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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning , 2009, and ending , 20

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

Please use IRS label or print or type. See Specific Instructions

C Name of organization CALAVERAS COMMUNITY FOUNDATION

Doing Business As

Number and street (or P O box if mail is not delivered to street address) P.O. BOX 1436

Room/suite

City or town, state or country, and ZIP + 4 ANGELS CAMP, CA 95222

D Employer identification number 68-0472056

E Telephone number 209-736-1845

G Gross receipts $ 128,720

F Name and address of principal officer BRENT HARRINGTON
P.O. BOX 1436, ANGELS CAMP, CA 95222

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶ N/A

I Tax-exempt status ☒ 501(c) (3)◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶www.calaverascommunityfoundation.org

K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 2001

M State of legal domicile CA

Part I Summary

1 Briefly describe the organization's mission or most significant activities. TO FACILITATE AND DEVELOP PHILANTHROPY AND GRANT MAKING AND TO TAKE OTHER ACTIONS FOR THE BENEFIT OF THE COMMUNITIES OF CALAVERAS COUNTY AND THE CALIFORNIA SIERRA FOOTHILL REGION. $98,448 WAS PAID OUT IN GRANTS, SCHOLARSHIPS AND PUBLIC ASSISTANCE IN 2009.

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

Activities & Governance	3 Number of voting members of the governing body (Part VI, line 1a)	3	12
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	12
	5 Total number of employees (Part V, line 2a)	5	0
	6 Total number of volunteers (estimate if necessary)	6	20
	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

		Prior Year	Current Year
Revenue	8 Contributions and grants (Part VIII, line 1h)	223,918	102,651
	9 Program service revenue (Part VIII, line 2g)		0
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	7,140	6,694
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	13,034	8,933
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	244,092	118,278
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	79,719	98,448
	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)		
	16a Professional fundraising fees (Part IX, column (A), line 11e)		
	b Total fundraising expenses (Part IX, column (D), line 25)▶		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	11,452	12,129
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	91,171	110,577
	19 Revenue less expenses Subtract line 18 from line 12	152,921	7,701

		Beginning of Current Year	End of Year
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	412,425	420,012
	21 Total liabilities (Part X, line 26)	1,125	1,011
	22 Net assets or fund balances. Subtract line 21 from line 20	411,300	419,001

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 — Date 7-19-10

Type or print name and title Brent Harrington, President

Paid Preparer's Use Only

Preparer's signature DAN AYALA, CPA — Date 6.29.10 — Check if self-employed ▶ ☐ — Preparer's identifying number (see instructions) P00025341

Firm's name (or yours if self-employed), address, and ZIP + 4 TRIBBLE & AYALA CPAS, INC.
BOX 400, ANGELS CAMP, CA 95222

EIN ▶ 94-3411614

Phone no ▶ 209-736-4631

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

ISA **For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.** Form **990** (2009)

SCANNED AUG 1 8 2010

RECEIVED JUL 23 2010 OSC

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission
TO FACILITATE AND DEVELOP PHILANTHROPY AND GRANT MAKING AND TO TAKE OTHER ACTIONS FOR THE BENEFIT OF THE COMMUNITIES OF CALAVERAS COUNTY AND THE CALIFORNIA SIERRA FOOTHILL REGION. $98,448 WAS PAID OUT IN GRANTS, SCHOLARSHIPS AND PUBLIC ASSISTANCE IN 2009.

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 ☒ 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 ☒ 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: N/A) (Expenses $ 100,020 including grants of $ 98,448) (Revenue $ 15,627)
TO FACILITATE AND DEVELOP PHILANTHROPY AND GRANT MAKING AND TO TAKE OTHER ACTIONS FOR THE BENEFIT OF THE COMMUNITIES OF CALAVERAS COUNTY AND THE CALIFORNIA SIERRA FOOTHILL REGION. $98,448 WAS PAID OUT IN GRANTS, SCHOLARSHIPS AND PUBLIC ASSISTANCE IN 2009.

4b (Code:) (Expenses $ including grants of $) (Revenue $)

4c (Code:) (Expenses $ including grants of $) (Revenue $)

4d Other program services (Describe in Schedule O)
(Expenses $ including grants of $) (Revenue $)

4e **Total program service expenses** ▶ 100,020

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)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? *If "Yes," complete Schedule C, Part II*	4		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? *If "Yes," complete Schedule C, Part III*	5		X
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? *If "Yes," complete Schedule D, Part I*	6	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? *If "Yes," complete Schedule D, Part V.* ENDOWMENT FUND	10	X	
11	Is the organization's answer to any of the following questions "Yes"? *If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable*	11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII.*			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*			
•	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*			
•	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? *If "Yes," complete Schedule D, Part X*			
12	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12		X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional* (Yes / No: 12A — / X)			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	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? *If "Yes," complete Schedule F, Part I*	14b		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? *If "Yes," complete Schedule F, Part II.*	15		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? *If "Yes," complete Schedule F, Part III*	16		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? *If "Yes," complete Schedule G, Part I*	17		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? *If "Yes," complete Schedule G, Part II*	18		X
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III.*	19		X
20	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20		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? *If "Yes," complete Schedule I, Parts I and II*	21		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? *If "Yes," complete Schedule I, Parts I and III*	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		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?	24c		X
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		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? *If "Yes," complete Schedule L, Part I*	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L Part I*	25b		X
26	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? *If "Yes," complete Schedule L, Part II*	26		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? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		X
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? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35		X
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

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 0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable . . 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X	
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 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* this return (see instructions)			
3a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	3a		X
	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)?	4a		X
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.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
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?	6a		X
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?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? .	7g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		X
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		X
9	**Sponsoring organizations maintaining donor advised funds.**			
a	Did the organization make any taxable distributions under section 4966?	9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	**Section 501(c)(7) organizations.** Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12 . . . . . N/A 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 . . . . . N/A 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		N/A
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b			

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	1a 12		
b	Enter the number of voting members that are independent	1b 12		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		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?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	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*	9a		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?	10a		X
b	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?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	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*	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this is done*	12c	X	
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		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?			
a	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		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?	16a		X
b	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?	16b		

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: ▶ BRENT HARRINGTON, PRESIDENT, 525 MAIN ST., ANGELS CAMP, CA 95222

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			
BRENT HARRINGTON, P.O. BOX 1436, ANGELS CAMP, CA 95222	20			X				0	0	
DENISE EBBETT, P.O. BOX 1436, ANGELS CAMP, CA 95222	2			X				0	0	
KATHY ZANCANELLA, P.O. BOX 1436, ANGELS CAMP, CA 95222	2			X				0	0	
PAUL DE BALDO, P.O. BOX 1436, ANGELS CAMP, CA 95222	2			X				0	0	
LINDA MCCALL KANGETER, P.O. BOX 1436, ANGELS CAMP, CA 95222	2			X				0	0	
ALLEN BREED, P.O. BOX 1436, ANGELS CAMP, CA 95222	2	X						0	0	
SANDRA LEMA, P.O. BOX 1436, ANGELS CAMP, CA 95222	2	X						0	0	
SCOTT RATTERMAN, P.O. BOX 1436, ANGELS CAMP, CA 95222	2	X						0	0	
J. SHOOP, P.O. BOX 1436, ANGELS CAMP, CA 95222	2	X						0	0	
PAUL STEIN, P.O. BOX 1436, ANGELS CAMP, CA 95222	2	X						0	0	
CHRISTY MAYNARD, P.O. BOX 1436, ANGELS CAMP, CA 95222	2	X						0	0	
SALVATORE MANNA, P.O. BOX 1436, ANGELS CAMP, CA 95222	0						X	0	0	
ELIZABETH RITCHIE, P.O. BOX 1436, ANGELS CAMP, CA 95222	0						X	0	0	
Cheryl Hillis, PO Box 1436 Angels Camp, Ca 95252	2	X						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			
1b Total ▶								0	0	0

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 ▶ 0

		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
NONE		

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 ▶ 0

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	102,651			
	g Noncash contributions included in lines 1a-1f $					
	h **Total.** Add lines 1a–1f ▶		102,651			
Program Service Revenue		**Business Code**				
	2a					
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g **Total.** Add lines 2a–2f ▶					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶		6,694			
	4 Income from investment of tax-exempt bond proceeds ▶					
	5 Royalties ▶					
		(i) Real / (ii) Personal				
	6a Gross Rents	9,114				
	b Less rental expenses	6,472				
	c Rental income or (loss)	2,642				
	d Net rental income or (loss) ▶		2,642			
		(i) Securities / (ii) Other				
	7a Gross amount from sales of assets other than inventory					
	b Less. cost or other basis and sales expenses					
	c Gain or (loss)					
	d Net gain or (loss) ▶					
	8a Gross income from fundraising events (not including $ ____ of contributions reported on line 1c). See Part IV, line 18 a	8,306				
	b Less direct expenses b	3,970				
	c Net income or (loss) from fundraising events ▶		4,336			
	9a Gross income from gaming activities See Part IV, line 19 a					
	b Less: direct expenses b					
	c Net income or (loss) from gaming activities ▶					
	10a Gross sales of inventory, less returns and allowances a					
	b Less: cost of goods sold b					
	c Net income or (loss) from sales of inventory ▶					
	Miscellaneous Revenue	**Business Code**				
	11a ADMINISTRATION	561000	1,824			
	b MISCELLANEOUS	900099	131			
	c					
	d All other revenue					
	e **Total.** Add lines 11a–11d ▶		1,955			
	12 **Total Revenue.** See instructions. ▶		118,278			

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	98,448	98,448		
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				
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				
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	1,050		1,050	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion	340		340	
13 Office expenses	998		998	
14 Information technology				
15 Royalties				
16 Occupancy	2,115		2,115	
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	1,261		1,261	
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 ADMINISTRATION FEES	1,824		1,824	
b BANK CHARGES	46		46	
c CONTRACT SERVICES	2,330		2,330	
d TELEPHONE	903	722	181	
e POSTAGE	1,062	850	212	
f All other expenses DUES & LICENSES	200		200	
25 **Total functional expenses.** Add lines 1 through 24f	110,577	100,020	10,557	
26 **Joint Costs.** Check here ▶ ☐ 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) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		22,368	1	36,496
	2	Savings and temporary cash investments		265,960	2	263,063
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	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			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 134,275			
	b	Less: accumulated depreciation	10b 14,833	122,972	10c	119,442
	11	Investments—publicly traded securities			11	
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11 DEPOSITS		1,125	15	1,011
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		412,425	16	420,012
Liabilities	17	Accounts payable and accrued expenses			17	
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	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 DEPOSITS HELD		1,125	25	1,011
	26	**Total liabilities.** Add lines 17 through 25		1,125	26	1,011
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☒ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		61,432	27	62,901
	28	Temporarily restricted net assets			28	
	29	Permanently restricted net assets		349,868	29	356,100
		Organizations that do not follow SFAS 117, check here ▶ ☐ 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		411,300	33	419,001
	34	Total liabilities and net assets/fund balances		412,425	34	420,012

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990. ☒ Cash ☐ Accrual ☐ 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?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b		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	2c		
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 ☐ Separate basis ☐ Consolidated basis ☐ 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?	3a		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.	3b		

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	Employer identification number
CALAVERAS COMMUNITY FOUNDATION	68-0472056

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 33⅓% 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 33⅓% 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									0

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 ")	105,783	58,377	87,375	223,918	102,651	578,104
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	941	40,400	10,912	23,866	8,306	84,425
4 **Total.** Add lines 1 through 3	106,724	98,777	98,287	247,784	110,957	662,529
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						662,529

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	106,724	98,777	98,287	247,784	110,957	662,529
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,399	5,450	11,976	7,140	8,933	35,898
9 Net income from unrelated business activities, whether or not the business is regularly carried on				(916)		(916)
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						697,511

12 Gross receipts from related activities, etc (see instructions) 12 84,425

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** . . . . . ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) . . . . 14 94.98 %

15 Public support percentage from 2008 Schedule A, Part II, line 14 . . . . . 15 95.84 %

16a **33⅓ % support test—2009.** If the organization did not check the box on line 13, and line 14 is 33⅓% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☐

b **33⅓ % support test—2008.** If the organization did not check a box on line 13 or 16a, and line 15 is 33⅓% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☐

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 . . . ▶ ☐

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 . . . . . ▶ ☐

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 ▶ ☐

Part III Support Schedule for Organizations Described in Section 509(a)(2) N/A
(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 ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6)						

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						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
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)						
13 **Total support.** (Add lines 9, 10c, 11, and 12)						

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	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

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

19a **33⅓ % support tests—2009.** If the organization did not check the box on line 14, and line 15 is more than 33⅓%, and line 17 is not more than 33⅓%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33⅓ % support tests—2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33⅓%, and line 18 is not more than 33⅓%, 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. N/A

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
CALAVERAS COMMUNITY FOUNDATION

Employer identification number
68-0472056

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	31	1
2	Aggregate contributions to (during year)	80,955	21,696
3	Aggregate grants from (during year)	0	0
4	Aggregate value at end of year	356,100	62,901

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? ☒ Yes ☐ 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? ☒ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)
- ☐ Preservation of land for public use (e.g., recreation or pleasure)
- ☐ Protection of natural habitat
- ☐ Preservation of open space
- ☐ Preservation of an historically important land area
- ☐ Preservation of a certified historic structure

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. N/A

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 the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21 N/A

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	18,266				
b Contributions					
c Net investment earnings, gains, and losses	863				
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	19,129				

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

a Board designated or quasi-endowment ► 0 %
b Permanent endowment ► 4.5 %
c Term endowment ► 0 %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

	Yes	No
3a(i) (i) unrelated organizations		X
3a(ii) (ii) related organizations		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	37,194			37,194
b Buildings	97,081		14,833	82,248
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c))* ►				119,442

Part VII Investments—Other Securities. See Form 990, Part X, line 12

N/A

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

N/A

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

N/A

(a) Description	(b) Book value
Total. *(Column (b) must equal Form 990, Part X, col (B) line 15)* ▶	

Part X Other Liabilities. See Form 990, Part X, line 25

N/A

1. (a) Description of liability	(b) Amount
Federal income taxes	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
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	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return N/A

1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
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	
5	Total revenue Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12)*			5	

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return N/A

1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV.)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
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	
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18)*			5	

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 V, QUESTION 4

THE INTENDED USE OF THE ORGANIZATION'S ENDOWMENT FUNDS IS TO BUILD ASSETS.

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" to Form 990, Part IV, lines 21 or 22.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
CALAVERAS COMMUNITY FOUNDATION

Employer identification number
68-0472056

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 . . . . . ▶ ☐

N/A

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

2 Enter total number of section 501(c)(3) and government organizations . . . . . ▶

3 Enter total number of other organizations . . . . . ▶

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
SEE ATTACHED SCHEDULE					

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

IN MOST CASES, AN AGREEMENT IS EXECUTED BETWEEN CALAVERAS COMMUNITY FOUNDATION (CCF) AND THE GRANTEE, WHICH INCLUDES A GRANTEE REQUIREMENT TO SEND CCF A FINAL REPORT ON EXPENDITURES AND SPOT CHECKS VIA SITE VISITS OCCUR OCCASIONALLY.

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
CALAVERAS COMMUNITY FOUNDATION

Employer identification number
68-0472056

FORM 990, PART VI

SECTION B, LINE 11

A COPY IS MADE AVAILABLE TO THE MEMBERS OF THE BAORD AT BOARD MEETINGS.

FORM 990, PART VI

SECTION B, LINE 12c

BOARD MEMBERS ARE ASKED ON AN ANNUAL BASIS TO REREAD THE POLICY AND TO SIGN A NEW CONFLICT OF INTEREST COMPLIANCE FORM.

FORM 990, PART VI

SECTION C, LINE 19

UPON REQUEST.

CALAVERAS COMMUNITY FOUNDATION
SUPPLEMENTAL SCHEDULE
68-0472056 2237918
DECEMBER 31, 2009

FORM 990, PART VIII, LINE 8
SPECIAL EVENTS

Calaveras Chairs for Charity Receipts	$ 8,306
Calaveras Chairs for Charity expenses	$ 3,970

FORM 990, PART III, LINE 4a

Grants, scholarships and special assistance is paid out according to the criteria established by each individual fund.

3 CD PM

03/30/10

Cash Basis

Calaveras Community Foundation
Transaction Detail By Account
January through December 2009

Type	Date	Num	Name	Memo	Class	Paid Amount	Balance
Restricted G2s/Grants							
Check	1/9/2009	1219	Sierra Hills Market, Inc.	Xmas Food Basket Project	Donor Advised Funds:AC Centennial Rotary Fund	5,375 82	5,375.82
General Journal	1/12/2009	JE-20	Romaggi Adobe Foundation	Void Ck #1162 for Romaggi Foundation-check lost	CCF Funds:CCF Grant	-385 00	4,990 82
General Journal	1/12/2009	JE-20	Romaggi Adobe Foundation	Stop Payment Fee Ck #1162 Romaggi Foundation-check lost	CCF Funds:CCF Grant	30 00	5,020 82
Check	1/12/2009	1223	Romaggi Adobe Foundation	$385 original gift - $30 stop payment fee	CCF Funds:CCF Grant	355 00	5,375 82
Check	1/15/2009	1226	Chabad of Stockton	Grant	Donor Advised Funds You Must Be The Change You ..	3,600 00	8,975 82
Check	1/15/2009	509	Earth Abides Land Trust	Grant	Donor Advised Funds You Must Be The Change You	3,600 00	12,575 82
Check	1/27/2009	1227	CSU-Chico	Scholarship-Lisa Smith	Scholarship Funds:C/H Scholarship	500 00	13,075.82
Check	1/28/2009	510	Isbis, Gavin	Scholarship	Scholarship Funds:Fred Katz Memorial Scholarship	500 00	13,575 82
Check	2/16/2009	1252	Calaveras Youth Mentoring	Grant-Chap 018	CCF Funds:CCF Grant	46 50	13,622.32
Check	2/16/2009	1253	First 5 Calaveras	Grant-#19321	CCF Funds:CCF Grant	63 50	13,685 82
Check	2/16/2009	1254	Habitat for Humanity	Grant 020	CCF Funds:CCF Grant	56 50	13,742 32
Check	2/16/2009	1255	Mokelumne Hill Community First	Grant 022	CCF Funds.CCF Grant	47 00	13,789 32
Check	2/16/2009	1256	Mountain Ranch Community Club	Grant 022	CCF Funds CCF Grant	40 00	13,829 32
Check	2/16/2009	1257	Murphys Community Club	Grant 024	CCF Funds:CCF Grant	114 50	13 943 82
Check	2/16/2009	1258	Ostendell	Grant 025 & 26	CCF Funds:CCF Grant	69 50	14,013.32
Check	2/16/2009	1259	Writers Unlimited	Grant 028	CCF Funds:CCF Grant	38 00	14,051.32
Check	2/16/2009	1260	Soroptomist Club of Calaveras	Grant 027 + 1/3 of profit	CCF Funds:CCF Grant	1,449 05	15,500.37
Check	2/16/2009	1261	Mind Matters	To close fund	Donor Advised Funds:Mind Matters	5 935 48	21,435 85
Check	2/16/2009	1262	Calaveras Children's Dental Project	Grant	CCF Funds:CCF Grant	3,675 00	25,110 85
Check	2/16/2009	1265	Safe Passage	Grant 029	CCF Funds:CCF Grant	0 00	25,110 85
Check	3/2/2009	1266	Juvenile Justice Commission	Grant	CCF Funds CCF Grant	1,000 00	26,110 85
Check	3/5/2009	1268	Soroptomist Club of Calaveras	Grant	Donor Advised Funds:Patrick J Kellet Fund	2,000 00	28,110 85
Check	3/23/2009	1272	Marlow, Brianna	Scholarship	Scholarship Funds:39th District Ag Assn	1,000 00	29,110 85
Check	3/23/2009	1273	Fischer, Anastasia	Scholarship	Scholarship Funds:39th District Ag Assn	600 00	29,710.85
Check	4/15/2009	1277	Angels Food market	Calaveras Cancer Support Xmas Party	Donor Advised Funds:Calaveras Cancer Support Gr ..	188.26	29,909 11
Check	6/16/2009	511	Ashley Maynard	Scholarship	Scholarship Funds:C/H Scholarship	500 00	30,409 11
Check	6/22/2009	1291	Tuff Shed, Inc	Shed	Fiscal Sponsorships:Murphys Senior Center	3,988 90	34,398 01
Check	7/2/2009	1296	Home Depot	Window Coverings	Fiscal Sponsorships:Murphys Senior Center	1,531 87	35,929 88
Check	7/2/2009	1297	Dallas Midwest Co	Tables	Fiscal Sponsorships:Murphys Senior Center	1,443 20	37,373 08
Check	7/2/2009	1298	Home Fabrics	Table Coverings	Fiscal Sponsorships:Murphys Senior Center	69 19	37,442.27
Check	7/10/2009	1302	U S Post Office	Stamps	Fiscal Sponsorships:Murphys Senior Center	88 00	37,530.27
Check	7/10/2009	1303	NIAC-Incurance	Insurance for D&O/GL	Fiscal Sponsorships:Murphys Senior Center	1,313 68	38,843 95
Check	7/10/2009	1300	Calaveras Children's Dental Project	Grant-Childrens Dental Project	CCF Funds:CCF Grant	3 675 00	42,518 95
Check	7/17/2009	1308	Moore, Holly	Scholarship	Scholarship Funds:39th District Ag Assn	600 00	43,118.95
Check	7/17/2009	1307	Finch, Megan	Scholarship	Scholarship Funds.39th District Ag Assn	100 00	43,218 95
Check	7/17/2009	1308	Bibee, David	Scholarship	Scholarship Funds.AC Cent Rotary Scholarship	500 00	43,718 95
Check	7/17/2009	1309	Perrano, Mana	Grant-J T Memorial	CCF Funds:CCF Grant	300 00	44,018 95
Check	7/17/2009	1310	Stewart, Janet	Art Supplies	Fiscal Sponsorships Murphys Senior Center	100 00	44,118 95
Check	7/17/2009	1311	Staples	Tables	Fiscal Sponsorships:Murphys Senior Center	542 10	44,661.05
Check	7/17/2009	1312	U S Post Office	Stamps	Fiscal Sponsorships:Murphys Senior Center	44 00	44,705 05
Check	7/23/2009	1313	Pacific States Bank	Cash for lunch program	Fiscal Sponsorships:Murphys Senior Center	50 00	44,755 05
Check	7/23/2009	1314	California Secretary of STate	Corporate Filing Fee	Fiscal Sponsorships:Murphys Senior Center	20.00	44,775 05
Check	7/23/2009	1315	Tuesday Morning	Chairs & Silverware	Fiscal Sponsorships Murphys Senior Center	305 16	45,080.21
Check	7/23/2009	1316	Wal-Mart	Papergoods for Nutrition Program	Fiscal Sponsorships Murphys Senior Center	0 00	45,080 21
Check	8/10/2009	1323	Malispinea, Mary	Contract Services	Fiscal Sponsorships Murphys Senior Center	75 00	45,155 21
Check	8/10/2009	1324	Gilmore, Karen	Contract Services	Fiscal Sponsorships Murphys Senior Center	25 00	45,180 21
Check	8/10/2009	1325	Anchor Prints	Banners	Fiscal Sponsorships:Murphys Senior Center	275.80	45,456 01
Check	8/10/2009	1326	Mohr, Margo	Site Coordinator	Fiscal Sponsorships:Murphys Senior Center	1,300 00	46,756 01
Check	9/1/2009	1328	U C Regents	Scholarship-Eve Apazgo	Scholarship Funds:C/H Scholarship	500 00	47,256 01
Check	9/1/2009	1332	AT&T	Telephone	Fiscal Sponsorships:Murphys Senior Center	340.52	47,598 53
Check	9/1/2009	1333	U C Regents	Scholarship-Alexandra Inslee	Scholarship Funds:C/H Scholarship	500 00	48,096 53
Check	9/14/2009	1337	Faith Lutheran Church	Consultants	Fiscal Sponsorships Murphys Senior Center	2,166 48	50,263 01
Check	9/14/2009	1338	AT&T	Telephone	Fiscal Sponsorships Murphys Senior Center	82 77	50,345 78
Check	9/14/2009	1339	McCutchan, Pat	Site Coordinator	Fiscal Sponsorships Murphys Senior Center	50 00	50,395 78
Check	9/14/2009	1340	Malispinea, Mary	Contract Services	Fiscal Sponsorships Murphys Senior Center	75 00	50,470 78
Check	9/14/2009	1341	Gilmore, Karen	Site Coordinator	Fiscal Sponsorships:Murphys Senior Center	50 00	50,520 78
Check	9/14/2009	1342	Plowright, Cindy	Site Coordinator	Fiscal Sponsorships:Murphys Senior Center	100.00	50,620 78
Check	9/14/2009	1343	Cagliaro, Karen	Site Coordinator	Fiscal Sponsorships:Murphys Senior Center	12 50	50 633.28
Check	9/14/2009	1344	Mohr, Margo	Site Coordinator	Fiscal Sponsorships Murphys Senior Center	1,300 00	51,933 28
Check	9/14/2009	1345	Merritt, Doug	Reimbursement	Fiscal Sponsorships Murphys Senior Center	96 03	52,029 31
Check	9/14/2009	1346	Sierra Hills Market, Inc	Food	Fiscal Sponsorships Murphys Senior Center	145 83	52,174 94
Check	9/14/2009	1347	Wagner, Bob	Reimbursement	Fiscal Sponsorships Murphys Senior Center	25 05	52,199 99
Check	10/20/2009	1351	Scott's Distributing	Food for event	Donor Advised Funds:Calaveras Cancer Support Gr	110 40	52,310.39
Check	10/20/2009	1352	Angels Food market	Food for event	Donor Advised Funds:Calaveras Cancer Support Gr	340 81	52,651.20
Check	10/20/2009	1353	Stanford Hospital	B Zlotko	Donor Advised Funds:Calaveras Cancer Support Gr	88 51	52,739 71
Check	10/20/2009	1354	UPCH Medical Group	B Zlotko	Donor Advised Funds:Calaveras Cancer Support Gr	168 70	52,908 41
Check	10/20/2009	1355	Mohr, Margo	Site Coordinator	Fiscal Sponsorships Murphys Senior Center	1,000 00	53,908 41
Check	10/20/2009	1356	Malispinea, Mary	Contract Services	Fiscal Sponsorships Murphys Senior Center	50 00	53,958 41
Check	10/20/2009	1357	Gilmore Karen	Contract Services	Fiscal Sponsorships Murphys Senior Center	25 00	53,983 41
Check	10/20/2009	1358	Plowright, Cindy	Site Coordinator	Fiscal Sponsorships Murphys Senior Center	100 00	54,083 41
Check	10/20/2009	1359	Cagliaro, Karen	Site Coordinator	Fiscal Sponsorships:Murphys Senior Center	12 50	54,095 91
Check	10/20/2009	1360	Sierra Hills Market, Inc.	Food	Fiscal Sponsorships:Murphys Senior Center	521 09	54,617.00
Check	10/20/2009	1361	Wagner, Bob	Reimbursement	Fiscal Sponsorships:Murphys Senior Center	202 68	54,819 68
Check	11/6/2009	1367	Bandera Outfitters of California	T-shirts	Donor Advised Funds:Calaveras Cancer Support Gr	491.51	55,311 19
Check	11/6/2009	1368	Murphys Senior Center	Reimbursed Expenses	Fiscal Sponsorships Murphys Senior Center	3,372 51	58,683 70
Check	11/18/2009	514	Mokelumne Hill Community First	Frog #2	CCF Funds:CCF Grant	394 00	59,077 70
Check	11/18/2009	515	Calaveras Humane Society	Frog #3	CCF Funds CCF Grant	886 50	59,964 20
Check	11/18/2009	516	Buttercup Farms	Frog #4	CCF Funds:CCF Grant	295 50	60 259 70
Check	11/18/2009	517	Sierra Hope	Frog #7	CCF Funds:CCF Grant	3,053 50	63,313.20
Check	11/18/2009	518	Michelson Parents Club	Frog #8	CCF Funds:CCF Grant	985 00	64,298.20
Check	11/18/2009	519	Calaveras Humane Society	Frog #9	CCF Funds:CCF Grant	1,379 00	65,677.20
Check	11/18/2009	520	Arnold Rotary Charitable Fdn	Frog #11	CCF Funds:CCF Grant	985 00	66,662.20
Check	11/18/2009	521	Calaveras Arts Council	Frog #	CCF Funds CCF Grant	1,477 50	68,139 70
Check	11/23/2009	1371	Celestrial Strings	Harp Music	Donor Advised Funds:Calaveras Cancer Support Gr	150 00	68,289 70
Check	12/8/2009	1376	Bibee, David	Scholarship	Scholarship Funds.AC Cent Rotary Scholarship	500 00	68,789 70
Check	12/10/2009	1378	Mokelumne Hill Community First	Grant	CCF Funds:CCF Grant	1,000 00	69,789 70
Check	12/10/2009	1379	Calaveras County Arts Council	Grant	CCF Funds:CCF Grant	1,600 00	71,389 70
Check	12/10/2009	1380	San Andreas Community Cavanan..	Grant	CCF Funds:CCF Grant	3,000 00	74,389 70
Check	12/10/2009	1381	Calaveras Adult Tutoring	Grant	CCF Funds:CCF Grant	2,500 00	76,889 70
Check	12/10/2009	1382	Calaveras County Senior Center	Grant	CCF Funds:CCF Grant	3,444 00	80,333 70
Check	12/10/2009	1383	Calaveras Community Band	Grant	CCF Funds:CCF Grant	500 00	80,833 70
Check	12/10/2009	1384	Valley Springs Community Arts	Grant	CCF Funds:CCF Grant	500 00	81,333 70
Check	12/10/2009	1385	Arts Council of NE Calaveras Cou ..	Grant	CCF Funds.CCF Grant	1,000 00	82,333 70
Check	12/10/2009	1386	Faces of Hope Charitable Fund	Grant	CCF Funds:CCF Grant	2,000 00	84,333 70
Check	12/10/2009	1387	Mother Lode Friends of Music	Grant	CCF Funds:CCF Grant	500 00	84,833 70
Check	12/10/2009	1388	Valley Springs Elementary School	Grant	CCF Funds:CCF Grant	730 00	85,583 70
Check	12/10/2009	1389	Calaveras County Office of Educo ..	Grant	CCF Funds:CCF Grant	2,000 00	87,583 70
Check	12/10/2009	1390	San Andreas Community Cornivel	Grant	CCF Funds:CCF Grant	300 00	87,883 70
Check	12/10/2009	1391	Michelson Elementary Education	Grant	CCF Funds:CCF Grant	570 00	88,433 70
Check	12/10/2009	1392	Soroptomist, International	Grant	CCF Funds:CCF Grant	2,000 00	90,433 70
Check	12/10/2009	1393	Volunteer Center of Calaveras Co	Grant	CCF Funds:CCF Grant	2,300 00	92,733 70
Check	12/10/2009	1395	Murphys Senior Center	Reimbursed Expenses	Fiscal Sponsorships Murphys Senior Center	1,842 97	94,576 67
Check	12/21/2009	1398	Habitat for Humanity	Grant	CCF Funds:CCF Grant	1,871.50	96,448 17
Check	12/21/2009	1397	Resource Connection Food Bank	Grant	CCF Funds:CCF Grant	1,500.00	97,948 17
Check	12/29/2009	1398	CSTARS'	Grant	CCF Funds:CCF Grant	500 00	98,448 17
Total Restricted G2s/Grants						98,448 17	98,448 17
TOTAL						98,448.17	98,448 17