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Form **990**Department of the Treasury  
Internal Revenue Service**Return of Organization Exempt From Income Tax**Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung  
benefit trust or private foundation)

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

OMB No 1545-0047

**2011**Open to Public  
Inspection**A** For the 2011 calendar year, or tax year beginning **JUL 1, 2011** and ending **JUN 30, 2012****B** Check if  
applicable

- ☐ Address  
change
- ☐ Name  
change
- ☐ Initial  
return
- ☐ Termin-  
ated
- ☐ Amend-  
ed return
- ☐ Applica-  
tion  
pending

**C** Name of organization**SHASTA REGIONAL COMMUNITY FOUNDATION**

Doing Business As

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

**1335 ARBORETUM DRIVE, SUITE B**

Room/suite

City or town, state or country, and ZIP + 4

**REDDING, CA 96003****F** Name and address of principal officer: **KATHY JOHNSON****1335 ARBORETUM DRIVE, STE B, REDDING, CA 96****D** Employer identification number**68-0242276****E** Telephone number**(530) 244-1219****G** Gross receipts \$**7,849,073.****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 ▶**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c)( ) (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: **SHASTARCF.ORG****K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation: **2000****M** State of legal domicile: **CA****Part I Summary**

Activities & Governance		Revenue		Expenses		Net Assets or Fund Balances	
1 Briefly describe the organization's mission or most significant activities: <b>THE FOUNDATION EXISTS TO BUILD RESOURCES TO MEET NEEDS IN SHASTA AND SISKIYOU COUNTIES THROUGH</b>							
2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.							
3 Number of voting members of the governing body (Part VI, line 1a)		3		15			
4 Number of independent voting members of the governing body (Part VI, line 1b)		4		14			
5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)		5		5			
6 Total number of volunteers (estimate if necessary)		6		200			
7a Total unrelated business revenue from Part VIII, column (C), line 12		7a		0.			
b Net unrelated business taxable income from Form 990-T, line 34		7b		0.			
8 Contributions and grants (Part VIII, line 1h)		8		3,842,617.		6,588,667.	
9 Program service revenue (Part VIII, line 2g)		9		223,254.		254,546.	
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		10		164,884.		193,987.	
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		11		395,127.		429,351.	
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		12		4,625,882.		7,466,551.	
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		13		1,439,289.		1,460,171.	
14 Benefits paid to or for members (Part IX, column (A), line 4)		14		0.		0.	
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		15		250,001.		277,281.	
16a Professional fundraising fees (Part IX, column (A), line 11e)		16a		0.		0.	
b Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>175,703.</b>		16b					
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		17		388,217.		448,541.	
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		18		2,077,507.		2,185,993.	
19 Revenue less expenses. Subtract line 18 from line 12		19		2,548,375.		5,280,558.	
20 Total assets (Part X, line 16)		20		14,033,235.		19,058,625.	
21 Total liabilities (Part X, line 26)		21		347,846.		137,777.	
22 Net assets or fund balances. Subtract line 21 from line 20		22		13,685,389.		18,920,848.	

**Part II Signature Block**

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

**Sign Here** ▶ Signature of officer: *Kathy Johnson* Date: **10-22-12**

▶ **KATHY JOHNSON, CEO**

Type or print name and title

**Paid Preparer Use Only**

Print/Type preparer's name: **HOLLY SALISBURY** Preparer's signature: *Holly Salisbury* Date: **OCT 22 2012** Check ☐ self-employed PTIN: **P00836978**

Firm's name: **MATSON AND ISOM** Firm's EIN: **94-2222122**

Firm's address: **1726 COURT STREET** Phone no.: **(530) 241-2515**

**REDDING, CA 96001**

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes☐ No

SCANNED NOV 28 2012

**Part III Statement of Program Service Accomplishments**

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

☒ X**1** Briefly describe the organization's mission:

**THE FOUNDATION EXISTS TO BUILD RESOURCES TO MEET NEEDS IN SHASTA AND SISKIYOU COUNTIES THROUGH PHILANTHROPY, EDUCATION AND INFORMATION.**

**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 \$ **1,589,761.** including grants of \$ **1,460,170.**) (Revenue \$ \_\_\_\_\_)  
**SERVING ALL OF SHASTA AND SISKIYOU COUNTIES, THE SHASTA REGIONAL COMMUNITY FOUNDATION HAS MORE THAN 100 PHILANTHROPIC FUNDS AND MANAGES ASSETS OF MORE THAN 19 MILLION DOLLARS. THE COMMUNITY FOUNDATION PROVIDES GRANTS, SCHOLARSHIPS AND LOANS TO ADDRESS LOCAL NEEDS. THE COMMUNITY FOUNDATION SERVES AS A REGIONAL CENTER FOR PHILANTHROPY PROVIDING DONORS SIMPLE AND EFFECTIVE WAYS TO GIVE LOCALLY.**

**4b** (Code \_\_\_\_\_) (Expenses \$ **60,842.** including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)  
**LEADERSHIP REDDING - THIS PROGRAM CONSISTS OF ONE YEAR PROGRAMS OF DAY-LONG SESSIONS INTENDED TO PROVIDE ITS PARTICIPANTS WITH INFORMATION AND OPPORTUNITIES TO PROMOTE COMMUNITY INVOLVEMENT.**

**4c** (Code \_\_\_\_\_) (Expenses \$ **46,965.** including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)  
**WOMEN'S FUND - THIS PROGRAM SUPPORTS THE EFFORTS AND ORGANIZATIONS THAT IMPROVE THE LIVES OF WOMEN, CHILDREN AND THEIR FAMILIES IN THE GREATER REDDING AREA.**

**4d** Other program services (Describe in Schedule O)(Expenses \$ **80,715.** including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)**4e** Total program service expenses **1,778,283.**

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	<b>1</b> X	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	<b>2</b> X	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	<b>3</b>	X
<b>4</b> <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	<b>4</b>	X
<b>5</b> 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? <i>If "Yes," complete Schedule C, Part III</i>	<b>5</b>	X
<b>6</b> 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? <i>If "Yes," complete Schedule D, Part I</i>	<b>6</b> X	
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	<b>7</b>	X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	<b>8</b>	X
<b>9</b> Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	<b>9</b>	X
<b>10</b> Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	<b>10</b> X	
<b>11</b> 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.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	<b>11a</b> X	
<b>b</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? <i>If "Yes," complete Schedule D, Part VII</i>	<b>11b</b>	X
<b>c</b> Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	<b>11c</b>	X
<b>d</b> Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	<b>11d</b> X	
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	<b>11e</b> X	
<b>f</b> 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)? <i>If "Yes," complete Schedule D, Part X</i>	<b>11f</b> X	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	<b>12a</b> X	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>	<b>12b</b>	X
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	<b>13</b>	X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?	<b>14a</b>	X
<b>b</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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	<b>14b</b>	X
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>	<b>15</b>	X
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>	<b>16</b>	X
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	<b>17</b>	X
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	<b>18</b>	X
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	<b>19</b>	X
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	<b>20a</b>	X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<b>20b</b>	

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>21</b> 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>	<b>21</b> X	
<b>22</b> 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>	<b>22</b> X	
<b>23</b> 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>	<b>23</b>	X
<b>24a</b> 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>	<b>24a</b>	X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	<b>24b</b>	
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	<b>24c</b>	
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	<b>24d</b>	
<b>25a</b> <b>Section 501(c)(3) and 501(c)(4) organizations.</b> 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>	<b>25a</b>	X
<b>b</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>	<b>25b</b>	X
<b>26</b> 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>	<b>26</b>	X
<b>27</b> 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>	<b>27</b>	X
<b>28</b> 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):		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	<b>28a</b>	X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	<b>28b</b>	X
<b>c</b> 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>	<b>28c</b>	X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	<b>29</b>	X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	<b>30</b>	X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	<b>31</b>	X
<b>32</b> 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>	<b>32</b>	X
<b>33</b> 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>	<b>33</b>	X
<b>34</b> 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>	<b>34</b> X	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)?	<b>35a</b>	X
<b>b</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>	<b>35b</b>	X
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	<b>36</b>	X
<b>37</b> 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>	<b>37</b>	X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	<b>38</b> X	

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

**Part V** Statements Regarding Other IRS Filings and Tax ComplianceCheck 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	12	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	5	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
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?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
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	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> 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	<b>Sponsoring organizations maintaining donor advised funds.</b>		
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	<b>Section 501(c)(7) organizations.</b> 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	<b>Section 501(c)(12) organizations.</b> 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	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> 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	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
a	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> 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	X
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
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year ..... <b>1a</b> <b>15</b> 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>b</b> Enter the number of voting members included in line 1a, above, who are independent ..... <b>1b</b> <b>14</b>		
<b>2</b> 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?	<b>2</b>	<b>X</b>
<b>3</b> 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?	<b>3</b>	<b>X</b>
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	<b>4</b>	<b>X</b>
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets?	<b>5</b>	<b>X</b>
<b>6</b> Did the organization have members or stockholders?	<b>6</b>	<b>X</b>
<b>7a</b> 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?	<b>7a</b>	<b>X</b>
<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7b</b>	<b>X</b>
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b> The governing body?	<b>8a</b>	<b>X</b>
<b>b</b> Each committee with authority to act on behalf of the governing body?	<b>8b</b>	<b>X</b>
<b>9</b> 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	<b>9</b>	<b>X</b>

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

	Yes	No
<b>10a</b> Did the organization have local chapters, branches, or affiliates?	<b>10a</b>	<b>X</b>
<b>b</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?	<b>10b</b>	
<b>11a</b> Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	<b>11a</b>	<b>X</b>
<b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b> Did the organization have a written conflict of interest policy? If "No," go to line 13	<b>12a</b>	<b>X</b>
<b>b</b> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<b>12b</b>	<b>X</b>
<b>c</b> Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	<b>12c</b>	<b>X</b>
<b>13</b> Did the organization have a written whistleblower policy?	<b>13</b>	<b>X</b>
<b>14</b> Did the organization have a written document retention and destruction policy?	<b>14</b>	<b>X</b>
<b>15</b> 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?		
<b>a</b> The organization's CEO, Executive Director, or top management official	<b>15a</b>	<b>X</b>
<b>b</b> Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	<b>15b</b>	<b>X</b>
<b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	<b>16a</b>	<b>X</b>
<b>b</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?	<b>16b</b>	

**Section C. Disclosure**

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

**18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (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: **KATHY JOHNSON - (503) 244-1219**  
**1335 ARBORETUM DRIVE, SUITE B, REDDING, CA 96003**

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Check 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) LARRY DAHL TREASURER	2.00	X		X				0.	0.	0.
(2) MARY RICKERT SECRETARY	2.00	X		X				0.	0.	0.
(3) MARK VEGH DIRECTOR	2.00	X						0.	0.	0.
(4) EVELYN JACOBS DIRECTOR	2.00	X						0.	0.	0.
(5) DEANNE PARKER DIRECTOR	2.00	X						0.	0.	0.
(6) KENDELL SEAMANS CHAIRMAN	2.00	X		X				0.	0.	0.
(7) JOSEPH TALLERICO VICE- CHAIRMAN	2.00	X		X				0.	0.	0.
(8) WILLIAM KOHN DIRECTOR	2.00	X						0.	0.	0.
(9) MARK FOSTER DIRECTOR	2.00	X						0.	0.	0.
(10) DORIAN AIELLO DIRECTOR	2.00	X						0.	0.	0.
(11) LEO GRAHAM DIRECTOR	2.00	X						0.	0.	0.
(12) BARBARA CROSS DIRECTOR	2.00	X						0.	0.	0.
(13) JIM ZAUHER DIRECTOR	2.00	X						0.	0.	0.
(14) JOAN FAVERO DIRECTOR	2.00	X						0.	0.	0.
(15) KATHY JOHNSON CEO	40.00			X				80,705.	0.	735.
(16) KERRY CARANCI INTERIM CEO	40.00			X				17,693.	0.	0.

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

(A) Name and title	(B) Average hours per week (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			
<b>1b Sub-total</b>								98,398.	0.	735.
<b>c Total from continuation sheets to Part VII, Section A</b>								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>								98,398.	0.	735.

**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 **0**

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

**Section B. Independent Contractors**

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

**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 **0**

**Part VIII Statement of Revenue**

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns	<b>1a</b>					
	<b>b</b> Membership dues	<b>1b</b>					
	<b>c</b> Fundraising events	<b>1c</b>					
	<b>d</b> Related organizations	<b>1d</b>					
	<b>e</b> Government grants (contributions)	<b>1e</b>					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	6,588,667.				
	<b>g</b> Noncash contributions included in lines 1a-1f \$						
	<b>h Total.</b> Add lines 1a-1f			6,588,667.			
<b>Program Service Revenue</b>	<b>2 a</b> <u>ADMINISTRATION FEES</u>	<b>Business Code</b>		251,733.	251,733.		
	<b>b</b> <u>OTHER FEES</u>			2,813.	2,813.		
	<b>c</b>						
	<b>d</b>						
	<b>e</b>						
	<b>f</b> All other program service revenue						
	<b>g Total.</b> Add lines 2a-2f			254,546.			
	<b>3</b> Investment income (including dividends, interest, and other similar amounts)			176,509.			176,509.
<b>4</b> Income from investment of tax-exempt bond proceeds							
<b>5</b> Royalties							
<b>Other Revenue</b>	<b>6 a</b> Gross rents	(i) Real	(ii) Personal				
	<b>b</b> Less: rental expenses						
	<b>c</b> Rental income or (loss)						
	<b>d</b> Net rental income or (loss)						
	<b>7 a</b> Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	<b>b</b> Less: cost or other basis and sales expenses						
	<b>c</b> Gain or (loss)						
	<b>d</b> Net gain or (loss)			17,478.	17,478.		
	<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	<b>a</b>					
	<b>b</b> Less: direct expenses	<b>b</b>					
	<b>c</b> Net income or (loss) from fundraising events						
	<b>9 a</b> Gross income from gaming activities See Part IV, line 19	<b>a</b>					
	<b>b</b> Less: direct expenses	<b>b</b>					
	<b>c</b> Net income or (loss) from gaming activities						
	<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>a</b>					
	<b>b</b> Less: cost of goods sold	<b>b</b>					
	<b>c</b> Net income or (loss) from sales of inventory						
	<b>Miscellaneous Revenue</b>			<b>Business Code</b>			
	<b>11 a</b> <u>CHNG IN VALUE REMNDR T</u>			429,351.	429,351.		
	<b>b</b>						
<b>c</b>							
<b>d</b> All other revenue							
<b>e Total.</b> Add lines 11a-11d			429,351.				
<b>12 Total revenue.</b> See instructions.			7,466,551.	701,375.	0.	176,509.	

**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	1,389,674.	1,389,674.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	70,497.	70,497.		
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	98,398.	19,680.	24,599.	54,119.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	140,252.	92,185.	34,813.	13,254.
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	18,370.	7,715.	9,185.	1,470.
10 Payroll taxes	20,261.	8,509.	10,131.	1,621.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	88,480.	22,120.	44,240.	22,120.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	2,299.	196.	2,103.	
12 Advertising and promotion	29,126.	14,141.	1,998.	12,987.
13 Office expenses	6,629.	2,717.	1,956.	1,956.
14 Information technology				
15 Royalties				
16 Occupancy	71,456.	17,864.	35,728.	17,864.
17 Travel	23,965.	11,845.	8,080.	4,040.
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	10,783.		10,783.	
23 Insurance	12,776.	4,235.	6,388.	2,153.
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 <b>CONTRACT SERVICES</b>	54,610.	13,741.	13,623.	27,246.
b <b>MISCELLANEOUS EXPENSE</b>	49,130.	41,111.	4,840.	3,179.
c <b>WORKSHOP EXPENSE</b>	31,764.	31,764.		
d <b>REPAIRS AND MAINTENANCE</b>	25,637.	6,409.	12,819.	6,409.
e All other expenses	41,886.	23,880.	10,721.	7,285.
25 Total functional expenses. Add lines 1 through 24e	2,185,993.	1,778,283.	232,007.	175,703.
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
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing		<b>1</b>	
	<b>2</b> Savings and temporary cash investments	2,866,141.	<b>2</b>	2,422,743.
	<b>3</b> Pledges and grants receivable, net	2,262,976.	<b>3</b>	5,667,784.
	<b>4</b> Accounts receivable, net		<b>4</b>	
	<b>5</b> Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		<b>5</b>	
	<b>6</b> 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)		<b>6</b>	
	<b>7</b> Notes and loans receivable, net	448,433.	<b>7</b>	436,044.
	<b>8</b> Inventories for sale or use		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges	5,041.	<b>9</b>	3,239.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	<b>10a</b> 104,743.		
	<b>b</b> Less: accumulated depreciation	<b>10b</b> 78,206.		
	<b>11</b> Investments - publicly traded securities	32,368.	<b>10c</b>	26,537.
	<b>12</b> Investments - other securities. See Part IV, line 11	6,902,417.	<b>11</b>	8,624,105.
	<b>13</b> Investments - program-related. See Part IV, line 11		<b>12</b>	
	<b>14</b> Intangible assets		<b>13</b>	
	<b>15</b> Other assets. See Part IV, line 11	1,515,859.	<b>14</b>	
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	14,033,235.	<b>15</b>	1,878,173.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses	14,033,235.	<b>16</b>	19,058,625.
	<b>18</b> Grants payable	7,417.	<b>17</b>	15,363.
	<b>19</b> Deferred revenue	323,091.	<b>18</b>	106,168.
	<b>20</b> Tax-exempt bond liabilities		<b>19</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D		<b>20</b>	
	<b>22</b> Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		<b>21</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties		<b>22</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties		<b>23</b>	
	<b>25</b> 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	17,338.	<b>24</b>	
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25	17,338.	<b>25</b>	16,246.
	<b>Net Assets or Fund Balances</b>	<b>27</b> <b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>	347,846.	<b>26</b>
<b>28</b> Unrestricted net assets		1,506,408.	<b>27</b>	584,175.
<b>29</b> Temporarily restricted net assets		5,703,214.	<b>28</b>	6,041,667.
<b>30</b> Permanently restricted net assets		6,475,767.	<b>29</b>	12,295,006.
<b>31</b> <b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>				
<b>32</b> Capital stock or trust principal, or current funds			<b>30</b>	
<b>33</b> Paid-in or capital surplus, or land, building, or equipment fund			<b>31</b>	
<b>34</b> Retained earnings, endowment, accumulated income, or other funds			<b>32</b>	
<b>35</b> Total net assets or fund balances		13,685,389.	<b>33</b>	18,920,848.
<b>36</b> Total liabilities and net assets/fund balances		14,033,235.	<b>34</b>	19,058,625.

**Part XI Reconciliation of Net Assets**

Check 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	7,466,551.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,185,993.
3	Revenue less expenses. Subtract line 2 from line 1	3	5,280,558.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	13,685,389.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-45,099.
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	18,920,848.

**Part XII Financial Statements and Reporting**

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

☐

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
b Were the organization's financial statements audited by an independent accountant?	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	X	
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Form 990 (2011)

Department of the Treasury  
Internal Revenue Service

**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

SHASTA REGIONAL COMMUNITY FOUNDATION

Employer identification number

68-0242276

<b>Part I</b>	<b>Reason for Public Charity Status</b> (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?

(ii) ☐ A family member of a person described in (i) above?

(iii) ☐ A 35% controlled entity of a person described in (i) or (ii) above?

h ☐ Provide the following information about the supported organization(s).

[illegible]

**LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.**

Schedule A (Form 990 or 990-EZ) 2011

**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
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2314526.	4144300.	1885720.	3842617.	6588667.	18775830.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4 Total.</b> Add lines 1 through 3	2314526.	4144300.	1885720.	3842617.	6588667.	18775830.
<b>5</b> 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)						10132503.
<b>6 Public support.</b> Subtract line 5 from line 4						8643327.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>7</b> Amounts from line 4	2314526.	4144300.	1885720.	3842617.	6588667.	18775830.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	-222,932.	114,880.	103,459.	159,899.	177,164.	332,470.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	338,600.	-59,999.	-2,426.	395,127.	429,351.	1100653.
<b>11 Total support.</b> Add lines 7 through 10						20208953.
<b>12</b> Gross receipts from related activities, etc. (see instructions)					12	1,081,610.

**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**

<b>14</b> Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	<b>14</b>	42.77 %
<b>15</b> Public support percentage from 2010 Schedule A, Part II, line 14	<b>15</b>	51.70 %

**16a 33 1/3% 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 33 1/3% 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
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> 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						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</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						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support.</b> (Subtract line 7c from line 6)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12)						
<b>14 First five years.</b> 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 <b>stop here</b> <span style="float: right;">► <input type="checkbox"/></span>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	%
<b>16</b> Public support percentage from 2010 Schedule A, Part III, line 15	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	%
<b>18</b> Investment income percentage from 2010 Schedule A, Part III, line 17	<b>18</b>	%

- 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 ► ☐

**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

SHASTA REGIONAL COMMUNITY FOUNDATION

Employer identification number

68-0242276

**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	26	102
2 Aggregate contributions to (during year)	153.	1,118.
3 Aggregate grants from (during year)	5,426,083.	6,788,995.
4 Aggregate value at end of year	8,753,809.	17,776,012.
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

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

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

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

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, 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	7,134,369.	5,582,365.	4,856,691.	3,780,154.	
b Contributions	5,972,385.	649,773.	586,880.	1,680,776.	
c Net investment earnings, gains, and losses	117,807.	1,031,535.	256,888.	-511,614.	
d Grants or scholarships	210,228.	129,304.	118,094.	92,625.	
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	13,014,333.	7,134,369.	5,582,365.	4,856,691.	

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 ☒ 94.40 %  
 c Temporarily restricted endowment ☒ 5.60 %

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  
 (ii) related organizations

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

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

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		104,743.	78,206.	26,537.
e Other				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				26,537.

**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. (Col (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. (Col (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) CONTRIBUTIONS RECEIVABLE, NON CURRENT	183,063.
(2) DEPOSITS	1,592.
(3) BENEFICIAL INTEREST IN REMAINDER TRUSTS	1,693,518.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	
	1,878,173.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ACCRUED VACATION	12,346.
(3) DEFERRED REVENUE	3,900.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	
	16,246.

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	7,466,551.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	2,185,993.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	5,280,558.
4	Net unrealized gains (losses) on investments	4	-45,099.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	-45,099.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	5,235,459.

**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	7,421,452.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	-45,099.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	-45,099.
3	Subtract line 2e from line 1	3	7,466,551.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	7,466,551.

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

1	Total expenses and losses per audited financial statements	1	2,185,993.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	2,185,993.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	2,185,993.

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

**PART V, LINE 4: ENDOWMENTS ARE USED TO MAINTAIN LONG-TERM SUPPORT FOR**

**THE INDIVIDUAL FUNDS SPECIFIED PURPOSE.**

Name of the organization

SHASTA REGIONAL COMMUNITY FOUNDATION

**Employer identification number**  
**68-0242276**

Part I	General Information on Grants and Assistance
--------	--

**1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

**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**

recipent 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	(h) Purpose of grant or assistance
SEE DETAILED LIST PROVIDED.			1,389,674.	0.			SEE DETAIL PROVIDED.

2	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	...	186.
3	Enter total number of other organizations listed in the line 1 table	...	...

HA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule I (Form 990) (2011)

**Part III** Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.  
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)	(f) Description of non-cash assistance
SEE LIST OF GRANTS	37	70,496.	0.		

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

SCHEDULE I, PART I, LINE 2: REQUIRE GRANT REPORTS OF ALL GRANTEES FOR EACH  
GRANT AWARDED AND CONDUCT OCCASIONAL SITE VISITS TO INSURE COMPLIANCE WITH  
GRANT CONTRACTS.

**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

SHASTA REGIONAL COMMUNITY FOUNDATION

Employer identification number

68-0242276

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

PHILANTHROPY, EDUCATION AND INFORMATION.

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

REDDING AFFORDABLE HOUSING LOAN FUND: THIS PROGRAM OFFERS LOANS AT  
AFFORDABLE RATES AND FLEXIBLE TERMS TO NON-PROFIT ORGANIZATIONS FOR  
FINANCING DEVELOPMENT OF AFFORDABLE HOUSING PROJECTS.

EXPENSES \$ 9,727. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

IVY B. HERR ENDOWED MEDICAL EDUCATION LOAN FUND: THIS PROGRAM PROVIDES  
LOW INTEREST LOANS TO STUDENTS FROM SHASTA, LASSEN, TRINITY, TEHAMA,  
MODOC AND SISKIYOU COUNTIES PURSUING AN EDUCATION IN MEDICINE.

EXPENSES \$ 13,036. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

OTHER PROGRAMS

EXPENSES \$ 57,952. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 3: LINE 3 EXPLANATION - INDEPENDENT  
CPA PERFORMS ACCOUNTING FUNCTIONS AND ASSISTS WITH PREPARATION FOR AUDIT.

FORM 990, PART VI, SECTION B, LINE 11: LINE 11A EXPLANATION - MATSON &  
ISOM CPAS PROVIDES A DRAFT IRS FORM 990 TO SRCF MANAGEMENT AND THE BOARD  
TREASURER FOR REVIEW TWO WEEKS PRIOR TO THE DUE DATE OF NOVEMBER 15TH.  
(MATSON & ISOM CPAS ALSO PROVIDES THE STATE OF CA TAX FORMS 199 AND RRF-1  
FOR FILING.)

Name of the organization

SHASTA REGIONAL COMMUNITY FOUNDATION

Employer identification number

68-0242276

SRCF MANAGEMENT FORWARDS THE DRAFT IRS FORM 990 TO ALL SRCF BOARD MEMBERS FOR REVIEW AND COMMENT, (REVIEW AND COMMENT PERIOD IS 5 DAYS).

UNLESS AN EXTENSION IS NECESSARY, THE IRS FORM 990 AND THE STATE OF CA TAX FORMS 199 AND RRF-1 ARE FILED VIA CERTIFIED MAIL BY THE DUE DATE.

FORM 990, PART VI, SECTION B, LINE 12C: ANNUAL DISCLOSURE STATEMENT IS SIGNED BY BOARD MEMBERS AND STAFF, AND THEN THE BOARD REVIEWS THE STATEMENTS TO IDENTIFY ANY POTENTIAL CONFLICTS.

FORM 990, PART VI, SECTION B, LINE 15A: THE SRCF EXECUTIVE COMMITTEE (BOARD CHAIR, VICE-CHAIR, SECRETARY, TREASURER, AND PAST CHAIR) SERVES AS THE COMPENSATION COMMITTEE (COMMITTEE). THE COMMITTEE MEETS ANNUALLY TO REVIEW THE CEO COMPENSATION. OFFICERS AND DIRECTORS OF SRCF ARE NOT PAID A SALARY OR WAGE OTHER THAN THE CEO.

THE COMMITTEE REVIEWS COUNCIL ON FOUNDATIONS SALARY AND WAGE SURVEY, THE CEO EMPLOYMENT CONTRACT AND RECOMMENDS ANY AND ALL CHANGES TO THE BOARD OF DIRECTORS FOR A FULL VOTE.

FORM 990, PART VI, SECTION C, LINE 19: SRCF POSTS THE INVESTMENT AND FUND MANAGEMENT, 990, AND ANNUAL AUDIT INFORMATION ON THEIR WEBSITE AT WWW.SHASTARCF.ORG. THE BYLAWS, ARTICLES OF INCORPORATION AND FORM 1023 ARE MADE AVAILABLE UPON REQUEST.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED LOSSES ON INVESTMENTS:

-45,099.





**Part V Transactions With Related Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?**a** Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity**b** Gift, grant, or capital contribution to related organization(s)**c** Gift, grant, or capital contribution from related organization(s)**d** Loans or loan guarantees to or for related organization(s)**e** Loans or loan guarantees by related organization(s)**f** Sale of assets to related organization(s)**g** Purchase of assets from related organization(s)**h** Exchange of assets with related organization(s)**i** Lease of facilities, equipment, or other assets to related organization(s)**j** Lease of facilities, equipment, or other assets from related organization(s)**k** Performance of services or membership or fundraising solicitations for related organization(s)**l** Performance of services or membership or fundraising solicitations by related organization(s)**m** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)**n** Sharing of paid employees with related organization(s)**o** Reimbursement paid to related organization(s) for expenses**p** Reimbursement paid by related organization(s) for expenses**q** Other transfer of cash or property to related organization(s)**r** Other transfer of cash or property from related organization(s)**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			



**Part VII** Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

## Shasta Regional Community Foundation

FEIN 68-0242276

Form 990 Schedule I Part II and Part III

June 30, 2012

		Part II Line (h)	
Grant Date	Grantee	Program Name	Granted
6/21/2012	Redding East Rotary Foundation	Fantasy Fountain rebuild project	\$ 100,000
11/9/2011	Red Bluff Joint Union High School District	acoustical wall	\$ 46,000
11/9/2011	State Theatre for the Arts	audio & visual equip	\$ 44,400
6/13/2012	Shasta Community Health Center	Mobile Clinic equipment	\$ 40,000
1/13/2012	Modoc Medical Center	purchase of digital radiography machine	\$ 38,000
6/1/2012	Mount Shasta Trail Association	trail planning	\$ 30,000
6/13/2012	Anderson Union High School District	tilt skillets	\$ 27,366
6/13/2012	Siskiyou Media Council	equipment	\$ 26,000
6/13/2012	Central Valley High School	band uniforms	\$ 25,000
6/13/2012	Shasta Union High School District	Robotics equipment	\$ 24,400
11/16/2011	Training, Employment & Community Help, Inc.	lower ceiling	\$ 22,500
7/1/2011	Mt. Shasta Nordic Ski Organization	snow grooming cat	\$ 20,000
8/17/2011	Redding West Rotary Foundation	T. R. Woods Playground	\$ 18,063
6/13/2012	Redding, City of	Aquatic center play systems	\$ 18,000
6/13/2012	Northern Valley Catholic Social Service, Inc.	computer lab	\$ 18,000
10/12/2011	Golden Umbrella, Inc	safety net	\$ 18,000
10/12/2011	Shasta Senior Nutrition Program	safety net	\$ 18,000
7/1/2011	Trinity County Resource Conservation	Young Ranch restrooms	\$ 18,000
11/9/2011	Girl Scouts of Northern California	Red Bluff center siding & windows	\$ 16,000
6/18/2012	Another Chance Animal Welfare League	no-kill sanctuary purchase	\$ 15,445
12/27/2011	Yavapai CASA for Kids, Inc.	general support w. 50% to support volunteers	\$ 15,353
11/16/2011	Alturas Community Theater	bathroom renovations	\$ 15,000
10/19/2011	Shasta Library Foundation	literacy program	\$ 15,000
10/12/2011	Great Northern Corporation	safety net	\$ 15,000
10/12/2011	Corning Christian Assistance	safety net	\$ 15,000
7/1/2011	Riverfront Playhouse	support capital campaign	\$ 15,000
6/13/2012	Shasta Historical Society	HVAC	\$ 13,500
6/13/2012	Alternatives to Violence, Inc.	bedroom furnishings	\$ 13,000
3/9/2012	Tulelake Community Fund	Interfund grant from Tulelake Endowment Fund	\$ 12,950
10/12/2011	Human Response Network	safety net	\$ 12,500
10/12/2011	Training, Employment & Community Help, Inc.	safety net	\$ 12,500
12/27/2011	World Vision International	international development	\$ 12,468
8/17/2011	Siskiyou Family YMCA	general support	\$ 12,464
10/12/2011	Salvation Army - Red Bluff	safety net	\$ 11,000
1/7/2012	Shasta Siskiyou Arts Endowment	Interfund grant from Community Art Fund	\$ 10,834
3/21/2012	Shasta County Arts Council	2nd Saturday Arts Walk	\$ 10,000
12/15/2011	Klamath Siskiyou Art Center	banners project	\$ 10,000
12/15/2011	Mr. Mark Oliver	book sculpture	\$ 10,000
11/9/2011	Jefferson Economic Development, Inst.	computers	\$ 10,000
10/19/2011	Shasta Community Health Center	dental care for women	\$ 10,000
11/9/2011	Women's Health Specialists	furniture	\$ 10,000
11/9/2011	Shasta College Foundation	garden classroom	\$ 10,000
12/15/2011	Madrone Hospice, Inc.	garden signs	\$ 10,000
12/15/2011	The Siskiyou Land Trust	general support	\$ 10,000
12/27/2011	Best Friends Animal Society	general support	\$ 10,000
11/9/2011	Butteville Elementary School	orchestra instruments	\$ 10,000
6/13/2012	Siskiyou County Library	patron computers	\$ 10,000
11/9/2011	FaithWORKS Community Coalition	playground	\$ 10,000
11/9/2011	Big Springs Union Elementary School	playground	\$ 10,000

## Shasta Regional Community Foundation

FEIN 68-0242276

Form 990 Schedule I Part II and Part III

June 30, 2012

Grant Date	Grantee	Part II Line (h)	Granted
		Program Name	
6/13/2012	Anderson Historical Society	restrooms & workroom	\$ 10,000
6/14/2012	CSU Chico, University Advancement	Symphony marketing	\$ 10,000
11/9/2011	Junction Elementary School District	theater sound system	\$ 10,000
7/1/2011	Free the Need	Van purchase	\$ 10,000
11/9/2011	Richfield School	computer equipment	\$ 8,300
6/13/2012	High Plateau Humane Society	cat shelter	\$ 8,200
10/28/2011	Mt. Shasta Union School District	playground, training, sites budgets	\$ 8,000
10/28/2011	First Baptist Church	preschool	\$ 8,000
2/1/2012	Tri County Community Network	safety net food vouchers	\$ 8,000
2/13/2012	California Department of Veterans Affairs	2011 Water	\$ 7,500
6/13/2012	Tri County Community Network	Landscaping materials for Main, Hudson, Marquet	\$ 7,500
6/13/2012	Burney Water District	Non-slip tile floors for pool facility	\$ 7,500
6/13/2012	Burney Basin Little League, Inc.	Scoreboards for Loren Miller Memorial Field	\$ 7,500
8/17/2011	Mt. Shasta Bioregional Ecology Center	Panther Meadows summer/fall 2011	\$ 7,000
6/13/2012	Trinity Lake Revitalization Alliance, Inc.	Visitor Center	\$ 7,000
6/13/2012	Intermountain Healthcare Foundation	Dietary equipment for Mayers Memorial	\$ 6,944
11/9/2011	Girls Incorporated of the Northern Sacramento	office equipment	\$ 6,750
6/13/2012	Burney Fire Protection District	Purchase of 3 desktop and 2 laptop computers	\$ 6,692
11/9/2011	Dunsmuir Botanical Gardens	concrete pathway	\$ 6,500
6/13/2012	University Preparatory School Educational Fdn	Remaining cost of purchasing reader board	\$ 6,000
8/17/2011	Redding West Rotary Foundation	TR Woods Park playground	\$ 6,000
9/21/2011	St Joseph School	art program & sports equipment	\$ 5,500
9/21/2011	Grace Baptist Schools	exercise weight equipment	\$ 5,500
9/21/2011	Shasta College	field turf in batting cages	\$ 5,500
9/21/2011	Burney Jr. - Sr. High School	goal posts & basketball goals	\$ 5,500
9/21/2011	Mountain View Middle School	ipads	\$ 5,500
9/21/2011	North Woods Discovery School	lighting & sound system	\$ 5,500
9/21/2011	Millville Elementary School	musical instruction & instruments	\$ 5,500
9/21/2011	Fall River Joint Unified School District	musical instruments	\$ 5,500
9/21/2011	Trinity County Office of Education	performance lighting	\$ 5,500
9/21/2011	Pacheco Union School District	Sports & musical equipment	\$ 5,500
12/14/2011	Liberty Painting Corporation	20 artists canvas	\$ 5,000
12/15/2011	Siskiyou Humane Society, Inc.	baby pit bull school	\$ 5,000
12/28/2011	Ms. Madeleine Graham Blake	Butte Valley photo project	\$ 5,000
6/13/2012	Modoc County Arts Council	ceramics equipment	\$ 5,000
12/15/2011	Save the Rain	general support	\$ 5,000
12/15/2011	Doctors Without Borders	general support	\$ 5,000
12/15/2011	Mt. Shasta Trail Association	general support	\$ 5,000
12/15/2011	Planned Parenthood Shasta- Pacific	general support Shasta & Siskiyou Counties	\$ 5,000
12/15/2011	Mercy Foundation North	Mercy Mt. Shasta digital mammography equip	\$ 5,000
6/13/2012	Millville Fire Protection District	Purchase rescue equipment	\$ 5,000
12/15/2011	Mt. Shasta Recreation & Parks District	senior nutrition program	\$ 5,000
11/18/2011	Fall River Joint Unified School District	Special Recognition Award	\$ 5,000
11/18/2011	Trinity County Office of Education	Special Recognition Award	\$ 5,000
6/13/2012	Liberty Painting Corporation	storage shed	\$ 5,000
7/7/2011	JPR Foundation - Cascade Theatre Restoration	student performance Momix	\$ 5,000
12/14/2011	Siskiyou Union High School District	student-selected books for ELA classes	\$ 5,000
6/13/2012	Special Olympics Northern California, Inc.	support costs of 2012 sports programs	\$ 5,000
12/14/2011	Siskiyou Arts Council	Weed benches	\$ 5,000

## Shasta Regional Community Foundation

FEIN 68-0242276

Form 990 Schedule I Part II and Part III

June 30, 2012

Grant Date	Grantee	Part II Line (h) Program Name	Granted
9/21/2011	Shasta Union High School District	weight vest for fire academy	\$ 5,000
7/12/2011	City of Anderson Community Services	youth murals	\$ 5,000
11/9/2011	The Siskiyou Land Trust	signs/ camera/ access	\$ 4,640
11/30/2011	Riverfront Playhouse	improv theater	\$ 4,635
6/13/2012	Mountain Communities Healthcare Foundation	snf room decor.	\$ 4,600
6/13/2012	Klamath River Community Hall Association, Inc	Hall upgrade	\$ 4,300
11/9/2011	Shasta County Office of Education	acoustical banners	\$ 4,200
7/25/2011	Mistletoe Elementary School	Playground	\$ 4,000
6/13/2012	Trinity County Office of Education	Hyampom Center equipment	\$ 3,849
6/13/2012	West Valley High School	Purchase video equipment	\$ 3,800
7/1/2011	Redding School of the Arts	mural	\$ 3,700
11/9/2011	American Trails	computers & software	\$ 3,664
6/13/2012	Happy Valley Fire Protection District	Purchase self contained breathing apparatus bottle	\$ 3,625
11/9/2011	Family Service Agency of Tehama County	phone & computer upgrades	\$ 3,550
6/13/2012	Shasta Women's Refuge, Inc.	Implement soft interview rooms at SFJC	\$ 3,500
6/13/2012	Indian Springs School	Purchase wood chips for playground	\$ 3,500
8/17/2011	Haven Humane Society, Inc.	general support	\$ 3,409
6/13/2012	Northern California Youth & Family Programs	Purchase of playground/safety enhancement	\$ 3,250
7/20/2011	Shasta Senior Nutrition Program	Trays/lids & computer/software	\$ 3,188
6/13/2012	Shasta Women's Refuge, Inc.	Purchase appliances for Peterson House	\$ 3,100
6/13/2012	Shasta County Arts Council	Fund summer theatre academy	\$ 3,000
6/13/2012	Northern Valley Catholic Social Service, Inc	Healthy Trinity Families	\$ 3,000
6/13/2012	Northern CA Educational Television Assoc.	KIXE Kids Club support	\$ 3,000
11/9/2011	Enterprise Lions Club	purchase and maintenance of flags	\$ 3,000
11/9/2011	Up Country Seniors	exercise equipment	\$ 2,772
6/13/2012	Wintu Audubon Chap. of the National Audubon	birding equipment	\$ 2,600
6/13/2012	Hat Creek Volunteer Fire Department	Purchase water rescue equipment	\$ 2,600
6/13/2012	Haven Humane Society, Inc.	Provide spay / neuter services	\$ 2,500
6/13/2012	Shasta Historical Society	Purchase computer server system	\$ 2,500
7/7/2011	The Eaton Gift	bricks for walkway	\$ 2,143
6/13/2012	Spay & Neuter Intermountain Pets & Pet Placement	Spay and Neuter voucher program	\$ 2,100
6/13/2012	Shasta High School	Assist with purchase of wrestling mat	\$ 2,000
5/18/2012	Enterprise Lions Club	repair and replace flag/flagpole	\$ 2,000
8/17/2011	Redding West Rotary Foundation	T. R. Woods Playground	\$ 2,000
9/12/2011	Acorn Community Enterprises	4 IDA matches	\$ 1,934
6/13/2012	Trinity Lake Revitalization Alliance, Inc.	Purchase of barbecue trailer	\$ 1,825
6/13/2012	Tri County Community Network	Purchase materials to renovate school-age fitness	\$ 1,756
4/17/2012	Dorris Lions Club	flag repair	\$ 1,570
5/18/2012	Missing in America - Veterans Recovery Progra	Camp for Life & SFJC Camp	\$ 1,500
6/13/2012	The Watershed Research & Training Center	Camp Ovens	\$ 1,500
6/13/2012	Young Family Ranch, Inc.	Purchase materials and equipment for community	\$ 1,500
6/13/2012	Shasta Library Foundation	Purchase books for distribution at events	\$ 1,400
7/1/2011	Redding School of the Arts	mural	\$ 1,300
6/13/2012	Shingletown Library Corporation	Purchase computers and supplies for Children's cor	\$ 1,200
8/17/2011	Good News Rescue Mission	general support	\$ 1,136
3/20/2012	Tulelake Basin Joint Unified School District	6th grade Klamath Outdoor Science School	\$ 1,000
6/13/2012	Turtle Bay Exploration Park	admission for 3rd grade students	\$ 1,000
10/28/2011	Mt. Shasta Fire Protection District	general support	\$ 1,000
10/28/2011	Choices Pregnancy Services	general support	\$ 1,000

## Shasta Regional Community Foundation

FEIN 68-0242276

Form 990 Schedule I Part II and Part III

June 30, 2012

Grant Date	Grantee	Part II Line (h)	Granted
		Program Name	
10/28/2011	Siskiyou Humane Society, Inc.	general support	\$ 1,000
3/20/2012	Tulelake Basin Joint Unified School District	Klamath Falls Children's Museum field trip 3rd grade	\$ 1,000
6/13/2012	City of Anderson Community Services	Purchase safety helmets for area youth	\$ 1,000
6/13/2012	Intermountain Healthcare Foundation	Purchase transport ventilator	\$ 1,000
10/28/2011	Mt. Shasta Recreation & Parks District	Senior Nutrition program & general support	\$ 1,000
8/19/2011	Mt. Shasta Recreation & Parks District	Siskiyou Jr. Golf	\$ 1,000
6/13/2012	The Watershed Research & Training Center	Support Indian Valley Summer Camp	\$ 1,000
4/18/2012	Siskiyou Media Council	Weed High School journalism	\$ 1,000
12/15/2011	Collier Interpretive and Information Center J	Welcome Center application	\$ 1,000
8/17/2011	The River Exchange	general support	\$ 971
12/14/2011	Cottonwood Citizen Patrol, Inc.	citizen volunteer programs	\$ 750
11/9/2011	Mt. Shasta Recreation & Parks District	Mt. Shasta Thanksgiving dinner	\$ 700
8/17/2011	Shriners Hospital for Children	general support	\$ 568
8/17/2011	Shasta Women's Refuge, Inc.	general support	\$ 568
12/14/2011	Tulelake Community Partnership	general support	\$ 555
5/18/2012	Life Light Pregnancy Help Center	"Earn While You Learn" program	\$ 500
5/18/2012	Shasta College	2012 Delta Lambda Scholarship	\$ 500
11/9/2011	Northern Valley Catholic Social Service, Inc.	Adopt a Family program	\$ 500
6/13/2012	Buckeye School of the Arts	American Folk Dance in Residency program	\$ 500
10/12/2011	Madrone Hospice, Inc.	arts planning	\$ 500
10/12/2011	Mr. Alan Crockett	banners planning	\$ 500
10/26/2011	Mr. Mark Oliver	cement book planning	\$ 500
11/8/2011	Ms. Madeleine Graham Blake	fountain planning	\$ 500
1/30/2012	Catalyst Young Professionals of Redding	general support	\$ 500
3/21/2012	North State Symphony	general support	\$ 500
3/20/2012	Tulelake Basin Joint Unified School District	iPad for special education classroom	\$ 500
3/20/2012	Tulelake Basin Joint Unified School District	Potato Festival drums & music	\$ 500
5/18/2012	Northern Valley Catholic Social Service, Inc.	Shasta County CASA program	\$ 500
3/20/2012	Tulelake Basin Joint Unified School District	12th grade trip to Shakespeare Festival	\$ 469
3/20/2012	Tulelake Basin Joint Unified School District	Kindergarten Academic Enhancement	\$ 300
3/20/2012	Tulelake Basin Joint Unified School District	bowling field trip for special education class	\$ 275
12/6/2011	Mosaic Ministries	Eagles Soar - 48 personalized bears	\$ 270
5/18/2012	Enterprise Lions Club	replace and repair flag/flagpole	\$ 263
5/18/2012	FaithWORKS Community Coalition	general support	\$ 250
3/21/2012	Northern Valley Catholic Social Service, Inc.	CASA of Shasta County's Incentive Fund	\$ 217
1/30/2012	Mt. Shasta Museum Association	general support	\$ 200
8/17/2011	Shasta Regional Community Foundation	Arts Endowment	\$ 142
1/30/2012	Child Abuse Prevention Coordinating Council	Honoring the life and work of Michele Erickson	\$ 100
2/15/2012	Shasta Siskiyou Arts Endowment	Interfund grant from Community Art Fund	\$ 100
			\$ 1,389,674
			<b>Part III c</b>
<b>Part III</b>			<b>Cash Amount</b>
6/13/2012	Shasta County Office of Education	Scholarships	\$ 15,169
6/13/2012	Shasta County Office of Education	Scholarships	\$ 12,308
1/13/2012	Thomas, Cassidie S	Scholarship	\$ 4,020
6/13/2012	Calzia, Megan E	Scholarship	\$ 3,000
6/13/2012	Matagulay, Adrianna N	Scholarship	\$ 3,000
6/13/2012	Roberts, Elizabeth M	Scholarship	\$ 3,000

Shasta Regional Community Foundation

FEIN 68-0242276

Form 990 Schedule I Part II and Part III

June 30, 2012

Grant Date	Grantee	Part II Line (h) Program Name	Granted
6/13/2012	Dorsett, Bria S	Scholarship	\$ 3,000
6/13/2012	Meese, Handsel A	Scholarship	\$ 3,000
6/13/2012	Murphy, Laura	Scholarship	\$ 3,000
6/13/2012	Holscher, Amanda	Scholarship	\$ 3,000
6/13/2012	Papac, Jennifer	Scholarship	\$ 3,000
5/9/2012	Hovis, Bailey J	Scholarship	\$ 2,500
5/9/2012	Hickman, Alexandria N	Scholarship	\$ 2,500
5/9/2012	Gilroy, Darlene B	Scholarship	\$ 1,000
6/13/2012	Theodore, Rylee E	Scholarship	\$ 1,000
5/17/2012	Reuter, John P	Scholarship	\$ 1,000
5/9/2012	Oliver, Elizabeth T	Scholarship	\$ 500
5/9/2012	Rubidoux, Molly A	Scholarship	\$ 500
5/9/2012	Ballew, Melanie	Scholarship	\$ 500
5/9/2012	Chang, Ame	Scholarship	\$ 500
5/9/2012	Roberts, Hayden A	Scholarship	\$ 500
5/9/2012	Vasquez, Kayla L	Scholarship	\$ 500
5/9/2012	Briggs, Brianna	Scholarship	\$ 500
5/9/2012	Kowalski, Katie	Scholarship	\$ 500
5/9/2012	Porras, Carmen	Scholarship	\$ 500
5/9/2012	Waggoner, Megan	Scholarship	\$ 500
5/9/2012	Yniguez, Rudi	Scholarship	\$ 500
6/13/2012	Nelson, Alanna	Scholarship	\$ 500
5/23/2012	Davis, Daulton	Scholarship	\$ 500
5/23/2012	Goltz, Caleb	Scholarship	\$ 500
5/23/2012	Titus, Allison B	Scholarship	\$ 250
5/23/2012	Davis, Daulton	Scholarship	\$ 250
5/23/2012	Ricci, Jeanette	Scholarship	\$ 250
5/23/2012	Rubio, Jennifer	Scholarship	\$ 250
5/23/2012	Reuter, John P	Scholarship	\$ 250
5/23/2012	Rimmer, Colby	Scholarship	\$ 250
6/13/2012	Ferguson, Chandler T	Scholarship cancelled	\$ (1,500)
			\$ 70,496
	TOTAL		\$ 1,460,170