TAXABLE YEAR 2014

California Exempt Organization Annual Information Return

428941 11-26-14 FORM

199

| Calendar Year | 2014 or fiscal year beginning (mm/dd/yyyy) | 07/01/2 | 014 , and ending | (mm/dd/yy) | /y) | 06/30 | /2015 | | |
|-------------------|--|--|---|---------------------------------------|------------------|---|---|-------------|----------|
| Corporation/Org | anization Name | | | | | ation number | | | |
| | R OF COMMERCE OF | | | | | | | | |
| SAN LU | IS OBISPO, INC. | | | - 1 | 02127 | 57 | | | |
| Additional Inform | nation. See instructions. | | | FE | IN | *************************************** | | | |
| | | | | | 95-15 | 05534 | <u>k</u> | | |
| Street address (| • | | | | PMB no. | | | | |
| | NTEREY STREET | | | | | *************************************** | | | |
| City | a optano | | | State | ZIP code | | | | |
| Foreign country | IS OBISPO | Γ= · · · · · · · · · · · · · · · · · · · | | CA | 93401 | | | | |
| roreign country | name | Foreign province/state | /county | | Foreign pos | ital code | | | |
| A First Retu | n | Yes X No | J If exempt under R&TC S | Section 237 | l Ω1d, has th | e organizati | inn | | |
| B Amended | Return | Yes X No | engaged in political activ | | | | | | No |
| | n 4947(a)(1) trust | npt under R | | | | Х | No | | |
| | mation Return? | | If "Yes," enter the gross | | | | | | |
| • [| Surrendered (Withdrawn) | | sources | | | | \$ | | |
| • 1 | ferged/Reorganized Enter date: (mm/dd/yyyy) | | L If organization is exemp | | | | | | |
| E Check acc | ounting method: | | and meets the filing fee | exception, o | check box. | No filing | | | |
| (1) | Cash (2) X Accrual (3) Othe | ır | fee is required | | | | • | | |
| F Federal re | | | M Is the organization a Lin | | | | • Yes | X | No |
| (1)● | | H (990) | N Did the organization file | | | | | | |
| | roup filing? See instructions. | Yes X No | report taxable income? | | | | • Yes | X | No |
| | anization in a group exemption? | Yes X No | 0 Is the organization under | | | | | 77 | |
| ii tes, w | hat is the parent's name? | | IRS audited in a prior ye | | | | | | |
| I Did the or | ganization have any changes to its guidelines | Yes X No | P is an IRS Form 1023/10 | | | | Yes | X | No |
| not report | ed to the FTB? See instructions. | 162 77 140 | Date filed with IRS | | | *********** | | | |
| Part I C | omplete Part I unless not required to file this for | rm. See General Ins | tructions B and C. | | | | V | | |
| | 1 Gross sales or receipts from other sources. | From Side 2, Part II | , line 8 | | • | 1 | 724,6 | 22. | - 00 |
| | 2 Gross dues and assessments from member | rs and affiliates | | | • [| 2 | 516,3 | 02. | 00 |
| Receipts | Gross contributions, gifts, grants, and simil Total gross receipts for filing requirement test. Add This line must be completed. If the result is less that | lar amounts received | j | | | 3 | *************************************** | | 00 |
| and | This line must be completed. If the result is less that | an \$50,000, see General | Instruction B | | | 4 1 | L,240,9 | 24. | 00 |
| Revenues | 5 Cost of goods sold6 Cost or other basis, and sales expenses of a | *************************************** | • 5 | · · · · · · · · · · · · · · · · · · · | 00 | | | | |
| | 6 Cost or other basis, and sales expenses of | assets sold | • 6 | 2 | 0.00 | | | | |
| | 7 Total costs. Add line 5 and line 6 | | | | | 7 | | 20. | |
| | 8 Total gross income. Subtract line 7 from lin | ie 4 | | | | 8 3 | L,240,9 | 04. | 00 |
| Expenses | Total expenses and disbursements. From S Excess of receipts over expenses and disbu | olde 2, Part II, line 18 | line O francisco | | ······ • | | L,236,5 | <u> 30.</u> | 00 |
| | , | | | | | 10 | 4,3 | | |
| | 46 7-(-) | | | | ····· | 11 | | 10. | |
| Filing | 13 Penalties and Interest. See General Instruct | ·· 1 | *************************************** | | | 13 | | | 00 |
| Fee | 44 Handay Can Canaval Instruction I/ | | | | | 14 | | | 00 |
| | | 14. Then subtract liv | ne 12 from the result | | | 15 | ···· | 10. | |
| | 15 Balance due. Add line 11, line 13, and line Under penatities of perjury, I declare that I have examined it is true, correct, and complete. Declaration of preparer (o | this return, including acother than taxpayer) is b | companying schedules and state | ments, and to | the best of | ny knowiedgi e. | e and bellef, | | |
| Sign | | | Title | Date | ,29 | | lephone | | |
| Here | Signature of officer | | PRESIDENT/CE | :0 | | | 05)781- | 27 | 17 |
| | Proporario | | Date | Check | if | ● PT | IN | | |
| | Preparer's signature | | self-er | nployed | | 1023187 | | | |
| Paid | Firm's name (or yours, CI PNN BIID DEFINE | | | | | • FE | | _ | |
| Preparer's | if self- | | | | | | -277260 lephone | 1 | |
| Use Only | employed) 1150 PALM STREET and address SAN LUIS OBISPO, CA 93401 | | | | | | • | A A · | 1 |
| | May the FTB discuss this return with the prepare | | | | • X | | 5-544-1 | 44. | <u>L</u> |
| | may and the discuss and retain with the prepare | i shown above: See | | | ▼ 🕰 | Yes | No | | |

Part II Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information.

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| | 4. Casa calas as as siste for a still | | • | | | | | |
|--|---|--|---|---|---------------------------------|--|--|--|
| | 1 Gross sales or receipts from all | | | | 1 00 | | | |
| | 2 Interest | *************************************** | | • | 2 1,043.00 | | | |
| Dogginto | 3 Dividends | | | | 3 3,157.00 | | | |
| Receipts | 4 Gross rents | | | | 4 00 | | | |
| from | 5 Gross royalties | 5 00 6 0.00 | | | | | | |
| Other Sources | 6 Gross amount received from sal | (000 1101 1001 1001 1001 1001 1001 1001 | | | | | | |
| Sources | 7 Other income | 7 720,422.00 | | | | | | |
| | 8 Total gross sales or receipts fro | | | | 8 724,622.00 | | | |
| | 9 Contributions, gifts, grants, and10 Disbursements to or for member | 9 00 | | | | | | |
| | | 10 00 | | | | | | |
| | | 11 - 00 | | | | | | |
| Expenses | 12 Other salaries and wages | | 12 00 13 7,857.00 | | | | | |
| and | | | | | | | | |
| Disburse- | | Taxes ents | | | | | | |
| ments | 16 Depreciation and depletion (See | | 15 123,749. ₀₀ 16 23,110. ₀₀ | | | | | |
| | 17 Other Expenses and Disbursema | | | | | | | |
| | 18 Total expenses and disburseme | 17 397,677. ₀₀ 18 1,236,536. ₀₀ | | | | | | |
| Schedu | | Beginning of 1 | | | 18 1,236,536.00 of taxable year | | | |
| Assets | | (a) | (b) | (c) | (d) | | | |
| | | V-7 | 487,487. | | • 494,996. | | | |
| 2 Net acc | counts receivable | | 51,663. | | • 56,266. | | | |
| 3 Net not | tes receivable STMT 5 | | 73,726. | | • 80,325. | | | |
| | ories | | , | | 007323. | | | |
| 5 Federal and state government obligations | | | | | • | | | |
| 6 Investments in other bonds | | | | | | | | |
| | ments in stock | | | | • | | | |
| | ige loans | | | | • | | | |
| 9 Other i | nvestments STMT 6 | | 3,730. | | • 3,730. | | | |
| 10 a Depi | reciable assets | 493,359. | | 511,89 | | | | |
| b Less | accumulated depreciation | (63,489.) | 429,870. | (86,598 | 425,292. | | | |
| 11 Land | | | | | • | | | |
| 12 Other a | ssets STMT 7 | | 36,712. | | • 70,560. | | | |
| 13 Total assets | | | 1,083,188. | 0.00 | 1,131,169. | | | |
| Liabilities and net worth | | | | | | | | |
| 14 Accounts payable | | | 129,485. | | • 113,978. | | | |
| | outions, gifts, or grants payable | | | | • | | | |
| 16 Bonds | and notes payable | | | | • | | | |
| 17 Mortga | ages payable | | 119,722. | | • 111,458. | | | |
| 18 Other liabilities STMT 8 | | | 62,890. | | 132,075. | | | |
| | stock or principal fund | | | | • | | | |
| | or capital surplus. Attach reconciliation | | | | • | | | |
| | ed earnings or income fund | | 771,091. | | • 773,658. | | | |
| | iabilities and net worth | | 1,083,188. | | 1,131,169. | | | |
| Schedu | | per books with income per re | | . II den coo | | | | |
| | | edule if the amount on Schedule | | | | | | |
| | come per books | | | | | | | |
| 2 redera | Il income tax | not included in this return. STM | | | 9 -1,801. | | | |
| | of capital losses over capital gains | | | | | | | |
| | | ed on books this year against book income this year | | | | | | |
| 5 Expenses recorded on books this year not | | | 9 Total, Add line 7 | *************************************** | -1,801. | | | |
| | ted in this return | | 2 E67 | | | | | |
| o rotal. | Add line 1 through line 5 | 4,5 | 67. Subtract line 9 fr | om line 6 | 4,368. | | | |