

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2009

Department of the Treasury
Internal Revenue Service

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

The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning JUL 1, 2009 **and ending** JUN 30, 2010

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization CALIFORNIA SCIENCE CENTER FOUNDATION Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite 700 EXPOSITION PARK DRIVE City or town, state or country, and ZIP + 4 LOS ANGELES, CA 90037 F Name and address of principal officer: CYNTHIA PYGIN 700 EXPOSITION PARK DRIVE, LOS ANGELES, CA	D Employer identification number 95-2210527 E Telephone number (213) 744-7487 G Gross receipts \$ 65,350,142. H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c) (3) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		J Website: ▶ WWW.CALIFORNIA SCIENCE CENTER.ORG	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1950 M State of legal domicile: CA	

Part I Summary

	1 Briefly describe the organization's mission or most significant activities: <u>SEE SCHEDULE O</u>		
Activities & Governance	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	88
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	88
	5 Total number of employees (Part V, line 2a)	5	361
	6 Total number of volunteers (estimate if necessary)	6	241
	7a Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b Net unrelated business taxable income from Form 990-T, line 34	7b	0.
Revenue		Prior Year	Current Year
	8 Contributions and grants (Part VIII, line 1h)	14,058,895.	13,112,400.
	9 Program service revenue (Part VIII, line 2g)	5,581,246.	3,840,715.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	30,056,831.	2,069,193.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-57,323.	-91,466.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	49,639,649.	18,930,842.
Expenses			
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	39,350.	34,350.
	14 Benefits paid to or for members (Part IX, column (A), line 4)		
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	7,311,849.	7,799,736.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	105,000.	98,039.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,488,842.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	42,507,948.	13,932,120.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	49,964,147.	21,864,245.
	19 Revenue less expenses. Subtract line 18 from line 12	-324,498.	-2,933,403.
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	135,657,680.	106,956,082.
	21 Total liabilities (Part X, line 26)	112,853,726.	86,965,267.
	22 Net assets or fund balances. Subtract line 21 from line 20	22,803,954.	19,990,815.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer CYNTHIA PYGIN, CFO Type or print name and title	Date	
Paid Preparer's Use Only	Preparer's signature Firm's name (or yours if self-employed), address, and ZIP + 4 SINGERLEWAK LLP 10960 WILSHIRE BLVD. SUITE 700 LOS ANGELES, CALIFORNIA 90024-3783	Date 04/19/11	Check if self-employed <input type="checkbox"/> Preparer's identifying number (see instructions) EIN ▶ Phone no. ▶ (310) 477-3924

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission: CSCF ASPIRES TO STIMULATE CURIOSITY AND INSPIRE SCIENCE LEARNING IN EVERYONE BY CREATING FUN, MEMORABLE EXPERIENCES, BECAUSE WE VALUE SCIENCE AS AN INDISPENSABLE TOOL FOR UNDERSTANDING OUR WORLD, ACCESSIBILITY AND INCLUSIVENESS, AND ENRICHING PEOPLE'S LIVES.

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 services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 9,239,519. including grants of \$) (Revenue \$ 1,355,852.) ECOSYSTEMS GALLERY AND EXHIBITS, INCLUDING CONSTRUCTION.

4b (Code:) (Expenses \$ 3,886,158. including grants of \$) (Revenue \$ 202,325.) OPERATIONS - EXHIBIT FACILITATION FOR GUESTS VISITING THE SCIENCE CENTER. TOTAL ATTENDANCE FOR THE YEAR - 1,277,057.

4c (Code:) (Expenses \$ 2,051,529. including grants of \$ 34,350.) (Revenue \$ 621,192.) EDUCATION PROGRAM EXPENSES INCLUDING SCIENCE SUMMER CAMPS, COMMUNITY PROGRAMS, EDUCATIONAL FLOOR PROGRAMS, SCIENCE TEACHER PROFESSIONAL DEVELOPMENT, SCIENCE OUTREACH PROGRAMS. 455,340 INDIVIDUALS PARTICIPATED IN OUR PROGRAMS.

4d Other program services. (Describe in Schedule O.) (Expenses \$ 3,800,786. including grants of \$) (Revenue \$ 1,661,346.)

4e Total program service expenses \$ 18,977,992.

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>	X	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		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? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	X	
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11	Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	X	
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>		
	• 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? <i>If "Yes," complete Schedule D, Part VII.</i>		
	• 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? <i>If "Yes," complete Schedule D, Part VIII.</i>		
	• 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? <i>If "Yes," complete Schedule D, Part IX.</i>		
	• Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>		
	• Did the organization'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? <i>If "Yes," complete Schedule D, Part X.</i>		
12	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i>	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional</i>	Yes	No
			X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
14b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	X	
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>	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	X	
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	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? <i>If "Yes," complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>	X	
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	X	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		X
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		X
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b 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? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		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):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	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>	X	
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		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? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		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>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	X	

Note. All Form 990 filers are required to complete Schedule O.

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
	1a 37		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	1b 1		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a 361		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
	3a		
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
	4a		
b	If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
	4b		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
	5a		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
	5b		
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		X
	6a		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	X	
	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d 2		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
	7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
	7h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.	Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
	8		
9 Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?		
	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
	9b		
10 Section 501(c)(7) organizations.	Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11 Section 501(c)(12) organizations.	Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a Section 4947(a)(1) non-exempt charitable trusts.	Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	

Form 990 (2009)

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body		
1b	Enter the number of voting members that are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?		X
6	Does the organization have members or stockholders?		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	X	
8b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?		X
10b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
12b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13	Does the organization have a written whistleblower policy?	X	
14	Does the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	X	
15b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
16b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **CA**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **CYNTHIA PYGIN - 213-744-7487**
700 EXPOSITION PARK DRIVE, LOS ANGELES, CA 90037

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- 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. 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 the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
RAUL A. ANAYA TRUSTEE	1.00	X					0.	0.	0.	
BETTY B. ANDERSON TRUSTEE	1.00	X					0.	0.	0.	
EDNA ANDERSON-OWENS TRUSTEE	1.00	X					0.	0.	0.	
WALLIS H. ANNENBERG TRUSTEE	1.00	X					0.	0.	0.	
WILLIAM R. BARRETT JR. TRUSTEE	1.00	X					0.	0.	0.	
ANDREW F. BARTH TRUSTEE	1.00	X					0.	0.	0.	
DALE E. BONNER TRUSTEE	1.00	X					0.	0.	0.	
ANTHONY J. BUZZELLI TRUSTEE	1.00	X					0.	0.	0.	
KENT S. CALDWELL-MEEKS TRUSTEE	1.00	X					0.	0.	0.	
DAVID W. CARTWRIGHT TRUSTEE	1.00	X					0.	0.	0.	
WILLIAM J. CHADWICK TRUSTEE	1.00	X					0.	0.	0.	
CHRISTOPHER A. CHAPIN TRUSTEE	1.00	X					0.	0.	0.	
CYNTHIA CHVATAL TRUSTEE	1.00	X					0.	0.	0.	
RONALD F. CLARK TRUSTEE	1.00	X					0.	0.	0.	
CATHERINE COLLINSON TRUSTEE	1.00	X					0.	0.	0.	
PAUL V. COLONY TRUSTEE	1.00	X					0.	0.	0.	
SANDRA M. COMRIE TRUSTEE	1.00	X					0.	0.	0.	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
ROBERTA A. CONROY TRUSTEE	1.00	X						0.	0.	0.
BRUCE H. CORBIN TRUSTEE	1.00	X						0.	0.	0.
CHRISTOPHER DARROW TRUSTEE	1.00	X						0.	0.	0.
HON. MIKE DAVIS TRUSTEE	1.00	X						0.	0.	0.
PATRICK W. DENNIS, ESQ. TRUSTEE	1.00	X						0.	0.	0.
HON. GEORGE DEUKMEJIAN TRUSTEE	1.00	X						0.	0.	0.
KATHLEEN M. DUNCAN TRUSTEE	1.00	X						0.	0.	0.
KEVIN DUNIGAN TRUSTEE	1.00	X						0.	0.	0.
MARVIN ELKIN TRUSTEE	1.00	X						0.	0.	0.
CRAIG A. ELLIS TRUSTEE	1.00	X						0.	0.	0.
1b Total								414,201.	0.	53,962.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **3**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation
ESHERICK HOMSEY DODGE & DAVIS, 500 TREAT AVENUE, #201, SAN FRANCISCO, CA 94110	ARCHITECT	1,028,145.
PRICEWATERHOUSECOOPERS 350 S. GRAND AVENUE, LOS ANGELES, CA 90071	AUDIT & TAX PREPARATION	125,631.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **2**

SEE SCHEDULE J-2 FOR PART VII, SECTION A CONTINUATION

Part VIII		Statement of Revenue		(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns	1a	532.				
	b	Membership dues	1b	1,155,275.				
	c	Fundraising events	1c	1,199,749.				
	d	Related organizations	1d					
	e	Government grants (contributions)	1e	4,581,284.				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	6,175,560.				
	g	Noncash contributions included in lines 1a-1f: \$		2,251,157.				
	h	Total. Add lines 1a-1f			13,112,400.			
	Program Service Revenue	2 a	IMAX THEATER	Business Code	611710	1,420,227.	1,420,227.	
b		CONFERENCE RESERVATION	611710	698,246.	698,246.			
c		EXHIBIT RENTAL	611710	562,404.	562,404.			
d		EDUCATIONAL PROG. REGI	611710	534,575.	534,575.			
e		ADMISSION SPECIAL EXHI	611710	215,274.	215,274.			
f		All other program service revenue	611710	409,989.	409,989.			
g		Total. Add lines 2a-2f			3,840,715.			
Other Revenue		3	Investment income (including dividends, interest, and other similar amounts)			1,709,056.		1,709,056.
	4	Income from investment of tax-exempt bond proceeds			366,307.		366,307.	
	5	Royalties						
	6 a	Gross Rents	(i) Real	(ii) Personal				
		Less: rental expenses						
		Rental income or (loss)						
		Net rental income or (loss)						
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		Less: cost or other basis and sales expenses	44,575,410.					
		Gain or (loss)	44,575,578.	6,002.				
		Net gain or (loss)	-168.	-6,002.				
	8 a	Gross income from fundraising events (not including \$ 1,199,749. of contributions reported on line 1c). See Part IV, line 18	a	83,235.				
	b	Less: direct expenses	b	513,284.				
	c	Net income or (loss) from fundraising events			-430,049.		-430,049.	
	9 a	Gross income from gaming activities. See Part IV, line 19	a	63,545.				
b	Less: direct expenses	b						
c	Net income or (loss) from gaming activities			63,545.		63,545.		
10 a	Gross sales of inventory, less returns and allowances	a	1,441,460.					
b	Less: cost of goods sold	b	1,324,436.					
c	Net income or (loss) from sales of inventory			117,024.		117,024.		
Miscellaneous Revenue			Business Code					
11 a	OTHER REVENUE		999999	158,014.			158,014.	
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d			158,014.				
12	Total revenue. See instructions.			18,930,842.	3,840,715.	0.	1,977,727.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	34,350.	34,350.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	337,910.	36,403.	160,073.	141,434.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	6,099,913.	4,919,812.	644,187.	535,914.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	111,713.	93,241.	10,374.	8,098.
9 Other employee benefits	762,864.	606,138.	91,312.	65,414.
10 Payroll taxes	487,336.	376,282.	61,877.	49,177.
11 Fees for services (non-employees):				
a Management				
b Legal	15,294.		15,294.	
c Accounting	135,146.		135,146.	
d Lobbying	130,700.			130,700.
e Professional fundraising services. See Part IV, line 17	98,039.			98,039.
f Investment management fees	31,699.	31,699.		
g Other	4,064,746.	3,964,369.	70,232.	30,145.
12 Advertising and promotion	410,551.	410,551.		
13 Office expenses	1,577,879.	1,447,263.	54,112.	76,504.
14 Information technology	121,659.	91,380.	21,604.	8,675.
15 Royalties	450,593.	450,593.		
16 Occupancy	49,284.	27,106.	22,178.	
17 Travel	248,265.	235,628.	3,879.	8,758.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	16,984.	16,664.		320.
20 Interest	3,812,001.	3,812,001.		
21 Payments to affiliates	8,827.	5,103.	2,919.	805.
22 Depreciation, depletion, and amortization	2,098,634.	2,020,632.	65,099.	12,903.
23 Insurance	146,950.	76,675.	70,275.	
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a OTHER EXPENSES	612,908.	322,102.	-31,150.	321,956.
b				
c				
d				
e				
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	21,864,245.	18,977,992.	1,397,411.	1,488,842.
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation ...				

Part X Balance Sheet

		(A)		(B)	
		Beginning of year		End of year	
Assets	1 Cash - non-interest-bearing	11,116,565.	1	7,983,983.	
	2 Savings and temporary cash investments	21,182,310.	2	4,040,273.	
	3 Pledges and grants receivable, net	9,929,797.	3	8,129,196.	
	4 Accounts receivable, net	2,106,994.	4	1,401,854.	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5		
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6		
	7 Notes and loans receivable, net	45,852,671.	7	26,893,595.	
	8 Inventories for sale or use	373,410.	8	486,342.	
	9 Prepaid expenses and deferred charges	206,939.	9	135,736.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 40,455,954.			
	b Less: accumulated depreciation	10b 27,783,111.	12,392,531.	10c 12,672,843.	
	11 Investments - publicly traded securities	19,928,253.	11	32,165,945.	
	12 Investments - other securities. See Part IV, line 11	8,073,085.	12	8,879,748.	
	13 Investments - program-related. See Part IV, line 11		13		
	14 Intangible assets		14		
	15 Other assets. See Part IV, line 11	4,495,125.	15	4,166,567.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	135,657,680.	16	106,956,082.		
Liabilities	17 Accounts payable and accrued expenses	10,550,398.	17	2,966,266.	
	18 Grants payable		18		
	19 Deferred revenue		19		
	20 Tax-exempt bond liabilities	82,000,000.	20	82,000,000.	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22		
	23 Secured mortgages and notes payable to unrelated third parties		23		
	24 Unsecured notes and loans payable to unrelated third parties		24		
	25 Other liabilities. Complete Part X of Schedule D	20,303,328.	25	1,999,001.	
	26 Total liabilities. Add lines 17 through 25	112,853,726.	26	86,965,267.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27 Unrestricted net assets	6,617,263.	27	6,322,168.	
	28 Temporarily restricted net assets	12,761,160.	28	9,343,983.	
	29 Permanently restricted net assets	3,425,531.	29	4,324,664.	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
	30 Capital stock or trust principal, or current funds		30		
	31 Paid-in or capital surplus, or land, building, or equipment fund		31		
	32 Retained earnings, endowment, accumulated income, or other funds		32		
	33 Total net assets or fund balances	22,803,954.	33	19,990,815.	
	34 Total liabilities and net assets/fund balances	135,657,680.	34	106,956,082.	

Form 990 (2009)

Part XI Financial Statements and Reporting

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
b Were the organization's financial statements audited by an independent accountant?	X	
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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b 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.		

Form **990** (2009)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization CALIFORNIA SCIENCE CENTER FOUNDATION	Employer identification number 95-2210527
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Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 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 government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III - Functionally integrated d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)	
(ii) A family member of a person described in (i) above?	11g(ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	
- h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule A (Form 990 or 990-EZ) 2009

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	8,502,924.	16,030,463.	28,667,710.	14,058,895.	13,112,400.	80,372,392.
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	5,680,827.	7,659,629.	8,090,908.	7,402,367.	5,428,955.	34,262,686.
3 Gross receipts from activities that are not an unrelated trade or business under section 513	175,730.	152,707.	142,495.			470,932.
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						
6 Total. Add lines 1 through 5	14,359,481.	23,842,799.	36,901,113.	21,461,262.	18,541,355.	115,106,010.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	1,026,509.	1,298,164.	6,871,685.	611,859.	630,004.	10,438,221.
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						0.
c Add lines 7a and 7b	1,026,509.	1,298,164.	6,871,685.	611,859.	630,004.	10,438,221.
8 Public support (Subtract line 7c from line 6.)						104,667,789.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	14,359,481.	23,842,799.	36,901,113.	21,461,262.	18,541,355.	115,106,010.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,217,988.	5,646,955.	4,829,259.	2,443,591.	2,075,363.	16,213,156.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	1,217,988.	5,646,955.	4,829,259.	2,443,591.	2,075,363.	16,213,156.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)					158,014.	158,014.
13 Total support (Add lines 9, 10c, 11, and 12.)	15,577,469.	29,489,754.	41,730,372.	23,904,853.	20,774,732.	131,477,180.

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	79.61 %
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	81.88 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	12.33 %
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	10.76 %

19a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2008. 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

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

SCHEDULE A, PART III, LINE 12, EXPLANATION FOR OTHER INCOME:

OTHER INCOME

Multiple horizontal lines for providing supplemental information.

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities
For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ **Complete if the organization is described below.**
▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions.**

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization <p align="center">CALIFORNIA SCIENCE CENTER FOUNDATION</p>	Employer identification number <p align="center">95-2210527</p>
--	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ▶ \$ _____
- 3 Volunteer hours _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule C (Form 990 or 990-EZ) 2009 LHA

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A Check if the filing organization belongs to an affiliated group.
 B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditures to influence public opinion (grass roots lobbying)			
b Total lobbying expenditures to influence a legislative body (direct lobbying)			
c Total lobbying expenditures (add lines 1a and 1b)			
d Other exempt purpose expenditures			
e Total exempt purpose expenditures (add lines 1c and 1d)			
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.			
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
Not over \$500,000	20% of the amount on line 1e.		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
Over \$17,000,000	\$1,000,000.		
g Grassroots nontaxable amount (enter 25% of line 1f)			
h Subtract line 1g from line 1a. If zero or less, enter -0-			
i Subtract line 1f from line 1c. If zero or less, enter -0-			
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes	<input type="checkbox"/> No

4-Year Averaging Period Under Section 501(h)
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2009

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?	X		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		0.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities? If "Yes," describe in Part IV	X		130,700.
j Total. Add lines 1c through 1i			130,700.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

PART II-B, LINE 1(I), OTHER LOBBYING ACTIVITIES:

THE FOUNDATION HAD AN ONGOING CONTRACT WITH STRATEGIC EDUCATION

SERVICES IN SACRAMENTO, CALIFORNIA. THEIR ACTIVITIES INCLUDED UPDATING

MEMBERS OF THE CALIFORNIA STATE LEGISLATURE ON THE CALIFORNIA SCIENCE

CENTER'S EDUCATIONAL OPPORTUNITIES FOR YOUTH, ETC. AND FACILITATING AND

MONITORING STATE INITIATIVES FOR THE CALIFORNIA SCIENCE CENTER. DURING

Part IV Supplemental Information (continued)

THE FISCAL YEAR ENDED 6/30/10, THE FOUNDATION PAID STRATEGIC EDUCATION

SERVICES \$36,200 FOR THEIR SERVICES. THE FOUNDATION ALSO HAS A CONTRACT

WITH THE NATIONAL GROUP IN WASHINGTON D.C. TO SERVE AS LIAISON TO

FEDERAL GOVERNMENT AGENCIES AS NECESSARY AND TO MONITOR AND REPORT ON

GOVERNMENT PROGRAMS RELEVANT TO THE INITIATIVES AND OTHER POSSIBLE

AREAS OF INTEREST TO THE FOUNDATION. DURING THE FISCAL YEAR ENDED

6/30/10, THE FOUNDATION PAID NATIONAL GROUP \$94,500 FOR THEIR SERVICES.

Multiple horizontal lines for supplemental information.

Schedule D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

CALIFORNIA SCIENCE CENTER FOUNDATION

Employer identification number

95-2210527

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Yes No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenues included in Form 990, Part VIII, line 1
- (ii) Assets included in Form 990, Part X
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:
- a Revenues included in Form 990, Part VIII, line 1
- b Assets included in Form 990, Part X

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, 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? Yes No
- b If "Yes," explain the arrangement in Part XIV and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21? Yes No
- b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	3,295,078.	2,907,473.			
b Contributions	899,133.	725,632.			
c Net investment earnings, gains, and losses	284,906.	-338,027.			
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	4,479,117.	3,295,078.			

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment _____ %
- b Permanent endowment 100.00 %
- c Term endowment _____ %

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

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		2,926,352.	1,946,172.	980,180.
e Other		37,529,602.	25,836,939.	11,692,663.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				12,672,843.

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	18,930,842.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	21,864,245.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-2,933,403.
4	Net unrealized gains (losses) on investments	4	120,263.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	120,263.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	-2,813,140.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	21,014,392.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	120,263.
b	Donated services and use of facilities	2b	118,952.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	1,844,335.
e	Add lines 2a through 2d	2e	2,083,550.
3	Subtract line 2e from line 1	3	18,930,842.
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 XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	18,930,842.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	23,827,531.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	118,952.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	1,844,335.
e	Add lines 2a through 2d	2e	1,963,287.
3	Subtract line 2e from line 1	3	21,864,244.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	21,864,244.

Part XIV Supplemental Information

Complete this part to 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, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART III, LINE 1A: THE FOUNDATION HOLDS A NUMBER OF ARTIFACTS OF

HISTORICAL SIGNIFICANCE AS COLLECTIONS. THESE COLLECTIONS ARE NOT

CAPITALIZED IN THE STATEMENT OF FINANCIAL POSITION. CONTRIBUTED COLLECTION

ITEMS ARE EXCLUDED FROM THE FINANCIAL STATEMENTS. COLLECTIONS ARE

CATALOGED AND PRESERVED FOR EDUCATIONAL PURPOSES. THE COSTS OF PURCHASING

OR COLLECTING LIVE ANIMALS ARE EXPENSED AS INCURRED. DONATED SPECIMENS ARE

NOT VALUED AND, THEREFORE, ARE NOT REFLECTED IN THE FINANCIAL STATEMENTS.

Part XIV Supplemental Information (continued)

PART III, LINE 4: ARTIFACTS OF HISTORICAL AND SCIENTIFIC SIGNIFICANCE

PRESERVED FOR EDUCATIONAL PURPOSES.

PART V, LINE 4: THE ORGANIZATION'S ENDOWMENT FUNDS ARE INTENDED TO

SUPPORT THE EDUCATIONAL AND OPERATIONAL PROGRAMS.

PART X: IN ACCORDANCE WITH FINANCIAL ACCOUNTING STANDARDS

BOARD ("FASB") ACCOUNTING STANDARDS CODIFICATION ("ASC") TOPIC NO. 740,

"UNCERTAINTY IN INCOME TAXES" ("ASC 740") (FORMERLY FASB INTERPRETATION

NO. 48 ("FIN 48"), "ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES - AN

INTERPRETATION OF FASB STATEMENT 109"), THE FOUNDATION RECOGNIZES THE

IMPACT OF TAX POSITIONS IN THE FINANCIAL STATEMENTS IF THAT POSITION IS

MORE LIKELY THAN NOT TO BE SUSTAINED ON AUDIT, BASED ON THE TECHNICAL

MERITS OF THE POSITION. TO DATE, THE FOUNDATION HAS NOT RECORDED ANY

UNCERTAIN TAX POSITIONS. THE FOUNDATION RECOGNIZES POTENTIAL ACCRUED

INTEREST AND PENALTIES RELATED TO UNCERTAIN TAX POSITIONS IN INCOME TAX

EXPENSE. DURING THE YEAR ENDED JUNE 30, 2010, THE FOUNDATION PERFORMED AN

EVALUATION OF UNCERTAIN TAX POSITIONS AND DID NOT NOTE ANY MATTERS THAT

WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS OR WHICH MAY HAVE AN

EFFECT ON ITS TAX-EXEMPT STATUS.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

LOSS ON DISPOSAL OF ASSET: 6002.

LOSS FROM SALE OF STOCK: 613.

FUNDRAISING EXPENSES: 513284.

COST OF GOODS SOLD: 1324436.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

Part XIV Supplemental Information (continued)

LOSS ON DISPOSAL OF ASSET: 6002.

LOSS FROM SALE OF STOCK: 613.

FUNDRAISING EXPENSES: 513284.

COST OF GOODS SOLD: 1324436.

Multiple horizontal lines for supplemental information.

**Schedule F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization	Employer identification number
CALIFORNIA SCIENCE CENTER FOUNDATION	95-2210527

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 For grantmakers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States.

3 Activities per Region. (Use Schedule F-1 (Form 990) if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
NORTH AMERICA	0	0	PROGRAM SERVICES	PAID FILM ROYALTY AND PROJECTOR RENTAL	406,996.
NORTH AMERICA	0	0	PROGRAM SERVICES	PURCHASED MERCHANDISE FOR RESALE	10,273.
NORTH AMERICA	0	0	PROGRAM SERVICES	PURCHASED MERCHANDISE FOR EDUCATION AND EXHIBIT	615.
NORTH AMERICA	0	0	PROGRAM SERVICES	HOTEL STAY	3,532.
NORTH AMERICA	0	0	PROGRAM SERVICES	REFUND OF OVER PAID PROPERTY TAX	-106,197.
NORTH AMERICA	0	0	PROGRAM SERVICES	MEMBERSHIP SOLD	0.
EAST ASIA & THE PACIFIC	0	0	PROGRAM SERVICES	PURCHASED SOUNDSCAPE PROGRAMS FOR PHASE II EXHIBITS	21,976.
EUROPE	0	0	PROGRAM SERVICES	PURCHASED AV PROGRAMS AND PHOTOS FOR PHASE II EXHIBITS	9,852.
Totals	0	0			347,047.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2009

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through col. (c))
		DISCOVERY BALL (event type)	WOMAN OF THE YEAR (event type)	(total number)	
Revenue	1 Gross receipts	1,263,705.	19,279.		1,282,984.
	2 Less: Charitable contributions	1,181,925.	17,824.		1,199,749.
	3 Gross income (line 1 minus line 2)	81,780.	1,455.		83,235.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	501,005.	12,279.		513,284.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				(513,284)
	11 Net income summary. Combine line 3, column (d), and line 10				-430,049.

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1 Gross revenue			63,545.
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input checked="" type="checkbox"/> No	
7 Direct expense summary. Add lines 2 through 5 in column (d)				()	
8 Net gaming income summary. Combine line 1, column (d), and line 7				63,545.	

	Yes	No
9 Enter the state(s) in which the organization operates gaming activities: <u>CA</u>		
a Is the organization licensed to operate gaming activities in each of these states?	X	
b If "No," explain:		
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?		X
b If "Yes," explain:		
11 Does the organization operate gaming activities with nonmembers?	X	
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?		X

13 Indicate the percentage of gaming activity operated in:

a The organization's facility	13a	95.00 %
b An outside facility	13b	5.00 %

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► CYNTHIA PYGIN

Address ► 700 EXPOSITION PARK DRIVE - LOS ANGELES, CA 90037

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?

15a	Yes	No
		X

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____ .

c If "Yes," enter name and address of the third party:

Name ► _____

Address ► _____

16 Gaming manager information:

Name ► ALLYSON GOODALL

Gaming manager compensation ► \$ 73,520.
**

Description of services provided ► ALLYSON GOODALL'S RESPONSIBILITY AS A DIRECTOR OF DEVELOPMENT IS TO ORGANIZE THE DISCOVERY BALL FUNDRAISING EVENT, INCLUDING THE RAFFLE HELD AT THE BALL.

Director/officer Employee Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

17a	Yes	No
	X	

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ 63,545.

** SEE SCHEDULE O FOR COMPLETE LINE 16 DESCRIPTION

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

**Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.**

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

CALIFORNIA SCIENCE CENTER FOUNDATION

Employer identification number

95-2210527

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ...

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance

- 2** Enter total number of section 501(c)(3) and government organizations ▶ _____
- 3** Enter total number of other organizations ▶ _____

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2009

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
CA STATE SCIENCE FAIR AWARD WINNERS	172	34,350.	0.	FAIR MARKET VALUE	

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE I, PART I, LINE 2: NO MONITORING REQUIRED OR PERFORMED.

THE FOUNDATION GIVES OUT AWARDS TO INDIVIDUALS AND NO MONITORING
REQUIRED AND/OR PERFORMED.

SCHEDULE J-2
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

▶ See the Instructions for Form 990.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the Organization

CALIFORNIA SCIENCE CENTER FOUNDATION

Employer Identification number

95-2210527

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
MELPHINE EVANS TRUSTEE	1.00	X						0.	0.	0.
ALAN J. FOHRER TRUSTEE	1.00	X						0.	0.	0.
VICTORIA ERTESZEK FOOTE TRUSTEE	1.00	X						0.	0.	0.
ALLAN M. FREW TRUSTEE	1.00	X						0.	0.	0.
DENISE W. FRIEDMAN TRUSTEE	1.00	X						0.	0.	0.
JOSHUA S. FRIEDMAN TRUSTEE	1.00	X						0.	0.	0.
JONATHAN E. FUNK TRUSTEE	1.00	X						0.	0.	0.
CATHERINE HUTTO GORDON TRUSTEE	1.00	X						0.	0.	0.
MATTHEW GROSSMAN, ESQ. TRUSTEE	1.00	X						0.	0.	0.
FRED HAMEETMAN TRUSTEE	1.00	X						0.	0.	0.
CHARLES HARRINGTON TRUSTEE	1.00	X						0.	0.	0.
KENNETH HEINTZ TRUSTEE	1.00	X						0.	0.	0.
BARBARA B. HENDERSON TRUSTEE	1.00	X						0.	0.	0.
MICHAEL HOEVEL TRUSTEE	1.00	X						0.	0.	0.
MARVIN L. HOLEN, ESQ. TRUSTEE	1.00	X						0.	0.	0.
ROBERT W. HUSTON TRUSTEE	1.00	X						0.	0.	0.
DAVID ISRAEL TRUSTEE	1.00	X						0.	0.	0.
CARL D. JACOBS TRUSTEE	1.00	X						0.	0.	0.
DANA JACOBS TRUSTEE	1.00	X						0.	0.	0.
BAHRAM JALALI TRUSTEE	1.00	X						0.	0.	0.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J-2 (Form 990) 2009

SCHEDULE J-2
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

▶ See the Instructions for Form 990.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the Organization

CALIFORNIA SCIENCE CENTER FOUNDATION

Employer Identification number

95-2210527

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
JAMES M. JASKA TRUSTEE	1.00	X						0.	0.	0.
G. BRADFORD JONES TRUSTEE	1.00	X						0.	0.	0.
DELORES SHINE KERR TRUSTEE	1.00	X						0.	0.	0.
CAROL LLEWELLYN TRUSTEE	1.00	X						0.	0.	0.
MARCUS LOLLIE TRUSTEE	1.00	X						0.	0.	0.
ROBERT H. LORSCH TRUSTEE	1.00	X						0.	0.	0.
MARTY LOUGHLIN TRUSTEE	1.00	X						0.	0.	0.
BERNARD MACHLOVITCH TRUSTEE	1.00	X						0.	0.	0.
MARK LUBKEMAN TRUSTEE	1.00	X						0.	0.	0.
MELANIE F. LUNDQUIST TRUSTEE	1.00	X						0.	0.	0.
KEN T. MCBRIDE TRUSTEE	1.00	X						0.	0.	0.
CANDACE BOND MCKEEVER TRUSTEE	1.00	X						0.	0.	0.
MARTIN R. MELONE TRUSTEE	1.00	X						0.	0.	0.
JAMES MONTGOMERY TRUSTEE	1.00	X						0.	0.	0.
JIM NEGUS TRUSTEE	1.00	X						0.	0.	0.
NANCI E. NISHIMURA, ESQ. TRUSTEE	1.00	X						0.	0.	0.
EZEKIEL PATTEN JR. TRUSTEE	1.00	X						0.	0.	0.
GEORGE PLA TRUSTEE	1.00	X						0.	0.	0.
SENATOR CURREN PRICE TRUSTEE	1.00	X						0.	0.	0.
GREGORY L. PROBERT TRUSTEE	1.00	X						0.	0.	0.

SCHEDULE J-2
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

▶ See the Instructions for Form 990.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the Organization

CALIFORNIA SCIENCE CENTER FOUNDATION

Employer Identification number

95-2210527

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
DANIEL PROVENCIO TRUSTEE	1.00	X						0.	0.	0.
MARK RACUNAS TRUSTEE	1.00	X						0.	0.	0.
KEITH W. RENKEN TRUSTEE	1.00	X						0.	0.	0.
HON. MARK RIDLEY-THOMAS TRUSTEE	1.00	X						0.	0.	0.
ALBERT ROBLES TRUSTEE	1.00	X						0.	0.	0.
IRENE M. ROMERO TRUSTEE	1.00	X						0.	0.	0.
EDWARD P. ROSKI JR. TRUSTEE	1.00	X						0.	0.	0.
MICHAEL ROUSE TRUSTEE	1.00	X						0.	0.	0.
W. SCOTT SANFORD TRUSTEE	1.00	X						0.	0.	0.
MARY SHANAHAN TRUSTEE	1.00	X						0.	0.	0.
STEVEN SELCER TRUSTEE	1.00	X						0.	0.	0.
HAL SNYDER TRUSTEE	1.00	X						0.	0.	0.
TOM L. SOTO TRUSTEE	1.00	X						0.	0.	0.
ROBERT L. STEIN TRUSTEE	1.00	X						0.	0.	0.
MARC I. STERN TRUSTEE	1.00	X						0.	0.	0.
JULIA A. STEWART TRUSTEE (ON LEAVE)	1.00	X						0.	0.	0.
JOEL L. STROM, DDS TRUSTEE	1.00	X						0.	0.	0.
JOHN A. SUSSMAN TRUSTEE	1.00	X						0.	0.	0.
LYNN M. SUTER TRUSTEE	1.00	X						0.	0.	0.
FRANKLIN E. ULF TRUSTEE	1.00	X						0.	0.	0.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J-2 (Form 990) 2009

SCHEDULE J-2
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

▶ See the Instructions for Form 990.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the Organization

CALIFORNIA SCIENCE CENTER FOUNDATION

Employer Identification number

95-2210527

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
CHRISTOPHER J. WARMUTH TRUSTEE	1.00	X					0.	0.	0.	
NADINE WATT TRUSTEE	1.00	X					0.	0.	0.	
FABIAN R. WESSON TRUSTEE	1.00	X					0.	0.	0.	
ANTHONY WILLIAMS TRUSTEE	1.00	X					0.	0.	0.	
KIRK WILLIAMS TRUSTEE	1.00	X					0.	0.	0.	
ADAM WINNICK TRUSTEE	1.00	X					0.	0.	0.	
SUZANNE WRIGHT TRUSTEE	1.00	X					0.	0.	0.	
PAULA A. MADISON CHAIR	1.00	X		X			0.	0.	0.	
MARGO L. O'CONNELL IMMEDIATE PAST CHAIR	1.00	X		X			0.	0.	0.	
ANDREW SALE SECRETARY/TREASURER	1.00	X		X			0.	0.	0.	
TONY BUDROVICH SR. VP-OPERATIONS	9.00			X			16,424.	0.	20,578.	
WILLIAM HARRIS SR. VP, DEV. & MKT.	40.00			X			137,034.	0.	11,844.	
CYNTHIA PYGIN CFO	40.00			X			119,028.	0.	3,656.	
JEFFREY N. RUDOLPH PRESIDENT	14.00			X			39,169.	0.	1,371.	
JOE DEAMICIS VP-MARKETING	40.00				X		102,546.	0.	16,513.	

Supplemental Information on Tax-Exempt Bonds
▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information on Schedule O (Form 990).
▶ Attach to Form 990. See separate instructions.

Name of the organization **CALIFORNIA SCIENCE CENTER FOUNDATION** Employer identification number **95-2210527**

Part I Bond Issues		SEE SCHEDULE O FOR COLUMN (F) CONTINUATIONS							
(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer	
						Yes	No	Yes	No
A CALIF. INFRASTRUCTURE AND ECONOMIC DEVELOPMENT BANK - 2006 SERIES B	63-0304653	13033WVD2	08/16/06	83,822,966.	TO CONSTRUCT SCIENCE CENTER PHASE II BUILDING.		X		X
B									
C									
D									
E									

Part II Proceeds											
		A		B		C		D		E	
1	Total proceeds of issue	89,837,469.									
2	Gross proceeds in reserve funds	7,477,421.									
3	Proceeds in refunding or defeasance escrows										
4	Other unspent proceeds	534,923.									
5	Issuance costs from proceeds	5,047,260.									
6	Working capital expenditures from proceeds	77,473,115.									
7	Capital expenditures from proceeds										
8	Year of substantial completion	2010									
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
9	Were the bonds issued as part of a current refunding issue? ...		X								
10	Were the bonds issued as part of an advance refunding issue?		X								
11	Has the final allocation of proceeds been made?		X								
12	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X									

Part III Private Business Use											
		A		B		C		D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X								
2	Are there any lease arrangements with respect to the financed property which may result in private business use?		X								

Part III Private Business Use (Continued)

	A		B		C		D		E	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts with respect to the financed property which may result in private business use?		X								
b Are there any research agreements with respect to the financed property which may result in private business use? ...		X								
c Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?	X									
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government00 %		%		%		%		%
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government00 %		%		%		%		%
6 Total of lines 4 and 500 %		%		%		%		%
7 Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X									

Part IV Arbitrage

	A		B		C		D		E	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X								
2 Is the bond issue a variable rate issue?		X								
3a Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?		X								
b Name of provider										
c Term of hedge										
4a Were gross proceeds invested in a GIC?	X									
b Name of provider	NATIXIS FUNDING CORP. & RABOBANK									
c Term of GIC										
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	X									
5 Were any gross proceeds invested beyond an available temporary period?	X									
6 Did the bond issue qualify for an exception to rebate?		X								

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

▶ **Complete if the organizations answered "Yes" on Form
990, Part IV, lines 29 or 30.
▶ Attach to Form 990.**

Name of the organization **CALIFORNIA SCIENCE CENTER FOUNDATION** Employer identification number **95-2210527**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock	X	1	2,023,340.	MARKET VALUE
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (AQUATIC ITEMS)	X	2	221,067.	REPLACEMENT COST
26 Other ▶ (CAMERA)	X	1	6,750.	RETAIL PRICE
27 Other ▶ ()				
28 Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgment **29** 2

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II.		

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2009

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization CALIFORNIA SCIENCE CENTER FOUNDATION	Employer identification number 95-2210527
--	--

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

CSCF ASPIRES TO STIMULATE CURIOSITY AND INSPIRE SCIENCE LEARNING IN
EVERYONE BY CREATING FUN, MEMORABLE EXPERIENCES, BECAUSE WE VALUE
SCIENCE AS AN INDISPENSABLE TOOL FOR UNDERSTANDING OUR WORLD,
ACCESSIBILITY AND INCLUSIVENESS, AND ENRICHING PEOPLE'S LIVES.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

OTHER PROGRAMS INCLUDE SCIENTIFIC EDUCATIONAL FILMS SHOWN IN IMAX
THEATER AND CONFERENCE RESERVATIONS AND SCHEDULING.
EXPENSES \$ 3800786. INCLUDING GRANTS OF \$ 0. REVENUE \$ 1661346.

FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS PREPARED BY

SINGERLEWAK, LLP BASED ON THE INFORMATION PROVIDED BY THE FOUNDATIONS
STAFF. PRIOR TO FILING, THE FORM 990 IS PRESENTED TO ALL MEMBERS OF THE
BOARD OF TRUSTEES. ONCE THE FORM 990 IS PRESENTED TO THE BOARD, THE CHIEF
FINANCIAL OFFICER SIGNS THE RETURN ON BEHALF OF THE ORGANIZATION.

FORM 990, PART VI, SECTION B, LINE 12C: ON AN ANNUAL BASIS, THE PRESIDENT

OF THE FOUNDATION WILL SEND TO ALL TRUSTEES AND OFFICERS OF THE FOUNDATION
A COPY OF THE CONFLICT OF INTEREST POLICY AND AN ANNUAL CONFLICT OF
INTEREST DISCLOSURE STATEMENT. THE DISCLOSURE STATEMENT MUST BE COMPLETED
AND RETURNED TO THE AUDIT AND GOVERNANCE COMMITTEE. ALL NEW TRUSTEES AND
OFFICERS MUST COMPLETE THE DISCLOSURE STATEMENT PRIOR TO ASSUMING THEIR
DUTIES FOR THE FOUNDATION. IF A TRUSTEE OR OFFICER BECOMES AWARE OF A
CONFLICT OF INTEREST OR POTENTIAL CONFLICT OF INTEREST, FOLLOWING THE

ANNUAL DISCLOSURE, THAT TRUSTEE OR OFFICER SHOULD NOTIFY THE AUDIT AND

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule O (Form 990) 2009

932211
02-03-10

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization **CALIFORNIA SCIENCE CENTER FOUNDATION** Employer identification number **95-2210527**

GOVERNANCE COMMITTEE OF THE FACTS SURROUNDING THE CONFLICT OF INTEREST IN

WRITING. THE AUDIT AND GOVERNANCE COMMITTEE SHALL SUBMIT AN ANNUAL

CONFIDENTIAL REPORT TO THE BOARD OF TRUSTEES REGARDING ANY TRUSTEE OR

OFFICER CONFLICTS OF INTEREST AND THEIR RESOLUTION.

FORM 990, PART VI, SECTION B, LINE 15: THE COMPENSATION OF THE PRESIDENT

AND CFO ARE REVIEWED BY THE AUDIT COMMITTEE. THE COMPENSATION OF OTHER

OFFICERS AND KEY EMPLOYEES ARE REVIEWED BY THE HUMAN RESOURCES DEPARTMENT.

FORM 990, PART VI, SECTION C, LINE 18: THE ORGANIZATION'S INFORMATIONAL

RETURN DOCUMENTS ARE AVAILABLE TO THE PUBLIC EITHER THROUGH

WWW.GUIDESTAR.ORG OR UPON WRITTEN REQUEST.

FORM 990, PART VI, SECTION C, LINE 19: CALIFORNIA SCIENCE CENTER

FOUNDATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY,

FINANCIAL STATEMENTS, AND INFORMATIONAL RETURNS AVAILABLE UPON WRITTEN

REQUEST. THE INFORMATIONAL RETURNS ARE ALSO MADE AVAILABLE TO THE PUBLIC

THROUGH THE ORGANIZATION'S WEBSITE, AND WWW.GUIDESTAR.ORG, A PUBLIC

WEBSITE.

FORM 990, PART V, LINE 7C & 7D:

FILING OF FORM 8282:

CALIFORNIA SCIENCE CENTER FOUNDATION SOLD A GIFT OF STOCK DURING THE

FISCAL YEAR ENDED 06/30/09 AND THE REQUIRED FORM 8282 WAS SUBSEQUENTLY

FILED IN NOVEMBER OF 2009. CALIFORNIA SCIENCE CENTER FOUNDATION SOLD A

STOCK GIFT IN DECEMBER 2009 AND FILED FORM 8282 IN JANUARY 2010.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule O (Form 990) 2009

932211
02-03-10

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization CALIFORNIA SCIENCE CENTER FOUNDATION	Employer identification number 95-2210527
--	--

SCHEDULE G, PART III, LINE 16, DESCRIPTION OF SERVICES PROVIDED:

ALYSON GOODALL'S RESPONSIBILITY AS A

DIRECTOR OF DEVELOPMENT IS TO ORGANIZE THE DISCOVERY BALL

FUNDRAISING EVENT, INCLUDING THE RAFFLE HELD AT THE BALL.

GOODALL'S SALARY OF \$73,520 REFLECTS HER OVERALL COMPENSATION AS

DIRECTOR OF DEVELOPMENT AND NOT ONLY AS GAMING MANAGER.

SCHEDULE K, PART I, BOND ISSUES:

(A) ISSUER NAME:

CALIF. INFRASTRUCTURE AND ECONOMIC DEVELOPMENT BANK - 2006 SERIES B

(B) DESCRIPTION OF PURPOSE: TO CONSTRUCT SCIENCE CENTER PHASE II BUILDING.

SCHEDULE K, PART I, COLUMN E:

BOND ISSUANCE PRICE:

THE BOND ISSUE PRICE REPORTED ON THE FORM 80038, PART III, LINE 21(B)

IS \$83,822,966. THE DIFFERENCE IN REPORTED ISSUE PRICE ON THE FORM 990,

SCHEDULE K IS ATTRIBUTABLE TO THE BOND PREMIUM.

SCHEDULE K, PART II, LINE 5:

ISSUANCE COSTS FROM PROCEEDS:

THE ISSUANCE COST OF \$5,047,260 INCLUDES THE FOLLOWING:

-UNDERWRITER'S DISCOUNT OF \$523,203

-INSURANCE PREMIUM OF \$3,430,402

-LEGAL & OTHER FEES OF \$1,093,655

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule O (Form 990) 2009

932211
02-03-10

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

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2009

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Inspection

Name of the organization CALIFORNIA SCIENCE CENTER FOUNDATION	Employer identification number 95-2210527
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SCHEDULE K, PART IV, LINE 4C:

TERM OF GIC:

4.96 YEARS & 3.71 YEARS