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Return of Organization Exempt From Income Tax

OMB No 1545-0047

2011**Open to Public Inspection**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.

A For the 2011 calendar year, or tax year beginning January 1 , 2011, and ending December 31 , 20 11																									
B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2">C Name of organization Carrington Charitable Foundation, Inc</td> <td>D Employer identification number 27-2073758</td> </tr> <tr> <td colspan="2">Doing Business As Carrington Charitable Foundation</td> <td rowspan="3">E Telephone number 203 661-6186</td> </tr> <tr> <td>Number and street (or P O box if mail is not delivered to street address)</td> <td>Room/suite</td> </tr> <tr> <td colspan="2">1610 E. St. Andrew Place,</td> </tr> <tr> <td colspan="2">City or town, state or country, and ZIP + 4 Santa Ana, CA 92705</td> <td rowspan="2">G Gross receipts \$ 669,548</td> </tr> <tr> <td colspan="2">F Name and address of principal officer Louis J. Garday, Treasurer 9380 Bell Cross Place, Parker, CO 80138</td> </tr> <tr> <td colspan="2">I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () ◀ (Insert no) ☐ 4947(a)(1) or ☐ 527</td> <td> 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 ▶ </td> </tr> <tr> <td colspan="2">J Website: ▶ www.carringtoncf.org</td> <td></td> </tr> <tr> <td colspan="2">K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶</td> <td>L Year of formation 2010 M State of legal domicile CA</td> </tr> </table>	C Name of organization Carrington Charitable Foundation, Inc		D Employer identification number 27-2073758	Doing Business As Carrington Charitable Foundation		E Telephone number 203 661-6186	Number and street (or P O box if mail is not delivered to street address)	Room/suite	1610 E. St. Andrew Place,		City or town, state or country, and ZIP + 4 Santa Ana, CA 92705		G Gross receipts \$ 669,548	F Name and address of principal officer Louis J. Garday, Treasurer 9380 Bell Cross Place, Parker, CO 80138		I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () ◀ (Insert no) ☐ 4947(a)(1) or ☐ 527		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 ▶	J Website: ▶ www.carringtoncf.org			K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶		L Year of formation 2010 M State of legal domicile CA
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Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: CCF's mission is to provide a platform for the employees within the family of Carrington companies to support recognized charitable organizations presented to the foundation by Carrington employees as worthy of both financial and volunteer support in an effort to make a difference in the communities that we both work and live within. Significant was 1st annual golf classic contributing \$357,350 to Veterans Air Command 501(c)3		
	2	Check this box ☐ 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	4
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	4
	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	0
	6	Total number of volunteers (estimate if necessary)	6	500
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	None
b	Net unrelated business taxable income from Form 990-E, line 34	7b	N/A	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	121,560	669,546
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		2
	11	Other revenue (Part VIII, column (A), lines 5, 6, 8c, 9c, 10c, and 11e)		
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	121,560	669,548
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	25,000	362,350
	14	Benefits paid to or for members (Part IX, column (A), line 4)	None	None
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	None	None
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	None	None
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,061	11,034
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)		
19	Revenue less expenses. Subtract line 18 from line 12	95,499	296,164	
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	95,499	391,760
	21	Total liabilities (Part X, line 26)	0	97
	22	Net assets or fund balances. Subtract line 21 from line 20	95,499	391,663

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		Date		
	Louis J. Garday, CPA - Treasurer	8-14-2012		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	
	Firm's name ▶	Firm's EIN ▶		
	Firm's address ▶	Phone no		
	May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☐ No			

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form **990** (2011)

SCANNED SEP 06 2012

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Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III ☐

- 1** Briefly describe the organization's mission:
 CCF's objective is to work together as a community of support for recognized charitable Organizations presented to CCF by the employees and associates of the Carrington Family of Companies. CCF will seek to raise funds for the organizations it supports and to solicit and facilitate the volunteer activities of more that 2.000 employees in the various Carrington affiliated companies.
- 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 organization's program service accomplishments for each of its three largest program services, as measured 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 \$ including grants of \$) (Revenue \$)

NO PROGRAM ACTIVITY FROM INCEPTION TO DATE. ALL EXPENSES OF THIS FOUNDATION ARE EITHER RELATED TO FUNRAISING OR ARE GRANTS OR EXPENSES SUPPORTING THE VOLUNTEER ACTIVITIES OF CARRINGTON EMPLOYEES TO/FOR QUALIFIED 501 (3)(C) PUBLIC CHARITEIS ALL NON-AFFILIATED WITH THE CARRINGTON CHARITABLE FOUNDATION

THE CARRINGTON FOUNDATION HAS NO PAID EMPLOYEES, ALL OFFICERS, DIRECTORS AND ACTIVE VOLUNTEERS ARE NON COMPENSATED IN ANY MANNER.

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 ►

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	☒	☐
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	☒	☐
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	☐	☒
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	☐	☒
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	☐	☒
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	☐	☒
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	☐	☒
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	☐	☒
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	☐	☒
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	☐	☒
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	☐	☒
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	☐	☒
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	☐	☒
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	☐	☒
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	☐	☒
f 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 (ASC 740)? If "Yes," complete Schedule D, Part X	☐	☒
12 a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	☒	☐
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	☐	☒
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	☐	☒
14 a Did the organization maintain an office, employees, or agents outside of the United States?	☐	☒
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	☐	☒
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, Parts II and IV	☐	☒
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, Parts III and IV	☐	☒
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 (see instructions)	☐	☒
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	☒	☐
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	☐	☒
20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	☐	☒
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	☐	☐

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21 ✓	
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>	22	✓
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>	23	✓
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>	24a	✓
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	✓
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	✓
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	✓
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>	25a	✓
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>	25b	✓
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>	26	✓
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	✓
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>	28a	✓
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	✓
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	✓
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29 ✓	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	✓
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	✓
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>	32	✓
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>	33	✓
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>	34	✓
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	✓
b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	✓
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>	36	✓
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	✓
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 ✓	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V



		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. 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	✓
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? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	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)?	4a	✓
b	If "Yes," enter the name of the foreign country: See instructions for 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	✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	✓
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	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	✓
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	
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	✓
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	✓
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	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	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	

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. Check if Schedule O contains a response to any question in this Part VI ☒

Section A. Governing Body and Management

		Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	1a 4		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b Enter the number of voting members included in line 1a, above, who are independent	1b 4		
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	✓	
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		✓
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		✓
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5		✓
6 Did the organization have members or stockholders?	6		✓
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		✓
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		✓
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a The governing body?	8a	✓	
b Each committee with authority to act on behalf of the governing body?	8b	✓	
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	9		✓

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

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a	✓
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a ✓	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a ✓	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b ✓	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c ✓	
13 Did the organization have a written whistleblower policy?	13	✓
14 Did the organization have a written document retention and destruction policy?	14 ✓	
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	
b Other officers or key employees of the organization	15b	
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	✓
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take 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, CT, IN, NY

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made 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 made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► Manuel A. Valencia CPA & Controller, 1610 E. St Andrew Place, Santa Ana, CA 949 517-7212

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response to any question in this Part VII ☒**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.

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
(1) Rosemary Rose - Chairperson & Director	2	✓						0	0	0
(2) Lorna Gordon - Director	1	✓						0	0	0
(3) Kimberly Nicolas - Director	1	✓						0	0	0
(4) Stephanie Rose - Director	1	✓						0	0	0
(5) Louis J. Garday, CPA - Treasurer	1			✓				0	0	0
(6) Richard Horowitz Esq - Secretary	1			✓				0	0	0
(7) Lori Grigg - Vice President	1			✓				0	0	0
(8) Manuel A. Valencia, CPA - Comptroller	1			✓				0	0	0
(9) Tami O'Neil	2				✓			0	0	0
(10)										
(11)										
(12)										
(13)										
(14)										

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
(15)										
(16)										
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		✓
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? <i>If "Yes," complete Schedule J for such individual</i>		✓
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		✓

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. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE	NONE	NONE

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

NONE

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	669,546			
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f				
	g	Noncash contributions included in lines 1a-1f: \$		104,414			
	h	Total. Add lines 1a-1f ▶		669,546			
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) ▶		2			2
	4	Income from investment of tax-exempt bond proceeds ▶					
	5	Royalties ▶					
		(i) Real	(ii) Personal				
	6a	Gross rents					
	b	Less: rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss) ▶					
	7a	(i) Securities	(ii) Other				
	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					
	b	Less: direct expenses b					
	c	Net income or (loss) from fundraising events ▶					583,838
	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							
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d ▶		0				
12	Total revenue. See instructions. ▶		669,548				

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).

Check if Schedule O contains a response to any question in this Part IX ☐

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 United States. See Part IV, line 21	362,350			
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States. 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 accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17	3,619			3,619
f Investment management fees				
g Other	30		30	
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy				
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	1,243		1,243	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a State or City Registration fees/tax	726		726	
b Credit Card Merchant Processing Fees	5,416			5,416
c				
d				
e All other expenses	6,142		726	5,416
25 Total functional expenses. Add lines 1 through 24e	373,384		1,999	9,035
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	95,499	1	379,258
	2 Savings and temporary cash investments		2	10,002
	3 Pledges and grants receivable, net		3	2,500
	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)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		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		
	b Less: accumulated depreciation	10b	10c	
	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		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	95,499	16	391,760	
Liabilities	17 Accounts payable and accrued expenses	0	17	97
	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 (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25		26	
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	95,499	27	391,663
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	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		33	391,663
34 Total liabilities and net assets/fund balances		34	391,760	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response to any question in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	669,548
2	Total expenses (must equal Part IX, column (A), line 25)	2	373,384
3	Revenue less expenses. Subtract line 2 from line 1	3	296,164
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	95,499
5	Other changes in net assets or fund balances (explain in Schedule O)	5	0
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	391,663

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII ☒

	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?		✓
b Were the organization's financial statements audited by an independent accountant?	✓	
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.	✓	
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 separate basis, consolidated 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?		✓
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		✓

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

2011

**Open to Public
Inspection**

Name of the organization

Carrington Charitable Foundation, Inc

Employer identification number

27-2073758

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?
- (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?

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		
- (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	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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 ☐						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2010 Schedule A, Part II, line 14	15	%
16a 33¹/₃% support test—2011. 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 ☐		
b 33¹/₃% support test—2010. 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 ☐		
17a 10%-facts-and-circumstances test—2011. 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—2010. 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)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.
If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")				121,660	669,546	791,206
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				121,660	669,546	791,206
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.)						791,206

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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				0	2	2
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				0	2	2
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)				0	2	2
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 2011 (line 8, column (f) divided by line 13, column (f))	15	100.00 %
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	100.00 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))	17	0 %
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	0 %
19a 33 1/3% support tests—2011. 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—2010. 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. Also complete this part for any additional information. (See instructions).

Except for an immaterial small amount of bank interest income, the organization's revenues are derived 100% from the employees, clients
friends and families of the over 2,000 employees and associates related to the Carrington Family of companies

**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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**
▶ **Attach to Form 990. ▶ See separate instructions.**

OMB No 1545-0047

2011

**Open to Public
Inspection**

Name of the organization

Carrington Charitable Foundation, Inc

Employer identification number

27-2073758

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? ☐ 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.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of an historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ 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, and not on a historic structure listed in the National Register	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 (ASC 958), 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 (ASC 958), 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 (ASC 958) 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.

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

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment %

b Permanent endowment %

c Temporarily restricted endowment %

The percentages in lines 2a, 2b, and 2c should equal 100%.

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

(i) unrelated organizations ☐ Yes ☐ No **3a(i)**

(ii) related organizations ☐ Yes ☐ No **3a(ii)**

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? ☐ Yes ☐ No **3b**

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

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

Description of property	(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				
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) -----		
(B) -----		
(C) -----		
(D) -----		
(E) -----		
(F) -----		
(G) -----		
(H) -----		
(I) -----		
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.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	

2. FIN 48 (ASC 740) 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 (ASC 740).

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	669,548
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	373,384
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	296,164
4	Net unrealized gains (losses) on investments	4	0
5	Donated services and use of facilities	5	481,223
6	Investment expenses	6	0
7	Prior period adjustments	7	None
8	Other (Describe in Part XIV.)	8	-481,223
9	Total adjustments (net). Add lines 4 through 8	9	None
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	296,164

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	1,159,771
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	481,223
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	481,223
3	Subtract line 2e from line 1	3	669,548
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	669,548

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

1	Total expenses and losses per audited financial statements	1	854,607
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	481,223
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	362,350
e	Add lines 2a through 2d	2e	843,573
3	Subtract line 2e from line 1	3	11,034
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	11,034

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 XI - Ln 8. The amount of services donated or goods and services paid for by third party sponsor, included in the Audited Report under

FAS 117, both in income and again as a deducted expense. Amount per Audited Statements but NOT reported on Form 990. \$481,223

Part XIII - L 1 (d). The Audited Statements include in the Expense Category the sum total of all 2011 Grants to other 501(c) 3 organizations.

The \$362,350 is reported elsewhere on Form 990 and thus removed from this reconciliation of Audited Statements to Tax Return F990

**SCHEDULE G
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

**Supplemental Information Regarding
Fundraising or Gaming Activities**

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization

Carrington Charitable Foundation, Inc.

Employer identification number

27-2073758

Part I

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- | | |
|---|---|
| a ☐ Mail solicitations | e ☐ Solicitation of non-government grants |
| b ☒ Internet and email solicitations | f ☐ Solicitation of government grants |
| c ☐ Phone solicitations | g ☒ Special fundraising events |
| d ☒ In-person solicitations | |
- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☒ No
- b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total ▶						

- 3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

California, Connecticut, Indiana, New York

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1 Golf Day & Dinner (event type)	(b) Event #2 (event type)	(c) Other events (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts	583,838			
	2 Less: Charitable contributions	350,000			
	3 Gross income (line 1 minus line 2)	233,838			
Direct Expenses	4 Cash prizes	none			
	5 Noncash prizes	Donated			
	6 Rent/facility costs	Donated			
	7 Food and beverages	Donated			
	8 Entertainment	None			
	9 Other direct expenses	5416			
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				(5416)
11 Net income summary. Combine line 3, column (d), and line 10 ▶				228,838	

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))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes _____ % ☐ No	☐ Yes _____ % ☐ No	☐ Yes _____ % ☐ 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 ▶				

9 Enter the state(s) in which the organization operates gaming activities: _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: _____

- | | | |
|-----------|---|---|
| 11 | Does the organization operate gaming activities with nonmembers? | ☐ Yes ☒ No |
| 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? | ☐ Yes ☒ No |
| 13 | Indicate the percentage of gaming activity operated in: | |
| a | The organization's facility | 13a % |
| b | An outside facility | 13b % |
| 14 | Enter the name and address of the person who prepares the organization's gaming/special events books and records: | |

Name ▶

Address ►

- 15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☒ No
- 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 ▶

Gaming manager compensation ▶ \$

Description of services provided ►

☐ 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? ☐ Yes ☐ No
- 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 \$

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

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

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

▶ Attach to Form 990.

Carrington Charitable Foundation, Inc.

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 the selection criteria used to award the grants or assistance?
- 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.
Part II can be duplicated 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
(1) Veterans Airlift Command 5775 Wayzata Blvd, St. Louis Park (2) MN 55416	20-4567769	501 (c)(3)	350,000			
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

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

Cat No 50055P

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Part III can be duplicated 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)
1				
2				
3				
4				
5				
6				
7				

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

The Carrington Charitable Foundation by charter only grants funds to charitable organizations who qualify under Section 501(c)(3)

of the IRC. We maintain evidence that the organization is current in all its filings with the IRC (As are we), and that its mission statement

and goals are consistent with those of our foundation.

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No 1545-0047

2011

**Open To Public
Inspection**

Name of the organization

Carrington Charitable Foundation, Inc

Employer identification number

27-2073758

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
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				
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	✓	7	3,529	Donor-silent auction Bid
19 Food inventory	✓	18	7,730	Donor-silent auction Bid
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (Vacation Packages)	✓	10	64,000	Donor-silent auction Bid
26 Other ► (Sports/Rec. Events)		7	25,830	Donor-silent auction Bid
27 Other ► (General Merchandi)		11	3,325	Donor-silent auction Bid
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 Acknowledgement	29	None	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?	30a		✓
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?	31	✓	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		✓
b	If "Yes," describe in Part II.			
33	If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Donors to the silent auction for various items estimated the fair market value for purposes of soliciting auction bids. In general, the items successfully sold at or above the donor estimate. Each donor received a report and acknowledgement of item donated and their estimated FMV, and a report as to the final auction price. Each auction bid winner received a receipt for the amount of their winning bid and an acknowledgement of the estimated FMV or the item they purchased.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2011

**Open to Public
Inspection**

Name of the organization

Carrington Charitable Foundation, Inc

Employer identification number

27-2073758

General Statement:

The Carrington Charitable Foundation, Inc ("CCF") is a creation born out of the Carrington Family of companies and those employees desiring a platform to provide community service and resources to other community 501(c)(3) organizations. Because of the broad solicitation and support (100%) comes from several thousand employees, clients, vendors and friends and families of the companies, and in communication with the IRS, it was determined to form the organization as a public charity under 501(c)(3).

All of the work performed for CCF is volunteer, on the personal time of officers, employees, and families, all associated with the various Carrington companies (a fact we are frankly proud of). There is no compensation to any individual or other entity for any matters, period. The Directors, officers and key personnel are all either directly or by marriage an officer, employee or somehow associated with those same Carrington companies. One of the Directors, is the sister in law of the Chairperson. Carrington companies regularly support CCF by bearing costs and expenses of minor overhead and other back office items to keep CCF moving forward. In addition to a broad base of direct contributions by Carrington employees, CCF in 2011 organized its first annual "Carrington Foundation Golf Classic", with a goal to raise monies in support of the Veterans Airlift Command, a 501 (c)(3) that provides air transport to members of the US armed services and their immediate families, active or retired, most of whom were severely wounded in the Iraq or Afghanistan Conflict. The Carrington employee and associate cadre, their clients, vendors and friends, all have a patriotic tenor to support our combat veterans and thus support the golf classic with an all volunteer staff and with donations to defray the expenses of reserving facilities and putting on a first class dinner for the donors and the veterans. The event, because of the volunteer and donor support, was an outstanding success, raising enough money to award the VAC \$350,000 for their mission.

CCF currently has no "programs" per se. In its formative years, it restricts its financial and volunteer support to only organizations chartered under IRC 501(c)(3), in part to eliminate any and all conflicts of interest or perception, real or imagined, that CCF in any way is directly affiliated with any other programs inside the Carrington companies.

Each of the Officers, Directors, key personnel, and volunteers, while employed in one for the various 40 Carrington companies is strictly governed by written rules and policies as to their conduct, potential conflicts of interest, privacy and other matters.

Of note is that the Carrington companies are primarily in the mortgage origination and servicing businesses nationwide.

Name of the organization

Carrington Charitable Foundation, Inc

Employer identification number

27-2073758

As such, the employee conduct is among other things regulated/bonded by various federal and state regulatory agencies, including the restrictive Gramm-Leach-Bliley Act. The conduct of all individuals associated with CCF therefore is an extension of the company's written protocols and conduct requirements for all matters associated with their employment, including volunteer time and activity when they are identified as associates of a Carrington Family company.

Lastly, CCF in its first year filed on form 990EZ. For 2011 and now in 2012 after filing form 990 and schedules, CCF makes that form available to all employees on the various company "intranets" and to any and all individuals requesting the form(s) from a Web site portal. A copy in final draft form, of the annual audit and this Form 990 are presented to all directors and officers at a regular monthly meeting of the Board of Directors for review and approval prior to filing.

CARRINGTON CHARITABLE FOUNDATION
FINANCIAL STATEMENTS
December 31, 2011

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Statements of Cash Flows	4
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INDEPENDENT AUDITORS' REPORT

To the Board of Directors
Carrington Charitable Foundation

We have audited the accompanying statements of financial position of Carrington Charitable Foundation (the "Foundation") as of December 31, 2011 and 2010, and the related statements of activities and changes in net assets and cash flows for the year ended December 31, 2011 and for the period from inception (March 9, 2010) to December 31, 2010. These financial statements are the responsibility of the Foundation's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatements. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the Foundation as of December 31, 2011 and 2010, and the changes in its net assets and its cash flows for the year ended December 31, 2011 and for the period from inception (March 9, 2010) to December 31, 2010 in conformity with generally accepted accounting principles.

Our audits were conducted for the purpose of forming an opinion on the basic financial statements taken as a whole. The accompanying supplementary information is presented for the purpose of additional analysis only and is not a required part of the basic financial statements of the Foundation. Such information has been subjected to the auditing procedures applied in the audits of the basic financial statements and, in our opinion, is fairly stated in all material respects in relation to the financial statements taken as a whole.

A handwritten signature in black ink that reads "Squar Milner Peterson Miranda & Williamson, LLP". The signature is written in a cursive, flowing style.

Newport Beach, California
August 8, 2012

SQUAR, MILNER, PETERSON, MIRANDA & WILLIAMSON, LLP
Certified Public Accountants, Chartered Accountants, Securities Analysts

4100 Newport Place Drive, Third Floor Newport Beach, CA 92660 Tel: 949-222-2999 Fax: 949-222-2989

Encino

Los Angeles

Newport Beach

San Diego

Cayman Islands

CARRINGTON CHARITABLE FOUNDATION
STATEMENTS OF FINANCIAL POSITION
December 31, 2011 and 2010

	<u>2011</u>	<u>2010</u>
ASSETS		
Assets		
Cash and cash equivalents	\$ 389,260	\$ 95,499
Pledge receivable	<u>2,500</u>	<u>—</u>
Total assets	<u>\$ 391,760</u>	<u>\$ 95,499</u>
LIABILITIES AND NET ASSETS		
Liabilities		
Accrued expenses	\$ 97	\$ —
Total liabilities	<u>97</u>	<u>—</u>
Net assets (undesignated and unrestricted)	<u>391,663</u>	<u>95,499</u>
Total liabilities and net assets	<u>\$ 391,760</u>	<u>\$ 95,499</u>

CARRINGTON CHARITABLE FOUNDATION
STATEMENTS OF ACTIVITIES AND CHANGES IN NET ASSETS
For the Year Ended December 31, 2011 and for the Period from
Inception (March 9, 2010) to December 31, 2010

	<u>2011</u>	<u>2010</u>
REVENUES		
Fundraising	\$ 811,026	\$ —
Contributed services	164,394	—
Auction proceeds	89,641	—
Contributions and donations	85,708	121,560
Other	2	—
Total revenues	<u>1,150,771</u>	<u>121,560</u>
EXPENSES		
Donations and grants	362,350	25,000
Fundraising activities	316,829	—
Allocated administrative	164,394	—
Other	11,034	1,061
Total expenses	<u>854,607</u>	<u>26,061</u>
EXCESS OF REVENUES OVER EXPENSES	<u>296,164</u>	<u>95,499</u>
CHANGE IN NET ASSETS	296,164	95,499
NET ASSETS AT BEGINNING OF YEAR	<u>95,499</u>	<u>—</u>
NET ASSETS AT END OF YEAR	<u>\$ 391,663</u>	<u>\$ 95,499</u>

CARRINGTON CHARITABLE FOUNDATION
STATEMENTS OF CASH FLOWS
For the Year Ended December 31, 2011 and for the Period from
Inception (March 9, 2010) to December 31, 2010

	<u>2011</u>	<u>2010</u>
CASH FLOWS FROM OPERATING ACTIVITIES		
Change in net assets	\$ 296,164	\$ 95,499
Adjustments to reconcile change in net assets to net cash provided by operating activities:		
Change in operating assets and liabilities:		
Pledge receivables	(2,500)	—
Accounts payable and accrued expenses	97	—
Net cash provided by operating activities	<u>293,761</u>	<u>95,499</u>
NET INCREASE IN CASH	293,761	95,499
CASH – beginning of period	<u>95,499</u>	<u>—</u>
CASH – end of period	<u><u>\$ 389,260</u></u>	<u><u>\$ 95,499</u></u>
SUPPLEMENTAL DISCLOSURE OF NONCASH ACTIVITIES:		
Contributed services	<u>\$ 164,394</u>	<u>\$ —</u>
Contributed fundraising expenses	<u><u>\$ 316,829</u></u>	<u><u>\$ —</u></u>

CARRINGTON CHARITABLE FOUNDATION
NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

1. ORGANIZATION

Organization

Carrington Charitable Foundation (the "Foundation" or "CCF") was incorporated in Delaware on March 9, 2010 and is exempt from federal and state income taxes under Section 501(a) of the Internal Revenue Code. The Foundation is a nonprofit organization classified under Section 501(c)(3) as a public charity and is registered in the states of California, New York, Indiana and Connecticut. The Foundation has also been classified as an entity that is not a private foundation within the meaning of Section 509(a) and qualifies for deductible contributions provided in Section 170(b)(1)(A)(vi). The financial support for the Foundation is derived through contributions from individuals, corporations and through fundraising activities.

The Foundation's objective is to partner with associates of the Carrington family of companies to reach out to those in need. CCF will support charities through the collective efforts of the CCF Board of Directors and associates of the Carrington family of companies in an effort to encourage associate participation and maximize contributions to those charities. CCF seeks to promote giving back to the community through generous support of the chosen charities which reflect the interests and passions of Carrington associates.

The Foundation's donations are primarily focused toward other 501(c)(3) organizations based on the interests of Carrington associates. All donations are determined through the combined efforts of the Foundation's Board of Directors and Advisory Committee, which is comprised of Carrington associates.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Method of Accounting

The accompanying financial statements have been prepared in accordance with accounting principles generally accepted in the United States of America ("GAAP").

Basis of Presentation

In order to accommodate the various alternatives for donors' distribution objectives, the Foundation's records are maintained for internal purposes in accordance with the principles of fund accounting. The Foundation reports gifts of each and other assets as restricted support if they are received with donor stipulations that limit the use of the donated assets. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net

CARRINGTON CHARITABLE FOUNDATION
NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

Basis of Presentation (continued)

assets released from restrictions. The Foundation follows authoritative guidance for financial statements for not-for-profit organizations. This guidance requires that net assets, revenues, gains, expenses and losses be classified as unrestricted, temporarily restricted and permanently restricted.

A summary of the net asset categories included in the accompanying financial statements is as follows:

Unrestricted – Unrestricted net assets include amounts that are available for support of the Foundation's operational and administrative functions, discretionary nonadvised amounts that are available to support community activities and charitable endeavors at the discretion of the Foundation's Board of Directors, and discretionary donor-advised amounts for which grant recommendations of the respective donors are accepted for consideration, subject to final approval by the Foundation's Board of Directors.

Temporarily Restricted – Temporarily restricted amounts represent contributed funds, subject to specific donor-imposed restrictions, contingent upon a specific performance of a future event or a specific passage of time before the Foundation may spend the funds. The balance includes contributions receivable, term endowments, deferred gifts in the form of trusts and annuities and unappropriated earnings on permanently restricted endowments.

Permanently Restricted – Permanently restricted net assets represent those assets contributed to the Foundation where the original dollar value is to remain in perpetuity as a permanent endowment of the Foundation.

As of December 31, 2011 and 2010, all of the Foundation's assets were unrestricted.

Use of Estimates

The preparation of financial statements in conformity with GAAP requires the Foundation to make estimates and assumptions that affect the amounts reported in the financial statements and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Cash and Cash Equivalents

The Foundation considers those investments that are highly liquid, readily convertible to cash and which mature within three months from the original date of purchase, to be cash equivalents. There were no cash equivalents as of December 31, 2011 or 2010. The estimated fair market value of cash is equal to its carrying amounts as of December 31, 2011 and 2010.

CARRINGTON CHARITABLE FOUNDATION
NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

Investments at Fair Market Value

Debt securities and marketable equity securities are measured at fair value based upon quoted market prices. Realized and unrealized gains and losses and interest and dividends on marketable securities are reported as investment income unless the income or loss is restricted by donor or law.

Concentrations of Credit Risk

The Foundation currently maintains substantially all of its cash with one major financial institution. At times, the cash balance may be in excess of the amounts insured by the Federal Deposit Insurance Corporation ("FDIC").

Financial instruments which potentially subject the Foundation to concentrations of credit risk consist solely of cash, although the Foundation's policy allows for investments, which would be managed within guidelines established by the Foundation's Board of Directors. This policy limits the amounts which may be invested in any one issue.

Support and Revenue Recognition

The Foundation records revenues and contributions on the accrual basis of accounting. Contributions are recognized as public support pursuant to the terms of the gifts. Unless specifically restricted by the donor, all contributions are considered available for the Foundation's discretionary use.

The Foundation typically holds one major fundraising event each year for which various businesses and individuals are solicited for donations of goods and/or services and participation.

Other major sources of revenue include Carrington employee and corporate donations.

Designated Donations and Functional Allocation of Expenses

The Foundation's Board of Directors approves specific donations, scholarships and grants.

The Foundation receives donated services from the Carrington family of companies for various administrative and corporate support services. The Foundation records these donated services at their fair market value as determined by management of the Foundation and the Carrington family of companies. Management of the Foundation believes these allocations to be reasonable.

The Carrington family of companies also provide support to the Foundation's fundraising activities through direct payment of fundraising expenses. These amounts are considered revenues and expenses of the Foundation.

CARRINGTON CHARITABLE FOUNDATION
NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

Designated Donations and Functional Allocation of Expenses (continued)

All other expenses of the Foundation are considered operating expenses incurred in fundraising, providing financial and other beneficial support to various charitable programs and in administering the Foundation.

Income Taxes

The Foundation is exempt from federal income and state franchise taxes under Section 501(c)(3) of the Internal Revenue Code and corresponding state revenue and taxation statutes. Accordingly, no provision for income taxes has been made. However, in accordance with GAAP, the Foundation is required to determine whether a tax position is more likely than not to be sustained upon examination by the applicable taxing authority, including resolution of any related appeals or litigation processes, based on the technical merits of the position. The tax benefit to be recognized is measured as the largest amount of benefit that is greater than fifty percent likely of being realized upon ultimate settlement. Derecognition of a tax benefit previously recognized could result in the Foundation recording a tax liability that would reduce net assets. The Foundation does not believe it has any unrecognized tax benefits at December 31, 2011 or 2010.

Subsequent Events

In connection with preparing the financial statements as of and for the year ended December 31, 2011, management evaluated subsequent events through August 8, 2012, which is the date that such financial statements were issued.

3. RELATED PARTY TRANSACTIONS

As discussed in Note 2, the Foundation receives certain administrative and corporate support from the Carrington family of companies in the form of personnel, office space and office equipment. Such amounts are allocated to the Foundation and recorded as contributed services, revenues, and allocated administrative expenses in the accompanying statements of activities and changes in net assets. During the period ended December 31, 2011, the Foundation was allocated \$164,394 from the Carrington family of companies for such services and expenses. The Carrington family of companies also provide support to the Foundation's fundraising activities through direct payment of fundraising expenses. During the period ended December 31, 2011, \$316,829 was recorded as Fundraising revenues and Fundraising activities in the accompanying statements of activities and changes in net assets.

OTHER FINANCIAL INFORMATION

CARRINGTON CHARITABLE FOUNDATION
DETAILS OF MAJOR FUNDRAISING ACTIVITIES
For the Year Ended December 31, 2011

	Golf Tournament	Auction
REVENUES		
Sponsor and fundraising	\$ 441,767	\$ —
Noncash donations	316,829	—
Auction proceeds	—	89,641
Donations	52,430	—
Total revenues	<u>811,026</u>	<u>89,641</u>
EXPENSES		
Facilities and catering	238,804	—
Supplies and promotional	44,109	—
Merchandise and gifts	26,465	—
Photography	7,451	—
Total expenses	<u>316,829</u>	<u>—</u>
NET FUNDS RAISED PER ACTIVITY	<u><u>\$ 494,197</u></u>	<u><u>\$ 89,641</u></u>

Lou Garday

From: reservations@nationalcar.com
Sent: Monday, August 13, 2012 2:54 PM
To: Lou Garday
Subject: National Car Rental Reservation Confirmation 675396151 for John Wayne Arpt



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[SPECIALS](#)
[EMERALD CLUB.](#)

Louis J Garday
 Emerald ID: 578325926

Your confirmation number is: 675396151

Reserved rate reflects the pick up date and time, return date and time, and car class quoted at time of reservation
 Any changes to the reservation may affect the rates quoted herein

Your level of service is Counter. Please proceed to the rental counter.

In order to use the counter bypass service for Emerald Club, you must complete your profile information with
 Personal Info, Credit Card & Coverage options.

If you need to make a change to this reservation, please use your reservation number as a reference.

Confirmation # 675396151
 Status: Booked



R 5 0 6 7 5 3 9 6 1 5 1



National Car Rental is located on the lower level of the parking garage across from baggage claim.

Emerald Club Members:

- Proceed to the Emerald Club area to obtain your rental agreement and vehicle keys

All other National customers:

- Please proceed to the counter to obtain your rental agreement.

Directions to our location:

- Exit Macarthur Blvd

- Enter airport and follow signs to car rental return

Reservation Information

Name: Louis J Garday
E-mail: lou.garday@carringtoncap.com
Vehicle Type: Midsize - 2 or 4-Door/Automatic/Air - Toyota Corolla Or Similar

Pickup Information Aisle & Executive Service

Location: John Wayne Arpt (SNAT01)
Date & Time: Monday, August 20, 2012 @ 10 30 PM
Address: 19051 Airport Way North
 Santa Ana, CA 92707
Phone: (888)826-6890 ext MAIN
Fax: (949)852-0149
Hours: Sun-Sat 05:30 am - 11:00 pm

Dropoff Information Aisle & Executive Service

Location: John Wayne Arpt (SNAT01)
Date & Time: Friday, August 24, 2012 @ 01:00 PM

Rate Information

Item:	Prices				
	(USD)				
Car Class: Midsize 2 or 4-Door/Automatic/Air					
Rates:					
Time & distance	4	DAY	@	\$59.80	\$239.20
Time & distance	0	HOUR	@	\$29.90	\$0.00
No charge distance	0	DISTANCE	@	\$0.00	\$0.00
Guaranteed Base Rate	Included				
(4) Additional Driver	Included				
Unlimited Miles	Included				
Sub total.....	\$239.20				
Freq Traveler Surcharge	\$2.50				
Surcharges:					
Concession Fee Recovery 11.11 Pct	\$27.32				
Tourism Fee 2.85 Pct	\$6.82				
Veh License Recovery 1.06/day	\$4.24				
Taxes:					
Sales Tax (7.750%)	\$20.66				

Total Estimate.....\$300.74
 (Country of Residence: US) (USD)
 Approximate Estimated Conversion: \$300.74

Total may vary slightly at time of rental based on the election of prepaid gas, optional coverage items or changes in taxes, surcharges and fees

Click below to View, Modify or Cancel your Reservation using the Web site

<http://www.nationalcar.com/index.do?>

[action=resFetch.do&resNumber=675396151&lastName=Garday&pickUpMonthYr=AUG-2012&pickUpDay=20](http://www.nationalcar.com/index.do?action=resFetch.do&resNumber=675396151&lastName=Garday&pickUpMonthYr=AUG-2012&pickUpDay=20)

Please note that if you experience any problems with the link, you can visit <http://www.nationalcar.com> and click on 'Existing Reservations' from the home page, or you can call 1-800-CAR-RENT.

Important Policy Information All renters and additional drivers must meet the minimum age requirements for the renting location. A major credit card or debit card and a valid driver's license both in the name of the renter will be required at the time of rental. Debit and check cards, considered to be any non-credit card bearing the VISA or MasterCard logo (except for gift/prepaid cards) may only be used in conjunction with proof of round trip ticket (airline, cruise ship and the like). Without proof of roundtrip ticket, debit or check cards are only accepted on return. Any other non-credit card without the VISA or MasterCard logo is not accepted. Customers planning to rent with cash must bring the following documentation to the rental counter: valid Driver's License, a return ticket from an airline, cruise ship or train, verifiable employment, verifiable home phone number or a current verifiable gas or electric bill with the renter's name and address. All documentation must be in the renter's name. A cash deposit will be required in addition to the cost of rental. City Exception: Renting with Cash. This location will not accept cash on rentals. All payments must be made on a credit card, or debit card with proof of roundtrip ticket. Renters may use cash as form of final payment upon return of the vehicle. Loss Damage Waiver (LDW) Optional Loss Damage Waiver (LDW) for this branch ranges between \$8.99 and \$26.99 per day, depending on the vehicle rented. - LDW is offered at the time of rental for an additional daily charge. If the renter accepts LDW, National waives or reduces the renter's responsibility for loss of, or damage to, the rental vehicle (including but not limited to towing, storage, impound and administrative fees subject to the terms and conditions of the rental agreement and applicable laws. LDW is not Insurance. The purchase of LDW is optional and not required to rent a car. The protection provided by LDW may duplicate the renter's existing coverage. National is not qualified to evaluate the adequacy of the renter's existing coverage, therefore the renter should examine his or her credit card protections, automobile insurance policies or other sources of coverage that may duplicate the protection provided by law.

© National Car Rental, 600 Corporate Park Drive, St. Louis, MO 63105

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Summary Info**Name:** Louis J Garday**Tier:** EXECUTIVE**Expiration Date:** 28-FEB-2013**Reward:** Miles / Points**Your Car****Midsize**
2 or 4-Door/Automatic/Air**Toyota Corolla**
or similar**Pickup:** **Aisle & Executive Service**John Wayne Arpt (SNAT01)
19051 Airport Way North
Santa Ana, CA 92707
US
Monday, August 20, 2012
10 30 PM**Dropoff:** **Aisle & Executive Service**John Wayne Arpt (SNAT01)
19051 Airport Way North
Santa Ana, CA 92707
US
Friday, August 24, 2012
1 00 PM**Estimated Total = \$300.74 USD****Pickup Location** **Aisle & Executive Service**John Wayne Arpt
19051 Airport Way North
Santa Ana, CA 92707
US**Phone:** (888)826-6890 ext:MAIN
(949)852-0403 ext:LOCAL**Fax:** (949)852-0149**Hours:** Sun-Sat 05 30 am 11 00 pm

Send copy of Itinerary to:

Email Address**Your National Car Rental reservation has been confirmed**
Confirmation # 675396151**Status:** Confirmed

R S 0 6 7 5 3 9 6 1 5 1

Reservation Details**Name** LOUIS J GARDAY
Email lou.garday@carringtoncap.com
Address
Emerald Club # 578325926
Level Of Service Counter

In order to use the counter bypass service for Emerald Club, you must complete your profile information with Personal Info, Credit Card & Coverage options.

Frequent Traveler Program **Frequent Traveler Number**
UNITED AIRLINES MILEAGE PLUS 3028743482**Base Rate - Midsize (USD)**(4) Time & Distance (\$59 80/Day) **\$239 20****Inclusive Rate Items**Guaranteed Base Rate **Included**(4) Additional Driver **Included**Unlimited Miles **Included***For information on coverage products, ex Loss Damage Waiver(LDW) [click here](#)***Subtotal \$239.20****Primary Driver ?****Name** LOUIS J GARDAY
Driver's License Number XXXXX0503**Additional Items ?**Freq Traveler Surcharge **\$2 50****Subtotal \$2.50****Taxes, Surcharges and Fees ?**Concession Fee Recovery 11 11 Pct **\$27 32**Tourism Fee 2 85 Pct **\$6.82**Veh License Recovery 1 06/day **\$4.24**Sales Tax (7.750%) **\$20.66****Subtotal \$59.04****Estimated Total***Estimated charges are confirmed based on the information you have provided, only taxes, fees, and surcharges are subject to change***\$300.74****How to Find Us:**

National Car Rental is located on the lower level of the parking garage across from baggage claim

Emerald Club Members:

- Proceed to the Emerald Club area to obtain your rental agreement and vehicle keys

All other National customers:

- Please proceed to the counter to obtain your rental agreement

Directions to our location:

[SEND NOW](#)

- Exit Macarthur Blvd
- Enter airport and follow signs to car rental return

>> Print your reservation confirmation

Policy Information

Important Policy Information: All renters and additional drivers must meet the minimum age requirements for the renting location. A major credit card or debit card and a valid driver's license both in the name of the renter will be required at the time of rental. Debit and check cards, considered to be any non-credit card bearing the VISA or MasterCard logo (except for gift/prepaid cards) may only be used in conjunction with proof of round trip ticket (airline, cruise ship and the like). Without proof of roundtrip ticket, debit or check cards are only accepted on return. Any other non-credit card without the VISA or MasterCard logo is not accepted. Customers planning to rent with cash must bring the following documentation to the rental counter: valid Driver's License, a return ticket from an airline, cruise ship or train, verifiable employment, verifiable home phone number or a current verifiable gas or electric bill with the renter's name and address. All documentation must be in the renter's name. A cash deposit will be required in addition to the cost of rental.

City Exception:

Renting with Cash: This location will not accept cash on rentals. All payments must be made on a credit card, or debit card with proof of roundtrip ticket. Customers may use cash as form of final payment upon return of the vehicle.

Loss Damage Waiver (LDW)

Optional Loss Damage Waiver (LDW) for this branch ranges between \$8.99 and \$26.99 per day, depending on the vehicle rented. - LDW is offered at the time of rental for an additional daily charge. If the renter accepts LDW, National waives or reduces the renter's responsibility for loss of, or damage to, the rental vehicle (including but not limited to towing, storage, impound and administrative fees subject to the terms and conditions of the rental agreement and applicable laws. LDW is not Insurance. The purchase of LDW is optional and not required to rent a car. The protection provided by LDW may duplicate the renter's existing coverage. National is not qualified to evaluate the adequacy of the renter's existing coverage; therefore the renter should examine his or her credit card protections, automobile insurance policies or other sources of coverage that may duplicate the protection provided by law.

Need technical help? Please call 1-888-501-9010.

Summary Info**Name:** LOUIS J GARDAY**Tier:** EXECUTIVE**Expiration Date:** 28-FEB-2013**Reward:** Miles / Points**Your Car****Midsize**
2 or 4-Door/Automatic/Air**Toyota Corolla**
or similar**EDIT CAR SELECTION****Pickup:** **Aisle & Executive Service**John Wayne Arpt (SNAT01)
19051 Airport Way North
Santa Ana, CA 92707
USMonday, August 20, 2012
10:30 PM**Dropoff:** **Aisle & Executive Service**John Wayne Arpt (SNAT01)
19051 Airport Way North
Santa Ana, CA 92707
USFriday, August 24, 2012
1 00 PM**EDIT TRIP INFORMATION****Estimated Total = \$300.74 USD****Need more information?** Click on individual items for details or the ? icon for details by section**Step 3: Select rental options and calculate total****Base Rate - Midsize (USD)**(4) Time & Distance (\$59 80/Day) **\$239 20****Inclusive Rate Items**Guaranteed Base Rate **Included**(4) Additional Driver **Included**Unlimited Miles **Included***For information on coverage products, ex Loss Damage Waiver(LDW) [click here](#)***Subtotal \$239.20****Primary Driver ?**☒ Of age primary driver (25 or older)☐ Underage primary driver (age 21 - 24) (\$25 00/day) **\$0.00***For information on age requirements and exceptions, [click here](#)***Subtotal \$0.00****Additional Drivers ?***Rentals that require Additional Drivers must be completed at the National counter, or via Save Time***Additional Items ?**☐ Booster Seat (\$9 99/Day, \$60 00/Max Amt) **\$0.00**☐ Greenhouse Gas Emissions Offset (\$1 25/Rental) **\$0 00**☐ Infant Seat (\$9 99/Day, \$60 00/Max Amt) **\$0 00**☐ Child/toddler Seat (\$9 99/Day, \$60.00/Max Amt) **\$0.00**☐ Gps Navigation Device (\$11 99/Day, \$69.65/Week, \$179 99/Max Amt) **\$0 00**☐ Loss Damage Waiver Full (\$8.99/Day) **\$0 00**☐ Personal Accident Insurance/personone (\$5.50/Day) **\$0 00**☐ Roadside Plus (\$4 99/Day) **\$0.00**☐ Supplemental Liability Insurance (\$13 74/Day) **\$0 00**☐ Upfront Fuel (\$3.75/gal) **\$0 00***The total upfront fuel charge reflected is an estimate based on the current prices and average tank size for the car class reserved
This charge may change at time of rental*Freq Traveler Surcharge **\$2.50****Subtotal \$2.50****Taxes, Surcharges and Fees ?**Concession Fee Recovery 11 11 Pct **\$27.32**Tourism Fee 2 85 Pct **\$6.82**Veh License Recovery 1 06/day **\$4.24**Sales Tax (7 750%) **\$20 66****Subtotal \$59.04****Calculate Estimated Total****CALCULATE****Estimated Total \$300.74***Estimated charges are confirmed based on the information you have provided, only taxes, fees, and surcharges are subject to change***Policy Information****Important Policy Information:** All renters and additional drivers must meet age requirements for the renting location. A major credit card or debit card driver's license both in the name of the renter will be required at the time of check cards, considered to be any non-credit card bearing the VISA or MasterCard (except for gift/prepaid cards) may only be used in conjunction with proof of payment (airline, cruise ship and the like). Without proof of roundtrip ticket, debit or only accepted on return. Any other non-credit card without the VISA or MasterCard is not accepted. Customers planning to rent with cash must bring the following

to the rental counter: valid Driver's License, a return ticket from an airline, train, verifiable employment, verifiable home phone number or a current electric bill with the renter's name and address. All documentation must be in the renter's name. A cash deposit will be required in addition to the cost of rental.

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Personal Information**First Name**

LOUIS J

Last Name

GARDAY

Driver's License Number

XXXXXX0503

Email ***Emerald Club #**

578325926

Confirm Email *

lou.garday@carringtoncap.cor



Your information is secure. View our [privacy policy](#).

Payment Information**Personalized Card Description**

AX-3008

Credit Card Number

*****3008

In order to use the counter bypass service for Emerald Club, you must complete your profile information with Personal Info, Credit Card & Coverage options. Complete your Reservation.

Your reservation request will be cancelled in 30 minutes if you do not return the car.

Need technical help? Please call 1-888-501-9010.