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Form **990**

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)

OMB No 1545 0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(except black lung benefit trust or private foundation)

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

Α_	For the	2011 calen	dar year, or tax year beginning 7/01 , 2011, and ending	6/30		2012	
	Check if an		С	D	Employer Identii	lication Number	
	Addre	ess change	COCC FOUNDATION, INC.		93-60412	247	
	Name	change	2600 N.W. COLLEGE WAY	E	Telephone numb	er	
	\vdash	return	BEND, OR 97701		(541) 38	33-7225	
	\vdash	ınated			(111)	<u> </u>	
	\vdash	nded return		اه	Gross receipts	3,459,	917
	\vdash	cation pending	F Name and address of principal officer		up return for affil		X No
		cation pending		(b) Are all affilia	ites included?	Yes	No
	Tay, eye	mpt status	X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527	If 'No,' attac	h a list (see inst	ructions)	
<u>:</u>		ite: ► N/		(c) Group evem	ption number		
K		organization	X Corporation Trust Association Other ► L Year of Formation		M State of le	egal domicile OR	
	rt I	Summar			THE STATE OF IC	gar dominare O21	
			be the organization's mission or most significant activities. THE CENTR	AL OREGO	ON COMMU	NITY COLLE	GE
			ON_PROVIDES FUNDS AND FOSTERS RELATIONSHIPS TO				
Activities & Governance			TAL IMPROVEMENTS	-424 F-434	_4,254,2	. 2/_ A 1143-14	· 25-1 _
Ē		m &	~~~ ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~				
o Ve	2 CI	heck this bo	ox If the organization discontinued its operations or disposed of more	e than 25%	of its net ass	sets	
Ö			oting members of the governing body (Part VI, line 1a)		3		<u> 16</u>
SS			dependent voting members of the governing body (Part VI, line 1b)		4		16
¥			of individuals employed in calendar year 2011 (Part V, line 2a)		5		<u></u> T
Ę	l .		r of volunteers (estimate if necessary)		6 7a		27 <u>2</u> 0.
•	L		ed business revenue from Part VIII, column (C), line 12 d business taxable income from Form 990-T, line 34		7 d		- 0.
	D IN	et uniteratet	dusiness taxable income from 1 orni 930-1, line 34	Prior	1	Current Ye	
	8 C	ontributions	and grants (Part VIII, line 1h)		11,090.	3,122,	
ē	4		vice revenue (Part VIII, line 2g)		60,015.		576.
			71,541.		263.		
æ	71 0	ther revenu	ncome (Part VIII, column (A), lines 3, 4, and 7d) - V - V - V - V - V - V - V - V - V -				
	T2 10	otal revenu	e – add lines 8 through 11 (mustiequal Parti VIII) column (A), line (I2)	4,0	42,646.	3,459,	917.
	93 G 14 B	rants and s	Imilar amounts paid (Part IX, column (A), lines 1-3)				
	₫ В	enefits paid					
	993 S		er compensation, employee benefits (Rårt X column (A) lines 5 10)	3	19,709.	330,	072.
Expenses	6 ₽	rofessional	fundraising fees (Part IX, column (A), line 11e)				
<u> </u>	≌¦ ⊤		sing expenses (Part IX, column (D), line 25) ► 257, 682.				
ᅑ	120		ses (Part IX, column (A), lines 11a-11d, 11f-24e)	3.1	27,289.	1,707,	260.
	(MZ)	-	es Add lines 13-17 (must equal Part IX, column (A), line 25)		46,998.	2,037,	
	_	•	s expenses Subtract line 18 from line 12		95,648.	1,422,	
b 8		evenue les	s expenses Subtract line 10 non line 12	1	Current Year	End of Ye	
	1	otal assets	(Part X, line 16).		34,235.	15,150,	
96	i .		es (Part X, line 26)		86,450.		085.
Net Assets Fund Balanc			r fund balances. Subtract line 21 from line 20	-	47,785.	14,870,	370
_	art II	Signatu		13/1	41,700.	11/0/0/	3,0.
				he hest of my kr	nowledge and he	hef it is true correct	and
con	nplete Dec	laration of prep	declare that I have examined this return, including accompanying schedules and statements, and to the larger (other than officer) is based on all information of which preparer has any knowledge				
			CB-		11 8 12		
Sig	gn	Signat	ure of officer	Date			
He	re		I'M WEAVER EXECUTIVE DREETER				
		Type	r print name and title				
		Print/Type	preparer's name Preparer's signature Date	12 Che	eck X if	PTIN	
Pa	id	STUAR	T D. KATTER STUART D. KATTER		-employed	P00236705	
_	eparer		VEDVOCH VARRED C NEI CON LLD				
	e Only		A F A WILL WAR AND A LIVE	Fire	n's EIN ► 93	-1154108	
	_		BEND, OR 97701-2900		ne no (54)		8
Ma	y the IR	S discuss t	his return with the preparer shown above? (see instructions)			X Yes	No

	1 990 (2011) COCC FOUNDATION, INC.	93-604124	<u>/</u> _	age 2
<u>Par</u>	t III Statement of Program Service Accomplishments			
	Check if Schedule O contains a response to any question in this Part III			
1	Briefly describe the organization's mission			
	THE CENTRAL OREGON COMMUNITY COLLEGE FOUNDATION PROVIDES FUNDS A	ND FOSTERS		
	RELATIONSHIPS TO SUPPORT STUDENTS, PROGRAMS, AND CAPITAL IMPROVE			
	Did the organization undertake any significant program services during the year which were not listed of	n the prior		
_		in the prior	Yes X	No
	Form 990 or 990-EZ?	. []	Yes X	No
_	If 'Yes,' describe these new services on Schedule O.	. —	😈	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program se	rvices?	Yes X	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 Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the authorise, the total expenses, and revenue, if any, for each program service reported	rices, as measure mount of grants a	d by expensind allocation	ses ons to
4:	a (Code (Cod	Revenue \$		
7.0	SCHOLARSHIPS - PROVIDED OVER 500 SCHOLARSHIPS TO COCC STUDENTS DU	· —	VEAD	
	2011-2012. SCHOLARSHIPS WERE AWARDED BASED UPON FINANCIAL NEED A			
	DEMONSTRATED SENSE OF DIRECTION AND PURPOSE. STATISTICALLY STUDE			
	FOUNDATION SCHOLARSHIPS TAKE MORE CLASSES, MAINTAIN HIGHER GPAS,			
	COMPLETION RATE THAN THE GENERAL COHORT. FUNDS FOR SCHOLARSHIPS			
	SCHOLARSHIP ENDOWMENTS, NAMED SCHOLARSHIPS GIVEN BY INDIVIDUALS	AND BOSTNES	SES, AN	<u>n</u>
	ANNUAL FUNDRAISING.			
		_ 		
	1 (O. I.) (F	Revenue \$		$\overline{}$
41	= \	·	וואדעע	
	CULINARY CAPITAL CAMPAIGN - THROUGH SUPPORT PROVIDED BY CENTRAL	OKEGON COMM	DON'T I	
	COLLEGE FOUNDATION, A NEW CULINARY FACILITY WAS BUILT IN 2011 BY			
	COMMUNITY COLLEGE. THIS NEW FACILITY WILL ALLOW THE CULINARY PF			
	TEN TIMES IN THE NUMBER OF STUDENTS THAT CAN ATTEND, GREATLY EXP	AND THE CRE	DIT	
	OFFERINGS AND PROVIDE MORE CLASSES FOR THE COMMUNITY.	_ 		
				
				
	(O 100 E00 1 100 E00 1 100 E00 100	Davanua é		
4		Revenue \$	OCDAN	,
	OTHER PROGRAM EXPENSES - INCLUDES THE NANCY R. CHANDLER VISITING			
	SUPPORT TO COCC PROGRAMS SUCH AS THE LIBRARY, COMMUNITY OPPORTUN	ITTY, CULINA	KY, FIN	<u> </u>
	ARTS, MATH DEPARTMENT AND OTHER FOUNDATION PROGRAMS.			
			. 	
				
4	d Other program services (Describe in Schedule O)			
	(Expenses \$ including grants of \$) (Revenue \$,)	
4	e Total program service expenses ► 1,582,446.			

Form 990 (2011) COCC FOUNDATION, INC.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Χ	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		_X_
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7	_	<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10	Х	<u> </u>
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
•	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
	b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		Х_
	c Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		X
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f	<u> </u>	<u>x</u>
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a	х	
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	 a Did the organization maintain an office, employees, or agents outside of the United States? b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV 	14a 14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		х
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b	<u> </u>	l

	Tit Chiconical Chicagonical Continuous			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		<u> </u>
24 a	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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
t	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		X
	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):			
ā	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
ŀ	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
	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? If 'Yes,' complete Schedule L, Part IV	28c	Х	Х
		29	_^	
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30 31		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I.	33	Х	
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34	х	
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
ı	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)? If 'Yes,' complete Schedule R, Part V, line 2	35b		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36_		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
3AA	A.	Forn	n 990	(2011)

Form 990 (2011) COCC FOUNDATION, INC.	93-6041247	Pag	je 5
Part V Statements Regarding Other IRS Filings and Tax Compliance			_
Check if Schedule O contains a response to any question in this Part V			لـــا
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b		Yes N	<u>Vo</u>
c Did the organization comply with backup withholding rules for reportable payments to vendors and (gambling) winnings to prize winners?	d reportable gamıng	X	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a	1		
b If at least one is reported on line 2a, did the organization file all required federal employment tax	returns? 2b	Х	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instruc	ctions)		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		<u>X</u>
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3b		
 4a At any time during the calendar year, did the organization have an interest in, or a signature or of financial account in a foreign country (such as a bank account, securities account, or other finances.) b If 'Yes,' enter the name of the foreign country: ► 	cial account)? 4a		X
See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year	1 1		<u>X</u>
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter tra		- +	<u>X</u>
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	. <u>5c</u>		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and dissolicit any contributions that were not tax deductible?	id the organization 6a		<u>X</u>
b If 'Yes,' did the organization include with every solicitation an express statement that such contribution not tax deductible?	outions or gifts were 6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly	for goods and		
services provided to the payor?	7a	X	
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b	Х	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which Form 8282? d If 'Yes' indicate the number of Forms 8282 filed during the year.	7c		X
an res, indicate the number of rorms of the desiring the year.	<u></u>		X
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of			$\frac{\Lambda}{X}$
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit of the organization received a contribution of qualified intellectual property, did the organization file.	le Form 8899		
as required?	· 7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization 1098-C?	7h	Х	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting or supporting organization, or a donor advised fund maintained by a sponsoring organization, have holdings at any time during the year?	rganizations. Did the excess business 8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9a		
b Did the organization make a distribution to a donor, donor advisor, or related person?	9 b	-	
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<u> </u>		
11 Section 501(c)(12) organizations. Enter	_1		
a Gross income from members or shareholders	3		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of For		$\vdash \vdash$	
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	<u> </u>		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.	13a	·-	
 a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 	-		
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 . 13t			
c Enter the amount of reserves on hand	c		

14a Did the organization receive any payments for indoor tanning services during the tax year?

14a

Form 990 (2011) COCC FOUNDATION, INC. 93-6041247 Page 6 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. X Check if Schedule O contains a response to any question in this Part VI. Section A. Governing Body and Management Yes No 16 1a Enter the number of voting members of the governing body at the end of the tax year 1 a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent 16 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х 2 officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 X of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents 4 X since the prior Form 990 was filed? 5 X Did the organization become aware during the year of a significant diversion of the organization's assets? X 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more X 7 a members of the governing body? **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a a The governing body? X 8ь **b** Each committee with authority to act on behalf of the governing body? Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the Х 9 organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code., Yes No 10 a Х 10a Did the organization have local chapters, branches, or affiliates? b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10b operations are consistent with the organization's exempt purposes? X 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 Х 12a 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise Х 12b to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done SEE SCHEDULE O Х 12c X 13 13 Did the organization have a written whistleblower policy? X 14 14 Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official SEE SCHEDULE O 15a 15_b b Other officers of key employees of the organization If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16a taxable entity during the year? 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 taken steps to safeguard the 161 organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ OR Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available. Check all that apply X Upon request Own website Another's website Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to SEE SCHEDULE O the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization.

JIM WEAVER 2600 N.W. COLLEGE WAY BEND OR 97701 (541) 383-7225

orm 990 (2011)	COCC	FOUND.	ATION,	INC.				93-60	41247	Pag
Part VII	Con	npensati	ion of C	Officers.	Directors.	Trustees.	Kev Employees.	Highest	Compensated	Employees	s. an

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

- 1 a 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	n nor any	relate	d o <u>r</u>	gan	ızatı	on co	mpe	nsated any current of	ficer, director, or trus	tee.	
(A) Name and title	(B) Average hours per week	(do no unles		((C)	an one l n an offi ustee)		(D) Reportable compensation from	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation	
	(describe hours for related organiza- tions in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations	
(1) SEE ATTACHED TRUSTEES	2	х						0.	0.	0.	
(2) JIM WEAVER EXECUTIVE DIREC	40	-		X				0.	84,380.	0.	
_(3)											
_(4)											
(6)											
_(9)			-								
(10)						··· -					
<u>(11)</u>											
(12)											
(13)											
(14)											

Name and title	(B) (do not check more than one hours officer and a director/trustee) co						h an	(D) (E) Reportable Reportable compensation from		(F) Estimated amount of other		
	per week (describ e hours for related organi- zations in Sch O)	or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099 MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations		
(15)									· · · · · · · · · · · · · · · · · · ·		_	
<u>(16)</u>				ļ							_	
(17)			-								_	
<u>(18)</u>	!				\vdash	-					_	
(19)											_	
(20)												
(21)												
(22)											_	
(23)												
(24)												
(25)						1						
1 b Sub-total c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)	A		•		•		A A	0. 0.	84,380. 0. 84,380.	0	<u>.</u>	
2 Total number of individuals (including but not limite from the organization ► 0	d to the	ose I	ıste	d ab	ove) wh	o re	ceived more than	\$100,000 of report	·	_	
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such it	ndıvıdu	al								Yes No		
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater t such individual	portable han \$1	le co 50,0	mpe 00?	ensa If '\	ition Yes'	com	i oth iplet	er compensation e Schedule J for	from	4 X	; ' <u>;</u>	
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,'	compen comple	satio te S	on fr <i>ched</i>	om dule	any <i>J fo</i>	unre or su	elate ch p	d organization or erson	ındıvıdual	5 X	<u>, </u>	
1 Complete this table for your five highest compensation from the organization. Report compe	ted inde	epen	nden the	t co	ntra	ctors	s tha	it received more t	han \$100,000 of in the organization	s tax year.		
(A) Name and business addres	-							(B Description)	(C) Compensation	_	
											_	
	-										_	
											_	
2 Total number of independent contractors (including \$100,000 in compensation from the organization ▶	_	t lim	uted	to t	hos	e list	ted a	above) who receiv	ed more than		,	
DAA										Form 900 (201		

(C)

Par	t VIII Statement of Revenue				
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f 3,122,078.				
	g Noncash contributions included in Ins 1a-1f* \$ 2,245,615. h Total. Add lines 1a-1f	3,122,078.			
3	Business Code				
É	2a PROGRAM INCOME	153,587.	153,587.		
2	b OTHER INCOME	28,989.	28,989.		
길	c				
ä	d				
ş	e				
용	f All other program service revenue				
PROGRAM SERVICE REVENUE	g Total. Add lines 2a-2f . ▶	182,576.		-	
	3 Investment income (including dividends, interest and other similar amounts).	155,263.	155,263.		
	4 Income from investment of tax-exempt bond proceeds. ▶				
	5 Royalties				
	(i) Real (ii) Personal				
	6a Gross rents				
	b Less rental expenses		İ		
	c Rental income or (loss)				
	d Net rental income or (loss)	-			
	(i) Securities (ii) Other				
	7a Gross amount from sales of assets other than inventory				
	b Less: cost or other basis and sales expenses				1
	c Gain or (loss)	_ , , ,			
	d Net gain or (loss)				
40E	8a Gross income from fundraising events (not including \$				
OTHER REVEN	of contributions reported on line 1c)				
. E	See Part IV, line 18				
띭	b Less: direct expenses b				.
6	c Net income or (loss) from fundraising events.				ļ
	9a Gross income from gaming activities See Part IV, line 19				
	b Less: direct expenses b				·
	c Net income or (loss) from gaming activities			•	
	10a Gross sales of inventory, less returns and allowances . a				
	1 2000 000t 0. geodus 00.u				
	c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code				
	11a				
	b				
	c				
	d All other revenue.				ļ
	e Total. Add lines 11a-11d				
	12 Total revenue. See instructions	3,459,917.	337,839.	0.	0.

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 re	sponse to any question	in this Part IX		
Do 1 6b, .	not include amounts reported on lines 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				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	84,380.	21,095.	21,095.	42,190.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	242,256.	59,413.	109,029.	73,814.
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
	Payroll taxes	3,436.	1,890.	344.	1,202.
11	,				
	Management	1.750		075	075
	Legal	1,750. 3,000.		875. 1,500.	875. 1,500.
	: Accounting I Lobbying	3,000.	-	1,500.	1,300.
	Professional fundraising services See Part IV, line 17				
	Investment management fees				
	Other				 -
-	Advertising and promotion				
	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	1,183.		1,183.	
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
	Conferences, conventions, and meetings				
20	Interest	654.		654.	
21	Payments to affiliates	2.005		1 040	1 047
22		2,095.		1,048.	1,047.
23 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)				
ā	SCHOLARSHIPS	1,037,944.	1,037,944.		······································
	CAPITAL SUPPORT	444,000.	444,000.		
	DIRECT FUNDRAISING EXPENSES	86,851.			86,851.
•	EVENTS	32,996.		16,498.	16,498.
•	All other expenses	96,787.	18,104.	44,978.	33,705.
25	Total functional expenses. Add lines 1 through 24e	2,037,332.	1,582,446.	197,204.	257,682.
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)				

Par	t X	Balance Sheet			
<u>-</u>			(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing .	134,321.	1	142,898.
	2	Savings and temporary cash investments	1,223,348.	2	1,157,779.
	3	Pledges and grants receivable, net	998,929.	3	630,381.
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
Ą	7	Notes and loans receivable, net	29,580.	7	
š	8	Inventories for sale or use		8	
A S E T S	9	Prepaid expenses and deferred charges		9	1,680.
	_	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 446,883.			
	h	Less accumulated depreciation 10b 21,914.	21,141.	10c	424,969.
	11	Investments – publicly traded securities	11,326,916.	11	11,100,885.
	12	Investments — publicly traded securities Investments — other securities See Part IV, line 11	11,320,310.	12	11,100,000.
	13	Investments – program-related See Part IV, line 11		13	
		Intangible assets		14	
	14	Other assets See Part IV, line 11		15	1,691,863
1	15	·	13,734,235.	16	15, 150, 455
	<u>16</u> 17	Total assets. Add lines 1 through 15 (must equal line 34) Accounts payable and accrued expenses .	16,388.	17	14,785
	18	Grants payable Grants payable	10,300.	18	21,700
- 1	19	Deferred revenue		19	
- 1	20	Tax-exempt bond liabilities		20	
Ī	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
в	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II		22	
Ţ	22	of Schedule L	270,062.	23	265,300
ē !	23	Secured mortgages and notes payable to unrelated third parties	210,002.	24	203,300
	24 25	Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	286,450.	26	280,085
_		Organizations that follow SFAS 117, check here ► X and complete lines			
Ĕ		27 through 29 and lines 33 and 34.			
Ą	27	Unrestricted net assets	1,684,832.	27	1,597,594
ASSE	28	Temporarily restricted net assets	6,885,168.	28	6,205,618
II	29	Permanently restricted net assets	4,877,785.	29	7,067,158
R	-•	Organizations that do not follow SFAS 117, check here ► and complete			,
E.		lines 30 through 34.			
Ř	30	Capital stock or trust principal, or current funds		30	
В	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
ŘΙ	32	Retained earnings, endowment, accumulated income, or other funds .		32	
AZCES	33	Total net assets or fund balances .	13,447,785.	33	14,870,370
Ĕ	34	Total liabilities and net assets/fund balances	13,734,235.		15,150,455

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Form **990** (2011)

Form 990 (2011) COCC FOUNDATION, INC.	93-6041 <u>247</u>		Pa	ge 12	
Part XI Reconciliation of Net Assets					
Check if Schedule O contains a response to any question in this Part XI					
 Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (A)) 	5	2,0		32. 85. 85.	
column (B)) Part XII Financial Statements and Reporting		7 0	, .		
Check if Schedule O contains a response to any question in this Part XII					
Check it contours a respense to any question in this variation			Yes	No	
1 Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O				-	
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X</u>	
b Were the organization's financial statements audited by an independent accountant?		2b	X		
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.					
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were separate basis, consolidated basis, or both. X Separate basis Consolidated basis Both consolidated and separate basis	issued on a				
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Audit Act and OMB Circular A-133?	the Single	3a		<u>x</u>	
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required audit	3b			
BAA		Form	990 ((2011)	

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection Employer identification number

Name of t	Name of the organization Employer identification number										
		NDATION, IN)41247	
Part I	Re	eason for Publ	ic Charity Status	(All organizations	must c	omple	te this	part.)	See ir	struct	ions.
The org	<u>j</u> anıza	ition is not a priva	te foundation because	e it is: (For lines 1 throi	ugh 11,	check o	nly one	box)		•	
1 [_] A c	hurch, convention	of churches or assoc	iation of churches desc	ribed in	section	170(b)	(1)(A)(i).			
2	_] A s	chool described in	section 170(b)(1)(A)	(ii). (Attach Schedule E	Ξ)						
3	Ah	ospital or a coope	erative hospital service	e organization describe	d in sec	tion 170	(b)(1)(A)(iii).			
4	An	nedical research o	rganization operated	in conjunction with a he	ospital c	describe	d in sec	tion 170)(b)(1)(A	XXIII) Er	nter the hospital's
		ne, city, and state									
5	<u>~</u> 170)(b)(1)(A)(iv). (Co	mplete Part II)	f a college or university		·	-	J	nmental	unit des	scribed in section
7	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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 c	ommunity trust de	escribed in section 17	0(b)(1)(A)(vi). (Complet	e Part I	I)					
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 orga	nized and operated e	xclusively to test for pu	blic safe	ety See	section	509(a)	(4).		
11 [An organization organized and operated exclusively for the benefit of, to perform the functions of, or 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	– Fund	tionally	ıntegrat	ed		d 🗌	Type III - Other
e [
f		he organization re eck this box	ceived a written deter	mination from the IRS	that is a	Type I	Type II	or Type	e III sup	porting (organization,
g	Sın	ce August 17, 200	6, has the organization	on accepted any gift or	r contrib	ution fro	m any	of the fo	llowing	persons	i?
											Yes No
	(i)	below, the gove	erning body of the sup	•	together	with pe	rsons d	escribe	d in (ii)	and (III)	11 g (i)
	(ii)	-	er of a person describ	• •							11 g (ii)
	(iii)			described in (i) or (ii) al							11 g (iii)
<u> </u>	Pro	vide the following	information about the	e supported organizatio	n(s)						
	1 (1)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organiz column (i your go	Is the tation in	the organ	ou notify nization in n (i) of upport?	organiz	s the ation in in (i) ed in the S ?	(vii) Amount of support
					Yes	No	Yes	No	Yes	No	
(A)											
(B)											
											
(C)											
<u>(D)</u>				<u> </u>							
<u>(E)</u>		<u></u>									
Total											

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

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

Sec	tion A. Public Support								
begii	ndar year (or fiscal year nning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total		
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants')	2,244,005.	1,300,155.	1,056,196.	2,111,090.	3,122,078.	9,833,524.		
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.		
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.		
4	Total. Add lines 1 through 3	2,244,005.	1,300,155.	1,056,196.	2,111,090.	3,122,078.	9,833,524.		
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						0.		
6	Public support. Subtract line 5 from line 4			_			9,833,524.		
Sec	tion B. Total Support								
	ndar year (or fiscal year nning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total		
7	Amounts from line 4	2,244,005.	1,300,155.	1,056,196.	2,111,090.	3,122,078.	9,833,524.		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	303,804.	276,419.	237,265.	231,419.	246,147.	1,295,054.		
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.		
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV). SEE PART IV	232,855.	157,177.	207,892.	160,015.	182,576.	940,515.		
11	Total support. Add lines 7 through 10						12,069,093.		
12	Gross receipts from related activ	vities, etc (see ins	tructions)			12	0.		
	First five years. If the Form 990 organization, check this box and	stop here		nd, third, fourth, o	or fifth tax year as	a section 501(c)(3)		
<u>Sec</u>	tion C. Computation of Pu	blic Support F	ercentage						
	Public support percentage for 20	• '	• • • • • • • • • • • • • • • • • • • •	ne 11, column (f))	14	81.48%		
	Public support percentage from	-	•			15	76.84 %		
16 a	16a 33-1/3% support test — 2011. If the organization did not check the box on line 13, and the 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 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions								
18		ization did not che	eck a box on line	13, 16a, 16b, 17a					
BAA					So	nequie A (Form 9	90 or 990-EZ) 2011		

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)

Sect	ion A. Public Support		· · · · · · · · · · · · · · · · · · ·	·	***	 	 -
	lar year (or fiscal yr beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include any 'unusual grants ')	(4) 2007	(5) 2000	(5) 2003	(4) 2010	(4) 2011	.y.,5td
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or						
	facilities furnished by a governmental unit to the organization without charge			<u></u>			
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b		_				
	Public support (Subtract line 7c from line 6.)						
<u>Sec</u>	tion B. Total Support						
Calen	dar year (or fiscal yr beginning in)►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV).						
13	Total support. (Add Ins 9, 10c, 11, and 12)				L		
14	First five years. If the Form 990 organization, check this box and	is for the organiz	ation's first, seco	nd, third, fourth,	or fifth tax year as	a section 501(c)	(3) ▶ □
Sec	tion C. Computation of Pu						
15	Public support percentage for 20			ne 13, column (f))	15	8
16	Public support percentage from					16	8_
	tion D. Computation of Inv			e			
17	Investment income percentage f	or 2011 (line 10c	, column (f) divide	ed by line 13, colu	umn (f))	17	%
18	Investment income percentage f					18_	%
	33-1/3% support tests — 2011. It is not more than 33-1/3%, check	this box and sto	p here. The organ	nization qualifies	as a publicly supp	orted organizatio	n
	33-1/3% support tests — 2010. In line 18 is not more than 33-1/3%						
20	Private foundation. If the organi	zation did not che	eck a box on line	14, 19a, or 19b,	check this box and	d see instructions	

Schedule A	(Form 990 or 1	990-EZ) 2011	COCC	FOUND	ATION,	INC.		93-60	41247	Page 4
Part IV	Supplemen Part II, line (See instruc	tal Informa 17a or 17b ctions).	i tion. Co ; and Pa	mplete art III, lii	this par ne 12. A	t to pro Also co	ovide the explana mplete this part	ations required by for any additional	Part II, line information.	10;
				_						
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2011 SCHE	DULE	A, PART	IV - SUPP	LEMENTAL	INFORMATI	ON PAGE
CLIENT 1516		coc	C FOUNDATION	ON, INC.		93-60412
11/06/12 PART II, LINE 10 - OTH	ER INCON	ΛE				10 32/
NATURE AND SOURCE		2011	2010	2009	2008	2007
PROGRAM AND OTHER	TOTAL \$	182,576. 182,576.	160,015 \$ 160,015	. 207,892. \$ 207,892.	157,177. \$ 157,177.	232,855. 232,855.

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, lines 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

Open to Public Inspection

Name of the organization Employer identification number COCC FOUNDATION, INC 93-6041247 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 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year 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? No 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? No Yes Part II Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space 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 24 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section No 170(h)(4)(B)(i) and section $170(h)(4)(B)(ii)^{2}$ 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 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

▶\$

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection receive (check all that apply) a Public exhibition d Loan or exchange programs b Scholarly research Cher c Preservation for future generations 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 Yes No search be sold to finds be than to be invariant dis part of the organization's collection? Yes No search be sold to finds be than to be invariant dis part of the organization answered Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not include on Form 990, Fart XIV and complete the following table:	Schedule D (Form 990) 2011 COCC					93-6041			Page 2
a public exhibition d Loan or exchange programs e Other c Persevute or 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'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 small assets to be sold to rase funds rather than to be maintained as part of the organization answered "Yes" to Form 990, Part IV, line 91, 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, line 21. 1a is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not include an emount on Form 990, Part X, line 21. 1a is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not include an emount or form 990, Part X, line 21. 1a is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not include an emount or form 990, Part X, line 21. 1a is the organization include an amount on Form 990, Part X, line 21. 1b if "Yes, explain the arrangement in Part XIV. Part VIENDOMEMENT Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1b if "Yes, explain the arrangement in Part XIV. 1a Beginning of year balance (b) Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1b if "Yes, explain the arrangement in Part XIV. 1a Beginning of year balance (b) Complete if the organization answered "Yes" to Form 990, Part X, line 21. 1a Beginning of year balance (b) Complete if the organization answered "Yes" to Form 990, Part X, line 21. 1b if "Yes, to Form 990, Part X, line 21. 2c Temporarity restricted endowment	Part III Organizations Mainta	ining Collection	s of Art, Histo	rical	Treasures, or C	Other Similar Ass	ets (co	ntınu	ed)
b Scholarly research e Other reservation for future generations Provision a description of the organization's collections and explain how they further the organization's exempt purpose in Provision and explain how they further the organization's exempt purpose in Superior 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, fustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? 1a is the organization an agent, fustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? 1b if "Yes, Explain the arrangement in Part XIV and complete the following table: 1 c Beginning balance 2 a Det the organization include an amount on Form 990, Part X, line 21? 2 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. 1 a Beginning of year balance 3 b Contributions 4 (a) Curret, year (b) Prior, year (c) Two years back (d) Three years	items (check all that apply)	on, accession, and	other records, che	eck an	y of the following t	nat are a significant us	se of its	collect	ion
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b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds SEE PART XIV Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements d Equipment e Other Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)	_								
4 Describe in Part XIV the intended uses of the organization's endowment funds SEE PART XIV Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (other) 419,729. b Buildings c Leasehold improvements d Equipment e Other Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) (c) Accumulated depreciation (d) Book value (1) Book value 27,154. 21,914. 5,240.		organizations listed	as required on So	shadul	a P2	• • •		$\overline{}$	├
Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (other) 1 a Land 1 a Land 4 19,729. b Buildings c Leasehold improvements d Equipment e Other Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) (c) Accumulated depreciation 419,729. 419,729. 21,914. 5,240.						XTV	<u> 30</u> [
Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation 1 a Land 419,729. 419,729. C Leasehold improvements d Equipment e Other Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) (c) Accumulated depreciation 419,729. 419,729. 21,914. 5,240.						212 1			
1a Land 419,729. 419,729. b Buildings C Leasehold improvements 21,729. d Equipment 27,154. 21,914. 5,240. Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) 424,969.		(a) Co	st or other basis	(b)	Cost or other		(d) B	ook va	lue
c Leasehold improvements d Equipment d Equipment 27,154. 21,914. 5,240. Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ▶ 424,969.	1 a Land							419,	729.
d Equipment e Other 27,154. 21,914. 5,240. Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ▶ 424,969.	b Buildings								
e Other 27, 154. 21, 914. 5, 240. Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ► 424, 969.	c Leasehold improvements								
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) 424, 969.	d Equipment								
						21,914.			
		nn (d) must equal F	orm 990, Part X,	colum	n (B), line 10(c).)	<u> </u>			

TEEA3302L 01/16/12

Schedule	D (Form 990) 2011 COCC FOUNDATION,	INC.		93-6041247	Page 3
Part VII	Investments - Other Securities. See	Form 990, Part X, I	line 12. N/A		
	(a) Description of security or category (including name of security)	(b) Book value	(c) M	ethod of valuation id-of-year market value	
	cial derivatives				
	y-held equity interests				
(3) Other					
<u>(A)</u>					
<u>(B)</u>					
(0)					
<u>(D)</u>					
(F)					
(G)					
(H)				- · · · · · · · · · · · · · · · · · · ·	
<u>_(i)</u>					
	ımn (b) must equal Form 990 Part X, column (B) line 12)				
	I Investments - Program Related. See	Form 990, Part X,			
	(a) Description of investment type	(b) Book value	(c) M	ethod of valuation: nd-of-year market value	
(1)					
(2)					
(3)					
(4)					
(5)					
(6)				· · ·	
(7)					
(8)					
(9)				· · · · · ·	
(10)					
	mn (b) must equal Form 990, Part X, column (B) line 13)				
Part IX	Other Assets. See Form 990, Part X,				
		escription		(b) Book va	
(1) LL(<u> </u>			1,691,	863.
(2)		·			
(3)			<u></u>		
(4)					
(5)			<u> </u>		
(6)					
(7)					
(8)			· · ·		
(9)					
(10)					
Total. (C	olumn (b) must equal Form 990, Part X, column			▶ 1,691,	863.
Part X	Other Liabilities. See Form 990, Part	X, line 25.			
	(a) Description of liability	(b) Book value			
(1) Fed	eral income taxes				
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)			 		
(11)					
	ımn (b) must equal Form 990, Part X, column (B) line 25)	▶			
	(ASC 740) Footnote In Part XIV, provide the tex	t of the footnote to the o	proanization's financial st	atements that reports the	
organizat	ion's liability for uncertain tax positions under FIN	N 48 (ASC 740)	30201101.0 11110110101		

Sche	dule D (Form 990) 2011 COCC FOUNDATION, INC.	93-60412	247	Page 4
Par	t 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)		3,459,	917.
2	Total expenses (Form 990, Part IX, column (A), line 25)	. 🗀	2,037,	
3	Excess or (deficit) for the year Subtract line 2 from line 1		1,422,	
4	Net unrealized gains (losses) on investments	. 🗆		
5	Donated services and use of facilities			
6	Investment expenses .		-	
7	Prior period adjustments .			
8	Other (Describe in Part XIV)			
9	Total adjustments (net). Add lines 4 through 8			
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		1,422,	585.
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue pe	r Return		
1	Total revenue, gains, and other support per audited financial statements .	1	3,459,	917.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains on investments 2a			
b	Donated services and use of facilities 2b			
c	Recoveries of prior year grants 2c			
c	Other (Describe in Part XIV)			
e	Add lines 2a through 2d	2e		_
3	Subtract line 2e from line 1.	3	3,459,	917.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	Investment expenses not included on Form 990, Part VIII, line 7b			
	Other (Describe in Part XIV)			
	Add lines 4a and 4b.	4c		
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	3,459,	917.
	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Return		
	Total expenses and losses per audited financial statements	1	2,037,	332.
	Amounts included on line 1 but not on Form 990, Part IX, line 25:		<u> </u>	
	Donated services and use of facilities 2a			
	Prior year adjustments 2b			
	Other losses 2c			
	Other (Describe in Part XIV)			
	Add lines 2a through 2d	2e		
3	Subtract line 2e from line 1	3	2,037	332
J	Amounts included on Form 990, Part IX, line 25, but not on line 1:	 •	2,031	332.
٠,	Investment expenses not included on Form 990, Part VIII, line 7b			
	O Other (Describe in Part XIV)			
	Add lines 4a and 4b.	4c		
	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	2,037	332.
_	t XIV Supplemental Information		<u> </u>	
Com Part any	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Par 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 com additional information	rt IV, lines 1b plete this par	and 2b, t to provide	
	PART Y, LINE 4 - INTENDED USES OF ENDOWMENT EUND			- <i>-</i>
	ENDOWMENT FUNDS ARE USED TO PROVIDE SCHOLARSHIPS AND PROGRAM SUPPO	BT TO CO	CC,_ AND	
	CURRED WIR CORE TOWNS TON THE ACCORDANCE LITTLE MUE DOMORG LITCHES A	ND OUD M	TOSTON	
	SUPPORT THE COCC FOUNDATION IN ACCORDANCE WITH THE DONORS WISHES A	שה אחר ש	エクシェロダー	
			- -	

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Schedule **D** (Form 990) 2011

Schedule D	Form 990) 2011 COCC FOUNDATION, INC.	93-6041247	Page 5
Pärt XIV.	Supplemental Information (continued)		
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		-	-
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TEEA3305L 05/25/11

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Schedule **D** (Form 990) 2011

SCHEDULE M (Form 990)

Noncash Contributions

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

OMB No 1545-0047

2011

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990.

Open To Public Inspection

Employer identification number

	CC FOUNDATION, INC.			93-	604124	7		
Par	t I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Metho noncash	(d d of d contrib	etermın.	ing nounts
1	Art - Works of art							
2	Art - Historical treasures.							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded							
10	Securities - Closely held stock		* ** = · .			•		
11	Securities – Partnership, LLC, or trust interests.							
12	Securities - Miscellaneous	-						· -· ··
13	Qualified conservation contribution – Historic structures							
14	Qualified conservation contribution — Other							
15	Real estate — Residential	-			·			
	Real estate — Commercial	X	1	2,006,615.	-			
16		$\frac{\hat{x}}{x}$		239,000.				
17	Real estate — Other		<u></u>	239,000.	 	•••		
18	Collectibles							
19	Food inventory	-						
20	Drugs and medical supplies		· · · · · · · · · · · · · · · · · · ·					
21	Taxidermy							
22	Historical artifacts.				ļ			
23	Scientific specimens .							
24	Archeological artifacts	ļ			ļ			
25	Other ► ()				ļ			
26	Other ► ()			\ <u></u>				
27	Other ► ()							
_28	Other ► (<u> </u>				
29	Number of Forms 8283 received by the organization completed Form 8283, Part IV, Done	ion during the	e tax year for contribut Igement	tions for which the	29			
							Yes	No
30	a During the year, did the organization receive by c hold for at least three years from the date of the purposes for the entire holding period?	contribution a initial contrib	iny property reported in oution, and which is no	n Part I, lines 1-28 that it required to be used fo	or exempt	30 a		X
ı	If 'Yes,' describe the arrangement in Part II							
	Does the organization have a gift acceptance pol				ons?	31	Х	
	Does the organization hire or use third parties or noncash contributions?	related orga	nizations to solicit, pro	ocess, or sell		32 a		Х
	of If 'Yes,' describe in Part II				1			
33	If the organization did not report an amount in codescribe in Part II.	olumn (c) for	a type of property for	which column (a) is chi	ecked,			

Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.	Schedule	M (Form 990) 2011	COCC FOUNDAT	CION,	INC.				93-6041247	Page 2
number of items received, or a combination of both. Also complete this part for any additional information.	Part II	Supplemental I and 33, and wh	nformation. Comether the organiz	plete ation	this part is report	to providing in Par	e the infori t I, column	mation required (b), the numerous	ed by Part I, lines in the solution of contribution	30b, 32b, is, the
	•	number of item	s received, or a c	combir	nation of	both. Als	o complete	this part for	any additional info	ormation.
		· 								
		· 								
		·						- 		
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047
2011

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Department of the Treasury Internal Revenue Service 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.

Name of the organization	Employer identification number
COCC FOUNDATION, INC.	93-6041247
FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS	
THE FORM 990 IS REVIEWED BY THE BUDGET COMMITTEE. THE RETURN IS	THEN EMAILED TO THE
BOARD OF TRUSTEES PRIOR TO THE BOARD MEETING. AT THE BOARD MEET	ING, WITH OUR CPA
PRESENT, THE FORM 990 IS PRESENTED FOR DISCUSSION AND QUESTIONS	. BOARD ACTION IS
TAKEN TO APPROVE THE FORM 990 PRIOR TO FILING.	
FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEME	ENT OF CONFLICTS
ANNUALLY, AT THE NOVEMBER BOARD MEETING, THE BOARD OF TRUSTEES	ARE REQUESTED TO
COMPLETE AND SIGN A CONFLICT OF INTEREST STATEMENT. FOR ANY BOA	ARD MEMBERS THAT ARE
ABSENT, CONFLICT OF INTEREST STATEMENTS ARE EMAILED.	
FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS	FOR CEO, EXEC. DIR., OR TOP MG
THE COMPENSATION FOR THE EXECUTIVE DIRECTOR'S POSITION WAS DETE	ERMINED BY A
COMPARABLE STUDY WITHIN THE COMMUNITY OF NON-PROFIT ORGANIZATION	ONS. THIS STUDY WAS
PERFORMED BY AN INDEPENDENT PERSON WITHIN THE HUMAN RESOURCE DE	PARTMENT OF COCC. IT
WAS THEN PRESENTED TO THE EXECUTIVE COMMITTEE OF THE BOARD. DOC	CUMENTATION WAS KEPT
FOR APPROXIMATELY ONE YEAR.	
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AV	/AILABLE
DOCUMENTS ARE AVAILABLE UPON REQUEST.	

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered 'Yes' to Form 990, Part IV, line 33, 34, 35, 36, or 37.
 Attach to Form 990. P See separate instructions.

2011

OMB No 1545-0047

Open to Public Inspection.

Employer identification number

Name of the organization COCC FOUNDATION, INC.					Employer identification number 93-6041247	ation number	
Identification of Disregarded Entities (Complete If	rganization ans	swered 'Yes'	to Form 990,	the organization answered 'Yes' to Form 990, Part IV, line 33.)			
(a) Name, address, and EIN of disregarded entity Pri	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Total income Enc	(e) End-of-year assets	(f) Direct controlling entity	olling
(1) COCC FOUNDATION PROPERTY, LLC	INVESTMENT	SN		29,061.	1, 691, 863.	COCC	NOI
(2)							
(3)						1	
Part II Identification of Related Tax-Exempt Organizations (Co	emplete if the or	rganization a	answered 'Yes	ns (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had	It IV, line 34 be	scause it ha	þ
one or more related tax-exempt organizations dur	ing the tax year.))					
(a) (b) Name, address, and EIN of related organization Primary activity		(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(f section 501(c)(3))	(f) Direct controlling entity		(g) Sec 512(b)(13) controlled entity?
						Yes	No
(1) CENTRAL OREGON COMMUNITY COLLEGE 2600 NW COLLEGE WAY		USA	MUNICIPAL		N/A		×
						:	
(3)							
	· · ·						
<u>(4)</u>							
BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	-	F	TEEA5001L 09/08/11		Sched	Schedule R (Form 990) 2011	90) 2011

Page 2

93-6041247

Schedule R (Form 990) 2011 COCC FOUNDATION, INC.

(k) Percentage ownership (h) Percentage ownership parive Identification of Related Organizations Taxable as a Corporation or Trust (Complete of the organization answered 'Yes' to Form 990, Part IV, Partilia Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) General or managing partner? (g) Share of end-of-year assets ž Yes Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Share of total income (h)
Disproportionate
allocations? ŝ line 34 because it had one or more related organizations treated as a corporation or trust during the tax year. Yes (g)
Share of
end-of-year
assets (f) Share of total Direct □ ıncome (e)
Predominant
income (related,
unrelated, excluded
from tax under
sections 512-514) (b)
Primary activity Direct controlling entity € (c)
Legal
domicile
(state or
foreign (a) Name, address, and EIN of related organization (b) Primary activity Name, address, and EIN of related organization Ē ١ ı 닫 음 ଫ୍ର ଫ୍ର ଷ୍ଟ ପ୍ର

Schedule **R** (Form 990) 2011

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93-6041247

Part V Transactions With Related Organizations (Complete of 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				Yes	No
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?	ons listed in Parts II.	-1\/2		· i	•
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity			1a		×
b Gift, grant, or capital contribution to related organization(s)			1 P	×	
c Gift, grant, or capital contribution from related organization(s)			10		×
d Loans or toan guarantees to or for related organization(s)			1g		×
e Loans or loan quarantees by related organization(s)			1		×
			2	T	: -
f Sale of assets to related organization(s)			-	į	×
g Purchase of assets from related organization(s)			19	_	×
h Exchange of assets with related organization(s)			- H		×
i Lease of facilities, equipment, or other assets to related organization(s)			; =		×
i Lease of faculties, equipment, or other assets from related organization(s)			į=	1	_ ×
k Performance of services or membership or fundraising solicitations for related organization(s)			¥	-	×
I 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)			E	×	
n Sharing of paid employees with related organization(s)			-L	×	
			Į Į	;	1
o Reimbursement paid to related organization(s) for expenses			ို	×	:
p Reimbursement paid by related organization(s) for expenses			2		×
a Other transfer of cash or property to related organization(s)			10	×	7
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	covered relationship	os and transaction thres	splods		
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved	f) determi involve	p. p.
(1) CENTRAL OREGON COMMUNITY COLLEGE	В	444,000.	FAIR VALUE	LUE	
(2) CENTRAL OREGON COMMUNITY COLLEGE	0	1,037,944.	FAIR VALUE	LUE	
(3)					
(4)					
(5)					
(9)					
BAA TEEA5003L 05/24/11		Sched	Schedule R (Form 990) 2011	(066 1	<u> </u>

Schedule R (Form 990) 2011 COCC FOUNDATION, INC.

Partwin Unrelated Organizations Taxable as a Partnership (Complete if the organization answered 'Yes' to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

Name, address, and EIN of entity Primary activity		(c) Legal domicile (state or foreign country)	Predominant Income (related, unrelated, excluded from tax under	(e) Are all partners section 501(c)(3) organizations?	(f) Share of total income	(g) Share of end-of-year assets	h) ropor- nate strons?	Code V-UBI amount in box 20 of Schedule K-1 Form (1065)	Genera manag partne	l or Perc	(k) Percentage ownership
			section 512-514)	Yes No			Yes No		Yes	<u>و</u>	
						-	_				
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			旦	TEEA5004L 05/24/11				Schec	Schedule R (Form 990) 2011	orm 990)) 2011

Schedule R	(Form 990) 2011	Page 5
Part VII	(Form 990) 2011 Supplemental Information Complete this part to provide additional information for responses to questions on Schedule R	, ago e
	Complete this part to provide additional information for responses to questions on Schedule R (see instructions).	
		-
		-
		- -
 -		- -