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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

2012

Open to Public Inspection

A For the 2012 calendar year, or tax year beginning and ending

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

C Name of organization
CALIFORNIA FIRE SAFE COUNCIL, INC.

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
502 W. ROUTE 66, SUITE 17

City, town, or post office, state, and ZIP code
GLENDORA, CA 91740

F Name and address of principal officer: MARGARET GRAYSON
502 W. ROUTE 66, SUITE 17, GLENDORA, CA 917

D Employer identification number
75-3078419

E Telephone number
(626) 335-7426

G Gross receipts $ 3,441,914.

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: ▶ WWW.FIRESAFECOUNCIL.ORG

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

L Year of formation: 1993 M State of legal domicile: CA

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: TO PROVIDE AN ONLINE GRANT APPLICATION PROCESS, PROVIDE TECHNICAL SUPPORT, AND EDCUATIONAL		
	2	Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	14
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	13
	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	9
	6	Total number of volunteers (estimate if necessary)	6	30
	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.

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	15,402,956.	3,430,863.
	9	Program service revenue (Part VIII, line 2g)	592.	5,645.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,561.	5,406.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	15,406,109.	3,441,914.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	14,267,985.	2,542,158.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	776,402.	603,680.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,535.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	353,737.	286,626.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	15,398,124.	3,432,464.
	19	Revenue less expenses Subtract line 18 from line 12	7,985.	9,450.

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	2,582,645.	1,853,965.
	21	Total liabilities (Part X, line 26)	2,424,749.	1,686,619.
	22	Net assets or fund balances Subtract line 21 from line 20	157,896.	167,346.

Part II Signature Block

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

Sign Here

▶ Signature of officer — Date ▶ 11/6/13

▶ MARGARET GRAYSON, EXECUTIVE DIRECTOR
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: ERICH RAIL	Preparer's signature	Date: 11/5/13	Check ☐ if self-employed	PTIN: P00174228
Firm's name ▶ MARTIN WERBELOW LLP			Firm's EIN ▶	95-1720829
Firm's address ▶ 300 N LAKE AVE, SUITE 930 PASADENA, CA 91101-4106			Phone no.	(626) 577-1440

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

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Part 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

MOBILIZING CALIFORNIANS TO PROTECT THEIR HOMES, COMMUNITIES, AND ENVIRONMENTS FROM WILDFIRE.

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 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 $ 3,228,922. including grants of $ 2,542,158.) (Revenue $ 5,645.)

THE ORGANIZATION ACTS AS A GRANT CLEARINGHOUSE AND REVIEWS, SELECTS, FUNDS, AND MONITORS GRANTS TO LOCAL ORGANIZATIONS, NONPROFITS, AND LOCAL GOVERNMENT AGENCIES FOR WILDFIRE PREVENTION AND EDUCATION. ADDITIONALLY, THE ORGANIZATION PROVIDES TECHNICAL ASSISTANCE AND EDUCATIONAL OPPORTUNITIES TO SUCH GROUPS, ESPECIALLY LOCAL FIRE SAFE COUNCILS.

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

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

4d Other program services (Describe in Schedule O)

(Expenses $ _____ including grants of $ _____) (Revenue $ _____)

4e **Total program service expenses** ▶ 3,228,922.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors*?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, 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		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		X
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*	11a		X
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*	11b		X
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*	11c		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*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		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*	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	X	
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 and XII is optional*	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, 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*	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		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? *If "Yes," complete Schedule F, Parts III and IV*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		X
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules *(continued)*

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	8		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	9		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		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?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b		
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?		7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		8		
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	**Section 501(c)(7) organizations.** Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	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	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 [X]

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 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.	1a	14		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	13		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3			X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6	Did the organization have members or stockholders?	6			X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a			X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		X	
b	Each committee with authority to act on behalf of the governing body?	8b		X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9			X

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

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

Section C. Disclosure

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

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 [X] Another's website [X] Upon request [ ] Other *(explain in Schedule O)*

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: ▶

NORMAN MOLINE, JR., CPA - 626-445-5554
150 N. SANTA ANITA AVE., SUITE. 640, ARCADIA, CA 91006

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 (list any hours for related organizations below line)	(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			
PATRICK KIDDER CHAIRMAN	20.00	X		X				45,000.	0.	0.
J. LOPEZ VICE CHAIRMAN	3.00	X		X				0.	0.	0.
DAVID HORNE TREASURER	3.00	X		X				0.	0.	0.
TROY WHITMAN SECRETARY	2.00	X		X				0.	0.	0.
KATE DARGAN BOARD MEMBER	2.00	X						0.	0.	0.
NIEL FISCHER BOARD MEMBER	2.00	X						0.	0.	0.
BRUCE TURBEVILLE BOARD MEMBER	2.00	X						0.	0.	0.
DAVE BISCHEL BOARD MEMBER	2.00	X						0.	0.	0.
JERRY DAVIES BOARD MEMBER	2.00	X						0.	0.	0.
FRANK STEWART BOARD MEMBER	2.00	X						0.	0.	0.
JAY WATSON BOARD MEMBER	2.00	X						0.	0.	0.
WALTER MCCALL BOARD MEMBER	2.00	X						0.	0.	0.
PAT FROST BOARD MEMBER	2.00	X						0.	0.	0.
MARGARET GRAYSON EXECUTIVE DIRECTOR	40.00			X				104,509.	0.	13,077.
PHYLLIS BANDUCCI BOARD MEMBER	2.00							0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(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			
1b Sub-total ▶								149,509.	0.	13,077.
c Total from continuation sheets to Part VII, Section A ▶								0.	0.	0.
d Total (add lines 1b and 1c) ▶								149,509.	0.	13,077.

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 ▶ 1

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

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	3,376,558.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	54,305.				
	g Noncash contributions included in lines 1a-1f $						
	h Total. Add lines 1a-1f			3,430,863.			
Program Service Revenue		Business Code					
	2a PROGRAM SERVICE REVENU	900099		5,645.	5,645.		
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			5,645.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			5,406.			5,406.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
		(i) Real	(ii) Personal				
	6a Gross rents						
	b Less rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)						
		(i) Securities	(ii) Other				
	7a Gross amount from sales of assets other than inventory						
	b Less cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss)						
	8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c) See Part IV, line 18	a					
	b Less. direct expenses	b					
	c Net income or (loss) from fundraising events						
	9a Gross income from gaming activities See Part IV, line 19	a					
	b Less direct expenses	b					
	c Net income or (loss) from gaming activities						
	10a Gross sales of inventory, less returns and allowances	a					
	b Less cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
	Miscellaneous Revenue		Business Code				
	11a						
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d						
	12 Total revenue. See instructions.			3,441,914.	5,645.	0.	5,406.

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).

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	2,542,158.	2,542,158.		
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	162,586.	102,560.	58,851.	1,175.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	371,457.	365,951.	5,392.	114.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	9,965.	9,332.	608.	25.
9 Other employee benefits	17,039.	16,775.	249.	15.
10 Payroll taxes	42,633.	37,598.	4,945.	90.
11 Fees for services (non-employees):				
a Management				
b Legal	5,278.	4,758.	520.	
c Accounting	63,742.		63,742.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	10,899.	9,711.	1,188.	
12 Advertising and promotion	3,850.	3,850.		
13 Office expenses	30,012.	13,009.	16,996.	7.
14 Information technology				
15 Royalties				
16 Occupancy	94,996.	77,855.	17,040.	101.
17 Travel	52,152.	31,192.	20,960.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	12,610.	10,720.	1,890.	
20 Interest	25.		25.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	13,062.	3,453.	9,601.	8.
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 _____				
c _____				
d _____				
e All other expenses _____				
25 **Total functional expenses.** Add lines 1 through 24e	3,432,464.	3,228,922.	202,007.	1,535.
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

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

			(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing	1,842,407.	1	703,164.
	2	Savings and temporary cash investments	587,006.	2	641,537.
	3	Pledges and grants receivable, net	132,737.	3	487,687.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6	Loans and other 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 instr) Complete Part II of Sch L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	16,006.	9	17,838.
	10a	Land, buildings, and equipment. cost or other basis Complete Part VI of Schedule D 10a			
	b	Less accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	4,489.	15	3,739.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	2,582,645.	16	1,853,965.
Liabilities	17	Accounts payable and accrued expenses	386,928.	17	75,184.
	18	Grants payable	1,150,228.	18	1,288,902.
	19	Deferred revenue	887,593.	19	322,533.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	
	26	**Total liabilities.** Add lines 17 through 25	2,424,749.	26	1,686,619.
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☒ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	42,879.	27	45,673.
	28	Temporarily restricted net assets	115,017.	28	121,673.
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	157,896.	33	167,346.
	34	Total liabilities and net assets/fund balances	2,582,645.	34	1,853,965.

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	3,441,914.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,432,464.
3	Revenue less expenses Subtract line 2 from line 1	3	9,450.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	157,896.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	167,346.

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: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2a		X
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2b	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	X	

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization	Employer identification number
CALIFORNIA FIRE SAFE COUNCIL, INC.	75-3078419

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

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

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II)

9 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III.)

10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Non-functionally integrated

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i)	A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?		
(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).

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	10113612.	13559823.	18741959.	15402956.	3430863.	61249213.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	10113612.	13559823.	18741959.	15402956.	3430863.	61249213.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4						61249213.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	10113612.	13559823.	18741959.	15402956.	3430863.	61249213.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	16,372.	14,589.	4,394.	2,561.	5,406.	43,322.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	2,474.	700.	5,029.	592.	5,645.	14,440.
11 **Total support.** Add lines 7 through 10						61306975.

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

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	99.91 %
15 Public support percentage from 2011 Schedule A, Part II, line 14	15	99.89 %

16a **33 1/3% support test - 2012.** 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 - 2011.** 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 - 2012.** 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 - 2011.** 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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total support.** (Add lines 9, 10c, 11, and 12)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2012** (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from **2011** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2012.** 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 - 2011.** 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

2012

Open to Public Inspection

Name of the organization: CALIFORNIA FIRE SAFE COUNCIL, INC.

Employer identification number: 75-3078419

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

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

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

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

		Held at the End of the Tax Year
a Total number of conservation easements	2a	
b Total acreage restricted by conservation easements	2b	
c Number of conservation easements on a certified historic structure included in (a)	2c	
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, 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 XIII, 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 XIII

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 XIII 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 XIII Check here if the explanation has been provided in Part XIII ☐

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

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

a Board designated or quasi-endowment ▶ _____ %
b Permanent endowment ▶ _____ %
c Temporarily restricted endowment ▶ _____ %

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

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

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

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				0.

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

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

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

2. FIN 48 (ASC 740) Footnote In Part XIII, 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) Check here if the text of the footnote has been provided in Part XIII [X]

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

1	Total revenue, gains, and other support per audited financial statements			1	3,441,914.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.				
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	3,441,914.
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 XIII)	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	3,441,914.

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

1	Total expenses and losses per audited financial statements			1	3,432,464.
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 XIII)	2d			
e	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	3,432,464.
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 XIII)	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	3,432,464.

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

PART X, LINE 2: CFSC CONSIDERS MANY FACTORS WHEN EVALUATING AND ESTIMATING ITS TAX POSITIONS AND TAX BENEFITS, WHICH MAY REQUIRE PERIODIC ADJUSTMENTS AND WHICH MAY NOT ACCURATELY ANTICIPATE ACTUAL OUTCOMES. CFSC EVALUATES ITS UNCERTAIN TAX POSITIONS IN ACCORDANCE WITH STANDARDS SET FORTH UNDER U.S. GAAP. THESE STANDARDS REQUIRE MANAGEMENT TO PERFORM AN EVALUATION OF ALL INCOME TAX POSITIONS TAKEN, OR EXPECTED TO BE TAKEN, IN THE COURSE OF PREPARING CFSC'S TAX RETURNS. MANAGEMENT BELIEVES THE TAX POSITIONS TAKEN MORE LIKELY THAN NOT WILL BE SUSTAINED UNDER EXAMINATION

Part XIII Supplemental Information *(continued)*

BY THE APPLICABLE TAX AUTHORITIES. EXAMPLES OF TAX POSITIONS TAKEN INCLUDE THE TAX-EXEMPT POSITION OF CFSC AND VARIOUS POSITIONS RELATED TO THE POTENTIAL SOURCES OF UNRELATED BUSINESS TAXABLE INCOME. SINCE MATTERS ARE SUBJECT TO SOME DEGREE OF UNCERTAINTY, THERE CAN BE NO ASSURANCE THAT CFSC'S TAX RETURNS WILL NOT BE CHALLENGED BY THE TAXING AUTHORITIES AND THAT CFSC WILL NOT BE SUBJECT TO ADDITIONAL TAX, PENALTIES, AND INTEREST AS A RESULT OF SUCH CHALLENGE. GENERALLY, CFSC'S TAX RETURNS REMAIN OPEN FOR THREE YEARS FOR FEDERAL INCOME TAX EXAMINATION AND FOUR YEARS FOR STATE INCOME TAX EXAMINATION.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990.**

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
CALIFORNIA FIRE SAFE COUNCIL, INC.

Employer identification number
75-3078419

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? [X] Yes [ ] No

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

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000 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
CORRAL CANYON FIRE SAFE ALLIANCE 26343 LOCKWOOD MALIBU, CA 90265	27-0781800	501(C)(3)	52,316.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
SIERRA COUNTY FIRE SAFE & WATERSHED - P.O. BOX 210 - CALPINE, CA 96124	20-4671752	501(C)(3)	13,200.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
ARROWHEAD COMMUNITIES FSC PO BOX 563 LAKE ARROWHEAD, CA 92352	01-0746407	501(C)(3)	75,000.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
BIG SUR LAND TRUST P.O. BOX 4071 MONTEREY, CA 93942	94-2473415	501(C)(3)	33,000.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
BIG BEAR LAKE FPD P.O. BOX 10000 BIG BEAR LAKE, CA 92315	95-3603975		230,000.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
RCD OF GREATER SAN DIEGO COUNTY 11769 WATERHILL RD. LAKESIDE, CA 92040	95-2586060		150,000.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 30.

3 Enter total number of other organizations listed in the line 1 table ▶ 26.

LHA **For Paperwork Reduction Act Notice, see the Instructions for Form 990.** **Schedule I (Form 990) (2012)**

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

232101
12-18-12

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)

(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
BRIDGEVILLE COMMUNITY CENTER PO BOX 3 BRIDGEVILLE, CA 95526	31-1763137	501(C)(3)	35,000.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
BUTTE COUNTY FIRE SAFE COUNCIL 767 BIRCH STREET PARADISE, CA 95967	10-0004010	501(C)(3)	100,000.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
HIGHWAY 108 FSC P.O. BOX 692 TUOLUMNE, CA 95379	74-3072909	501(C)(3)	10,300.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
CALAVERAS FOOTHILLS FSC PO BOX 812 MURPHYS, CA 95247	74-3072915	509(A)(1)	20,000.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
MAMMOTH LAKES FIRE PROTECTION P.O. BOX 5 MAMMOTH LAKES, CA 93546			11,000.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
RCD OF THE SANTA MONICA MOUNTAINS P.O. BOX 638 AGOURA HILLS, CA 91376	95-2158325		55,000.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
HOMESTEAD VALLEY LAND TRUST 315 MONTFORD MILL VALLEY, CA 94941	94-2375721	501(C)(3)	10,000.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
PIT RESOURCE CONSERVATION DISTRICT P.O. BOX 301 BIEBER, CA 96009	68-0425211		20,000.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
DEER SPRINGS FSC INC. PO BOX 460097 ESCONDIDO, CA 92046	34-1988484	501(C)(3)	20,850.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)

(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
TAHOE DOUGLAS FIRE PROTECTION P.O. BOX 919 ZEPHYR COVE, NV 89448	88-0162034		30,000.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
NORTH LAKE TAHOE FPD 866 ORIOLE WAY INCLINE VILLAGE, NV 89451	88-0181106		18,160.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
DIABLO FIRE SAFE COUNCIL P.O. BOX 18616 OAKLAND, CA 94619	31-1661233	501(C)(3)	6,360.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
FSC OF GREATER JULIAN P.O. BOX 1514 JULIAN, CA 92036	05-0578927	501(C)(3)	24,500.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
RESOURCE MANAGEMENT 13132 RATTLESNAKE CREEK RD FORT JONES, CA 96032	94-3373380		10,000.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
EAST LAKE RCD 889 LAKEPORT BLVD LAKEPORT, CA 95453	94-2500145		37,000.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
EASTERN MADERA COUNTY FIRE SAFE COUNCIL - PO BOX 747 - FORK, CA 93643	91-2164658	501(C)(3)	58,000.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
EL DORADO COUNTY FIRE SAFE COUNCIL PO BOX 1237 POLLOCK PINES, CA 95726	04-3631411	509(A)(1)	83,700.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
FSC OF SISKIYOU COUNTY 206 SHASTA AVE MT SHASTA, CA 96067	58-2679050	501(C)(3)	9,000.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)

(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
FIRE SAFE SONOMA 2300 COUNTY CENTER DRIVE, 221A SANTA ROSA, CA 95403	91-1821198	509(A)(1)	20,290.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
GREATER ALPINE FIRE SAFE COUNCIL PO BOX 342 ALPINE, CA 91903	22-3937969	501(C)(3)	100,000.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
GREATER LAGUNA COAST FSC PO BOX 814 LAGUNA BEACH, CA 92652	91-2161719	501(C)(3)	11,000.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
GREYBACK DISASTER PREPAREDNESS GROUP - PO BOX 360 - ANGELUS OAKS, CA 92305	33-0628491	501(C)(3)	6,778.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
HAPPY CAMP FSC, INC. P.O. BOX 444 HAPPY CAMP, CA 96039	72-1538742	501(C)(3)	54,000.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
KERN RIVER VALLEY FIRE SAFE COUNCIL - PO BOX 633 - KERNVILLE, CA 93238	56-2293142	501(C)(3)	25,800.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
MATTOLE RESTORATION COUNCIL PO BOX 160 PETROLIA, CA 95558	68-0037149	501(C)(3)	28,000.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
MENDOCINO FSC 151 LAWS AVENUE #B UKIAH, CA 95482	83-0395685	501(C)(3)	79,734.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
MODOC FIRE SAFE COUNCIL 806 W. 12TH ST ALTURAS, CA 96101	87-0764643	501(C)(3)	41,109.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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
MONTEREY COUNTY FSC 2221 GARDEN RD MONTEREY, CA 93940	75-2980732	501(C)(3)	41,746.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
MOUNTAIN COMMUNITIES FSC PO BOX 507 IDYLLWILD, CA 92549	91-2161820	501(C)(3)	50,000.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
NORTH TAHOE FPD P.O. BOX 5879 TAHOE CITY, CA 96145	68-0299709		50,000.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
NORTHERN CALIFORNIA RESOURNCE CENTER - PO BOX 342 - JONES, CA 96032	94-3373377	501(C)(3)	224,490.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
OJAI VALLEY FSC 910 EAST ALISO ST OJAI, CA 93023	52-2291493	509(A)(1)	23,300.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
PLACER COUNTY RCD 251 AUBURN RAVINE RD., #107 AUBURN, CA 95603	68-0389895		111,510.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
SALMON RIVER RESTORATION COUNCIL PO BOX 1089 SAWYERS BAR, CA 96027	68-0343595	509(A)(1)	29,099.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
SAN LUIS OBISPO COUNTY COMMUNITY FSC - PO BOX 15501 - SAN LUIS OBISPO, CA 93405	77-0563035	501(C)(3)	20,883.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
SANTA CLARA COUNTY FSC 16174 HIGHLAND DRIVE SAN JOSE, CA 95127	56-2368255	509(A)(1)	201,391.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)

(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
TAMALPAIS COMMUNITY SERVICES DISTRICT - 305 BELL LANE - MILL VALLEY, CA 94941	94-6030664		18,950.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
TEHAMA COUNTY RCD 2 SUTTER ST., STE. D RED BLUFF, CA 96080	68-0142292		43,042.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
WATERSHED RESEARCH & TRAINING PO BOX 356 HAYFORK, CA 96041	94-3116339	501(C)(3)	5,000.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
WESTERN SHASTA RESOURCE CONSERVATION DIST - 6270 PARALLELL ROAD - ANDERSON, CA 96007	68-0285373		85,019.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
YANKEE HILL FSC PO BOX 4242 YANKEE HILL, CA 95965	68-0486052	501(C)(3)	50,000.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
YOSEMITE/SEQUOIA RCD P.O. BOX 415 NORTH FORK, CA 93643	91-2155866		37,390.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
COUNTY OF HUMBOLDT 3015 H STREET EUREKA, CA 95501	94-6000513	-	78,500.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
CITY OF MONROVIA 415 S. IVY AVE. MONROVIA, CA 91016			40,565.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
NORTHSTAR FIRE DEPARTMENT 910 NORTHSTAR DRIVE TRUCKEE, CA 96161	68-0243256		72,914.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)

(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
RAMONA WEST END FSC 15873 HIGHWAY 67 RAMONA, CA 92065	30-1506748	501(C)(3)	23,000.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
COUNTY OF SANTA CRUZ 701 OCEAN STREET SANTA CRUZ, CA 95060			101,082.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
SOQUEL FIRESAFE COUNCIL 687 PAU HANA DR. SOQUEL, CA 95073	26-4366294	501(C)(3)	26,474.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
SOUTH LAKE FSC P.O. BOX 1773 MIDDLETOWN, CA 95461	68-0481417	501(C)(3)	10,230.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS
GRANTS REFUNDED BACK TO ORGANZIATION			<318,974.>	0.			
MISSION CANYON ASSOCIATION PO BOX 401 SANTA BARBARA, CA 93102	95-6093517		22,632.	0.	N/A	N/A	WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS

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

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

SCHEDULE I, PART I, LINE 2: GRANT MANAGERS ARE ASSIGNED THE RESPONSIBILITY OF TRACKING THE PROGRAMS AND FINANCIAL PROGRESS ON SUBAWARDS. THEY PROVIDE TECHNICAL ASSISTANCE, MAINTAIN REGULAR CONTACT WITH THE SUBRECIPIENTS, REVIEW THEIR FINANCIAL REPORTS AND BUDGETS, AND PERFORM SITE VISITS. FURTHERMORE, THE ORGANIZATION MAINTAINS TRACKING SYSTEMS THAT INCLUDES PROGRESS REPORTING ON THE WEBSITES AND SPREADSHEETS FOR TRACKING SUBGRANT-RELATED ISSUES AND RESOLUTIONS.

PART II, LINE 1, COLUMN (H):

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: CORRAL CANYON FIRE SAFE ALLIANCE

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: SIERRA COUNTY FIRE SAFE & WATERSHED

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: ARROWHEAD COMMUNITIES FSC

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: BIG SUR LAND TRUST

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: BIG BEAR LAKE FPD

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: RCD OF GREATER SAN DIEGO COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT

Part IV Supplemental Information

MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: BRIDGEVILLE COMMUNITY CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: BUTTE COUNTY FIRE SAFE COUNCIL

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: HIGHWAY 108 FSC

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: CALAVERAS FOOTHILLS FSC

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: MAMMOTH LAKES FIRE PROTECTION

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: RCD OF THE SANTA MONICA MOUNTAINS

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: HOMESTEAD VALLEY LAND TRUST

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: PIT RESOURCE CONSERVATION DISTRICT

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: DEER SPRINGS FSC INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: TAHOE DOUGLAS FIRE PROTECTION

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: NORTH LAKE TAHOE FPD

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

Part IV | Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: DIABLO FIRE SAFE COUNCIL

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: FSC OF GREATER JULIAN

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: RESOURCE MANAGEMENT

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: EAST LAKE RCD

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT:
EASTERN MADERA COUNTY FIRE SAFE COUNCIL

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: EL DORADO COUNTY FIRE SAFE COUNCIL

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: FSC OF SISKIYOU COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: FIRE SAFE SONOMA

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: GREATER ALPINE FIRE SAFE COUNCIL

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: GREATER LAGUNA COAST FSC

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: GREYBACK DISASTER PREPAREDNESS GROUP

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: HAPPY CAMP FSC, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: KERN RIVER VALLEY FIRE SAFE COUNCIL

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: MATTOLE RESTORATION COUNCIL

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: MENDOCINO FSC

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: MODOC FIRE SAFE COUNCIL

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: MONTEREY COUNTY FSC

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS

Part IV Supplemental Information

INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: MOUNTAIN COMMUNITIES FSC

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: NORTH TAHOE FPD

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: NORTHERN CALIFORNIA RESOURNCE CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: OJAI VALLEY FSC

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: PLACER COUNTY RCD

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

Part IV | Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: SALMON RIVER RESTORATION COUNCIL

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: SAN LUIS OBISPO COUNTY COMMUNITY FSC

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: SANTA CLARA COUNTY FSC

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: TAMALPAIS COMMUNITY SERVICES DISTRICT

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: TEHAMA COUNTY RCD

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: WATERSHED RESEARCH & TRAINING

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT

Part IV Supplemental Information

MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT:

WESTERN SHASTA RESOURCE CONSERVATION DIST

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: YANKEE HILL FSC

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: YOSEMITE/SEQUOIA RCD

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: COUNTY OF HUMBOLDT

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: CITY OF MONROVIA

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: NORTHSTAR FIRE DEPARTMENT

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: RAMONA WEST END FSC

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: COUNTY OF SANTA CRUZ

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: SOQUEL FIRESAFE COUNCIL

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: SOUTH LAKE FSC

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

NAME OF ORGANIZATION OR GOVERNMENT: MISSION CANYON ASSOCIATION

(H) PURPOSE OF GRANT OR ASSISTANCE: WILDFIRE PROTECTION PROJECTS INCLUDING PRE-FIRE PLANNING, HAZARDOUS FUELS REDUCTION, PROJECT

Part IV Supplemental Information

MONITORING, AND FIRE-PROTECTION, MITIGATION, AND EDUCATION ACTIVITIES.

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

2012

Open to Public Inspection

Name of the organization
CALIFORNIA FIRE SAFE COUNCIL, INC.

Employer identification number
75-3078419

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

ACTIVITIES TO ORGANIZATIONS WHO ARE ADDRESSING THE ISSUE OF WILDFIRE PREVENTION.

FORM 990, PART VI, SECTION B, LINE 11: EXECUTIVE DIRECTOR AND OUTSIDE ACCOUNTANT FOR CFSC REVIEWS FORM 990 PRIOR TO SUBMISSION.

FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION REVIEWS AND REPORTS SITUATIONS AND COMPLAINTS RELATED TO POTENTIAL CONFLICTS OF INTEREST.

FORM 990, PART VI, SECTION B, LINE 15: THE CEO MAKES THE SALARY RECOMMENDATION TO THE FINANCE COMMITTEE. THE FINANCE COMMITTEE THEN MAKES THE RECOMMENDATION TO THE BOARD OF DIRECTORS FOR REVIEW AND DECISION. SALARY SURVEYS ARE COMPLETED PERIODICALLY.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND 990 AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XII, LINE 2C

THE ORGANIZATION'S AUDIT COMMITTEE ASSUMES RESPONSIBILITY FOR THE OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND THE SELECTION OF THE INDEPENDENT AUDITOR. THE REVIEW PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** and check this box ▶ [X]

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** (on page 1)

Part II **Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed)

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return See instructions	Name of exempt organization or other filer, see instructions	Employer identification number (EIN) or
	CALIFORNIA FIRE SAFE COUNCIL, INC.	75-3078419
	Number, street, and room or suite no If a P O box, see instructions 502 W. ROUTE 66, SUITE 17	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions GLENDORA, CA 91740	

Enter the Return code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of ▶ NORMAN MOLINE, JR., CPA 150 N. SANTA ANITA AVE., SUITE. 640 - ARCADIA, CA 91006
  Telephone No. ▶ 626-445-5554 FAX No ▶
- If the organization does not have an office or place of business in the United States, check this box ▶ [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ▶ [ ] If it is for part of the group, check this box ▶ [ ] and attach a list with the names and EINs of all members the extension is for

4 I request an additional 3-month extension of time until NOVEMBER 15, 2013

5 For calendar year 2012 , or other tax year beginning _____ , and ending _____

6 If the tax year entered in line 5 is for less than 12 months, check reason [ ] Initial return [ ] Final return [ ] Change in accounting period

7 State in detail why you need the extension
ALL INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE INFORMATION RETURN IS NOT YET AVAILABLE.

8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	8a	$	0.
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	$	0.
c	**Balance due.** Subtract line 8b from line 8a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c	$	0.

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ▶ _____ Title ▶ CPA Date ▶ 9/11/13

223842
01-21-13

Form **8868**
(Rev. January 2013)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

OMB No 1545-1709

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box ▶ [X]
- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing *(e-file)*. You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions) For more details on the electronic filing of this form, visit *www irs gov/efile* and click on *e-file for Charities & Nonprofits*

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6 month extension - check this box and complete Part I only ▶ [ ]

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print File by the due date for filing your return See instructions	Name of exempt organization or other filer, see instructions	Employer identification number (EIN) or
	CALIFORNIA FIRE SAFE COUNCIL, INC.	75-3078419
	Number, street, and room or suite no If a P O box, see instructions 502 W. ROUTE 66, SUITE 17	Social security number (SSN)
	City, town or post office, state, and ZIP code For a foreign address, see instructions GLENDORA, CA 91740	

Enter the Return code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041 A	08
Form 4720 (individual)	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ▶ NORMAN MOLINE, JR., CPA 150 N. SANTA ANITA AVE., SUITE. 640 - ARCADIA, CA 91006
  Telephone No ▶ 626-445-5554 FAX No ▶
- If the organization does not have an office or place of business in the United States, check this box ▶ [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ▶ [ ]. If it is for part of the group, check this box ▶ [ ] and attach a list with the names and EINs of all members the extension is for

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2013, to file the exempt organization return for the organization named above The extension is for the organization's return for
▶ [X] calendar year 2012 or
▶ [ ] tax year beginning _____, and ending _____

2 If the tax year entered in line 1 is for less than 12 months, check reason [ ] Initial return [ ] Final return [ ] Change in accounting period

3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions	3a	$ 0.
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit	3b	$ 0.
c	**Balance due.** Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	3c	$ 0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions