d) |
|------------------|-----|---|---------------------------------------|---------------------------------|-------------------------|-----------|----------|
| Schedule | ÷ L | Balance Sheet | · · · · · · · · · · · · · · · · · · · | f taxable year | | f taxable | |
| | 18 | Total expenses and disbursements. Add | line 9 through line 17. Enter h | ere and on Side 1, Part I, line | 9 | 18 | 229,831. |
| | 17 | Other Expenses and Disbursem | ents. Attach schedule. | SEE SI | | 17 | 67,371. |
| | 16 | Depreciation and depletion (See | | | | 16 | 20,781. |
| ments | 15 | Rents | | | | 15 | 3,600. |
| Disburse- | | Taxes | | | · · · · · | 14 | |
| Expenses and | 13 | Interest | | | | 13 | |
| Evenences | 12 | Other salaries and wages | | | | 12 | 91,466. |
| | 01 | Compensation of officers, direct | ors, and trustees. Attac | h schedule. | EE STMT 2 🔸 | 11 | 46,613. |
| | 10 | Disbursements to or for membe | | | | 10 . | |
| | 9 | Contributions, gifts, grants, and similar a | mounts paid. Attach schedule | | •••••••• | 9 | |
| | 8 | Total gross sales or receipts from other | | | | 8 | 212,520. |
| | 7 | Other income. Attach schedule . | | SEE ST | ATEMENT 1 🖕 | 7 | 212,520. |
| Sources | 6 | Gross amount received from sal | | | | 6 | |
| Other | 5 | Gross royalties | | | | 5 | |
| Receipts from | 4 | Gross rents | | | • • • • • • • • • • • • | 4 | |
| Dessints | 3 | Dividends | 12111212212221222 | | • • • • • • • | 3 | |
| | 2 | Interest | | | ••••• | 2 | |
| | 1 | Gross sales or receipts from all | business activities. See | e instructions | | 1 | |

| Assets | (a) | (b) | (c) | | (d) |
|--|-------------------|----------|----------|---|----------|
| 1 Cash | والمتكالي متعادية | 61,510. | | • | 36,068. |
| 2 Net accounts receivable. | ALCON TO THE REAL | 95,622. | | • | 115,301. |
| 3 Net notes receivable | | | | • | |
| 4 Inventories | | | | • | |
| 5 Federal and state government obligations | | | | • | |
| 6 Investments in other bonds | | | | • | |
| 7 Investments in stock | | | | • | |
| 8 Mortgage loans | | | | • | |
| 9 Other investments. Attach schedule | | | | • | Sec |
| 10 a Depreciable assets | 645,260. | | 648,524. | | |
| b Less accumulated depreciation | 477,083. | 168,177. | 497,864. | | 150,660. |
| 11 Land | | | | • | |
| 12 Other assets, Attach schedule STM 4 | | 1,996. | | • | 5,208. |
| 13 Total assets | | 327,305. | | | 307,237. |
| Liabilities and net worth | | | | | |
| 14 Accounts payable | | 25,893. | | • | 22,557. |
| 15 Contributions, gifts, or grants payable | | | | • | |
| 16 Bonds and notes payable. | | | | • | |
| 17 Mortgages payable | | | | • | |
| 18 Other liabilities. Attach schedule | | 2,016. | | 1 | 2,595. |
| 19 Capital stock or principal fund | | 299,396. | | • | 282,085. |
| 20 Paid-in or capital surplus. Attach reconciliation | | | | • | |
| 21 Retained earnings or income fund | | | | • | |
| 22 Total liabilities and net worth | | 327,305. | | | 307,237. |

Schedule M-1

-1 Reconciliation of income per books with income per return

Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$50,000.

| | Do not complete una senedule | on the amount of our cauco | -, inic | 10, column (u), is less than \$50,000. | 12 | |
|---|---|---|---------|---|-------|-----|
| 1 | Net income per books | • -17,311. | 7 | Income recorded on books this year not included | | |
| 2 | Federal income tax | • | | in this return. Attach schedule | • | |
| 3 | Excess of capital losses over capital gains | • | 8 | Deductions in this return not charged | | |
| 4 | Income not recorded on books this year. | | | against book income this year. | | |
| | Attach schedule. | • | | Attach schedule | • | |
| 5 | Expenses recorded on books this year not deducted | | 9 | Total, Add line 7 and line 8 | | |
| | in this return. Attach schedule | • ~ | 10 | Net income per return. | | |
| 6 | Total. Add line 1 through line 5 | -17,311. | | Subtract line 9 from line 6 | -17,3 | 11. |

Form at bottom of page.

IF PAID ELECTRONICALLY: DO NOT FILE THIS FORM

| WHERE TO FILE: | Using black or blue ink, make check or money order payable to the 'Franchise Tax Board.' Write the corporation number or FEIN and '2016 FTB 3539' on the check or money order. Detach form below. Enclose, but do not staple, payment with form and mail to: |
|--------------------------------------|---|
| | FRANCHISE TAX BOARD PO BOX 942857 SACRAMENTO CA 94257-0531 |
| Make all checks or mo | ney orders payable in U.S. dollars and drawn against a U.S. financial institution. |
| WHEN TO FILE: | Calendar year C corporations — File and Pay by April 18, 2017 Calendar year S corporations — File and Pay by March 15, 2017 Calendar year exempt organizations — File and Pay by May 15, 2017 Employees' trust and IRA — File and Pay by April 18, 2017 Fiscal year filers — See instructions |
| When the due da penalty is extend | te falls on a weekend or holiday, the deadline to file and pay without ed to the next business day. |
| Due to the federa filed and payment | al Emancipation Day holiday observed on April 17, 2017, tax returns ts mailed or submitted on April 18, 2017, will be considered timely. |
| ONLINE SERVICES: | Corporations can make payments online with Web Pay for Businesses. Corporations can make an immediate payment or schedule payments up to a year in advance. Go to ftb.ca.gov for more information. |

| CAUTION: You may be | | | | | | | |
|---|------------------------------|--------------|---|------|---------|------|--------|
| P | CALIFORNIA FORM | | | | | | |
| 2016 fo | or Corpora | tions and Ex | empt Organiza | tior | IS | 3539 | (CORP) |
| 1240607 TYB 07-01-2 COMMUNITY ME SCOTT AUSTIN 847 E OLIVE | 2016 TYE EDIA OF THE N | 06-30-2017 | 000000000000000000000000000000000000000 | | 16 | FORM | 3 |
| MONROVIA | CA | 91016 | | | | | |
| 626-357-4974 | Ŀ | | AMOUNT | OF | PAYMENT | | 10. |

L

CALIFORNIA FORM

| | ch to Form 100 or For | m 100W. Form | 199 | | | | | | |
|----------|--|-------------------------------|-------------------------|----------------------------|------------------------|-------------------|----------------|--------------|-----------------------------|
| Corpo | ration name | | | | | | Califo | omia corp | oration number |
| _ | MUNITY MEDIA | | | | | | 124 | 0607 | |
| Par | | pense Certain Pro | | | | | _ | <u> </u> | |
| 1 | Maximum deduction | | | | | | | | \$25,000 |
| 2 3 | Total cost of IRC Se Threshold cost of IR | | | | | | | | <u> </u> |
| 4 | Reduction in limitation | | | | | | | - | \$200,000 |
| 5 | Dollar limitation for 1 | | | | | | | | |
| 6 | | Description of property | | (b) Cost (business | | (c) Elect | | | |
| | | | | | | _ (/ | | 1 | |
| - | | | · | 1 | | | | 24 | |
| _ | | | | | | | | 1 | |
| | | | | | | | | | |
| 7 | Listed property (elec | | | | | | | | |
| 8 | Total elected cost of | | | | | | | | |
| 9 | Tentative deduction. | | | | | | | | |
| 10 11 | Carryover of disallow Business income lim | | | | | | | | |
| 12 | IRC Section 179 exp | | | | | | | | |
| 13 | Carryover of disallow | | | | | | | · · | |
| Par | | nd Election of Addition | | | | | 356 | | |
| 14 | (a) | (b) | (c) | (d) | (e) | (1) | (| (g) | (h) |
| | Description of property | Date acquired (mm/dd/yyyy) | Cost or other basis | Depreciation allowed or | Depreciation method | 1 Life or rate | Deprec | iation fo | or Additional first vear |
| | or property | (IIIII/dalyyyy) | ottior basis | allowable in | mounou | | 0.03 | year | depreciation |
| | | | | earlier years | | | | | |
| | 92/93 | 7/01/1992 | 45,395. | 43,393. | | 5 | | | |
| | #1094 | 8/09/1993 | 480. | | 200DB | 5 | | | <u> </u> |
| | # 1187 | 12/16/1993 | 4,989. | 4,431. | | 5 | | | |
| | # 1271 # 1272 | 4/20/1994 4/20/1994 | <u>3,963.</u> 2,452. | 3,124. 1,930. | 1 | 5 | - | | |
| | | | | | | | ' | | |
| 15 | Add the amounts in \$2,000. See instruct | | | | | | 2 | 0,78 | 1 |
| Par | | | | | | | | 0770 | ±•• |
| | Total: If the corporat | ion is electing: | | | | | | - <u>-</u> · | |
| | IRC Section 179 exp Additional first year | ense, add the amou | unt on line 12 and | line 15, column (g) |) or Its on line 1 | | (a) and (h | | |
| | Depreciation (if no e | lection is made), er | nter the amount fro | om line 15, column | (q) | | (g) and (i | 1.1 | 6 |
| 17 | Total depreciation cl | | | | | | | | 7 |
| 18 | Depreciation adjustn Form 100W, Side 1, | nent. If line 17 is gr | eater than line 16, | , enter the difference | e here and | I on Form 10 | 00 or | | |
| | Form 100W, Side 2, | line 12. (If Californi | a depreciation am | ounts are used to e | determine r | net income t | pefore | | |
| _ | state adjustments or | Form 100 or Form | 100W, no adjustn | nent is necessary.) | | | <u></u> | 1 | 8 |
| Parl | | 41.5 | | | Bb. | T | | | |
| 19 | (a) Description | (b) Date acquired | Cost o | r Amorti | d) ization | (e) R&TC | Period | | (g) Amortization |
| | of property | (mm/dd/yyyy) | other bas | sis allowed or | ^r allowable | section | percent | | for this year |
| | | | | in earlie | er years | (see instr) | | | |
| | <u> </u> | | | | | | <u> </u> | | |
| | | | | | | | | | |
| | | | - | | | | + · · | | |
| | | | | | | | | | |
| 20 | Total. Add the amou | nts in column (a) | | | | F | program in a s | 20 | |
| 20 21 | Total amortization cl | 107 | | | | | | 20 | |
| | Amortization adjustn | • | • | | | | | <u> </u> + | |
| ~~ | Form 100W, Side 1, | line 6. If line 21 is I | ess than line 20, e | enter the difference | e here and o | on Form 100 |) or | | |
| | Form 100W, Side 2, | line 12 | | ···· | | . <u></u> | <u></u> | 22 | |
| | | | | | | | | | |

CALIFORNIA FORM

| | ch to Form 100 or For | m 100W. FORI | M 199 | | | | Californ | | tion number |
|--------|---|---|--|--|------------------------------|-----------------------------|--------------------|---------------|--|
| | | | | | | | | - | uori number |
| | MUNITY MEDIA | | | | | | 124 | 0607 | |
| Par | | cpense Certain Pro | | | | | | 4 1 - | *05 000 |
| 1 | Maximum deduction | | | | | | | 1 | \$25,000 |
| 2 3 | Total cost of IRC Se | | | | | | | 3 | 4000 000 |
| 4 | Threshold cost of IR Reduction in limitation | | | | | | | 4 | \$200,000 |
| 5 | Dollar limitation for t | | | | | | | 5 | |
| 6 | | Description of property | | (b) Cost (business | | (c) Electe | | <u> </u> | |
| | | protection of property | | | | (0) 210000 | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 7 | Listed property (elec | ted IRC Section 17 | /9 cost) | | | | - | | |
| 8 | Total elected cost of | | | | | ine 7 | | 8 | alanda al da al antida a la si <mark>ngle angle sa anana anan</mark> a |
| 9 | Tentative deduction. | | | | | | | 9 | |
| 10 | Carryover of disallow | ved deduction from | prior taxable year | s | | | | | |
| 11 | Business income lim | | | | | | | 11 | |
| 12 | IRC Section 179 exp | | | | | | <u></u> | 12 | |
| 13 | Carryover of disallow | | | | | | | | |
| Par | - | nd Election of Additi | | | Under R&TO | C Section 243 | 356 | | · · · · |
| 14 | (a) Description | (b) Date acquired | (c) Cost or | (d) Depreciation | (e) | Life or | Deprecia |) tion for | (h) |
| | of property | (mm/dd/yyyy) | other basis | allowed or | Depreciation method | rate | this | | Additional first year |
| | | | | allowable in | | | . | , , | depreciation |
| 077 | # 1050 | 4/20/1004 | 264 | earlier years | 00000 | <u> </u> | | | |
| | # 1279 | 4/20/1994 | 364. | 287. | 200DB | 5 | | | |
| - | # 1289 | 5/05/1994 | 1,947. | 1,533. | | | | | |
| | JIPMENT | 7/01/1994 | 2,114. | 1,650. | | 5 | | | · |
| | JIPMENT | 9/21/1995 | 12,554. | 11,297. | | 5 | | | |
| | DEO EQUIPMENT | 6/05/1997 | 1,198. | 1,018. | | 5 | | | |
| 15 | Add the amounts in \$2,000. See instruct | | | | | | | | |
| Par | t III Summary | | | | | | 8 | | , <u>.,</u> , |
| 16 | Total: If the corporat | ion is electing: | | | | ÷ | | | |
| | IRC Section 179 exp Additional first year | ense, add the amo | unt on line 12 and | line 15, column (g |) or uts on line 1 | 5 columns - | (a) and (b) | | |
| | Depreciation (if no e | | | | | | | | |
| 17 | Total depreciation cl | | | | | | | | |
| 18 | Depreciation adjustr | nent. If line 17 is g | reater than line 16, | , enter the difference | e here and | on Form 10 | 0 or | - | |
| | Form 100W, Side 1, Form 100W, Side 2, | line 6. It line 17 is line 12. (If Californ | less than line 16, (ia depreciation am | enter the difference pounts are used to a | e here and o determine r | on ⊦orm 100 bet income b | or efore | | |
| | state adjustments or | Form 100 or Forn | 100W, no adjustn | nent is necessary.) | | | | 18 | |
| Par | t IV Amortization | | | | | | | | |
| 19 | (a) | (b) | (c) | (| d) | (e) R&TC | (f) | | (g) |
| | Description of property | Date acquire (mm/dd/yyyy | d Cost o) other bas | | ization allowable | R&TC section | Period percenta | | Amortization for this year |
| | or property | (((((((((((((((((((((((((((((((((((((((| | | er years | (see instr) | porconte | ge | for this year |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 20 | Total. Add the amou | nts in column (g). | | W | | | (7.1%) | 20 | |
| 21 | Total amortization cl | aimed for federal p | urposes from fede | ral Form 4562, line | . 44 | | [| 21 | |
| 22 | Amortization adjustn | nent. If line 21 is g | reater than line 20, | , enter the differend | ce here and | on Form 10 | 0 or | | |
| | Form 100W, Side 1, | line 6. If line 21 is | less than line 20, e | enter the difference | e here and d | on Form 100 | or | | |
| | Form 100W, Side 2, | ime 12 | <u></u> | <u> </u> | <u></u> | | | 22 | |
| | | | | | | | | | |

CALIFORNIA FORM

| | to Form 100 or For | m 100W. FOR | M 199 | | | | | - | <u>.</u> |
|-----------|--|-----------------------------|-----------------------|-------------------------------|---------------------------|-----------------|-------------------------|------------|---------------------------------------|
| | | | | | | | | | ion number |
| | MUNITY MEDIA | | | | | | 12406 | 07 | |
| Part | | | perty Under IRC S | | | | | | |
| 1 | Maximum deduction | | | | | | | 1 | \$25,000 |
| 2 | Total cost of IRC Set | | | | | | | 2 | +000 00 |
| 3 4 | Threshold cost of IR Reduction in limitation | | | | | | | 3 | \$200,000 |
| 5 | Dollar limitation for t | | | | | | 1,00,000 | 5 | |
| 6 | | Description of property | | (b) Cost (business) | | (c) Electe | | <u>. I</u> | |
| | | beautipation of property | | (b) bost (business | | (0) 110010 | 1 6031 | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 7 | Listed property (elec | ted IRC Section 12 | 79 cost) | | 7 | | | | |
| 8 | Total elected cost of | | | | | ine 7= | Server 1 Victor 1 | B | |
| 9 | Tentative deduction. | | | | | | | 9 | · · · |
| 10 | Carryover of disallow | | | | | | | 0 | |
| 11 | Business income lim | itation. Enter the s | maller of business | income (not less t | han zero) c | r line 5 📻 | 8 1 | | |
| 12 | IRC Section 179 exp | | | | | | 1 | 2 | |
| | Carryover of disallow | | | | | | | | |
| Part | • | | onal First Year Dep | reciation Deduction | Under R&T | C Section 243 | 356 | | |
| 14 | (a) Description | (b) Date acquired | (c) Cost or | (d) Depreciation | e) | Life or | (g) Depreciatio | n for | (h) Additional first |
| | of property | (mm/dd/yyyy) | other basis | allowed or | Depreciation method | rate | this yea | | year |
| | | | | allowable in earlier years | | | | | depreciation |
| FOU | IPMENT | 6/19/1996 | 1,674. | 1,506. | 20008 | 5 | | | · · · · · · · · · · · · · · · · · · · |
| | IPMENI-VAR | 4/24/1997 | 5,734. | 4,875. | 1 | 5 | | | |
| | IPMENT | 7/09/1997 | 566. | <u> </u> | S/L | 5 | | | |
| | TEL-CITY HAL | 9/19/1997 | 26,720. | 26,720. | S/L S/L | 5 | | | |
| · | RKEY SCANNER | 2/16/1998 | 306. | 306. | S/L | 5 | | | · · · · · |
| | | | | | | <u> </u> | · · · · | | |
| 15 | Add the amounts in \$2,000. See instruction | | | | | | | | |
| Part | | | | <u></u> | | | | | |
| | Total: If the corporat | ion is electing: | | · · · · · · | | | | 1 | |
| | IRC Section 179 exp | ense, add the amo | unt on line 12 and | line 15, column (g) |) or | C. Ashiring . | | | |
| | Additional first year (Depreciation (if no e | | | | | | | 1 16 | |
| | Total depreciation cli | | | | | | | 17 | |
| 18 | Depreciation adjustm | nent. If line 17 is g | reater than line 16, | enter the difference | e here and | on Form 10 | 0 or | | |
| | Form 100W, Side 1, Form 100W, Side 2, | line 6. If line 17 is | less than line 16, e | enter the difference | here and o | on Form 100 | or | | |
| | state adjustments or | Form 100 or Forn | n 100W, no adjustn | hent is necessary.) | | | | 18 | |
| Part | | | • | | | | | | |
| 19 | (a) | (b) | (c) | (| d) | (e) | (f) | | (g) |
| | Description of property | Date acquire (mm/dd/yyyy | | | | R&TC section | Period or percentage | | Amortization |
| | or property | (IIIIII/ddi/yyyy | | in earlie | | (see instr) | percentage | | for this year |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 20 | Total. Add the amou | nts in column (g). | | x | | | | ו | |
| 21 | Total amortization cla | aimed for federal p | ourposes from fede | ral Form 4562, line | 44 | | 21 | | |
| <u>22</u> | Amortization adjustr | nent. If line 21 is g | reater than line 20, | enter the difference | e here and | on Form 10 | 0 or | | |
| | Form 100W, Side 1, | line 6. If line 21 is | less than line 20, e | enter the difference | here and o | on Form 100 | or | | |
| | Form 100W, Side 2, | | | <u></u> | • • • • • • • • • • • • • | | | | |

CALIFORNIA FORM

| COMMUNITY MEDIA OF THE FOOTHILLS 1240607 Part Election To Expense Certain Property Under IRC Section 179 1 Maximum deduction under IRC Section 179 for California 1 \$25,0 2 Total cost of IRC Section 179 property placed in service 2 2 1 \$200,0 3 Threshold cost of IRC Section 179 property before reducticn in limitation. 3 \$200,0 4 Reduction in limitation. 3 \$200,0 6 (a) Description of property (b) Cast (business use only) (c) Elected cost 7 Listed property (elected IRC Section 179 property. Add amounts in column (c), line 6 and line 7. 8 9 Tentative deduction. Enter the smaller of line 5 or line 8. 9 10 Carryover of disallowed deduction nor prior taxable years. 10 11 Inclusions income limitation. Enter the smaller of busines income (not less than zero) or line 5. 11 12 Carryover of disallowed deduction Add line 9 and line 10, but do not enter more than line 11. 12 12 Carryover of disallowed deduction Add line 9 and line 10, but do not enter more than line 11. 12 13 Carryover of disallowed deduction for Direct Add line 9 and line 10, but do not enter more than line 11. 12 | | ch to Form 100 or For ration name | rm 100W. FOR | M 199 | | | · <u></u> | Californ | | |
|---|------|--|--|--------------------------------|---------------------------------------|-----------------------------|-----------------------------|-------------|------|--|
| Part I Election To Expense Cartain Property Under IRC Section 179 1 Maximum deduction under IRC Section 179 for California 1 \$25,0 2 Total cost of IRC Section 179 property barbore reduction in limitation. 3 \$200,0 3 Threshold cost of IRC Section 179 property barbore reduction in limitation. 3 \$200,0 4 Reduction in limitation. 3 \$200,0 4 Reduction in limitation. 4 \$ 5 6 (a) Description of property (b) Cost (business use only) (c) Elected cost 7 Listed property (elected IRC Section 179 property. Add amounts in column (c), line 6 and line 7. 8 9 10 Carryover of disallowed deduction from prior taxable years. 10 11 12 11 Description of property (mind datuction from prior taxable years. 10 11 12 12 IRC Section 179 exost). 11 12 12 13 11 12 IRC Section 179 exost). 0 11 12 13 11 12 13 Carryover of disallowed deduction for property of the D business income (not tess then zero) or line 5. 11 12 | • | | | _ | | | | | • | tion number |
| 1 Maximum deduction under IRC Section 179 for California 1 \$25,0 2 Total cost of IRC Section 179 property before reduction in limitation. 3 \$200,0 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0. 4 4 5 Dellar limitation. Subtract line 4 from line 1. If zero or less, enter -0. 5 5 6 (a) Description of property (b) Cast (business use only) (c) Elected cost 5 7 Listed property (elected IRC Section 179 post). 7 7 8 7 8 Total elected cost of IRC Section 179 post). 7 8 7 10 10 Carryover of disallowed deduction from prior taxable years. 10 10 11 11 12 IRC Section 179 expense deductor. Add line 9 and line 10, but do not enter more than line 11. 12 12 12 Carryover of disallowed deduction to 2017. Add line 9 and line 10, less line 12 | | | | | | | | 1240 | 0607 | |
| 2 Total cost of IRC Section 179 property before reductic in limitation. 2 3 Threshold cost of IRC Section 179 property before reductic in limitation. 2 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0. 4 5 0 (a) Description of property (b) Cast (business use only) (c) Elected cost 6 (a) Description of property (b) Cast (business use only) (c) Elected cost 7 Listed property (elected IRC Section 179 property. Add amounts in column (c), line 6 and line 7 8 9 Tentative deduction. Enter the smaller of business income (not less than zero) or line 5 11 12 CATCYOVEr disallowed deduction from prior taxable years. 10 13 Carryover disallowed deduction from prior taxable years. 10 14 (a) (b) (c) (c) (c) 13 Carryover disallowed deduction for prior taxable years. 10 11 12 RCS cetion 179 expense deduction for prior taxable years. 10 11 13 Carryover disallowed deduction for prior taxable years. 10 11 12 14 (c) (b) (c) (c) (c) </td <td>_</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>-</td> <td></td> <td></td> <td></td> | _ | | | | | | - | | | |
| 3 Threshold cost of IRC Section 179 property before reduction in limitation. 3 \$200,0 4 Reduction in limitation. Subtract line 4 from line 2. If zero or less, enter -0 | _ | | | | | | | | | \$25,000 |
| 4 Reduction in limitation. Subtract line 3 from line 1. If zero or less, enter -0 | _ | | | | | | | | | |
| 5 Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0 | - | | | | | | | | - | \$200,000 |
| 6 (a) Description of property (b) Cast (business use only) (c) Elected cost 7 Listed property (elected IRC Section 179 cost). 7 8 Total elected cost of IRC Section 179 property. Add amounts in columm (c), line 6 and line 7. 8 9 Tentative deduction. Enter the smaller of bine 5 or line 8. 9 10 Carryover of disallowed deduction from prior taxable years. 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. 11 12 IRC Section 179 expense deduction. Add line 9 and line 10, but do not enter more than line 11. 12 13 Carryover of disallowed deduction to 2017. Add line 9 and line 10, but do not enter more than line 11. 12 14 (a) (b) Date acquired other basis 0 0 Date acquired other basis 0 Depreciation between or rate 13 0 Date acquired other basis 0 Depreciation between or rate 10 0 Date acquired other basis 0 Depreciation between or rate 14 6 14 (b) Date acquired other basis 3,198. 3,198. 5/L 5 0 Date ac | - | | | | | | | | | |
| Part II Derivative and Express (f) < | | | | | 1 | | | 1 | | |
| 8 Total elected cost of IRC Section 179 property. Add amounts in column (c), line 6 and line 7 | | | bassipable of property | | (b) obat (business | | | | | |
| 8 Total elected cost of IRC Section 179 property. Add amounts in column (c), line 6 and line 7 | | · · · · · · · · · · · · · · · · · · · | | | | | | | | |
| 8 Total elected cost of IRC Section 179 property. Add amounts in column (c), line 6 and line 7 | | | | · · · · | | | | | | |
| 8 Total elected cost of IRC Section 179 property. Add amounts in column (c), line 6 and line 7 | | | | | | | | | | |
| 8 Total elected cost of IRC Section 179 property. Add amounts in column (c), line 6 and line 7 | 7 | Listed property (elec | ted IRC Section 17 | /9 cost) | | 7 | | | | |
| 9 Tentative deduction. Enter the smaller of line 5 or line 8. 9 10 Carryover of disallowed deduction from prior taxable years. 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. 11 12 IRC Section 179 expense deduction. Add line 9 and line 10, but do not enter more than line 11. 12 13 Carryover of disallowed deduction to 2017. Add line 9 and line 10, less line 12. 13 14 (a) (b) (c) (d) 0 Description Date acquired (mm/dd/yyyy) (c) (d) (e) (f) 0 Description Date acquired (mm/dd/yyyy) (c) (f) (f) (f) (f) 0 Description Date acquired (mm/dd/yyyy) (f) (f) (f) (f) (f) 0 Description Date acquired (mm/dd/yyyy) (f) (f) (f) (f) (f) (f) 0 Description Date acquired (mm/dd/yyy) (f) | - | | | | | | ine 7 | | 8 1 | indulainde feite a sladin <mark>e an internet an anna an an a</mark> |
| 10 Carryover of disallowed deduction from prior taxable years. 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. 11 12 IRC Section 179 expense deduction to 2017. Add line 9 and line 10, less line 12. 13 2 Carryover of disallowed deduction to 2017. Add line 9 and line 10, less line 12. 13 Part II Depreciation and Election of Additional First Year Depreciation Deduction Under R&TC Section 24356 14 (a) Date acquired (Cost or other basis Cost or other basis Depreciation allowed or allo | 9 | | | | | | | | - | |
| 12 IRC Section 179 expense deduction. Add line 9 and line 10, but do not enter more than line 11 | 10 | | | | | | | | 10 | |
| 13 Carryover of disallowed deduction to 2017. Add line 9 and line 10, less line 12 | 11 | | | | | | | | 11 | |
| Part II Depreciation and Election of Additional First Year Depreciation Deduction Under R&TC Section 24356 14 (a) of property (b) Date acquired (mm/dd/yyyy) (c) Other basis (c) other basis (c) other basis (c) other basis (c) Depreciation allowable in earlier years (c) Depreciation method (c) Depreciation method (c) Depreciation for this year (d) Additional first year DELL COMPUTER 2/12/1998 3,198. 3,198. S/L 5 5 PANASONIC 2/16/1998 1,148. 1,148. S/L 5 5 FED -2PVS7670 2/27/1998 1,765. 1,765. S/L 5 5 FED -4PVS7670 2/27/1998 1,000. 1,000. S/L 5 5 TRVCS CONTROL 3/11/1998 1,000. 1,000. 15 5 5 Part III Summary 15 5 15 16 16 Total depreciation claimed for federal purposes from federal Form 4562, line 22. 16 16 17 18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 2, line 12. (If California depreciation amounts are used to dete | 12 | | | | | | | | 12 | |
| 14 (a) Description of property (b) Date acquired (mm/dd/yyyy) (c) other basis (d) Depreciation allowed or allowed or a | | | | | | | | - | | |
| Description of propertyDate acquired (mm/dd/yyyy)Cost or other basisDepreciation allowable in earlier yearsLife or methodDepreciation for this yearAdditional firs year depreciationDELL COMPUTER2/12/19983,198.3,198.S/L5 | | t II Depreciation ar | nd Election of Additi | onal First Year Dep | reciation Deduction | Under R&T | C Section 243 | 356 | | |
| of property (mm/dd/yyyy) other basis allowable in earlier years rate this year year depreciation DELL COMPUTER 2/12/1998 3,198. 3,198. 3/198. S/L 5 | 14 | | (b) | (c) | | | | | | (h) |
| allowable in earlier years depreciation DELL COMPUTER 2/12/1998 3,198. 3,198. S/L 5 PANASONIC 2/16/1998 1,148. 1,148. S/L 5 FED-2PVS7670 2/27/1998 878. 878. S/L 5 FED-4PVS7670 2/27/1998 1,765. 1,765. S/L 5 IXVCS CONTROL 3/11/1998 1,000. 1,000. S/L 5 15 Add the amounts in column (g) and column (h). The total of column (h) may not exceed 15 5 Part III Summary Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&TC Section 24355, add the amounts on line 15, columns (g) and (h) or Depreciation (fin o election is made), enter the amount from line 15, column (g). 16 17 Total depreciation claimed for federal purposes from federal Form 4562, line 22. 17 18 Depreciation adjustment. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100 wr | | | (mm/dd/yyyy) | | | | | | | |
| DELL COMPUTER 2/12/1998 3,198. 3,198. S/L 5 PANASONIC 2/16/1998 1,148. 1,148. S/L 5 FED-2PVS7670 2/27/1998 878. 878. S/L 5 FED-4PVS7670 2/27/1998 1,765. 1,765. S/L 5 IRVCS CONTROL 3/11/1998 1,000. 1,000. S/L 5 15 Add the amounts in column (g) and column (h). The total cf column (h) may not exceed \$2,000. See instructions for line 14, column (h). 15 Part III Summary 15 15 16 16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&TC Section 24355, add the amounts on line 15, columns (g) and (h) or Depreciation (fin o election is made), enter the amount from line 15, column (g). 16 17 Total depreciation claimed for federal purposes from federal Form 4562, line 22. 17 18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 2, line 12. (If California depreciation amounts are used to determine net income before 18 Part IV Amortization 18 Ost or Observiption of property | | | | | | | | | | depreciation |
| PANASONIC 2/16/1998 1,148. 1,148. S/L 5 FED-2PVS7670 2/27/1998 878. 878. S/L 5 FED-4PVS7670 2/27/1998 1,765. 1,765. S/L 5 IRVCS CONTROL 3/11/1998 1,000. 1,000. S/L 5 15 Add the amounts in column (g) and column (h). The total cf column (h) may not exceed \$2,000. See instructions for line 14, column (h). 15 15 Part III Summary 16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&TC Section 24355, add the amounts on line 15, columns (g) and (h) or Depreciation (fi no election is made), enter the amount from line 15, column (g). 16 17 Total depreciation claimed for federal purposes from federal Form 4562, line 22. 17 18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 2, line 12. (If California depreciation amounts are used to determine net income before 18 Part IV Amortization G(b) (c) Amortization allowed or allowable R&TC Section Period or percentage | DET | | 2/12/1000 | 2 100 | | 0/7 | - | | | |
| FED-2PVS7670 2/27/1998 878. 878. S/L 5 FED-4PVS7670 2/27/1998 1,765. 1,765. S/L 5 IRVCS CONTROL 3/11/1998 1,000. 1,000. S/L 5 15 Add the amounts in column (g) and column (h). The total cf column (h) may not exceed \$2,000. See instructions for line 14, column (h). 15 15 Part III Summary 16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&TC Section 24355, add the amounts on line 15, columns (g) and (h) or Depreciation (if no election is made), enter the amount from line 15, column (g). 16 17 Total depreciation claimed for federal purposes from federal Form 4562, line 22. 17 18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 2, line 12. (If California depreciation amcunts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.) 18 Part IV Amortization R&TC Period or percentage Amortization for this year 19 (a) (b) (c) (d) (e) (f) Amortization for this year | | | | | | | | | _ | |
| FED-4PVS7670 2/27/1998 1,765. 1,765. S/L 5 IRVCS CONTROL 3/11/1998 1,000. 1,000. S/L 5 15 Add the amounts in column (g) and column (h). The total of column (h) may not exceed 15 15 Part III Summary 15 15 15 16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&TC Section 24355, add the amounts on line 15, columns (g) and (h) or Depreciation claimed for federal purposes from federal Form 4562, line 22 | | | | | · · · · · · · · · · · · · · · · · · · | | | | | |
| IRVCS CONTROL 3/11/1998 1,000. 1,000. S/L 5 15 Add the amounts in column (g) and column (h). The total of column (h) may not exceed \$2,000. See instructions for line 14, column (h). 15 Part III Summary 15 15 16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&TC Section 24355, add the amounts on line 15, columns (g) and (h) or Depreciation (if no election is made), enter the amount from line 15, column (g). 16 17 Total depreciation claimed for federal purposes from federal Form 4562, line 22. 17 18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 2, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.) 18 Part IV Amortization 18 19 (a) Description of property (b) Cost or Other basis (c) Amortization allowed or allowable R&TC Section Period or Percentage Amortization for this year | | | | | | | | | | |
| 15 Add the amounts in column (g) and column (h). The total of column (h) may not exceed \$2,000. See instructions for line 14, column (h). 15 Part III Summary 16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&TC Section 24355, add the amounts on line 15, columns (g) and (h) or Depreciation (if no election is made), enter the amount from line 15, column (g). 16 17 Total depreciation claimed for federal purposes from federal Form 4562, line 22. 17 18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 2, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.) 18 Part IV Amortization 19 (a) Description of property (b) Date acquired (mm/dd/yyyy) (c) Other basis (d) Amortization allowed or allowable (e) R&TC Section (f) Amortization for this year | | | | | | l | | | | |
| \$2,000. See instructions for line 14, column (h). 15 Part III Summary 16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) or Depreciation (if no election is made), enter the amount from line 15, column (g). 16 17 Total depreciation claimed for federal purposes from federal Form 4562, line 22. 17 18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 1COW, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 1COW, Side 2, line 12. (If California depreciation amounts are used to determine net income before 18 Part IV Amortization 18 19 (a) Description of property (b) Date acquired (mm/dd/yyyy) (c) other basis (d) Amortization allowed or allowable R&TC Section Period or percentage | | | | | | | | | | |
| Part III Summary 16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&TC Section 24355, add the amounts on line 15, columns (g) and (h) or Depreciation (if no election is made), enter the amount from line 15, column (g). 16 17 Total depreciation claimed for federal purposes from federal Form 4562, line 22. 17 18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 1COW, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 1COW, Side 2, line 12. (If California depreciation amounts are used to determine net income before 18 Part IV Amortization 18 Part IV Amortization of property Date acquired (mm/dd/yyyy) Cost or other basis Amortization allowed or allowable R&TC section Period or percentage | 15 | Add the amounts in \$2,000. See instruction | column (g) and col ions for line 14 col | umn (h). The total jumn (h) | of column (h) may | not exceed | 15 | | | |
| IRC Section 179 expense, add the amount on line 12 and line 15, column (g) or Additional first year depreciation under R&TC Section 24355, add the amounts on line 15, columns (g) and (h) or 16 17 Total depreciation claimed for federal purposes from federal Form 4562, line 22 | Par | | <u></u> | | | | | | | |
| Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h) or Depreciation (if no election is made), enter the amount from line 15, column (g) | 16 | Total: If the corporat | tion is electing: | | | | · | | | |
| Depreciation (if no election is made), enter the amount from line 15, column (g) | | IRC Section 179 exp | ense, add the amo | unt on line 12 and | line 15, column (g) |) or ta an lina 1 | E columno d | | | |
| 17 Total depreciation claimed for federal purposes from federal Form 4562, line 22 | | Depreciation (if no e | lection is made), e | nter the amount fro | om line 15. column | (a) | o, columns i | (g) and (n) | 16 | |
| 18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 2, line 12. (If California depreciation amcunts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.) 18 Part IV Amortization 18 19 (a) (b) (c) (d) (e) (f) (g) Description of property Date acquired (mm/dd/yyyy) Cost or other basis Allowed or allowable R&TC Period or percentage Amortization for this year | 17 | | | | | | | | | |
| Form 100W, Side 2, line 12. (If California depreciation amcunts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.) 18 Part IV Amortization 18 Image: Part IV Amortization 18 Description of property (b) (c) (d) (e) (f) (g) Amortization of property Date acquired (mm/dd/yyyy) Cost or other basis allowed or allowable R&TC Period or percentage Amortization for this year | 18 | Depreciation adjustr | nent. If line 17 is gi | eater than line 16, | enter the difference | e here and | on Form 10 | 0 or | | |
| state adjustments on Form 100 or Form 100W, no adjustment is necessary.) 18 Part IV Amortization 18 19 (a) (b) (c) (d) (e) (f) (g) Description of property Date acquired (mm/dd/yyyy) Cost or other basis Amortization allowed or allowable R&TC Period or percentage Amortization for this year | | Form 100W, Side 1, Form 100W, Side 2 | line 6. If line 17 is line 12 (If Californ | less than line 16, e | enter the difference | here and o | on Form-100 bet income b | or efore | | |
| Part IV Amortization 19 (a) Description of property (b) Date acquired (mm/dd/yyyy) (c) Cost or other basis (d) Amortization allowed or allowable (e) R&TC section (f) Period or percentage (g) Amortization for this year | | state adjustments or | Form 100 or Form | 100W, no adjustr | nent is necessary.) | | | | . 18 | |
| Description Date acquired Cost or Amortization R&TC Period or Amortization of property (mm/dd/yyyy) other basis allowed or allowable section percentage for this year | Pari | t IV Amortization | | | | | | | | |
| of property (mm/dd/yyyy) other basis allowed or allowable section percentage for this year | 19 | (a) | (b) | (c) | (| d) | | (f) | | |
| | | | Date acquire | d Cost or ther bas | | | | | | Amortization |
| | | | (IIIIIIIda)yyyy | | | | | percenta | ge | for this year |
| | | | | | | | | | • | |
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| | | | | | | | | | | |
| 20 Total. Add the amounts in column (g) | 20 | Total. Add the amou | nts in column (g) | | | | | | 20 | |
| 21 Total amortization claimed for federal purposes from federal Form 4562, line 44 | 21 | Total amortization cla | aimed for federal p | urposes from fede | ral Form 4562, line | 44 | | | 21 | |
| 22 Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or | 22 | Amortization adjustm | nent. If line 21 is gi | eater than line 20, | enter the difference | e here and | on Form 10 | 0 or | | |
| Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or | | Form 100W, Side 1, | line 6. If line 21 is | less than line 20, e | enter the difference | here and c | on Form 100 | or | | |
| Form 100W, Side 2, line 12 22 | | TOTH TOON, SIDE Z, | 12 <u>.</u> | <u></u> | | | <u></u> | | ~~ | |

CALIFORNIA FORM

3885

| | ch to Form 100 or For ration name | m 100W. FORI | 1 199 | | | ···· | Californi | | |
|------------|--|---|------------------------|----------------------------|----------------------------------|---------------------------------------|-----------------------|----------|-------------------------------|
| • | | | | | | | | • | tion number |
| | MUNITY MEDIA | | | | | | 1240 | 607 | |
| Par | | cpense Certain Pro | | | | | | <u> </u> | |
| 1 | Maximum deduction | | | | | | | 1 | \$25,000 |
| 2 | Total cost of IRC Se | | | | | | | 2 | |
| - 3 - 4 | Threshold cost of IR Reduction in limitation | | | | | | | <u> </u> | \$200,000 |
| - 5 | Dollar limitation for t | | | | | | | 5 | |
| 6 | | Description of property | | (b) Cost (business | | | | 5 | |
| | (a) | Description of property | | (D) COST (DUSINESS | use only) | (c) Electe | | | |
| | | _ | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 7 | Listed property (elec | ted IPC Section 17 | (0 eact) | | | | | | |
| 8 | Total elected cost of | | • | | | ine 7 | | 8 | |
| 9 | Tentative deduction. | | | | | | | 9 | |
| 10 | Carryover of disallov | | | | | | | 10 | |
| 11 | Business income lim | | | | | | | 11 | |
| 12 | IRC Section 179 exp | | | | | | | 12 | |
| 13 | Carryover of disallow | ved deduction to 20 | 17. Add line 9 and | l line 10, less line 1 | 12[| 13 | • | | |
| Par | t II Depreciation ar | nd Election of Additi | onal First Year Dep | reciation Deduction | Under R&T | Section 243 | 56 | | |
| 14 | (a) | (b) | (C) | (d) | (e) | (f) | (g) | | (h) |
| | Description | Date acquired (mm/dd/yyyy) | Cost or other basis | Depreciation allowed or | Depreciation | | Depreciat | ion for | Additional first |
| | of property | (IIIII/dd/yyyy) | other basis | allowable in | method | rate | this ye | ar | year depreciation |
| | | | | earlier years | | | | | |
| ELI | C MAIL BOX | 4/28/1998 | 725. | 725. | S/L | 5 | | | |
| AV3 | D SYSTEM | 5/22/1997 | 17,260. | 16,972. | S/L | 5 | | | |
| PEI | TIUM II | 3/14/1999 | 701. | 701. | S/L | 5 | | | |
| DCI | R VX1000 | 4/12/1999 | 3,544. | 3,544. | S/L | 5 | | | |
| ELE | ECTRONIC MAIL | 4/30/1999 | 315. | 315. | S/L | 5 | | | |
| 15 | Add the amounts in | column (g) and col | umn (h). The total | of column (h) may | not exceed | ı | | | |
| | \$2,000. See instruct | | | | | | | | |
| Par | | | | | | | | | |
| 16 | Total: If the corporat IRC Section 179 exp Additional first year | ense, add the amo depreciation under | R&TC Section 243 | 356, add the amoun | its on line 1 | 5, columns (| (g) and (h) (| | |
| 17 | Depreciation (if no e | | | | | | | 16 | |
| | Total depreciation cl. Depreciation adjustm | | | | | | | | |
| | Form 100W. Side 1. | line 6. If line 17 is | less than line 16. (| enter the difference | e here and o | on Form 100 | or | | |
| | Form 100W, Side 2, state adjustments or | line 12. (If Californ | a depreciation am | nounts are used to a | determine n | iet income b | efore | . 18 | |
| Par | | | | nent is necessary./ | <u></u> | <u></u> | | . 10 | |
| 19 | (a) | (b) | (c) | 6 | d) | (e) | (f) | | (g) |
| 10 | Description of property | Date acquired (mm/dd/yyyy | d Costo | r Amorti sis allowed or | ization allowable er years | (e) R&TC section (see instr) | Period o percentag | | Amortization for this year |
| | | | | | | | | | |
| | | - | | | | | | | |
| | | | | | | i i | | <u> </u> | |
| | | | | | | | | <u> </u> | |
| | | | 1 | | | | | | |
| 20 | Total. Add the amou | nts in column (a) | ···· | | | | | 20 | ; |
| 21 | Total amortization cl | | | | | | | 21 | |
| | | | • | | | | | | |
| | Amortization adjustm Form 100W, Side 1, | line 6. If line 21 is | less than line 20, e | enter the difference | here and c | on Form 100 | or | | |
| | Form 100W, Side 2, | line 12 | | <u></u> | <u>.</u> | <u></u> | . <u></u> 2 | 2 | |
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CALIFORNIA FORM

| | h to Form 100 or Foi ation name | rm 100W. FOR | M 199 | | | | Califor | nia corpora | ation number |
|-----------|--|--|---------------------------------|---------------------------------------|------------------------|--------------------|-----------------------------------|-------------|--------------------------|
| | | | | | | | | | |
| Part | MUNITY MEDIA | | | | | | 1240 | 1607 | |
| | Maximum deduction | xpense Certain Pro | | | | Set of Section and | ~ 1 | 1 | \$25 000 |
| | Total cost of IRC Se | | | | | | | 2 | \$25,000 |
| | Threshold cost of IR | | | | | | | 3 | \$200,000 |
| | Reduction in limitati | | | | | | | 4 | |
| | Dollar limitation for | | | | | | | 5 | |
| 6 | | Description of property | | (b) Cost (business | | (c) Electe | | | |
| | | | | · · · · · · · · · · · · · · · · · · · | | | | | |
| | | | | | | | 1 | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 7 | Listed property (elec | ted IRC Section 17 | 79 cost) | | 7 | | | | |
| | Total elected cost of | | | | | ne 7 | 0000001415 | 8 | |
| | Tentative deduction. | | | | | | | 9 | |
| | Carryover of disallow | | | | | | | 10 | |
| | Business income lim | | | | | | | 11 | |
| 12 | IRC Section 179 exp | ense deduction. A | dd line 9 and line 1 | 0, but do not enter | more than | line 11 | | 12 | |
| | Carryover of disallov | | | | | | | | |
| Part | Depreciation a | nd Election of Addit | ional First Year Dep | reciation Deduction | Under R&TC | Section 243 | 356 | | |
| 14 | (a) | (b) | (c) | (d) | (e) | (f) | (g | | (h) |
| | Description of property | Date acquired (mm/dd/yyyy) | Cost or other basis | Depreciation allowed or | Depreciation method | Life or | Deprecia this y | | Additional first year |
| | of property | (mm/dd/yyyy) | oulei basis | allowable in | | | uns y | real | depreciation |
| | | | | earlier years | | | | | |
| HAR | DRIVES | 5/02/1999 | 1,768. | 1,768. | S/L | 5 | | | |
| SVH | S RECORDER | 6/03/1999 | 4,075. | 4,075. | S/L | 5 | | | |
| VHS | CAMCORDER | 6/30/1999 | 761. | 761. | S/L | 5 | | | |
| JVC | SWITCHER | 10/29/1998 | 2,307. | 2,307. | S/L | 5 | | | |
| EDI | T CONTROLLER | 9/01/1998 | 2,474. | 2,474. | S/L | 5 | | | |
| 15 | Add the amounts in \$2,000. See instruct | column (g) and col ions for line 14, co | lumn (h). The total lumn (h) | of column (h) may | not exceed | 15 | | | |
| | III Summary | , | () | | | | | | |
| | Total: If the corporat | tion is electina: | | | | | | | |
| | IRC Section 179 exp | ense, add the amo | unt on line 12 and | line 15, column (g) |) or | - | | | |
| | Additional first year Depreciation (if no e | epreciation under | nter the amount fr | no, add the amount | ונs on line ו: (מ) | 5, columns | (g) and (n) | or | |
| | Total depreciation cl | | | | | | | | |
| 18 | Depreciation adjustn | nent. If line 17 is a | reater than line 16. | enter the difference | e here and | on Form 10 | 0 or | | |
| | Form 100W, Side 1, | line 6. If line 17 is | less than line 16, i | enter the difference | here and o | n Form 100 | or | | |
| | Form 100W, Side 2, state adjustments or | Time 12. (If Californ Form 100 or Form | na depreciation am | iounts are used to (| determine n | et income b | etore | . 18 | |
| Part | | | in room, no adjuodi | <u>nont is neococary.</u> | | | | | |
| 19 | (a) | (b) | (c) | | d) | (e) | (f) | | (g) |
| | Description | Date acquire | d Cost o | r Amort | ization | R&TC | Period | | Amortization |
| | of property | (mm/dd/yyyy | ') other bas | sis allowed or in earlie | | section | percenta | ge | for this year |
| | | | | in carile | years | (see man) | | | |
| | | | | | | | | <u> </u> | |
| | | | | | | | | | |
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| | | | | | | | - | | |
| | | | | | | | | | |
| | Total. Add the amou | (0) | | | | | - | 20 | |
| | Total amortization cl | | • | | | | · · · · · · · · · · · · · · · · · | 21 | |
| 22 | Amortization adjustn | nent. If line 21 is g | reater than line 20, | enter the difference | e here and | on Form 10 | 0 or | | |
| | Form 100W, Side 1, Form 100W, Side 2, | | | | | | | 22 | |
| - 1 | 5/11 100W, Olde 2, | | <u></u> | | <u></u> | <u></u> | | | |
| | | | | | | | | | |

TAXABLE YEAR

2016 Corporation Depreciation and Amortization

CALIFORNIA FORM

3885

| | ch to Form 100 or Fo | rm 100W. FOR | M 199 | | | | | | | |
|---------|--|---|----------------------|----------------------------------|-----------------------------|-----------------------------|--------------------|--------------------|---------------------------------------|------------|
| Corpo | ration name | | | | | | Califor | rnia cor | poration number | |
| CO | MMUNITY MEDIA | OF THE FOOT | HILLS | | | | 124 | 0607 | 7 | |
| Par | | xpense Certain Pro | | | | | | | | |
| 1 | Maximum deduction | | | | | | | 1 | \$25,0 | 000 |
| 2 | Total cost of IRC Se | | | | | | | 2 | | |
| 3 | | | | y before reduction in limitation | | | | | \$200,0 | 000 |
| 4 | Reduction in limitati | | | | | | | 4 | | |
| | Dollar limitation for | | act line 4 from line | | 1 | | • • • | 5 | <u> </u> | |
| 6 | (a) | Description of property | | (b) Cost (business | use only) | (c) Electe | d cost | | | |
| - | | | | | | | | ļ | | |
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| | | | | | | | | | | |
| | | | | | | | | | | |
| 7 | Listed property (elec | | | | | | | | | |
| 8 | Total elected cost of | | | | | | | 8 | | _ |
| 9 10 | Tentative deduction. | | | | | | | 9 | | |
| 11 | Carryover of disallow Business income lim | | | | | | | 10 11 | | |
| 12 | IRC Section 179 exp | | | | | | | 12 | | _ |
| 13 | Carryover of disallow | | | | | | | 12 | | (<u> </u> |
| Par | | nd Election of Addit | | | | | 56 | | · · · · | |
| 14 | (a) | (b) | (c) | (d) | (e) | (f) | | 1) | (h) | |
| | Description | Date acquired | Cost or | Depreciation | Depreciation | | Deprecia | ation f | | st |
| | of property | (mm/dd/yyyy) | other basis | allowed or allowable in | method | rate | this | year | year | |
| | | | | earlier years | | | | | depreciation | I |
| AUI | DIO MIXER | 9/23/1998 | 592. | 592. | S/L | 5 | | | | |
| TEI | LEPROMPTER | 10/29/1998 | 370. | 370. | | 5 | | _ | | |
| LIC | HT KIT | 2/19/1999 | 652. | 652. | S/L | 5 | | | | |
| TR | [POD | 11/30/1998 | 300. | 300. | | 5 | 1 | | | |
| 2 1 | 2 PV \$7670 11/04/1998 638. 638. 5/L 5 | | | | | | | | | _ |
| 15 | Add the amounts in | column (a) and co | | | | | | | | |
| | \$2,000. See instruct | ions for line 14, co | lumn (h) | | | 15 | | | | |
| Par | | | • • | ···· | | 1 | | | · · · · · · · · · · · · · · · · · · · | — |
| 16 | | tion is electing: | | | | | | | | _ |
| | IRC Section 179 exp Additional first year | ense, add the amo | ount on line 12 and | line 15, column (g) |) or ts on line 1 | 15 columns (| (a) and (b) | | | |
| | Depreciation (if no e | lection is made), e | nter the amount fro | om line 15, column | (q) | | | / ⁰ 1 | 6 | |
| | Total depreciation cl | aimed for federal p | urposes from fede | ral Form 4562, line | 22 | | | | 7 | _ |
| 18 | Depreciation adjustn Form 100W, Side 1, | nent. If line 17 is g | reater than line 16, | enter the difference | e here and | l on Form 10 | 0 or | | | |
| | Form 100W, Side 1, Form 100W, Side 2, | line 6. If line 17 is line 12. (If Californ | iess than line 16, e | enter the difference | e nere and o letermine r | on Form 100 het income b | or efore | | | |
| | state adjustments or | Form 100 or Forn | n 100W, no adjustn | ent is necessary.) | | | | [1 | 8 | |
| Par | t IV Amortization | | | | | | | | | |
| 19 | (a) | (b) | (c) | (| d) | (e) | (f) | | (g) | |
| | Description of property | Date acquire (mm/dd/yyyy | d Cost o | | zation | R&TC section | Period percenta | | Amortization | |
| | | (| | in earlie | | (see instr) | percente | AGC | for this year | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| 20 | Total. Add the amou | nts in column (g). | | | | ···· | | 20 | | |
| 21 | Total amortization cl | aimed for federal p | ourposes from fede | ral Form 4562, line | 44 | | | 21 | | |
| 22 | Amortization adjustr | nent. If line 21 is a | reater than line 20. | enter the difference | e here and | on Form 10 | 0 or | | | |
| | Form 100W, Side 1, | line 6. If line 21 is | less than line 20, e | enter the difference | here and d | on Form 100 | or | _ | | |
| | Form HEW Side 2 | IINE 12 | | <u> </u> | | | | 22 | | |
| | | | | | - | | | | | |

TAXABLE YEAR

2016 Corporation Depreciation and Amortization

CALIFORNIA FORM

| | ch to Form 100 or Fo | rm 100W. FOR | 199 | | | | | | |
|----------|---|---|--|--|-----------------------------|---|-----------------------|-------------|-------------------------------|
| Corpo | ration name | | | | | | Califor | nia corpora | ation number |
| | MUNITY MEDIA | | | | | | 124 | 0607 | |
| Par | | xpense Certain Pro | | | | | | | |
| 1 | Maximum deduction | | | | | | | 1 | \$25,000 |
| 2 | Total cost of IRC Se | | | | | | | | |
| 3 4 | Threshold cost of IR Reduction in limitati | | | | | | | | \$200,000 |
| 5 | Dollar limitation for | | | | | | | 4 | |
| | | Description of property | | (b) Cost (business | 1 | (c) Electe | | 9 | |
| <u> </u> | (0) | Description of property | | (b) Cost (business | use only) | | <u>u cost</u> | | |
| | | | | | | | · | | |
| | | · | | | | | | | |
| | | | | | | | | | |
| 7 | Listed property (elec | ted IRC Section 17 | '9 cost) | | 7 | | | | |
| 8 | Total elected cost o | | | | | ne 7 | | 8 | |
| 9 | Tentative deduction. | | | | | | | 9 | |
| 10 | Carryover of disallow | ved deduction from | prior taxable year | s | | | | 10 | |
| 11 | Business income lin | | | | | | | 11 | |
| 12 | IRC Section 179 exp | | | | | | • • • • • • • • • • • | 12 | |
| 13 | Carryover of disallow | | | | | | 2002 - 20 20 | | |
| Par | · · · · · · · · · · · · · · · · · · · | nd Election of Additi | · · · · · · · · · · · · · · · · · · · | <u> </u> | | Section 243 | | | |
| 14 | (a) Description | (b) Date acquired | (c) Cost or | (d) Depreciation | (e) Depreciation | (f) Life or | Deprecia | | (h) Additional first |
| | of property | (mm/dd/yyyy) | other basis | allowed or | method | rate | this | | year |
| | | | | allowable in earlier years | | | | | depreciation |
| DFN | OVABLE HD | 9/30/1998 | 465. | 465. | S/L | 5 | | - | |
| | GATE SCSI | 11/17/1998 | 2,480. | 2,480. | S/L S/L | 5 | | | |
| | -VCR | 11/30/1998 | 3,500. | 3,500. | S/L | 5 | | | |
| | TTO MAX | 11/19/1998 | 287. | 287. | S/L S/L | 5 | | | |
| | ADAPTER | 3/29/1999 | 330. | 314. | S/L | 5 | | | |
| | Add the amounts in | | | | · · · - | · | | | |
| 10 | \$2,000. See instruct | ions for line 14, col | umn (h) | | | 15 | | | |
| Par | | · · · · · | • • | | | | | | |
| 16 | Total: If the corpora | tion is electing: | | | | | | | |
| | IRC Section 179 exp Additional first year | ense, add the amo depreciation under | unt on line 12 and R&TC Section 243 | line 15, column (g) 56, add the amoun |) or ts on line 1 | 5 columns (| a) and (h) | or | - |
| | Depreciation (if no e | lection is made), e | nter the amount fro | om line 15, column | (g) | ••••••••••••••••••••••••••••••••••••••• | | 16 | |
| 17 | Total depreciation cl | aimed for federal p | urposes from fede | ral Form 4562, line | 22 | | | 17 | |
| 18 | Depreciation adjustr | nent. If line 17 is gr | eater than line 16, | enter the difference | e here and | on Form 10 | 0 or | | |
| | Form 100W, Side 1, Form 100W, Side 2, | line 12. (If Californ | ia depreciation am | ounts are used to a | e nere and d determine n | et income b | or efore | | |
| | state adjustments or | n Form 100 or Form | <u>100[']W, no adjustn</u> | nent is necessary.) | | | <u></u> | 18 | |
| Parl | | | | | | | | | |
| 19 | (a) Description | (b) | d Costo | | 1) Totion | (e) R&TC | (f) Period | | (g) |
| | of property | Date acquire (mm/dd/yyyy |) other bas | | | section | percenta | | Amortization for this year |
| | · · · · · | | | in earlie | er years | (see instr) | <u> </u> | | |
| | | <u> </u> | _ | | | | | | |
| | <u> </u> | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| <u> </u> | | | | | | | | | |
| 20 | Total. Add the amou | | | | | | | 20 | |
| 21 | Total amortization cl | - | | | | | | 21 | |
| 22 | Amortization adjustn | nent. If line 21 is gr | eater than line 20, | enter the difference | e here and | on Form 100 |) or | | |
| | Form 100W, Side 1, Form 100W, Side 2, | line 6. IT line 21 IS | iess than line 20, e | enter the difference | nere and o | n Form 100 | or | 22 | |
| | . onit 10011; Oldo 2, | | <u></u> | | | <u></u> | | | |

CALIFORNIA FORM

| | to Form 100 or For | rm 100W. FOR I | M 199 | | | | | | |
|----------|--|-------------------------------|---|---------------------------------------|------------------------------|---------------------------------------|-----------------------|------------|----------------------------|
| Corpo | ration name | | | | | | California | a corporat | lion number |
| | MUNITY MEDIA | | | <u> </u> | | | 1240 | 607 | |
| Par | | cpense Certain Pro | | | | | | | |
| 1 | Maximum deduction | | | | | | | 1 2 | \$25,000 |
| 2 3 | Total cost of IRC Se Threshold cost of IR | | | | | | | 2 3 | \$200,000 |
| 4 | Reduction in limitation | | | | | | | 4 | \$200,000 |
| 5 | Dollar limitation for t | | | | | | | 5 | |
| 6 | | Description of property | | (b) Cost (business | | (c) Electe | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 7 | Listed property (elec | | | | | | | | |
| 8 | Total elected cost of | | | | | | | 8 | |
| 9 | Tentative deduction. | | | | | | | 9 | |
| 10 11 | Carryover of disallow Business income lim | | | | | | | 10 | |
| 12 | IRC Section 179 exp | | | • | | | | 12 | · |
| 13 | Carryover of disallow | | | | | | | | |
| Par | t I Depreciation ar | nd Election of Addit | ional First Year Dep | reciation Deduction | Under R&TC | Section 243 | 56 | | |
| 14 | (a) | (b) | (C) | (d) | (e) | (f) | (g) | | (h) |
| | Description of property | Date acquired (mm/dd/yyyy) | Cost or other basis | Depreciation allowed or | Depreciation method | Life or rate | Depreciati this ye | | Additional first year |
| | or property | (111111100) 33333 | 00101 50010 | allowable in | mounda | | ano ye | | depreciation |
| | | | | earlier years | - (- | <u> </u> | | | · |
| | DULAR DECODER | 3/29/1999 | 323. | 308. | S/L | 5 | | | |
| | IS RECORDER | 11/29/1999 | 5,814. | 5,814. | S/L | 5 | | | |
| | ER/CLOCK | 6/06/1999 6/30/1999 | 675. 2,985. | 664. 2,985. | S/L S/L | 5 | | | · · · · · |
| | PUTER | 11/14/1999 | 610. | 610. | S/L S/L | 5 | | | |
| | | | | | | <u> </u> | | | |
| 15 | Add the amounts in \$2,000. See instruct | | | | | | | | |
| Par | | | | | | | | | |
| 16 | Total: If the corporat | tion is electing: | | | | | | | |
| | IRC Section 179 exp Additional first year | ense, add the amo | ount on line 12 and R&TC Section 243 | line 15, column (g) |) or its on line 1 | 5 columns i | (a) and (h) (| | |
| | Depreciation (if no e | election is made), e | nter the amount fro | om line 15, column | (g) | | | 16 | |
| 17 | Total depreciation cl | | | | | | | 17 | |
| 18 | Depreciation adjustn Form 100W, Side 1, | nent. If line 17 is g | reater than line 16, | enter the difference | e here and | on Form 10 | 0 or | | |
| | Form 100W, Side 2, | line 12. (If Californ | ia depreciation am | ounts are used to o | determine n | iet income b | efore | | |
| | state adjustments or | n Form 100 or Form | n 100W, no adjustn | nent is necessary.) | | · · · · · · · · · · · · · · · | | 18 | |
| Par | | | | | | | 10 | | |
| 19 | (a) Description | (b) Date acquire | d Costo | r Amorti | d) ization | (e) R&TC | (f) Period o | r | (g) Amortization |
| | of property | (mm/dd/yyyy | other bas | sis allowed or | | section (see instr) | percentag | e | for this year |
| | | | | in earlie | | | | | |
| | · · · · | | | | | | | | |
| | | | | | | | | | |
| | | | | | | ·· | | | |
| | | | | | | | | | |
| 20 | Total. Add the amou | ints in column (a). | | · · · · · · · · · · · · · · · · · · · | | · · · · · · · · · · · · · · · · · · · | | 20 | |
| 21 | Total amortization cl | | | | | | | 21 | |
| 22 | | | | | | | | | |
| | Amortization adjustn Form 100W, Side 1, | line 6. If line 21 is | less than line 20, a | enter the difference | here and o | on Form 100 | or | | |
| | Form 100W, Side 2, | | <u></u> | <u></u> <u>,</u> <u>,</u> | <u></u> | <u></u> | | 22 | |
| | | | | | | | | | |

CALIFORNIA FORM

| | ch to Form 100 or For ration name | rm 100W. FORI | M 199 | | | | Califor | mia ee | roorati | on number |
|-----------|--|-------------------------|----------------------|----------------------------|-----------------------|---------------|---------------|------------|--------------|----------------------|
| • | | | | | | | | | | oar number |
| | MUNITY MEDIA | | | | | | 124 | 060 | 7 | |
| Par | | xpense Certain Pro | | | C14151 | | | 1 1 | - | <u> </u> |
| 1 | Maximum deduction | | | | | | | 1 | | \$25,000 |
| 2 3 | Total cost of IRC Se Threshold cost of IR | | • | | | | | <u> </u> | + | ¢200_000 |
| 4 | Reduction in limitation | | • | | | | | | - | \$200,000 |
| 5 | Dollar limitation for 1 | | | | | | | 5 | + | |
| 6 | | Description of property | | (b) Cost (business | 1 | (c) Electe | | | 4 | |
| <u> </u> | (4) | becomption of property | | | use entry | (0) 210010 | | | | |
| | | | | | | | | 1 | | |
| | | | | | | | | 1 | | |
| | | | | | | | · - | 1 | | |
| 7 | Listed property (elec | ted IRC Section 17 | (9 cost) | | 7 | | | ł | | |
| 8 | Total elected cost of | | | | | ine 7 | 1000000 | 8 | | · <u>/</u> ······· |
| 9 | Tentative deduction. | | | | | | | 9 | + | · |
| 10 | Carryover of disallow | | | | | | | 10 | ╉ | |
| 11 | Business income lim | | | | | | | 11 | | |
| 12 | IRC Section 179 exp | | | | | | | 12 | \mathbf{T} | |
| 13 | Carryover of disallov | ved deduction to 20 | 17. Add line 9 and | Tine 10, less line 1 | 12 [| 13 | | | 1 | |
| Par | t I Depreciation ar | nd Election of Additi | onal First Year Dep | reciation Deduction | Under R&T | C Section 243 | 356 | | | |
| 14 | (a) | (b) | (c) | (d) | (e) | (f) | ((| g) | | (h) |
| | Description | Date acquired | Cost or | Depreciation | Depreciation | | Deprecia | ation | for | Additional first |
| | of property | (mm/dd/yyyy) | other basis | allowed or allowable in | method | rate | this | year | | year depreciation |
| | | | | earlier years | | | | | | aprobation |
| TEI | LEVISION | 5/16/1999 | 714. | 706. | S/L | 7 | | | | |
| ELE | TRONICS | 5/24/1999 | 557. | 546. | S/L | 5 | | | | |
| 2 0 | CAMCORDERS | 10/14/1999 | 4,532. | 4,532. | S/L | 5 | | | | |
| COM | PUTER ACCESS | 7/05/2000 | 2,985. | 2,985. | S/L | 5 | | | | |
| MAT | ROX EDIT | 3/07/2001 | 888. | 888. | S/L | 7 | | | | |
| 15 | Add the amounts in \$2,000. See instruct | | | | | | | | | |
| Par | t III Summary | | | | | | | | | |
| | Total: If the corporat | tion is electina: | | | | | | | | |
| | IRC Section 179 exp | ense, add the amo | unt on line 12 and | line 15, column (g) |) or | | | | | |
| | Additional first year Depreciation (if no e | | | | | | | | 16 | |
| 17 | Total depreciation cl | | | | | | | | 17 | |
| | Depreciation adjustn | | | | | | | ···· | | |
| | Form 100W, Side 1, | line 6. If line 17 is | less than line 16, o | enter the difference | e here and \circ | on Form 100 | or | | | |
| | Form 100W, Side 2, state adjustments or | line 12. (If Californ | a depreciation am | iounts are used to (| determine r | net income b | etore | | 18 | |
| Par | | | T TOOW, NO AUJUST | Herit is necessary.) | • • • • • • • • • • • | | | | 10 | |
| 19 | (a) | (b) | (c) | | d) | (e) | (6) | | 1 | (g) |
| 15 | Description | Date acquire | d Costo | r Amort | ization | R&TC | (f) Period | or | | Amortization |
| | of property | (mm/dd/yyyy |) other bas | | allowable | section | percenta | age | | for this year |
| | | | | in earlie | er years | (see instr) | - | | | |
| | | | | | | | | | - | |
| | | · | | | | | | | <u> </u> | |
| | | | | | | | <u> </u> | | | |
| | | | | | | <u> </u> | | | | |
| | | | | | | | l, | - | _ | |
| 20 | Total. Add the amou | 107 | | | | | | 20 | | |
| 21 | Total amortization cl | laimed for federal p | urposes from fede | ral Form 4562, line | 44 | <i>.</i> | | 2 1 | | |
| <u>22</u> | Amortization adjustn | nent. If line 21 is g | reater than line 20, | enter the difference | e here and | on Form 10 | 0 or | | | |
| | Form 100W, Side 1, | | | | | | or | 20 | | |
| | Form 100W, Side 2, | Ine 12 | <u></u> | <u></u> | | | | 22 | I | |
| | | | | | | | | | | |

CALIFORNIA FORM

3885

| | ch to Form 100 or For | rm 100W. FOR | M 199 | | | | | | |
|---------------|--|---|----------------------|-------------------------------|---------------------|--------------|-----------------------|-----------------------|--------------------|
| Corpo | ration name | | | | | | Califo | mia corpo | oration number |
| | MUNITY MEDIA | | | | | | 124 | 0607 | |
| Par | | xpense Certain Pro | | | | | | | |
| 1 | Maximum deduction | | | | | | | | \$25,000 |
| 2 | Total cost of IRC Se | | | | | | | | |
| 3 | Threshold cost of IR | | | | | | | | \$200,000 |
| 4 | Reduction in limitation | | | | | | | | |
| <u>5</u> 6 | Dollar limitation for t | | | | | | | 5 | |
| 0 | (8) | Description of property | | (b) Cost (business | use only) | (c) Electe | a cost | - | |
| | | | | | | | | 4 | |
| | | | | | | <u> </u> | | - | |
| | | | | | | | | 4 | |
| | | | | | | | | 4 | |
| 7 | Listed property (elec | | | | | | | + | |
| 8 | Total elected cost of | | | | | | | | |
| 9 10 | Tentative deduction. | | | | | | | | |
| 10 11 | Carryover of disallow Business income lim | | | | | | | 10 | |
| 12 | IRC Section 179 exp | | | | | | | 12 | |
| 13 | Carryover of disallow | | | | | | | + "~ + | |
| Parl | | | | reciation Deduction | | | 56 | | |
| 14 | (a) | (b) | (c) | (d) | 1 | (f) | - | <u></u> | (h) |
| 14 | Description | Date acquired | Cost or | Depreciation | (e) Depreciation | | Depreci | g) ation fo | r Additional first |
| | of property | (mm/dd/yyyy) | other basis | allowed or | method | rate | | year | year |
| | | | | allowable in earlier years | | | | | depreciation |
| PAN | ASONIC VCR | 3/08/2001 | 1,077. | 1,077. | S/L | 7 | | | |
| | 2000 | 9/01/2000 | 995. | 995. | 5/L | 7 | | | |
| | ASONIC PRO L | | 2,947. | 2,947. | 5/L | 7 | | | |
| | 2000 | 3/28/2001 | 2,550. | 2,550. | S/L | 7 | | | |
| | PUTER EQUIPM | | 4,449. | 4,449. | S/L S/L | 7 | | - | |
| | | | | | | · · · · · | | | |
| 15 | Add the amounts in \$2,000. See instruct | column (g) and col | lumn (h). The total | of column (h) may | not exceed | 15 | | | |
| Pari | | | | ····· | | | | | |
| | Total: If the corporat | tion is electing: | | | | | | <u> </u> | |
| | IRC Section 179 exp | ense, add the amo | unt on line 12 and | line 15, column (g) |) or | | | | |
| | Additional first year Depreciation (if no e | depreciation under | R&TC Section 243 | 56, add the amoun | ts on line 1 | 5, columns (| (g) and (h |) or 16 | |
| 17 | Total depreciation cl | • · | | | 107 | | | | |
| | | | | | | | | ··· <u>··</u> | |
| | Depreciation adjustn Form 100W, Side 1, | line 6. If line 17 is | less than line 16, | enter the difference | here and c | n Form 100 | or | | |
| | Form 100W, Side 2, state adjustments or | Tine 12. (If Californ Form 100 or Form | a depreciation am | ounts are used to (| determine n | et income b | etore | 18 | |
| Parl | | | | Bent is necessary.) | <u></u> | | | | • |
| 19 | (a) | (b) | (c) | | d) | (e) | (f) | | (g) |
| | Description | Date acquire | d Costo | r Amorti | zation | (e) R&TC | Period | lor | Amortization |
| | of property | (mm/dd/yyyy |) other bas | sis allowed or in earlie | | section | percent | age | for this year |
| | ··· | | | in earne | r years | (see instr) | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | . | | | | | | |
| 20 | Total. Add the amou | 10, | | | | •••••••••• | • • • • • • • • • • • | 20 | |
| | Total amortization cl | • | , | • | | | | 21 | |
| 22 | Amortization adjustn Form 100W, Side 1, | nent. If line 21 is g | reater than line 20, | enter the difference | e here and | on Form 10 | 0 or | | |
| | Form 100W, Side 1, Form 100W, Side 2, | line 5. If line 21 is line 12 | iess than line 20, e | enter the difference | nere and o | n ⊢orm 100 | or | 22 | |
| | · one room, one z, | | <u></u> | | | <u></u> | | | |
| | | | | | | | | | |

TAXABLE YEAR

2016 Corporation Depreciation and Amortization

CALIFORNIA FORM

| | ch to Form 100 or For | m 100W. FOR | M 199 | | | | | | |
|-------|---|-------------------------|------------------------|----------------------------|-----------------------------|---------------|---|-------------|---------------------------------------|
| Corpo | ration name | | | | | | California | a corporati | on number |
| CO | MUNITY MEDIA | OF THE FOOT | HILLS | | | | 12400 | 607 | |
| Par | t Election To Ex | pense Certain Pro | perty Under IRC S | ection 179 | | | • | | <u> </u> |
| 1 | Maximum deduction | | | | | | | 1 [| \$25,000 |
| 2 | Total cost of IRC Se | ction 179 property | placed in service. | | | | | 2 | |
| 3 | Threshold cost of IR | C Section 179 prop | perty before reduction | ion in limitation: | | | in the second | 3 | \$200,000 |
| 4 | Reduction in limitation | | | | | | | 4 | |
| 5 | Dollar limitation for t | | | | | | | 5 | · · · · · · · · · · · · · · · · · · · |
| 6 | | Description of property | | (b) Cost (business | | (c) Electe | | | |
| | | | | | | | | | |
| | | | | | | | _ | | |
| - | | | | | | | | | |
| | | | | | | | | | |
| 7 | Listed property (elec | ted JBC Section 17 | 79 cost) | | | | | | |
| 8 | Total elected cost of | | | | | ine 7 | | 8 | |
| 9 | Tentative deduction. | | | | | | | 9 | |
| 10 | Carryover of disallow | | | | | | | 0 | |
| 11 | Business income lim | itation. Enter the s | maller of business | income (not less t | han zero) c | n line 5 | 1 | | |
| 12 | IRC Section 179 exp | | | | | | | 2 | |
| 13 | Carryover of disallow | | | | | 13 | | | |
| Par | | | | reciation Deduction | | C Section 243 | 56 | | |
| 14 | (a) | (b) | (c) | (d) | (e) | (f) | (g) | | (h) |
| | Description | Date acquired | Cost or | Depreciation | Depreciation | | Depreciati | on for | Additional first |
| | of property | (mm/dd/yyyy) | other basis | allowed or allowable in | method | rate | this ye | ar | year |
| | | | | earlier years | | | | | depreciation |
| SON | Y DXC CAMERA | 2/05/2002 | 1,900. | 1,900. | S/L | 7 | | | |
| NEW | STUDIO IMPR | 3/12/2003 | 70,000. | 31,107. | S/L | 30 | 2. | 333. | |
| | STUDIO IMPR | 5/14/2003 | 110,000. | 48,282. | S/L | 30 | | 667. | |
| | YOUT SOFTWAR | 2/10/2003 | 5,000. | 5,000. | S/L | 5 | | | |
| | EQUIPMENT | 9/16/2002 | 81,884. | 81,884. | S/L | 7 | | | |
| | | | | | | | | | |
| 15 | Add the amounts in \$2,000. See instructi | ons for line 14 col | umin (n). The total | or column (n) may | not exceed | 15 | | | |
| Parl | | | <u>anni (ny</u> | | • • • • • • • • • • • • • • | | | | |
| | Total: If the corporat | ion is electina: | | | • • | | | | |
| | IRC Section 179 exp | ense, add the amo | unt on line 12 and | line 15, column (g) |) or | | | | |
| | Additional first year of | depreciation under | R&TC Section 243 | 56, add the amoun | ts on line 1 | 5, columns (| (g) and (h) o | | |
| 17 | Depreciation (if no el | | | | | | | 16 | |
| 12 | Total depreciation cla Depreciation adjustment | ameu for leuerarp | actor than line 16 | antor the difference | | Eerre 10 | | 17 | |
| 10 | Form 100W, Side 1, | line 6. If line 17 is | less than line 16, | enter the difference | here and a | on Form 100 | or | | |
| | Form 100W, Side 2, | line 12. (If Californ | ia depreciation am | iounts are used to d | determine r | iet income bi | efore | | |
| Davi | state adjustments on | Form 100 or Form | 1 100W, no adjustr | nent is necessary.) | | <u></u> | | 18 | |
| Part | | | | | | | | | |
| 19 | (a) Description | (b) Date acquired | d Costor | r Amorti | 1) | (e) R&TC | (f) Period or | | (g) |
| | of property | (mm/dd/yyyy |) other bas | | | section | percentage | | Amortization for this year |
| | | | | in earlie | er years | (see instr) | , | _ | lor this year |
| | | | | | | | | | |
| | | | | | | | | | |
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| | | | | | | | | | |
| 20 | Total. Add the amour | nts in column (a) | | | | • | | 0 | |
| | Total amortization cla | | | | | | | | |
| | Amortization adjustm | | • | | | | | <u> </u> | |
| | Form 100W, Side 1, I | ine 6. If line 21 is | less than line 20, ε | enter the difference | here and c | on Form 100 | or | | |
| | Form 100W, Side 2, I | ine 12 | ······ | ····· | <u></u> | <u></u> | <u>.</u> | 2 | |
| | | | | | | | | | |

CALIFORNIA FORM

3885

| | ch to Form 100 or For ration name | rm 100W. FOR | M 199 | | | | | | |
|--------|--|-------------------------|---------------------------------------|-------------------------------|------------------------|---------------------------------------|-----------------|--------------|--------------------------------|
| | | | | | | | | ia corporati | on number |
| | MUNITY MEDIA | | | | | | 1240 | 607 | |
| Par | | | perty Under IRC S | | - | | | 4 | |
| 1 | Maximum deduction | | | | | | | 2 | \$25,000 |
| 2 | Total cost of IRC Se Threshold cost of IR | | | | | | | 3 | <u> </u> |
| 3 4 | Reduction in limitation | | | | | | | 4 | \$200,000 |
| 5 | Dollar limitation for 1 | | | | | | | 5 | |
| 6 | | Description of property | | (b) Cost (business | | (c) Electe | | | |
| | | possiplier of property | | (1) 0001 (20011000 | | (0) 2,0000 | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 7 | Listed property (elec | ted IRC Section 1 | 79 cost) | | 7 | • | | | |
| 8 | Total elected cost of | | • | | | ine 7 | 10/0000 | 8 | |
| 9 | Tentative deduction. | | | | | | | 9 | |
| 10 | Carryover of disallow | ved deduction from | n prior taxable year | s | | | 1221287 | 10 | |
| 11 | Business income lim | nitation. Enter the | smaller of business | income (not less t | han zero) o | r line 5. | 1986 | 11 | |
| 12 | IRC Section 179 exp | | | | | line 11 | | 12 | |
| 13 | Carryover of disallow | | | | | 13 | | | |
| Par | | | - | reciation Deduction | Under R&TO | | 356 | | · · - ··· ··· |
| 14 | (a) Description | (b) Date acquired | (c) Cost or | (d) Depreciation | (e) Depreciation | (f) Life or | (g) Deprecia | | (h) Additional first |
| | of property | (mm/dd/yyyy) | other basis | allowed or | method | rate | this y | | year |
| | | | | allowable in earlier years | | | | | depreciation |
| - | E COMPUTER S | 0/26/2002 | 8,676. | | a / T | 7 | | | |
| | TERA CABLES | 9/26/2002 10/08/2002 | 1,979. | 8,676. 1,979. | S/L S/L | 7 | | | |
| | CPUTER EQUIPM | | 600. | 600. | 5/L S/L | 7 | | | |
| - | DIO IMPROVEM | 8/13/2003 | 7,698. | 3,978. | S/L | 25 | | 308. | |
| | C-DV/S VHS VC | | 2,831. | 2,831. | S/L | - 25 | | 500. | |
| | | | | | | <u> </u> | · | | |
| 15 | Add the amounts in \$2,000. See instruct | | | | | | | | |
| Par | | | | | | | | | |
| | Total: If the corporat | tion is electing: | | | | | | <u> </u> | |
| | IRC Section 179 exp | ense, add the amo | ount on line 12 and | line 15, column (g |) or | - · | | | |
| | Additional first year Depreciation (if no e | depreciation under | R&IC Section 243 | 55, add the amoun | nts on line 1 | 5, columns (| (g) and (h) | or 16 | |
| 17 | Total depreciation cl | | | | | | | | |
| | Depreciation adjustn Form 100W, Side 1, | | | | | | | | |
| | Form 100W, Side 1, | line 6. If line 17 is | less than line 16, | enter the difference | e here and o | on Form 100 | or | | |
| | Form 100W, Side 2, state adjustments or | | | | | | | . 18 | |
| Par | | | | | | | | | |
| 19 | (a) | (b) | (c) | (| d) | (e) | (f) | | (g) |
| | Description | Date acquire | d Cost o | r Amort | ization r allowable | (e) R&TC | Period | | Amortization |
| | of property | (mm/dd/yyyy | /) other bas | | er years | section (see instr) | percenta | ge | for this year |
| | _ | | | | | <u> </u> | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | 1- | |
| | | | | | | | | | |
| 20 | Total. Add the amou | ints in column (a). | · · · · · · · · · · · · · · · · · · · | ····· | | | 10000 | 20 | |
| 21 | Total amortization cl | 10, | | | | | _ | 21 | |
| 22 | Amortization adjustn | nent. If line 21 is a | reater than line 20. | enter the difference | ce here and | on Form 10 | 0 or | | |
| | Form 100W, Side 1, | line 6. If line 21 is | less than line 20, e | enter the difference | e here and o | on Form 100 | or | | |
| | Form 100W, Side 2, | line 12 | · · · · · · · · · · · · · · · · · · · | | | · · · · · · · · · · · · · · · · · · · | | 22 | |
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CALIFORNIA FORM

3885

| | ch to Form 100 or For ration name | m 100W. FOR | M 199 | | | | Californi | a comorati | ion number |
|------------------|---|-------------------------|----------------------|-------------------------------|----------------------|---------------------------------------|----------------------|----------------|----------------------------|
| | | | | | | | | • | |
| | MUNITY MEDIA | | | | | | 1240 | 607 | |
| Par | | | perty Under IRC S | | | | | - 1 | |
| 1 | Maximum deduction Total cost of IRC Ser | | | | | | | 1 2 | \$25,000 |
| 2 | Threshold cost of IRC | | | | | | | 3 | 4200 000 |
| 4 | Reduction in limitation | | | | | | | 4 | \$200,000 |
| 5 | Dollar limitation for t | | | | | | | 5 | |
| 6 | | Description of property | | (b) Cost (business | | (c) Electe | | <u> </u> | |
| _ ` | | Description of property | | | use only) | (c) Electe | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| <u> </u> | | | | | | | | | |
| | | | 10 | | | | | | |
| 7 | Listed property (elec | | | | | | | | |
| 8 | Total elected cost of | | | | | | | 8 | |
| 9 | Tentative deduction. | | | | | | | 9 | |
| 10 11 | Carryover of disallow | | | | | | | | |
| 12 | Business income lim IRC Section 179 exp | | | | | | | 12 | |
| 13 | Carryover of disallow | | | | | 13 | | | |
| Par | / | | | reciation Deduction | | - | 356 | | |
| 14 | (a) | (b) | (c) | (d) | 1 | | ī' | | (h) |
| | Description | Date acquired | Cost or | Depreciation | (e) Depreciatio | n Lifeor | (g) Depreciati | on for | Additional first |
| | of property | (mm/dd/yyyy) | other basis | allowed or | method | rate | this ye | | year |
| | | | | allowable in earlier years | | | | | depreciation |
| CON | PUTER EQUIPM | 1/24/2006 | 2,918. | 2,918. | S/L | 7 | | | |
| | TWARE | 1/23/2006 | 532. | 532. | 5/L | 7 | | _ | |
| | APUTER EQUIPM | 1/20/2006 | 2,013. | 2,013. | S/L S/L | 7 | 1 | | |
| | M MATRIX SWI | 2/01/2006 | 1,000. | 1,000. | S/L | 7 | | | |
| | AMCORDERS | 6/16/2006 | 7,979. | 7,979. | S/L | 7 | | | |
| | | | | | • | | | | |
| 15 | Add the amounts in \$2,000. See instructi | column (g) and col | umn (h). The total | of column (h) may | not excee | d 15 | | | |
| Par | | | | | | | | | |
| | Total: If the corporat | ion is electing: | | | | | | 1 | |
| | IRC Section 179 exp | ense, add the amo | unt on line 12 and | line 15, column (g) |) or | | | | |
| | Additional first year | depreciation under | R&TC Section 243 | 55, add the amoun | its on line | 15, columns | (g) and (h) (| or 10 | 25 |
| 17 | Depreciation (if no e Total depreciation cla | | | | | | | 16 | |
| | Depreciation adjustm | | | | | | | · - · · | |
| 10 | Form 100W, Side 1, | line 6. If line 17 is | less than line 16. | enter the difference | here and | on Form 100 | or | | |
| | Form 100W, Side 2, | line 12. (If Californ | ia depreciation am | iounts are used to a | determine i | net income b | efore | | |
| Par | state adjustments or | Form 100 or Form | n Tuuw, no adjustn | nent is necessary.) | | <u></u> | | . 18 | |
| <u>ган</u> 19 | | (b) | | | | | <i>/</i> A | | (-) |
| 19 | (a) Description | (b) Date acquire | d Costo | r Amorti | d) ization | (e) R&TC | (f) Period o | r İ | (g) Amortization |
| | of property | (mm/dd/yyyy |) other bas | sis allowed or | allowable | section | percentag | | for this year |
| | | | | in earlie | er years | (see instr) | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 20 | Total. Add the amount | nts in column (g) | | | | . | , [2 | 20 | |
| 21 | Total amortization cla | aimed for federal p | urposes from fede | ral Form 4562, line | 44 | | | n | |
| 22 | Amortization adjustm Form 100W, Side 1, | nent. If line 21 is g | eater than line 20, | enter the difference | e here and | d on Form 10 | 0 or 🗌 | T | |
| | Form 100W, Side 1, | line 6. If line 21 is | less than line 20, e | enter the difference | here and | on Form 100 | or | | |
| | Form 100W, Side 2, | line 12 | <u></u> | <u> </u> | <u></u> | · · · · · · · · · · · · · · · · · · · | | 2 | |
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CALIFORNIA FORM

| | ch to Form 100 or For ration name | rm 100W. FOR | M 199 | | | | | | |
|------------|--|--------------------------|---|----------------------------|--|---|----------------|-----------------|---------------------------------------|
| | | | | | | | | | ation number |
| | MUNITY MEDIA | | | | | | 124 | 0607 | |
| <u>Par</u> | Maximum deduction | xpense Certain Pro | | | | 90.039.05 | | 1 | <u> </u> |
| 2 | Total cost of IRC Se | | | | | | | 2 | \$25,000 |
| 3 | Threshold cost of IR | | | | | | | 3 | \$200,000 |
| 4 | Reduction in limitati | | | | | | | 4 | |
| 5 | Dollar limitation for | | | | | | | 5 | · · · · · · · · · · · · · · · · · · · |
| 6 | | Description of property | | (b) Cost (business | | (c) Electe | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 7 | Listed property (elec | ted IRC Section 17 | 79 cost) | | 7 | | | | |
| 8 | Total elected cost of | | | | | | | 8 | |
| 9 | Tentative deduction. | | | | | | | 9 | |
| 10 | Carryover of disallow | | | | | | | 10 | |
| 11 12 | Business income lim | | | | | | | 11 | |
| 13 | IRC Section 179 exp Carryover of disallow | | | | | | | 12 | |
| Par | | | | reciation Deduction | | | 56 | | |
| 14 | (a) | (b) | (c) | (d) | (e) | (f) | | <u>````</u> | (b) |
| | Description | Date acquired | Cost or | Depreciation | Depreciation | Life or | (g Deprecia |) ition for | (h) Additional first |
| | of property | (mm/dd/yyyy) | other basis | allowed or allowable in | method | rate | this y | /ear | year |
| | | | | earlier years | | | | | depreciation |
| FUE | NITURE | 6/23/2006 | 508. | 508. | S/L | 7 | | | |
| CON | PUTER MEMORY | 1/13/2006 | 711. | 711. | S/L | 7 | | | |
| SYE | BERCOM INF | 8/08/2006 | 1,264. | 1,264. | S/L | 7 | | | |
| CON | PUTER EQUIPM | 10/19/2006 | 3,379. | 3,379. | S/L | 7 | | | |
| CON | PUTER EQUIPM | 11/21/2006 | 2,343. | 2,343. | S/L | 7 | | | |
| 15 | Add the amounts in | column (g) and col | umn (h). The total | of column (h) may | not exceed | 4 | | | |
| | \$2,000. See instruct | ions for line 14, co | lumn (h) | | <u></u> | 15 | | | |
| Parl | | | | | | | | | |
| 16 | Total: If the corporat | tion is electing: | upt on line 12 and | line 15. column (a) | \ A F | | | | |
| | IRC Section 179 exp Additional first year | depreciation under | R&TC Section 243 | 16, add the amoun | its on line 1 | 5, columns (| (g) and (h) | or | |
| | Depreciation (if no e | lection is made), e | nter the amount fro | om line 15, column | (g) | | | . 16 | |
| | Total depreciation cl | | | | | | | <u> </u> | |
| 10 | Depreciation adjustn Form 100W, Side 1, | line 6. If line 17 is gi | eater than line 16, less than line 16, e | enter the difference | here and the second the second terms and the second s | on Form 10 | 0 or | | |
| | Form 100W, Side 2, | line 12. (If Californ | ia depreciation am | iounts are used to a | determine r | net income b | efore | | |
| David | state adjustments or | 1 Form 100 or Form | n 100W, no adjustn | nent is necessary.) | | • | <u></u> | . 18 | |
| Part 19 | (a) | | | | J/ | | (6) | | |
| 13 | Description | (b) Date acquire | d Cost o | r Amorti | d) ization | (e) R&TC | (f) Period | or | (g) Amortization |
| × | of property | (mm/dd/yyyy |) other bas | sis allowed or | allowable | section | percenta | ge | for this year |
| | | | | in earlie | er years | (see instr) | | | |
| | | <u> </u> | | <u> </u> | | ┼────┤ | | | |
| | | | | | | | | · | |
| | | | | | | <u>├</u> ───┤ | • | | |
| | | | | | | ╀──────┤ | | | |
| 20 | Total. Add the amou | | | | | | <u> </u> | 20 | |
| 20 21 | Total amortization cl | | | | | | | <u>20</u> 21 | |
| | | | • | | | | | 21 | |
| 22 | Amortization adjustn Form 100W, Side 1, | line 6. If line 21 is gr | less than line 20, | enter the difference | here and c | on Form 100 | or | | |
| | Form 100W, Side 2, | line 12 | ····· | | | <u></u> | | 22 | |
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CALIFORNIA FORM

3885

| | ch to Form 100 or For | m 100W. FOR | M 199 | | | | | | |
|----------|--|-----------------------------|----------------------|----------------------------|--|------------------------|-------------|------------|-----------------------|
| Corpo | ration name | | | | | | Califor | nia corpoi | ration number |
| CON | MUNITY MEDIA | OF THE FOOT | HILLS | | | | 124 | 0607 | |
| Par | t Election To Ex | opense Certain Pro | perty Under IRC S | ection 179 | | | | | |
| 1 | Maximum deduction | under IRC Section | 179 for California | | an a | aarm | | 1 | \$25,000 |
| 2 | Total cost of IRC Se | | | | | | | 2 | |
| 3 | Threshold cost of IR | | | | | | | 3 | \$200,000 |
| 4 | Reduction in limitation | | | | | | | 4 | |
| | Dollar limitation for t | | act line 4 from line | | | | | 5 | |
| 6 | (a) | Description of property | | (b) Cost (business | use only) | (c) Electe | d cost | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | - | - | | | | | | |
| 7 | Listed property (elec | | | | | | | | |
| 8 | Total elected cost of | | | | | | | 8 | |
| 9 | Tentative deduction. | | | | | | | 9 | |
| 10 11 | Carryover of disallow Business income lim | | | | | | | 10 11 | |
| 12 | IRC Section 179 exp | | | | | | | 12 | |
| 13 | Carryover of disallow | | | | | 13 | <u>.</u> | | |
| Parl | | nd Election of Additi | | | | | 356 | | |
| 14 | (a) | (b) | (c) | (d) | (e) | (f) | (0 | 0 | (h) |
| | Description | Date acquired | Cost or | Depreciation | Depreciation | Life or | Deprecia | ation for | r Additional first |
| | of property | (mm/dd/yyyy) | other basis | allowed or allowable in | method | rate | this | year | year |
| | | | | earlier years | | | | | depre ciat ion |
| PL | AYBACK SYSTEM | 3/20/2007 | 2,667. | 2,667. | S/L | 7 | | | |
| | PITAL TBC | 6/08/2007 | 1,775. | 1,775. | S/L | 7 | | | |
| | JIPMENT | 6/03/2007 | 3,007. | 3,007. | S/L | 7 | | | |
| | 1PUTER | 10/15/2007 | 671. | 671. | S/L | 5 | | - | |
| | RVER AND SWIT | 7/08/2008 | 10,970. | 10,970. | <u>s/</u> | 7 | | | |
| | Add the amounts in | | | | | | | | |
| 15 | \$2,000. See instructi | ions for line 14. col | umn (h). | or column (n) may | not exceed | 15 | | | |
| Parl | | | | | | | t | | |
| | Total: If the corporat | ion is electina: | | | | | | | - |
| | IRC Section 179 exp | ense, add the amo | unt on line 12 and | line 15, column (g) |) or | C | (_) (_) | | |
| | Additional first year (Depreciation (if no e | lection is made) e | nter the amount fro | ob, add the amoun | ונs on ime i (מ) | is, columns i | (g) and (n) | | • |
| 17 | Total depreciation cl | | | | | | | | |
| | Depreciation adjustr | nent. If line 17 is a | eater than line 16. | enter the difference | e here and | l on Form 10 | 0 or | | |
| | Form 100W, Side 1, Form 100W, Side 2, | line 6. If line 17 is | less than line 16, e | enter the difference | here and | on Form 100 | or | | |
| | state adjustments or | Form 100 or Form | n 100W, no adjustn | ient is necessary.) | | | | . 18 | |
| Parl | | | | 37 | | | | | |
| 19 | (a) | (b) | (c) | (| d) | (e) | (f) | 1 | (g) |
| | Description of property | Date acquire (mm/dd/yyyy | d Costoi | | | (e) R&TC | Period | | Amortization |
| | or property | (IIIII/dd/yyyy |) other bas | in earlie | er vears | section (see instr) | percenta | ige | for this year |
| | | | | | | r | | | |
| | | | | | | | | | |
| | | | | | | † | | | |
| | <u> </u> | - | | | | | | | |
| | | | | | - | † | | | |
| 20 | Total. Add the amou | nts in column (a) | | I | | I | | 20 | |
| 21 | Total amortization cl | 107 | | | | | - | 21 | |
| 22 | Amortization adjustr | • | • | | | | F | | <u> </u> |
| -£ | Form 100W, Side 1, | line 6. If line 21 is | less than line 20, e | enter the difference | here and e | on Form 100 | or | | |
| | Form 100W, Side 2, | line 12 | . <u>.</u> | | | <u></u> <u>.</u> | | 22 | |
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CALIFORNIA FORM

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| | ch to Form 100 or For ration name | rm 100W. FORM | 4 199 | | | | | | |
|----------|---|--------------------------|---|----------------------------|-----------------|--------------------------|---------------------------------------|---------------|----------------------|
| • | | | | | | | California | - | on number |
| | MUNITY MEDIA | | | | | | 12406 | 07 | |
| Par 1 | Maximum deduction | kpense Certain Pro | | | | | | - | |
| 2 | Total cost of IRC Se | | | | | | | | \$25,000 |
| 3 | Threshold cost of IR | | | | | | | | \$200,000 |
| 4 | Reduction in limitation | | | | | | | | \$200,000 |
| 5 | Dollar limitation for t | | | | | | | | |
| 6 | | Description of property | | (b) Cost (business | | (c) Electe | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| - | | | | | | | | | |
| | | | | | | | | | |
| 7 | Listed property (elec | | | | | | | | |
| 8 | Total elected cost of | | | | | | | | |
| 9 | Tentative deduction. | | | | | | | | |
| 10 | Carryover of disallow | | | | | | | | |
| 11 12 | Business income lim IRC Section 179 exp | | | | | | | | |
| 13 | Carryover of disallov | | | | | | | • | |
| Par | | nd Election of Additi | | | | | 56 | | |
| 14 | (a) | (b) | (c) | (d) | (e) | (f) | · (g) | | (h) |
| | Description | Date acquired | Cost or | Depreciation | Depreciation | Life or | Depreciatio | | Additional first |
| | of property | (mm/dd/yyyy) | other basis | allowed or allowable in | method | rate | this yea | r | year depreciation |
| | | | | earlier years | | | | | depreciation |
| CAN | IERAS | 8/18/2009 | 6,882. | 6,717. | S/L | 7 | 1 | L65. | |
| GOI | DLINE CAMERA | 3/23/2010 | 10,021. | 8,950. | S/L | 7 | 1,0 |)71. | |
| CAN | IERA | 8/26/2009 | 2,082. | 2,030. | S/L | 7 | | 52. | |
| CAN | BRA | 9/25/2009 | 3,071. | 2,963. | S/L | 7 | 1 | L08. | |
| CON | PUTER FOR SE | 12/16/2010 | 8,041. | 6,319. | S/L | 7 | 1,1 | L 4 9. | |
| 15 | Add the amounts in | column (g) and col | umn (h). The total | of column (h) may | not exceed | | | | |
| | \$2,000. See instruct | ions for line 14, col | umn (h) | ····· | <u></u> | 15 | | | |
| Par | | | | | | | | . <u> </u> | <u> </u> |
| 16 | Total: If the corporat IRC Section 179 exp | tion is electing: | unt on line 12 and | line 15. column (a) | \ O F | | | | |
| | Additional first year | depreciation under | R&TC Section 243 | 56, add the amoun | ts on line 15 | 5, columns (| (g) and (h) or | | |
| | Depreciation (if no e | | | | | | | 16 | |
| | Total depreciation cl | | | | | | | 17 | |
| 18 | Depreciation adjustn Form 100W, Side 1, | line 6. If line 17 is gr | eater than line 16, less than line 16, (| enter the difference | here and o | on Form 10 n Form 100 | 0 or or | | |
| | Form 100W, Side 2, | line 12. (If Californ | a depreciation am | ounts are used to c | determine n | et income b | efore | | |
| Deve | state adjustments or | n Form 100 or Form | 100W, no adjustn | nent is necessary.) | <u></u> | | · · · · · · · · · · · · · · · · · · · | 18 | |
| Par | | | (-) | | .0 | (-) | | - | |
| 19 | (a) Description | (b) Date acquired | i Costo | | : zation | (e) R&TC | (f) Period or | | (g) Amortization |
| | of property | (mm/dd/yyyy | other bas | sis allowed or | allowable | section | percentage | | for this year |
| _ | | | | in earlie | er years | (see instr) | · | | |
| | | | | | | | | _ | · |
| | | | | | | | | _ | |
| | | | | | | | | | _ |
| | | | | | | | | | ······ |
| 00 | T-1-1 6 1 1 1 | | _ | | ; | | | | |
| 20 | Total. Add the amou | | | | | | | _ | |
| 21 | Total amortization cl | • | • | | | | | | |
| 22 | Amortization adjustm Form 100W, Side 1, | line 6. If line 21 is gr | eater than line 20, less than line 20 | enter the difference | here and o | on Form 10 n Form 100 | 0 or | | |
| | Form 100W, Side 2, | line 12 | ····· | | | | | | |
| | | | | | | | • | | |

CALIFORNIA FORM

| Atta | ch to Form 100 or Fo | rm 100W. FOR | M 199 | | | | <u> </u> | | |
|------------|---|--|----------------------|----------------------------|---------------------------------------|---------------------------|---------------------------------------|---------------|-------------------------|
| Corpo | pration name | | | | | | California co | orporation nu | umber |
| CO | MMUNITY MEDIA | OF THE FOOT | HILLS | | | | 124060 |)7 | |
| Par | | xpense Certain Pro | | | | | | | |
| 1 | Maximum deduction | | | | | | | | \$25,000 |
| 2 | Total cost of IRC Se | ction 179 property | placed in service. | | | ···· | | | |
| 3 | Threshold cost of IR | C Section 179 prop | perty before reduct | ion in limitation | · · · · · · · · · · · · · · · · | | 3 | | \$200,000 |
| 4 | Reduction in limitati | on. Subtract line 3 | from line 2. If zero | o or less, enter -0 | · · · · · · · · · · · · · · · · · · · | | 4 | | |
| | Dollar limitation for | | act line 4 from line | | | <u></u> | 5 | | |
| 6 | (a) | Description of property | | (b) Cost (business | use only) | (c) Electe | d cost | | |
| | | | | | | | | | |
| | | | <u> </u> | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 7 | Listed property (elec | | | | | | | | |
| 8 9 | Total elected cost of | FIRC Section 179 p | property. Add amou | ints in column (c), | line 6 and li | ine 7 | | _ | |
| 10 | Tentative deduction. | | | | | | | | |
| 11 | Carryover of disallow Business income lim | ved deduction from | maller of business | incomo (not loce t | | r line E | 10 | | |
| 12 | IRC Section 179 exp | ense deduction. A | dd line 9 and line 1 | 10 but do not enter | more than | line 11 | | | |
| 13 | Carryover of disallow | | | | | | · · · · · · · · · · · · · · · · · · · | | |
| Par | | | | reciation Deduction | | | 356 | | |
| 14 | (a) | (b) | (c) | (d) | (e) | (f) | (g) | | (h) |
| | Description | Date acquired | Cost or | Depreciation | Depreciation | Life or | Depreciation | | dditional first |
| | of property | (mm/dd/yyyy) | other basis | allowed or allowable in | method | rate | this year | | year depreciation |
| | | | | earlier years | | | | ` | epreciation |
| 301 | Y CAMCORDER | 4/19/2011 | 12,220. | 9,021. | S/L | 7 | 1,7 | 46. | |
| MON | NITORS AND ME | 4/28/2011 | 2,379. | 1,757. | S/L | 7 | 3 | 40. | |
| B&I | H PHOTO TRIP | 6/14/2012 | 6,334. | 3,695. | S/L | 7 | 9 | 05. | |
| MAC | C PRO SERVER | 10/05/2011 | 4,523. | 3,069. | S/L | 7 | 6 | 46. | |
| DAT | TA VIDEO HS20 | 4/19/2012 | 7,380. | 4,392. | S/L | 7 | 1,0 | 54. | |
| 15 | Add the amounts in | column (g) and col | umn (h). The total | of column (h) may | not exceed | | | | |
| Devi | \$2,000. See instruct | ions for line 14, co | umn (h) | ····· | | | | | |
| _ | t III Summary | | | | | | | | |
| 16 | Total: If the corporat IRC Section 179 exp | ion is electing: ense, add the amo | unt on line 12 and | line 15. column (a) | or | | | | |
| | Additional first year | depreciation under | R&TC Section 243 | 56, add the amoun | ts on line 1. | 5, columns (| (g) and (h) or | | |
| | Depreciation (if no e | lection is made), e | nter the amount fro | om line 15, column | (g) | ••••• | | 16 | _ |
| | Total depreciation cl | | | | | | | 17 | |
| 10 | Depreciation adjustn Form 100W, Side 1, | line 6. If line 17 is gi | less than line 16, | enter the difference | here and c | on Form 10 on Form 100 | 0 or | | |
| | Form 100W, Side 2, | line 12. (If Californ | la depreciation am | icunts are used to d | letermine n | et income b | efore I | | |
| David | state adjustments or | h Form 100 or Form | n 100W, no adjustr | nent is necessary.) | <u></u> | | | 18 | |
| Part 19 | | | 1 - 1 | | <u> </u> | | | | |
| 19 | (a) Description | (b) Date acquire | d Coston | r Amorti | 1) zation | (e) R&TC | (f) Period or | A | (g) |
| | of property | (mm/dd/yyyy | | sis allowed or | allowable | section | percentage | | ortization this year |
| | | | | in earlie | r years | (see instr) | | | |
| | | | | | | | | ┨ | |
| | | <u>_</u> | | | | <u> </u> | | <u> </u> | |
| | | | | | | | | ┣ ─ | |
| | | | | | | | | ╡ | |
| | - | | | | | | | | |
| 20 | Total. Add the amou | | | | | | | | |
| | Total amortization cla | | - | | | | | | |
| 22 | Amortization adjustm Form 100W, Side 1, | ient. If line 21 is gr | eater than line 20, | enter the differenc | e here and | on Form 10 | Dor | | |
| | Form 100W, Side 1, Form 100W, Side 2, | ine o. ir i ne ∠i is line 12 | iess than line 20, é | enter the amerence | nere and o | n Form 100 | or 22 | ĺ | |
| | , Sixe Ej | | | | | <u></u> | <u></u> 44 | <u> </u> | |

TAXABLE YEAR

2016 Corporation Depreciation and Amortization

CALIFORNIA FORM

| | ch to Form 100 or For ration name | m 100W. FOR | M 199 | | | | California | corporati | ол number |
|--------|--|-----------------------------|--|----------------------------|------------------------|-----------------------------|-------------------------|-----------|--------------------------|
| | | | | | | | | | |
| | MUNITY MEDIA | | | | | | 12406 | 07 | |
| Par | | cpense Certain Pro | | | | 2023 | | | <u> </u> |
| 1 2 | Maximum deduction Total cost of IRC Se | | | | | | | 2 | \$25,000 |
| 2 | Threshold cost of IRC Se | | | | | | | 2 3 | <u> </u> |
| 4 | Reduction in limitation | | | | | | | _ | \$200,000 |
| 5 | Dollar limitation for t | | | | | | | 5 | · |
| 6 | | Description of property | | (b) Cost (business | | (c) Electe | | - | |
| | (4) | boompaon or property | | (6) 0001 (54011000 | uoo onnyy | (0) 210010 | | | |
| | | | | | | | | | |
| | | | | | | | _ | | |
| _ | | | | | | | | | |
| 7 | Listed property (elec | ted IRC Section 17 | /9 cost) | | 7 | | | | |
| 8 | Total elected cost of | | | | | ine 7 | | 3 | |
| 9 | Tentative deduction. | | | | | | | | |
| 10 | Carryover of disallow | ved deduction from | prior taxable year | s | | | 10 |) | |
| 11 | Business income lim | itation. Enter the s | maller of business | income (not less t | han zero) d | or line 5. | 124-324 | | |
| 12 | IRC Section 179 exp | | | | | | <u></u> 12 | 2 | |
| 13 | Carryover of disallov | | | | | | | | |
| Par | t II Depreciation ar | nd Election of Addit | onal First Year Dep | reciation Deduction | Under R&T | C Section 243 | 356 | | |
| 14 | (a) | (b) Date acquired | (c) | (d) | (e) | (f) | (g) | - 6 | (h) |
| | Description of property | (mm/dd/yyyy) | Cost or other basis | Depreciation allowed or | Depreciation method | Life or | Depreciatio this yea | | Additional first year |
| | | | | allowable in | | | | | depreciation |
| | | <i></i> | | earlier years | | <u> </u> | | | |
| | HTING | 6/04/2013 | 7,522. | 3,315. | S/L | 7 | | 075. | |
| | IERA GEAR | 7/25/2013 | 3,500. | 1,458. | S/L | 7 | | 500. | |
| | iera | 5/14/2014 | 7,185. | 2,223. | S/L | 7 | | 026. | |
| | C EQUIPMENT | 6/30/2013 | 28,438. | 5,688. | S/L | 10 | | 844. | |
| | FICE FURNITUR | | 2,787. | 265. | S/L | 7 | | 398. | |
| 15 | Add the amounts in \$2,000. See instruct | | | | | | | | |
| Par | | | | | | | | | |
| | Total: If the corporat | ion is electing: | | | | | | | |
| | IRC Section 179 exp | ense, add the amo | unt on line 12 and | line 15, column (g) |) or | | | | |
| | Additional first year Depreciation (if no e | depreciation under | nter the amount fro | on line 15 column | (a) | 15, columns (| (g) and (n) o i | 16 | |
| 17 | Total depreciation cl | • · | | | | | | 17 | |
| | Depreciation adjustr | nent. If line 17 is a | reater than line 16. | enter the difference | e here and | l on F <mark>or</mark> m 10 | 0 or | | |
| | Form 100W, Side 1, Form 100W, Side 2, | line 6. If line 17 is | less than line 16. | enter the difference | here and | on Form 100 | or | | |
| | state adjustments or | Form 100 or Forn | na depreciation am 100W, no adjustn | nent is necessary.) | | | eluie | 18 | |
| Parl | | | | | | | | | |
| 19 | (a) | (b) | (c) | (| d) | (e) | (f) | | (g) |
| | Description of property | Date acquire (mm/dd/yyyy | d Costro | | | R&TC | Period or | | Amortization |
| | of property | (mm/dd/yyyy |) Other Das | in earlie | | section | percentage | | for this year |
| | | | | | - | | | | |
| | | | | | | | | | |
| | | | | | | | | | · |
| | | | | | | 1 1 | | | |
| | | | | | , | | | | |
| 20 | Total. Add the amou | nts in column (a) | | | <u> </u> | | | | |
| 21 | Total amortization cl | | | | | | | | |
| | Amortization adjustn | | • | | | | | | |
| | Form 100W, Side 1, | line 6. If line 21 is | less than line 20, e | enter the difference | here and e | on Form 100 | or | | |
| | Form 100W, Side 2, | line 12 | ····· | | | <u> </u> | | : | |
| | | | | | | | | | |

CALIFORNIA FORM

3885

| | ch to Form 100 or For ration name | rm 100W. FOR | 4 199 | | | <u> </u> | | | |
|------------|--|--|--------------------------------|-------------------------------|---------------------|---|---------------------|----------|--------------------------------|
| • | | | | | | | California c | - | on number |
| | MUNITY MEDIA | | | | | <u></u> | 12406 | 07 | |
| Par 1 | Maximum deduction | kpense Certain Pro | | | | | | | 405 000 |
| 2 | Total cost of IRC Se | | | | | | | | \$25,000 |
| 3 | Threshold cost of IR | | • | | | | | | \$200,000 |
| 4 | Reduction in limitation | | | | | | | | \$200,000 |
| 5 | Dollar limitation for t | | | | | | | | |
| 6 | | Description of property | | (b) Cost (business | | (c) Electe | 1 | · | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | · · | | | | | | |
| 7 | Listed property (elec | | '9 cost) | | 7 | | | | |
| 8 | Total elected cost of | | | | | ine 7 | | T | |
| 9 | Tentative deduction. | Enter the smaller | of line 5 or line 8. | | | | (| , | |
| 1 0 | Carryover of disallow | ved deduction from | prior taxable year | s | | | | | |
| 11 | Business income lim | | | | | | | | |
| 12 | IRC Section 179 exp | | | • | | | 12 | <u> </u> | |
| 13 | Carryover of disallow | | | | | | | | |
| Par | - | nd Election of Additi | · | r | 1 | | | | |
| 14 | (a) Description | (b) Date acquired | (c) Cost or | (d) Depreciation | (e) Depreciation | Life or | (g) Depreciation | n for | (h) Additional first |
| | of property | (mm/dd/yyyy) | other basis | allowed or | method | rate | this year | | year |
| | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | | | allowable in earlier years | | | | | depreciation |
| ROI | JIPMENT | 8/14/2015 | 507. | 66. | S/L | 7 | | 72. | |
| | JIPMENT | 9/14/2015 | 914. | 109. | S/L | 7 | | .31. | |
| | JIPMENT | 7/14/2015 | 5,078. | 725. | S/L S/L | 7 | | 25. | |
| | JIPMENT | 7/09/2016 | 3,265. | /23. | S/L | 7 | 1 | 66. | |
| <u> </u> | | 770372010 | . 3,203. | | 5/1 | <u>+- </u> | | .00. | |
| 15 | A dad all a | L | | | <u> </u> | | | | ····· |
| 13 | Add the amounts in \$2,000. See instruct | column (g) and col ions for line 14 col | umn (n). The total lumn (h) | of column (n) may | not exceed | 15 | | | |
| Par | | | | | | | · · · · | | |
| | Total: If the corporat | tion is electina: | | | | | | | |
| | IRC Section 179 exp Additional first year | ense, add the amo | unt on line 12 and | line 15, column (g |) or | | | | |
| | Depreciation (if no e | depreciation under | R&IC Section 243 | sob, add the amoun | its on line ו מי | 5, columns (| (g) and (h) or | 16 | |
| 17 | Total depreciation cl | | | | | | | 17 | |
| | Depreciation adjustm Form 100W, Side 1, | | | | | | | | |
| | Form 100W, Side 1, | line 6. If line 17 is | less than line 16, | enter the difference | here and c | on Form 100 | or | | |
| | Form 100W, Side 2, state adjustments or | infe 12. (if Californ Form 100 or Form | 1 100W. no adjustn | nent is necessary.) | uetermine n | let income b | elore | 18 | |
| Parl | | | | , | | | | | |
| 19 | (a) | (b) | (c) | (| d) | (e) | (f) | | (g) |
| | Description | Date acquire | d Costro | r Amort | ization | R&TC | Period or | | Amortization |
| | of property | (mm/dd/yyyy |) other bas | | er years | section | percentage | | for this year |
| | | | | | , | | • | | |
| | | | | | | | | | |
| | | | | | ï | | | | |
| | | | - | | • | <u> </u> | | | |
| | | | | | | | | | <u></u> |
| 20 | Total. Add the amou | nts in column (a) | | | | · · · · · · · · · · · · · · | | | |
| 21 | Total amortization cl | | | | | | | | |
| | Amortization adjustn | | • | | | | | + | |
| | Form 100W, Side 1, | line 6. If line 21 is | less than line 20, e | enter the difference | e here and c | on Form 100 | or | | |
| | Form 100W, Side 2, | line 12 | | | <u>.</u> | | | | |
| | | | | | | | | | |

| 2016 | California Stateme | ents | | Page ⁻ |
|---|--|------------------|----------------|-----------------------------|
| Client 107 | COMMUNITY MEDIA OF THE F | OOTHILLS | | 95388621 |
| 5/14/18 | | | | 07:30PI |
| Statement 1 Form 199, Part II, Line 7 Other Income Program Service Revenue | 55 · · · · · · · · · · · · · · · · · · | | \$ Total \$ | <u>212,520.</u> 212,520. |
| Statement 2 Form 199, Part II, Line 11 Compensation of Officers, Director | rs, Trustees and Key Employees | 5 | | |
| Current Officers: | Title and Average Hours | Total Compen- | | Expense Account/ |
| Name and Address | Average Hours <u>Per Week Devoted</u> | i sation | EBP & DC | Other |
| SCOTT AUSTIN 847 E. OLIVE AVE MONROVIA, CA 91016 | Treasurer O | \$0. | \$0. | \$ 0 |
| RYANN BLACHSHERE VARGAS 847 E. OLIVE AVE MONROVIA, CA 91016 | BOARD MEMBER 0 | 0. | 0. | 0 |
| LANCE MUNGIA 847 E. OLIVE AVE MONROVIA, CA 91016 | Executive Dir. 40.00 | 46,613. | 0. | 0 |
| CHARLES CLAY 847 E. OLIVE AVE MONROVIA, CA 91016 | BOARD MEMBER 0 | 0 🔬 | 0. | 0 |
| JULIE GAMBERG 847 E. OLIVE AVE MONROVIA, CA 91016 | BOARD MEMBER 0 | 0 - | 0. | 0 |
| SHANOAH HARDY 847 E. OLIVE AVE MONROVIA, CA 91016 | BOARD MEMBER 0 | 0 | 0. | 0 |
| MEREDITH LUITEN 847 E. OLIVE AVE MONROVIA, CA 91016 | BOARD MEMBER 0 | 0. | 0. | 0 |
| WARD CALAWAY 847 E. OLIVE AVE MONROVIA, CA 91024 | Director O | 0. | 0. | 0 |
| RENA DELGADO 847 E. OLIVE AVE MONROVIA, CA 91016 | Chairman O | 0. | 0. | 0 |
| LAQUETTE SHAMBLEE 847 E. OLIVE AVE MONROVIA, CA 91016 | Secretary 0 | 0. | 0. | 0 |
| | Tota | 1 \$ 46,613. | \$ 0. | \$ 0. |

2016

California Statements

Page 2

COMMUNITY MEDIA OF THE FOOTHILLS

| 14/18 07 Statement 3 Form 199, Part II, Line 17 Other Expenses 6 Accounting Fees \$ 1,597 Advertising and Promotion 370 BAD DEBT 900KKEPING SERVICE BOOKKEPING SERVICE 1,300 EQUIPMENT RENTAL 5,586 Insurance 609 MEMBERSHIP DUES 28,585 Office Expenses 2,138 OUTSIDE SERVICES 3,201 PAYROLL SERVICES 3,201 PRODUCTION SERVICES 4,040 SECURITY 7,413 | | OMMUNITY MEDIA OF THE FOOTHILLS | 953880 |
|--|---|---------------------------------|---|
| Statement 3 Form 199, Part II, Line 17 Other ExpensesAccounting Fees\$ 1,59°Advertising and Promotion370°BAD DEBT1,300°BOOKKEEPING SERVICE5,58°EQUIPMENT RENTAL5,58°Insurance28,58°Office Expenses21,38°OUTSIDE SERVICES5,14°PAYROLL SERVICE3,201PAYROLL SERVICES4,040°REPAIRS7,413°SECURITY7,413° | 14/18 | | 953886 |
| Advertising and Promotion370BAD DEBT.1,300BOOKKEEPING SERVICE.5,580EQUIPMENT RENTAL.5,580Insurance.609MEMBERSHIP DUES.28,585Office Expenses.2,130OUTSIDE SERVICES5,149PAYROLL SERVICES3,201PRODUCTION SERVICES.4,040REPAIRS.985SECURITY7,413 | Form 199, Part II, Line 17 | | |
| 892 Travel | Advertising and Fromotion BAD DEBT. BOOKKEEPING SERVICE EQUIPMENT RENTAL Insurance. MEMBERSHIP DUES. Office Expenses. OUTSIDE SERVICES PAYROLL SERVICE PRODUCTION SERVICES. REPAIRS. SECURITY. TAX AND LICENSE. TELEPHONE. Travel | | 1,597 370 1,300 5,586 609 28,585 2,138 5,149 3,201 4,040 985 7,413 300 665 892 84 4,457 |
| Statement 4 | Form 199, Schedule L, Line 12 Other Assets | ed Charges | 5,208 |
| Other Assets | | Total <u>\$</u> | 5 , 20 8 |
| Other Assets Prepaid Expenses and Deferred Charges | | | |
| Other Assets Prepaid Expenses and Deferred Charges | Form 199, Schedule L, Line 18 Other Liabilities | | |
| Other Assets Prepaid Expenses and Deferred Charges Total \$ 5,208 Total \$ < | Other Liabilities ACCRUED PAYROLL TAXES | | 483. 2,112. 2,595. |
| Other Assets Prepaid Expenses and Deferred Charges Total \$ 5,208 Total \$ < | Other Liabilities | | 483. 2,112. 2,595. |
| Other Assets Prepaid Expenses and Deferred Charges Total \$ 5,208 Total \$ < | Other Liabilities | | 483. 2,112. 2,595. |
| Other Assets Prepaid Expenses and Deferred Charges Total \$ 5,208 Total \$ < | Other Liabilities ACCRUED PAYROLL TAXES | | 483. 2,112. 2,595. |
| Other Assets Prepaid Expenses and Deferred Charges Total \$ 5,208 Total \$ 5,208 Statement 5 Form 199, Schedule L, Line 18 Other Liabilities ACCRUED PAYROLL TAXES 483 | Other Liabilities ACCRUED PAYROLL TAXES | | 483. 2,112. 2,595. |