

### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



# 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)

2012

OMB No 1545-0047

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

Open to Public Inspection

н гс	n the 2	2012 Cai	C Name of organization	2013		
		plicable	NORTH VALLEY COMMUNITY FOUNDATION		D Employer ide	entification number
_	dress ch	-	Doing Business As		68-016145	5
_ Na	me char	nge	,			
_	tial retur rminated		Number and street (or P O box if mail is not delivered to street address) Room/suite 3120 COHASSET ROAD SUITE 8		E Telephone nur	nber
_	nended r		City or town, state or country, and ZIP + 4		(530)891-	1150
_		pending	CHICO, CA 95973		<b>G</b> Gross receipts	\$ 3.744.903
			F Name and address of principal officer	H(a) Is th	is a group returi	<del> </del>
			ALEXA VALAVANIS	affilia		┌ Yes ┌ No
			3120 COHASSET ROAD SUITE 8 CHICO,CA 95973	11/6		
			, ,			uded? 「Yes 「No (see instructions)
[ Ta	ıx-exem	pt status	▼ 501(c)(3)	11 10	o, attach a hist	(see mstructions)
ı w	ebsite	: <b>►</b> HT	TP //WWW NVCF ORG	H(c) Grou	ıp exemptıon nu	mber ►
		anızatıon	Corporation Trust Association Other ►	<b>L</b> Year of fo	rmation 1989	State of legal domicile CA
Pa	rt I	Sum	ımary			
			escribe the organization's mission or most significant activities CING THE EDUCATIONAL AND SOCIOLOGICAL INTERESTS OF THE	COMMUNI	TIES SERVED	
ارد ا	_					
Governance		1 · ·			F0/ -5:1-	
Š	2 (	neck ti	his box দ if the organization discontinued its operations or disposed of i	more than 2	5% of its net a	ssets
	3 1	Number	of voting members of the governing body (Part VI, line 1a)		. 3	11
Activities &	4 1	Number	of independent voting members of the governing body (Part VI, line 1b)		4	10
	<b>5</b> T	otal nu	mber of individuals employed in calendar year 2012 (Part V, line 2a) .		5	3
ទ្ធ	6 ⊺	otal nu	mber of volunteers (estimate if necessary)		6	
•	7a ⊺	otal un	related business revenue from Part VIII, column (C), line 12		7a	0
	Ь≀	let unre	elated business taxable income from Form 990-T, line 34		7b	
nue				Prio	or Year	Current Year
	8	Contri	ibutions and grants (Part VIII, line 1h)		2,355,204	3,221,195
	9	Progra	am service revenue (Part VIII, line 2g)		167,322	249,591
Reveni	10	Inves	tment income (Part VIII, column (A), lines 3, 4, and 7d)	230,061		274,117
ш	11		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			0
	12		revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		2,752,587	3,744,903
	13		s and similar amounts paid (Part IX, column (A), lines 1–3)		1,277,661	2,730,468
	14		its paid to or for members (Part IX, column (A), line 4)		1,277,001	2,730,400
	15		es, other compensation, employee benefits (Part IX, column (A), lines			
8	13	5-10			111,294	135,498
Expenses	16a		ssional fundraising fees (Part IX, column (A), line 11e)			0
ठ	b		undraising expenses (Part IX, column (D), line 25) • 0			
	17		expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		557,504	588,405
	18		expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		1,946,459	3,454,371
₩ Ø	19	Reven	nue less expenses Subtract line 18 from line 12	Reginning	806,128 g of Current	290,532
Net Assets or Fund Balances					'ear	End of Year
ά. Ω. Ω.	20		assets (Part X, line 16)		9,889,012	10,902,403
2 E	21		liabilities (Part X, line 26)		575,404	746,705
	22		ssets or fund balances Subtract line 21 from line 20		9,313,608	10,155,698
	rt II		nature Block			
ny k	nowled	ge and	perjury, I declare that I have examined this return, including accompanying belief, it is true, correct, and complete Declaration of preparer (other that nowledge			
		****			014-01-15	
Sigr		Signa	ature of officer	Da	ate	
Her	е		A VALAVANIS CHIEF EXECUTIVE OFFICER e or print name and title			
			Print/Type preparer's name Preparer's signature Date HEIDI COPPIN 201:	4 02 42   0110	eck I if PTIN	
Pai	d	<b>⊢</b>	Firm's name TITTLE & COMPANY LLP	Sell	-employed n's EIN ►	_
Pre	pare		THE CONTINUE OF			
	Onl		Firm's address 🕩 3263 ESPLANADE	Pho	ne no (530) 898-8	<u></u> 3647
	<b>-</b>	·	CHICO, CA 95973			

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

✓ Yes ☐ No

art IV	Check	list 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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 📆	2	Yes	
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		No
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		No
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		No
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 1	6	Yes	
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
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		No
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	Yes	
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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
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	Yes	
С	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		No
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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
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		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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		No
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		No
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		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
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		No
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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule $H$	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
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	Yes	
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	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If</i> "Yes," complete Schedule J	23		No
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		No
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		No
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		No
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		Νo
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		No
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			1
_		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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		No
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		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	20	Yes	

Раг	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V	<del></del> -	 Yes	 No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   24		163	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0	-		
		1		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1</b> c		
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Νo
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		No
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		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		
С	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		Νo
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).			
	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		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
ч	If "Yes," indicate the number of Forms 8282 filed during the year	70		
u	11 res, indicate the number of Forms 8282 med during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
_		8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12	]		
	facilities  Section FO1(a)(12) arranimations Enter			
	Section 501(c)(12) organizations. Enter  Gross income from members or shareholders			
		-		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )	-		
2a	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			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. 

Se	ection 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			
b	Enter the number of voting members included in line 1a, above, who are independent			
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		No
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		No
4		4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		N o
6	Did the organization have members or stockholders?	6		No
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		N o
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		No
8				
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
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	Yes	
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	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
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	Yes	
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14	Yes	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		Νo
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
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 Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
  - Own website Another's website Upon request Other (explain in Schedule O)
- 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
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►ALEXA VALAVANIS 3120 COHASSET ROAD SUITE 8 CHICO, CA (530) 891-1150

## Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- 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, or 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) A verage hours per week (list any hours for related organizations below	Position (do not check more than one box, unless person is both an officer and a director/trustee)  Officer and institution or director di						from the organization	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related
	dotted line)	Individual trustee or director	Institutional Trustee	el	Key employee	Highest compensated employee	ner e			organizations
(1) ALEXA VALAVANIS	40 00	x		x				78,000	0	0
CEO (2) JOAN STONER	2.00									
	2 00	x		х				0	0	0
PRESIDENT (3) CAROLYN J NAVA	2 00									
	200	х		х				0	0	0
VICE PRESIDE (4) LORI PARRIS	2 00									
TREASURER		Х		Х				0	0	0
(5) LISA FURR	2 00									
DIRECTOR		X						0	0	0
(6) SHERRY HOLBROOK DIRECTOR	2 00	х						0	0	0
(7) SANDORA NISHIO DIRECTOR	2 00	х						0	0	0
(8) DEBORAH ROSSI	2 00	X						0	0	0
DIRECTOR										
(9) VANESSA SUNDIN	2 00	x		х				0	0	0
SECRETARY (10) DIANE RUBY	2.00	-								
	2 00	x						0	0	0
DIRECTOR (11) MARC NEMANIC	2 00									
DIRECTOR		x						0	0	0
(12) KAREN WHITE	24 00									
CFO				Х				31,444	0	0
					L_					
										Form <b>990</b> (2012)

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

related organization below dotted line)    Policy   Polic		(A) Name and Title	(B) A verage hours per week (list any hours	Position (do n more than one b person is both and a director				unless officer		(D)  Reportable compensation from the organization (V		(E) Reportable compensation from related organizations (W	_	(F) Estimated amount of other compensation from the organization and		
Total from continuation sheets to Part VII, Section A			below	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)		relate	ed .	
Total from continuation sheets to Part VII, Section A																
Total from continuation sheets to Part VII, Section A																
Total from continuation sheets to Part VII, Section A																
Total from continuation sheets to Part VII, Section A																
Total from continuation sheets to Part VII, Section A																
Total from continuation sheets to Part VII, Section A																
Total from continuation sheets to Part VII, Section A																
c Total from continuation sheets to Part VII, Section A																
Total (add lines 1b and 1c)																
Total from continuation sheets to Part VII, Section A																
Total from continuation sheets to Part VII, Section A																
d Total (add lines 1b and 1c)				 ection /	٠.	•										
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization   Yes N  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			•		· ·	٠.	٠.		<b> -</b>		109,444					
Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	2						liste	d abov	e) w	ho receive	d more th	an				
on line 1a? If "Yes," complete Schedule J for such individual	_	Dud bloom and an inchange of					1							Yes	No	
organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such Individual	3							• • •	yee,	, or nignes	. compen	sated employee	3		No	
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	4	organization and related organ														
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) (B) (C)	5		a receive or acc	rue coi	· · mpen	• satı	• on fro	om an	• y unr	related org	• • • anızatıon	or individual for	4		No_	
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)  (B)  (C)												[	5		No	
compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year  (A) (B) (C)	Se	ction B. Independent Co	ntractors													
(A) (B) (C)		Complete this table for your fix	ve highest comp											ax year		
		N		address							Des					
I I													$\blacksquare$			
2 Total number of independent contractors (including but not limited to those listed above) who received more than																

Part V		Statement of Revenue Check if Schedule O contains a response to any question	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
u 20	1a	Federated campaigns 1a				
ant	b	Membership dues 1b				
Gr.	С	Fundraising events 1c				
ifts, ar A	d	Related organizations 1d				
s, G mil	е	Government grants (contributions) 1e				
ons Si	f	All other contributions, gifts, grants, and <b>1f</b> 3,221,195	·  			
Contributions, Gifts, Grants and Other Similar Amounts		Similar amounts not included above  Noncash contributions included in lines				
ntri d O	g	1a-1f \$ 970,717				
Col	h	Total. Add lines 1a-1f	3,221,195			
le		Business Code				
Program Serwce Revenue	2a	PROGRAM/ADMINISTRATIVE FEES	249,591	249,591		
<del>2</del>	b					
MCE	C					
Ser	d e					
ran	f	All other program service revenue				
•ે						
	g 3	Total. Add lines 2a-2f	249,591			
		and other similar amounts)	274,117			274,117
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
	6a	Gross rents (1) Near (11) Crashian	1			
	b	Less rental expenses				
	С	Rental income	1			
	d	or (loss)  Net rental income or (loss)	1			
		(ı) Securities (ıı) Other				
	7a	Gross amount from sales of assets other				
	b	than inventory Less cost or	1			
		other basis and sales expenses				
	С	Gain or (loss)	]			
	d	Net gain or (loss)				
nne	8a	Gross income from fundraising events (not including \$				
Other Revenue		of contributions reported on line 1c) See Part IV, line 18				
her	ь	Less direct expenses b	<del> </del>			
ة ا	С	Net income or (loss) from fundraising events	<u> </u>			
	9a	Gross income from gaming activities See Part IV, line 19				
	h	Less direct expenses b	-			
	С	Net income or (loss) from gaming activities	1			
	10a	Gross sales of inventory, less returns and allowances .				
	h	Less cost of goods sold b	-			
		Net income or (loss) from sales of inventory	†			
		Miscellaneous Revenue Business Code	<u> </u>			
	11a					
	b					
	С					
	d	All other revenue				
	е	Total. Add lines 11a-11d ▶				
	12	Total revenue. See Instructions	3,744,903	249,591		274,117

		Functional Expenses				
Section	on 501(c)(3) and 501(c)	(4) organizations must complete all columns All	other organizati	ons must comp	lete column (A)	
	Check if Schedule	O contains a response to any question in this Pa	rt IX			<u></u>
	ot include amounts report o, 9b, and 10b of Part VII		(A) Total expenses	( <b>B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assist in the United States Se	ance to governments and organizations e Part IV, line 21	2,651,505	2,651,505		
2	Grants and other assist United States See Part	ance to individuals in the IV, line 22	78,963	78,963		
3	Grants and other assist organizations, and indiv States See Part IV, line	iduals outside the United	70,300	70,700		
4	Benefits paid to or for m	embers				
5	Compensation of current key employees	t officers, directors, trustees, and	109,444		109,444	
6	(as defined under section	ded above, to disqualified persons on 4958(f)(1)) and persons 58(c)(3)(B)				
7	Other salaries and wage	es	12,000		12,000	
8		nd contributions (include section 401(k)				
9	Other employee benefit	s	3,231		3,231	
10	Payroll taxes		10,823		10,823	_
11	Fees for services (non-					
а	Management					
ь	Legal		570		570	
c	Accounting		9,900		9,900	
d	<del>-</del>		,		,	
e	· -	services See Part IV, line 17				
f		nt fees				
g g	_	nt exceeds 10% of line 25,				
	Schedule O)		4,363		4,363	
12	Advertising and promot					
13	Office expenses		9,115		9,115	
14	Information technology					
15	Royalties					
16	Occupancy		6,348		6,348	
17	Travel		4,367		4,367	
18		ntertainment expenses for any federal,				
19	Conferences, conventio	ns, and meetings				
20	Interest		104		104	
21	Payments to affiliates					
22	Depreciation, depletion	and amortization	781		781	
23	Insurance		2,138		2,138	
24	miscellaneous expense	e expenses not covered above (List s in line 24e If line 24e amount exceeds 10% mount, list line 24e expenses on Schedule O)				
а	CHARITABLE PROJEC		489,375	489,375		
b	INVESTMENT/BANK F		41,219		41,219	
c	MARKETING		6,808		6,808	
d	SOFTWARE SUPPORT		5,907		5,907	
	All other expenses		7,410		7,410	
25		es. Add lines 1 through 24e	3,454,371	3,219,843	234,528	0
26 26	Joint costs. Complete the reported in column (B) juddicational campaign a	nis line only if the organization oint costs from a combined nd fundraising solicitation Check OP 98-2 (ASC 958-720)	3,434,3/1	3,219,643	234,328	0

Form 990 (2012) Page **11** Balance Sheet
Check if Schedule O contains a response to any question in this Part X . . . . . . . . . Part X (A) Beginning of year **(B)** End of year

Assets

Liabilities

Net Assets or Fund Balances

		Beginning of year		End of year
1	Cash—non-interest-bearing	20,263	1	19,951
2	Savings and temporary cash investments		2	_
3	Pledges and grants receivable, net	240,385	3	197,912
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 instructions) Complete Part II of Schedule L			
			6	
7	Notes and loans receivable, net		7	
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges		9	
10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D  52,999			
b	Less accumulated depreciation 10b 51,708	2,072	<b>10</b> c	1,291
11	Investments—publicly traded securities	9,478,230	11	9,564,470
12	Investments—other securities See Part IV, line 11		12	970,717
13	Investments—program-related See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets See Part IV, line 11	148,062	15	148,062
16	Total assets. Add lines 1 through 15 (must equal line 34)	9,889,012	16	10,902,403
17	Accounts payable and accrued expenses		17	56,727
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability Complete Part IV of Schedule D		21	_
22	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	575 404	25	689,978
26	D	575,404 575,404	25 26	746,705
26	Total liabilities. Add lines 17 through 25	373,404	20	740,700
	lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	7,095,984	27	7,897,057
28	Temporarily restricted net assets	2,217,624	28	2,258,641
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	9,313,608	33	10,155,698
34	Total liabilities and net assets/fund balances	9,889,012	34	10,902,403
				Form <b>990</b> (2012)

Par	t XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				<u></u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3,7	744,903
2	Total expenses (must equal Part IX, column (A), line 25)	2		3,4	154,371
3	Revenue less expenses Subtract line 2 from line 1	3		2	290,532
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		9,3	313,608
5	Net unrealized gains (losses) on investments	5		Ē	551,558
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			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		10,1	155,698
Par	t XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response to any question in this Part XII				. $ abla$
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	n			
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?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493043023064

OMB No 1545-0047

**Employer identification number** 

### **SCHEDULE A**

(Form 990 or 990EZ)

Name of the organization

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.

Inspection

NORTH VALLEY COMMUNITY FOUNDATION													
									68-0161				
	rt I			blic Charity Sta						instructions			
	rganı —		•	e foundation becaus	•			•	•				
1	<u> </u>		•	on of churches, or a				ection 170(	b)(1)(A)(i).				
2		A scho	ol described	in <b>section 170(b)(1</b>	l <b>)(A)(ii).</b> (At	tach Schedı	ıle E)						
3	Г	A hosp	ital or a coo	perative hospital se	rvice organiz	ation descr	ibed in <b>sectio</b>	n 170(b)(1	)(A)(iii).				
4	Γ			n organization operat	ted ın conjun	ction with a	hospital des	cribed in <b>se</b>	ction 170(b)	(1)(A)(iii). E	Enter the		
_	_			ty, and state	+ - <b>£</b> 11								
5	Г	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)											
_	_				•			470(1)(	43/43/				
6	<u> </u>			local government or									
7	Γ			at normally receives on 170(b)(1)(A)(vi).			support from	a governm	ental unit or i	from the gen	eral publi	С	
8	굣			described in <b>sectior</b>			nplete Part II	. )					
9	Ė		-	at normally receives			-	-	butions, mem	nbership fees	s, and gros	ss	
_	•			ities related to its e									
				oss investment inco									
										(ax) o o			
10	Г	acquired by the organization after June 30, 1975 See <b>section 509(a)(2).</b> (Complete Part III )  An organization organized and operated exclusively to test for public safety See <b>section 509(a)(4).</b>											
11	_							the nurno	ses of				
one or more publicly supported organizations described in section 509(a)(1) or sec													
	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											
е	Г			ox, I certify that the									
			han foundati n 509(a)(2)	on managers and ot	her than one	or more pub	licly support	ed organiza	tions describ	oed in sectio	n 509(a)(	1) or	
f				received a written de	etermination	from the IR	S that it is a	Type I. Typ	e II. or Type	III support	ıng organı	ızatıon.	
-			this box					.,,,,,	. с 11, с , р с	опреста	9 0.94		
g			-	2006, has the organi	ızatıon accep	ted any gift	or contributi	on from any	of the				
			ng persons?							`		T	
				rectly or indirectly o	· ·		_	persons de	scribed in (ii		Yes	No	
				governing body of th		_	17			110		<del>                                     </del>	
(ii) A family member of a person described in (i) about (iii) A 35% controlled entity of a person described in								11g		├─			
										TTG	(iii)	<u> </u>	
h		Provide	e the following	ng information about	the supporte	ed organizat	ion(s)						
	\ Nan	no of	(ii) ETN	(iii) Type of	(iv) Is t	-ho	(v) Did you	ı notifi	(vi) Is	tho	T (vii) A r	mount of	
•	•	me of (ii) EIN		organization	organizati		the organiz		organizat			etary	
supported organizatio				(described on	col (i) list		ın col (i) d		col (i) org			port	
				lines 1- 9 above	your gove		suppor	t?	ın the U	JS?			
				or IRC section	docume	nt?							
				(see instructions))		ı		1					
				macractions,)	Yes	No	Yes	No	Yes	No			
					1		1	1					

Page 2

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

_S	ection A. Public Support						
Cal	endar year (or fiscal year beginning in) ▶	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	2,360,876	1,725,607	3,431,010	2,355,204	3,221,195	13,093,892
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	2,360,876	1,725,607	3,431,010	2,355,204	3,221,195	13,093,892
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)						755,044
6	Public support. Subtract line 5						12,338,848
	from line 4						
	ection B. Total Support endar year (or fiscal year				1		
Car	beginning in) 🕨	(a) 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	<b>(d)</b> 2011	(e) 2012	<b>(f)</b> Total
7	Amounts from line 4	2,360,876	1,725,607	3,431,010	2,355,204	3,221,195	13,093,892
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	198,683	144,362	184,918	230,061	274,117	1,032,141
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support (Add lines 7 through 10)						14,126,033
12	Gross receipts from related activities					12	249,591
13	First five years. If the Form 990 is this box and stop here						zation, check
	ection C. Computation of Pub			1.1 malum - /f\\		1	
14	Public support percentage for 2012			II, column (T))		14	87 350 %
15	Public support percentage for 2011	•	•			15	93 330 %
16a	33 1/3% support test—2012. If the o	organization did n	ot check the box	on line 13, and li	ne 14 is 33 1/3%	or more, check th	us box

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.

**8 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012 Page 3 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 (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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						
3	furnished by a governmental unit to						
	the organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
	Amounts included on lines 1, 2,						
/a	and 3 received from disqualified						
	persons						
b	Amounts included on lines 2 and 3						
_	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6 )						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	<b>(b)</b> 2009	(c) 2010	( <b>d)</b> 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	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						
11	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)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					
	ction C. Computation of Public			1.2		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,		
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

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 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493043023064

OMB No 1545-0047

**SCHEDULE D** (Form 990)

Department of the Treasury

**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

Open to Public

ilema	Revenue Service F Attach to Fo	rm 990. F See separate instructions.		Inspect	IUII
	me of the organization RTH VALLEY COMMUNITY FOUNDATION		Emp	loyer identification number	r
				0161455	
Pa	organizations Maintaining Donor Ad organization answered "Yes" to Form 990	), Part IV, line 6.	nds	or Accounts. Complete	e if the
		(a) Donor advised funds		<b>(b)</b> Funds and other accour	nts
1	Total number at end of year	24			364
2	Aggregate contributions to (during year)	1,322,466		2,6	80,520
3	Aggregate grants from (during year)	289,098		3,1	13,067
4	Aggregate value at end of year	1,759,532		7,8	24,889
5	Did the organization inform all donors and donor advis funds are the organization's property, subject to the o		or advi	ısed <b>∀ Yes</b>	┌ No
6	Did the organization inform all grantees, donors, and oused only for charitable purposes and not for the bene				□ No
Da	conferring impermissible private benefit?  rt II	f the organization answered "Ves" to	Eorn		, 140
	•	-	FOIII	ii 990, Part IV, lille 7.	
1	Purpose(s) of conservation easements held by the org	<u> </u>	hictor	ically important land area	
	Protection of natural habitat			d historic structure	
	Preservation of open space	,			
2					
2	Complete lines 2a through 2d if the organization held easement on the last day of the tax year	a qualified conservation contribution in tr	ie iorn	n or a conservation	
	,	Γ		Held at the End of the	Year
а	Total number of conservation easements	Ī	2a		
b	Total acreage restricted by conservation easements		2b		
c	Number of conservation easements on a certified hist	oric structure included in (a)	2c		
d	Number of conservation easements included in (c) ac historic structure listed in the National Register	quired after 8/17/06, and not on a	2d		
3	Number of conservation easements modified, transfer	red, released, extinguished, or terminated	d by th	ne organization during	
	the tax year ►		·		
4	Number of states where property subject to conserva	tion easement is located ►			
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	the periodic monitoring, inspection, hand	ling of	violations, and <b>Yes</b>	┌ No
6	Staff and volunteer hours devoted to monitoring, insper	ecting, and enforcing conservation easem	ents d	during the year	
	A mount of expenses incurred in monitoring, inspectin	a and enforcing conservation easements	durin	a the year	
7	► \$	g, and emoreting conservation casements	aariii	g the year	
8	Does each conservation easement reported on line 2( and section 170(h)(4)(B)(II)?	(d) above satisfy the requirements of sect	ion 17	70(h)(4)(B)(ı) <b>Yes</b>	┌ No
9	In Part XIII, describe how the organization reports cobalance sheet, and include, if applicable, the text of the			nse statement, and	
	the organization's accounting for conservation easem				
Pai	t III Organizations Maintaining Collection Complete if the organization answered "		or Ot	her Similar Assets.	
1a	If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar assesservice, provide, in Part XIII, the text of the footnote	ets held for public exhibition, education, o	r rese	arch in furtherance of publi	
b	If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar assesservice, provide the following amounts relating to the	ets held for public exhibition, education, o			С
	(i) Revenues included in Form 990, Part VIII, line 1			<b>►</b> \$	
	(ii) Assets included in Form 990, Part X			<u></u>	
2	If the organization received or held works of art, histo following amounts required to be reported under SFAS		r finan		
а	Revenues included in Form 990, Part VIII, line 1	· · · · · ·		<b>►</b> \$	
	Revenues included in Form 550, Fait VIII, line I			Γ Ψ <u> </u>	

**b** Assets included in Form 990, Part X

Par	Organizations Maintaining Co	llections of Art	<u>, Hist</u>	<u>tori</u>	<u>cal Trea</u>	asur	es, or O	<u>ther</u>	<u>Similar A</u>	sset	(co	ntınued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	ds, ch	eck	any of the	follov	ving that a	re a	sıgnıficant us	e of it	s	
а	Public exhibition		d	Γ	Loan or	excha	nge progr	ams				
b	Scholarly research		e	$\Gamma$	Other							
c	Preservation for future generations											
4	Provide a description of the organization's c Part XIII	ollections and explai	ın how	the	y further t	he org	ganızatıon	's exe	empt purpose	ın		
5	During the year, did the organization solicit								lar			
Do	assets to be sold to raise funds rather than t IV Escrow and Custodial Arrang								oc" to Form	<u> </u>	es	│ No
FGI	Part IV, line 9, or reported an air						answered	. TE	es to roilli	990,		
1a	Is the organization an agent, trustee, custoon included on Form 990, Part X?	dian or other interme	diary	for c	ontributio	ns or	other ass	ets n	ot	┌ Ye	2S	┌ No
b	If "Yes," explain the arrangement in Part XI	II and complete the	follow	ıng t	able		_					
							F		Α	moun	t	
с	Beginning balance						<b>—</b>	1c				
d	Additions during the year						<b>⊢</b>	1d				
e	Distributions during the year						<b>—</b>	1e				
f	Ending balance						L	1f				
2a	Did the organization include an amount on F	orm 990, Part X, line	21?							Γ Ye	es	□ No
_ь	If "Yes," explain the arrangement in Part XI											
Pa	rt V Endowment Funds. Complete											
1-	Beginning of year balance	(a)Current year 1,977,239	(b)	Prior y	750,219	(c)Iwo	735,852	_	hree years back 647,04	+	our ye	ears back 833,727
la L		1,577,255		Ι,	361,220		986,084	+	24,93	+		033,727
b	Contributions				301,220		300,00-		24,93	1-		
С	Net investment earnings, gains, and losses	230,020			-1,952		143,828	3	82,92	ι <u> </u>		-166,799
d	Grants or scholarships	146,530			132,248		115,545	5	19,05	L		19,885
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance	2,060,729		1,	977,239		1,750,219	9	735,85	2		647,043
2	Provide the estimated percentage of the cur	rent year end balanc	e (line	e 1g	, column (	(a)) he	ld as					
а	Board designated or quasi-endowment ►											
b	Permanent endowment ► 100 000 %											
c	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c sho	uld equal 100%										
3a	Are there endowment funds not in the posse organization by	ssion of the organiza	ation t	hata	are held a	nd adı	mınıstered	l for t	:he	Г	<b>V</b>	No
	(i) unrelated organizations								3	ı(i)	Yes	No No
	(ii) related organizations									(ii)		No
b	If "Yes" to 3a(II), are the related organization				lule R? .					3b		
4	Describe in Part XIII the intended uses of t	he organization's end	dowme	ent f	unds							
Pai	t VI Land, Buildings, and Equipme	<b>ent.</b> See Form 99	0, Pa						ı			
	Description of property				a) Cost or o asıs (ınvestm		( <b>b)</b> Cost or basis (oth		(c) Accumula depreciatio		( <b>d)</b> B	ook value
1a	Land											
b	Buildings											
С	Leasehold improvements											
d	Equipment						52	2,999	5	1,708		1,291
e	Equipment		<u> </u>					2,999	5	1,708		1,291

(a) Description of security or Category (b) Book value (c) Method of valuation (c) Including name of security) (L) Financial derivatives (2) Closelyheld equity interests (3) Other (A) INVESTMENT IN PARTNERSHIP 970,717  Total. (Column (b) most equal Form 990, Fart X, cot (4) time 12.) > 970,717  Part VIII Investments—Program Related. See Form 990, Part X, line 13.  (a) Description of investment type (b) Book value (c) Method of valuation (c) Cost or end-of-year markel (b) Book value (c) Method of valuation (c) Method of valuation (d) Description of investment type (b) Book value (c) Method of valuation (d) Description (d) Book	
(2) Closely-held equity interests (3) Other (A) INVESTMENT IN PARTNERSHIP  70tal. (Column (b) must equal form 990, Part X, col (B) line 12)  (a) Description of investment type  (b) Book value  (c) Method of valuation Cost or end-of-year market  (b) Book value  (c) Method of valuation Cost or end-of-year market  (b) Book value  (c) Method of valuation Cost or end-of-year market  (d) Description of investment type  (e) Method of valuation Cost or end-of-year market  (f) Method of valuation Cost or end-of-year market  (g) Method of valuation Cost or end-of-year market	
(2)Closely-held equity interests (3)Other (A)INVESTMENT IN PARTNERSHIP 970,717 C  Total. (Column (b) must equal form 990, Part X, col (B) line 12) Part VIII Investments—Program Related. See Form 990, Part X, line 13.  (a) Description of investment type (b) Book value Cost or end-of-year markel Cost or end-of-year markel	value
(3) Other (A) INVESTMENT IN PARTNERSHIP  Potal. (Column (b) must equal Form 990, Part X, col (B) line 12)  Part VIII Investments—Program Related. See Form 990, Part X, line 13.  (a) Description of investment type  (b) Book value  (c) Method of valuation Cost or end-of-year markel  Cost or end-of-year markel  Total. (Column (b) must equal Form 990, Part X, col (B) line 13)  Part IX Other Assets. See Form 990, Part X, line 15.	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)  Part VIII Investments—Program Related. See Form 990, Part X, line 13.  (a) Description of investment type  (b) Book value  Cost or end-of-year market  Cost or end-of-year market  Total. (Column (b) must equal Form 990, Part X, col (B) line 13)  Part IX Other Assets. See Form 990, Part X, line 15.	
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	
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	
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	
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	
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	
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	
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	
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	
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	
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	
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	
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	
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	
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	
(a) Description of investment type (b) Book value (c) Method of valuation Cost or end-of-year market  Cost or end-of-year market  Total. (Column (b) must equal Form 990, Part X, col (B) line 13)  Part IX Other Assets. See Form 990, Part X, line 15.	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )  Part IX Other Assets. See Form 990, Part X, line 15.	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )  Part IX Other Assets. See Form 990, Part X, line 15.	
Part IX Other Assets. See Form 990, Part X, line 15.	value
Part IX Other Assets. See Form 990, Part X, line 15.	
Part IX Other Assets. See Form 990, Part X, line 15.	
Part IX Other Assets. See Form 990, Part X, line 15.	
Part IX Other Assets. See Form 990, Part X, line 15.	
Part IX Other Assets. See Form 990, Part X, line 15.	
Part IX Other Assets. See Form 990, Part X, line 15.	
Part IX Other Assets. See Form 990, Part X, line 15.	
Part IX Other Assets. See Form 990, Part X, line 15.	
Part IX Other Assets. See Form 990, Part X, line 15.	
Part IX Other Assets. See Form 990, Part X, line 15.	
Part IX Other Assets. See Form 990, Part X, line 15.	
Part IX Other Assets. See Form 990, Part X, line 15.	
Part IX Other Assets. See Form 990, Part X, line 15.	
Part IX Other Assets. See Form 990, Part X, line 15.	
(a) Description (b) Boo	
	c value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	
Part X Other Liabilities. See Form 990, Part X, line 25.	
1 (a) Description of liability (b) Book value	
Federal income taxes	
FUNDS HELD AS AGENCY ENDOWMENTS 689,978	
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 re	

Par	XI Reconciliation of Revenue per Audited Financial Statements With Revenue	er Re	eturn
1	Total revenue, gains, and other support per audited financial statements	1	4,296,461
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII ) 2d		
e	Add lines <b>2a</b> through <b>2d</b>	2e	551,558
3	Subtract line <b>2e</b> from line <b>1</b>	3	3,744,903
4	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII )		
c	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12)	5	3,744,903
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses	per	Return
1	Total expenses and losses per audited financial statements	1	3,454,371
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII )		
e	Add lines <b>2a</b> through <b>2d</b>	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	3	3,454,371
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII )	]	
C	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 18)	5	3,454,371

### 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

Identifier	Return Reference	Explanation
SUPPLEMENTAL FINANCIAL INFORMATION		PART V, LINE 4 - ITENDED USES FOR ENDOWMENT FUNDS THE HAROLD WILLIAMS ENDOWMENT FUND IS INTENDED TO BENEFIT THE UNDERSERVED YOUTH IN THE PARADISE RIDGE AREA THE WENDELL LOUGHEAD ENDOWMENT FUND BENEFITS FIVE NONPROFIT ORGANIZATIONS THE AMERICAN HEART ASSOCIATION, LASSEN CO SEARCH & RESCUE, LASSEN CO HUMANE SOCIETY, BUTTE HOME HEALTH HOSPICE, AND MEDIC ALERT FOUNDATION OF TURLOCK THE LYDIA SCHULERUD ENDOWMENT FUND BENEFITS THREE BENEFICIARIES AND A YEARLY SCHOLARSHIP RECIPIENT PARADISE ANIMAL SHELTER HELPERS, CHICO CREEK NATURE CENTER, PARADISE HOSPICE, AND PARADISE HIGH SCHOOL SCHOLARSHIP RECIPIENT THE HAWAII AUDUBON SOCIETY

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493043023064 OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

NORTH VALLEY COMMUNITY FOUNDATION

Schedule I

(Form 990)

### **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

**Inspection** Employer identification number

68-0161455	

Part I Gener	al Inform	ation on Gran	nts and Assistance					
the selection c	riteria used	to award the gran	ubstantiate the amount of t its or assistance? dures for monitoring the us					┌ Yes
			to Governments and			s. Complete if the ord	nanization answered	"Yes" to
			ny recipient that receive					
(a) Name and add organizatio or governme	n	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) SEE ATTACHE SPREADSHEET	:D			2,391,427				
			government organizations ted in the line 1 table					72
For Panerwork Reducti	ion Act Notic	e see the Instructi	ions for Form 990		Cat No. 50055P		Sch	edule I (Form 990) 2012

STATES

(a) Type of grant or assistance

(b) Number of

(f)Description of non-cash assistance

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, P	art IV,	line 22
	Part III can be duplicated if additional space is needed.		

(d)A mount of

(e)Method of valuation (book,

(c)A mount of

(-).,,,		recipients		cash grant	non-cash assistance		(-,-
(1) SCHOLARSHIPS		103		78,963			
Part IV Suppleme			ıne 2, F	Part III, column (b), and	d any other additional inf	ormation	
Identifier	Return Referen	ce	Expla	nation			

PROCEDURES FOR SCHEDULE I, PAGE 1, PART I, MONITORING THE USE OF GRANT FUNDS
INSIDE THE UNITED

SCHEDULE I, PAGE 1, PART I, THE ORGANIZATION DOES NOT MAKE ANY DETERMINDATIONS AS TO THE AMOUNT OF GRANTS, ELIGIBILITY, OR SELECTION PROCESS ALL OUR FUNDS ARE DONOR, COMMITTEE, OR NON-PROFIT BOARD ADVISED THE ORGANIZATION VERIFIES GRANTEE NON-PROFIT/GOVERNMENT ELIGIBILITY AND MAINTAINS ACCOUNTING RECORDS THE SELECTION CRITERIA IS DETERMINED BY THE DONOR

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493043023064

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

**SCHEDULE M** 

(Form 990)

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

**Noncash Contributions** 

Name of the organization NORTH VALLEY COMMUNITY FOUNDATION

**Employer identification number** 

Da	rt I Types of Property				58-0161455			
Pa	Types of Property	(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	( Method of a noncash contri		_	ts
1	Art—Works of art							
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods							
	Cars and other vehicles							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .							
	Securities—Closely held stock	•						
11	Securities—Partnership, LLC, or trust interests	X	1	970.717	NET BOOK VALUI	<b>=</b>		
12	Securities—Miscellaneous							
13	Qualified conservation							
	contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
	Real estate—Commercial							
	Real estate—Other							
	Collectibles							
	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	Other ► ()							
	O ther ►()							
	O ther ▶ ()							
	O ther ► ()	h ble a series		- 6 t b t				
	Number of Forms 8283 received for which the organization complete.				29			
				L			Yes	No
30a	During the year, did the organiza	ation receiv	e by contribution any prope	erty reported in Part I, lines	1-28 that it			
	must hold for at least three year							
	for exempt purposes for the enti	re holding p	period?			30a		No
b	If "Yes," describe the arrangem							
31	Does the organization have a gi			review of any non-standard	contributions?	31		No
32a	Does the organization hire or us	e third part	ies or related organizations	to solicit, process, or sell i	noncash			
	contributions?	·	-			32a		No
h	If "Yes," describe in Part II					32a		<u>No</u>
	If the organization did not repor	t an amount	in column (c) for a type of	property for which column (	a) is checked			
	describe in Part II	c an amount	column (c) for a type of	property for willen column (	a, is checked,			

Page 2

Schedule M	(Form 990) (201:
Part II	Supplem

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

Identifier Return Reference Explanation

Schedule M (Form 990) (2012)

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493043023064

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Name of the organization NORTH VALLEY COMMUNITY FOUNDATION

**SCHEDULE 0** 

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Employer identification number

68-0161455

ldentifier	Return Reference	Explanation
ORGANIZATION'S PROCESS USED TO REVIEW FORM 990	FORM 990, PAGE 6, PART VI, LINE 11B	THE BOARD RECEIVES A DRAFT COPY FROM OUR TAX PREPARER IT IS REVIEWED AT A BOARD MEETING
ENFORCEMENT OF CONFLICTS POLICY	FORM 990, PAGE 6, PART VI, LINE 12C	THE BOARD MEMBER IS REQUIRED TO SIGN FOR RECEIPT OF THE CONFLICT OF INTEREST POLICY THE EXECUTIVE COMMITTEE REVIEWS THE BOARD MEMBERS PARTICIPATION ON A YEARLY BASIS
COMPENSATION PROCESS FOR TOP OFFICIAL	FORM 990, PAGE 6, PART VI, LINE 15A	COMPENSATION IS COMPARED TO SIMILAR POSITIONS AT OTHER ORGANIZATIONS AND REVIEWED BY THE EXECUTIVE COMMITTEE, AND THEN REVIEWED BY THE FULL BOARD
GOVERNING DOCUMENTS DISCLOSURE EXPLANATION	FORM 990, PAGE 6, PART VI, LINE 19	A STATEMENT IS PUBLISHED ON THE NVCF WEBSITE THAT ALL DOCUMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST

100			
		•	
	1		
	1		

Page 1		Descr Assistance Purpose of Grant or Assistance Fiscal Sponser's EIN	Grant for Three Sixty Ecotique	Grant for Social High Rise	SBA ILP Loan Loss Reserves	Seed Fund Grant fox Social	Five By Five Tonics Seed Fund Grant	Upper Park Designs LLC Seed Fund Grant Disbursement
North Valley Community Foundation	Grantee 990 - Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions	Cash Grant Non-Cash Grant Valuation Method	501(C)(3) 3,500	501(C)(3) 2,500	501(C)(3) 50,000	501(C)(3) 7,500	501(C)(3) 3,950	501(C)(3) 2,500
		ss, and zıp EIN IRC Code	68-0065873 1 , Suite 1	68-0065873	68.0065873 Suite 1	68-0065873	68-0065873 3 , Suite 1	3Core Inc 3120 Cohasset Rd , Sulte 1 Chico, CA 95973 501(
11/20/2013 11 04 AM		Name, address,	3Core Inc 3120 Cohasset R Chico, CA 95973	3COre Inc 3120 Cobasset Rc Chico, CA 95973	3Core Inc 3120 Cohasset Rd Chico, CA 95973	3120 Cohasset R Chico, CA 95973	3Core Inc 3120 Cohasset R Chico, CA 95973	3Core Inc 3120 Cohasse Chico, CA 99

13
201
$\overline{}$
20
7
П

11 04 AM

North Valley Community Foundation

N

Page

Non-Cash Grant Valuation Method Descr Assistance Purpose of Grant or Assistance Fiscal Sponser Sponser's EIN \$5000 - EDA BIP Match, \$8,000 EDA Planning Grant Match Unrestricted end of the year gift Support for Vision Trip to Honduras Annie B's Fundraiser 2012 RE Ann and Tim Edwards Grantee 990 - Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions 1,200 5,089 200 5,000 1,000 13,000 IRC Code Cash Grant 501(C)(3) 501(C)(3) 501(C)(3) 68-0065873 91-1276578 91-1276578 91-1276578 68-0373268 68-0373268 EIN 3Core Inc 3120 Cohasset Rd , Suite 1 Chico, CA 95973 Agros International 2225 4th Avenue 2nd Floor Seattle, WA 98121 Agros International 2225 4th Avenue 2nd Floor Seattle, WA 98121 Agros International 2225 4th Avenue 2nd Floor Seattle, WA 98121 Barry Kirschner Wildlife Foundation 4995 Durham-Pentz Road Oroville, CA 95965 Barry Kirschner Wildlife Foundation 4995 Durham-Pentz Road Oroville, CA 95965 Name, address, and zip

Grant for General Support

/ Foundation	
ley Community	
North Vall	

11/20/2013				North Valley Comm	North Valley Community Foundation		Page 3	
11 04 AM								
				Grantee 990 - Part : Grantees receiving : Tax Year 2013 Region All Regions	Grantee 990 - Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions			
Name, address, and zıp	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponser Sponser's EIN	EIN
Bidwell Presbyterian Church 208 w 1st Street Chico, CA 95928	94-1212149	501(C)(3)		400		Grant for General Support		
Bidwell Presbyterian Church 208 W 1st Street Chico, CA 95928	94-1212149	501 (C) (3)		65.0		Grant for General Support		
Bidwell Presbyterian Church 208 W 1st Street Chico, CA 95928	94-1212149	501 (C) (3)		950		Grant for General Support		
Bidwell Presbyterian Church 94-1212149 208 W 1st Street Chico, CA 95928	94-1212149	501 (C) (3)		400		Grant for General Support		
Bidwell Presbyterian Church 208 W 1st Street Chico, CA 95928	94-1212149	501 (C) (3)		450		Grant for General Support		
Bidwell Presbyterian Church 94-1212149 208 W 1st Street Chico, CA 95928	94-1212149	501(C)(3)		400		Grant for General Support		

Page 4		e Fiscal Sponser Sponser's EIN					
		Purpose of Grant or Assistance	Grant for General Support				
nunity Foundation	Grantee 990 - Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions	Non-Cash Grant Valuation Method Descr Assistance					
North Valley Community Foundation	Grantee 990 - Part ; Grantees receiving ; Tax Year 2013 Region All Regions	Cash Grant	000	0 •	450	400	450
		EIN IRC Code	ch 94-1212149 501(C)(3)	ch 94-1212149 501(C)(3)	rch 94-1212149 501(C)(3)	cch 94-1212149 501(C)(3)	rch 94-1212149 501(C)(3)
11/20/2013 11 04 AM		Name, address, and z1p	Bidwell Presbyterian Church 94-1212149 208 W 1st Street Chico, CA 95928	Bidwell Presbyterian Church 94-1212149 208 W lst Street Chico, CA 95928	Bidwell Presbyterian Church 94-1212149 208 W 1st Street Chico, CA 95928	Bidwell Presbyterian Church 94-1212149 208 W 1st Street Chico, CA 95928	Bidwell Presbyterian Church 94-1212149 208 W 1st Street Chico, CA 95928

Grant for General Support

450

501(C)(3)

Bidwell Presbyterian Church 94-1212149 208 W 1st Street Chico, CA 95928

Foundation	
COMMUNICY	
Valley	
North	

11/20/2013

11/20/2013 11 04 AM			~	North Valley Community Foundation	unity Foundation			Page 5	
	,			Grantee 990 - Part : Grantees receiving Tax Year 2013 Region All Regions	Grantee 990 - Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions				
Name, address, and 21p	EIN	IRC Code (	Cash Grant	Non-Cash Grant	Non-Cash Grant Valuation Method Des	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponser	Sponser's EIN
Biue Oak Charter School 450 West East Avenue Chico, CA 95926	02-0702969	501(C)(3)	1,400	٥			Harvest Festival and other events expenses		
Blue Oak Charter School 450 West East Avenue Chico, CA 95926	02-0702969	501(C)(3)	22,940	0		•	Annie B's Fundraiser 2012		
Boys & Girls Club of North Valley 601 Wall Street Chico, CA 95928	68-0294846	501 (C) (3)	100	0			Falrview High School Bus Passes		
Boys & Girls Club of North Valley 601 Wall Street Chico, CA 95928	68-0294846	501 (C) (3)	7,405	ys.			Annie B's Fundraiser 2012		
Boys & Girls Club of North Valley 601 Wall Street Chico, CA 95928	68-0294846	501(C)(3)	250	ę			Grant for General Support		
Butte Agriculture Foundation 2580 Feather River Blvd Oroville, CA 95965	27-5326108		50,002	· 2			To Close Account		

			Sponser's EIN				Sponser's EIN						
Page 6			Fiscal Sponser	Page 7			Fiscal Sponser						
			Purpose of Grant or Assistance				Purpose of Grant or Assistance		Account Closure as per client		Final Closing Funds		Annie B's Fundraiser 2012
		lons re	Descr Assistance			ıons ıre	Descr Assistance						
North Valley Community Foundation		Grantee 990 - Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions	nt Valuation Method	North Valley Community Foundation		Grantee 990 - Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions	Non-Cash Grant Valuation Method						
North Valley C		Grantee 990 - Part 3 Grantees receiving 9 Tax Year 2013 Region All Regions	t Non-Cash Grant	North Valley Co		Grantee 990 - Part : Grantees receiving : Tax Year 2013 Region All Regions			5,000		106		299
			e Cash Grant				e Cash Grant						3)
•			IRC Code				IRC Code	8		8		9	501 (C) (3)
			EIN				EIN	94-3139132		94-3139132		94-6000506	
11/20/2013	11 04 AM		Name, address, and 21p	11/20/2013	11 04 AM		Name, address, and zip	Butte County Child Abuse Prevention Council PO Rox 569	Chico, CA 95927	Butte County Child Abuse Prevention Council PO Box 569	CA1CO, CA 95927	Butte County Library 1820 Mitchell Ave	

.

11/20/2013			NO	rth Valley Commu	North Valley Community Foundation			Page 8	
11 04 AM				Grantee 990 - Grantees recei	Grantee 990 - Part 2 Organizations Grantees receiving \$5000 or more				
				Region All Regions	gatons				
Name, address, and 21p	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method Des	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponser Sp	Sponser's EIN
Butte County Library 1820 Mitchell Ave Oroville, CA 95966	94-6000506	501(C)(3)	) 193				Annie B's Fundraiser 2012		
Butte County Library 1820 Mitchell Ave Oroville, CA 95966	94-6000506	501 (C) (3)	10,744				Annie B's Fundraiser 2012		
Butte County Library 1820 Mitchell Ave Oroville, CA 95966	94-6000506	501 (C) (3)	) 171				Annie B's Fundiaiser 2012		
Butte Creek Canyon Volunteer Fire Company, Inc P O Box 3171 Chico, CA 95927	68-0182552 IC	501(C)(3)	5,949				Annie B's Fundraiser 2012		
Butte Humane Society 2580 Fair St Chico, CA 95928	94-1508621	501 (C) (3)	4,930				Annie B's Fundraiser 2012		
Butte Humane Society 2580 Fair St Chico, CA 95928	94-1508621	501(C)(3)	) 250				Grant for General Support		

Name, address, and zip  Butte Humane Society 2580 Fair St Chico, CA 95928  Callfornia State Parks 525 The Esplanade Chico, CA 95926  Callfornia State Parks 525 The Esplanade Chico, CA 95926  Callfornia State Parks 525 The Esplanade Chico, CA 95926	EIN  94-1508621 68-0303606 68-0303606	IRC Code	Cash Grant 1, 00 20, 00	Grantee 990 - Part 2 Organization Grantees receiving \$5000 or more Tax Year 2013 Region All Regions Non-Cash Grant Valuation Method	Descr Assistance Purpose of Grant or Assistance	Page 9  Fiscal Sponser Sponser's EIN
Callfornia State Parks 525 The Esplanade Chico, CA 95926	68-0303606	501 (C) (3)	10,000	01	Bidwell Mansion	
Catalyst Domestic Violence Services P O Box 4184 Chico, CA 95927	94-2587378	501(C)(3)	6,419	6.	Annie B's Fundraiser 2012	
Chico Air Museum 170 Convair Ave Chico, CA 95973	53-3819450	501(C)(3)	3,346	91	Annie B's Fundraiser 2012	

Dace 10			or Assistance Fiscal Sponser Sponser's EIN	Support	on to close	l Pamily	n to close	on to close	on to close
			Purpose of Grant or Assistance	Grant for General Support	Final distribution to close account	Tultion for Dowell Family	Final distribution to close account	Final distribution to close account	Final distribution to close account
		su	Descr Assistance						
North Valley Community Foundation		Grantee 990 - Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions	Valuation Method				-		
orth Valley Com		Grantee 990 - Part Grantees receiving Tax Year 2013 Region All Regions	Non-Cash Grant						
Ŋ			Cash Grant	2,500	15,960	00 \$	4,736	1, 127	4,033
			IRC Code	501(C)(3)	501(C)(3)	501 (C) (3)	501 (C) (3)	501 (C) (3)	501 (C) (3)
			EIN	53-3819450	94-1697956	94-1697956	94-1697956	94 - 1697956	94-1697956
11/20/2013	11 04 AM		Name, address, and 21p	Chico Air Museum 170 Convair Ave Chico, CA 95973	Chico Christian School 2801 Notre Dame Blvd Chico, CA 95928	Chico Christian School 2801 Notre Dame Blvd Chico, CA 95928	Chico Christian School 2801 Notre Dame Blvd Chico, CA 95928	Chico Christian School 2801 Notre Dame Blvd Chico, CA 95928	Chico Christian School 2801 Norre Dame Blvd Chico, CA 95928

Foundation	
Community	
valley	
North	

11/20/2013 11 04 AM			North Valley Community Foundation	Page 11	
			Grantee 990 - Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions		
Name, address, and 21p	EIN	IRC Code	de Cash Grant Non-Cash Grant Valuation Method Descr Assistance	Purpose of Grant or Assistance Fiscal Sponser	Sponser's EIN
Chico Christian School 2801 Notre Dame Blvd Chico, CA 95928	94-1697956	<b>501</b> (C) (3)	3) 3,388	Final distribution to close account	
Chico Community Scholarship Association 1530 Humboldt Road, Suite 2 Chico, CA 95928	23-7056599	501(C)(3)	(3) 6,005	Grant for General Support	
Chico Community Scholarship 23-7056599 Association 1530 Humboldt Road, Suite 2 Chico, CA 95928	23-7056599	501(C)(3)	(3) 1,610	Grant for General Support	
Chico Community Scholarship Association 1530 Humboldt Road, Suite 2 Chico, CA 95928	23-7056599	501(C)(3)	(3) 6,739	Annie B's Fundraiser 2012	
Chico Community Shelter Partnership 101 Silver Dollar Way Chico, CA 95928	68-0440819	501(C)(3)	(3) 500	Grant for General Support	
Chico Community Shelter Partnership 101 Silver Dollar Way Chico, CA 95928	68-0440819	501(C)(3)	(3) 4,950	Gift Received \$5K, less 1≹ processing	

11/20/2013			Z	North Valley Community Foundation	unity Foundation			CL aped	
11 04 AM									
				Grantee 990 - Part : Grantees receiving : Tax Year 2013 Region All Regions	Grantee 990 - Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions				
Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method Desc	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponser	Sponser's EIN
Chico Community Shelter Partnership 101 Silver Dollar Way Chico, CA 95928	68-0440819	501(C)(3)	) 49,573	_			Annie B's Fundraiser 2012		
Chico Country Day School 102 W lith St Chico, CA 95928	20-1224053	501 (C) (3)	) 15,051	_			Annie B's Fundraiser 2012		
Chico Creek Nature Center 1968 E. 8th Street Chico, CA 95928	68-0341188	501 (C) (3)	2,993			·	Grant for general support		
Chico Creek Nature Center 1968 E. 8th Street Chico, CA 95928	68-0341188	501(C)(3)	2,810	2			Quarterly Distribution		
Chico Creek Nature Center 1968 E. 8th Street Chico, CA 95928	68-0341188	501 (C) (3)	2,943	مد مد					

2,810 Quarterly Distribution

Quarterly Distribution

2,993

501(C)(3)

١

501(C)(3)

Chico Creek Nature Center 68-0341188 1968 E 8th Street Chico, CA 95928

11/20/2013			Z	North Valley Community Foundation Page 13	n
11 04 AM					
				Grantee 990 - Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions	
Name, address, and 21p	EIN	IRC Code	Cash Grant	Non-Cash Grant Valuation Method Descr Assistance Purpose of	ser Sponser's EIN
Chico Creek Nature Center 1968 E 8th Street Chico, CA 95928	68-0341188	501(C)(3)	7,470	Annie B's Fundraiser 2012	
Chico Creek Nature Center 1968 E 8th Street Chico, CA 95928	68-0341188	501(C)(3)	2,993	.993 Quarterly Dividend	
Chico High Ag Boosters PO Box 185 Chico, CA 95927	94-1591650		5,468	Balance of funds to close account	
Chico Unified School District 1163 E 7th Street Chico, CA 95928	94-1591650	501 (C) (3)		42 Pennie Baxter's Art Program .	
Chico Unified School District 1163 E 7th Street Chico, CA 95928	94-1591650	501(C)(3)		18 Mrs Triplett's Band Program	
Chico Unified School District 1163 E 7th Street Chico, CA 95928	94-1591650	501(C)(3)		15 Rickmer's Art Program	

Rickmer's Art Program

11/20/2013			1	North Valley Community Foundation	Page 14	
:				Grantee 990 - Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions		
Name, address, and 21p	EIN	IRC Code	Cash Grant	Non-Cash Grant Valuation Method Descr Assistance Purpose of Grant or Assistance	Fiscal Sponser	Sponser's EIN
Chico Unified School District 1163 E 7th Street Chico, CA 95928	94-1591650	501(C)(3)		162 Rickmers Field Trips		
Chico Unified School District 1163 E 7th Street Chico, CA 95928	94-1591650	501 (C) (3)		300 Deposit to 01-0024-0-1502-4900-050		
Chico Unified School District 1163 E 7th Street Chico, CA 95928	94-1591650	501 (C) (3)		200 Please deposit to account # 01-9024-0-0000-8699-050-2		
Chico Unified School District 1163 E 7th Street Chico, CA 95928	94-1591650	S01(C)(3)		61 #01-0024-0-1502-4900-050		
Chico Unified School District 1163 E 7th Street Chico, CA 95928	94-1591650	501 (C) (3)		300 beposit to acct #01-0024-0-1502-4900-050		
Chico Unified School District 1163 E 7th Street Chico, CA 95928	94-1591650	501(C)(3)		200 #01-0024-0-1502-4900-050		

11/20/2013				North Valley Community Foundation	tty Foundation				
11 04 AM								raye 15	
				Grantee 990 - Part : Grantees receiving : Tax Year 2013 Region All Regions	Grantee 990 - Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions	St			
Name, address, and 21p	EIN	IRC Code	Cash Grant	Non-Cash Grant Va	Valuation Method	Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponser	Sponser's EIN
Chico Unified School District 1163 E 7th Street Chico, CA 95928	94-1591650	501(C)(3)		4.0			Grant for Fine Arts .		
Chico Unified School District 1163 E 7th Street Chico, CA 95928	94-1591650	501(C) (3)	`	120			Account #01-0024-0-1502-4900-050		
Chico Unified School District 1163 E 7th Street Chico, CA 95928	94-1591650	501(C)(3)		278			Deposit to 01-0024-0-1502-4900-050		-
Chico Unified School District 1163 E 7th Street Chico, CA 95928	94-1591650	501(C)(3)		100			Please deposit to account # 01-9024-0-0000-0000-8699-050-2 050		٠
Chico Unified School District 1163 E 7th Street Chico, CA 95928	94-1591650	501(C)(3)	) 11,357	57			Engineering Program		
Chico Unified School District 1163 E 7th Street Chico, CA 95928	94-1591650	501(C)(3)		100			Dance Program		

	raye 10
North Valley Community Foundation	
11/20/2013	11 04 AM

	Descr Assistance Purpose of Grant or Assistance Fiscal Sponser's EIN	Foor Foundation Grant #2 PVHS (Walkway Project)	Grant for General Support	Balance of Money for Walkway Grant for PVHS	Inspire School - Fall 2012 Mini Grant (Joyce Henderson - student theatre production)	
Grantee 990 - Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions	IRC Code Cash Grant Non-Cash Grant Valuation Method Dee	501(C)(3) 2,500	501(C)(3) 400	S01(C)(3) 1,371	501(C)(3) 200	501(C)(3)
	EIN	94-1591650	94-1591650	94-1591650	94-1591650	94-1591650
	Name, address, and 21p	Chico Unified School District 1163 E 7th Street Chico, CA 95928	Chico Unified School District 1163 E 7th Street Chico, CA 95928	Chico Unified School District 1163 E 7th Street Chico, CA 95928	Chico Unified School District 1163 E 7th Street Chico, CA 95928	Chico Unified School District 1163 E 7th Street Chico, CA 95928

Inspire School of Arts

3,119

501 (C) (3)

no.	
munity Foundati	
rth Valley Com	
Nor	

Page 17		Descr Assistance Purpose of Grant or Assistance Fiscal Sponser's EIN	Gala 2013 Ticket Sales Benefit	Deposit to	01-0024-0-1502-4900-050	Please deposit to account # 01-9024-0-0000-0000-8699-050-2 050	Deposit to accoutn 01-0024-0-1502-4900-050		Please deposit to account # 01-9024-0-0000-0000-8699-050-2 050		Board Approved Grant
North Valley Community Foundation	Grantee 990 - Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions	Non-Cash Grant Valuation Method Descr									
N		de Cash Grant	(3) 183	(3) 200		525	(3) 310		(3) 243	(1)	
		IRC Code	50 501(C)(3)	50 501(C)(3)		(5) (3) 105	501 (C) (3)	20	501(C)(3)	50	101 100
		EIN	94-1591650	94-1591650	94-1591650		94-1591650	94-1591650	-	94-1591650	
11/20/2013 11 04 AM		Name, address, and 21p	Chico Unified School District 1163 E 7th Street Chico, CA 95928	Chico Unified School District 1163 E 7th Street Chico, CA 95928	Chico Unified School District 1163 E 7th Street Chico, CA 95928		Chico Unfled School District 1163 E 7th Street Chico, CA 95928	Chico Unified School District 1163 E 7th Street		Chico Unified School District 1163 E 7th Street Chico, CA 95928	

Foundation	
Community	
North Valley	
NO	
3	

		Sponser's EIN						
Page 18		Fiscal Sponser		•				
		Purpose of Grant or Assistance	Annie B's Fundraiser 2012	Grant for General Support	Amnie B's Fundraiser 2012	Grant for General Support	Transfer funds to close account	Final amount to close fund
	s successions	Descr Assistance						
North Valley Community Foundation	Grantee 990 - Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions	Non-Cash Grant Valuation Method						
Worth Valley Com	Grantee 990 - Part Grantees receiving Tax Year 2013 Region All Regions	Non-Cash Grant	o.	0	o,	0	m	r vo
-		Cash Grant	5,209	150	8 8 8	1,500	987,463	255
		IRC Code	\$Ô1(C) (3)	501(C)(3)	501(C)(3)	501(C)(3)	501(C)(3)	501(C)(3)
		EIN	94-2223398	20-4331649	20-4331649	20-4331649	on 20-3824986	ton 20-3824986
11/20/2013 11 04 AM		Name, address, and zıp	Community Housing Improvement Program 1001 Willow Street Chico, CA 95928	Doroteia Pathways P O Box 7514 Chico, CA 95927	Doroteia Pathways P O Box 7514 Chico, CA 95927	Doroteia Pathways P O Box 7514 Chico, CA 95927	Durham Community Foundation 20-3824986 PO Box 454 Durham, CA 95938	Durham Community Foundation 20-3824986 PO Box 454 Durham, CA 95938

North Valley Community Foundation	Grantee 990 - Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions	p EIN IRC Code Cash Grant Non-Cash Grant Valuation Method Descr Assistance Purpose of Grant or Assistance Fiscal Sponser's EIN	idation 20-3824986  S01(C)(3) 458  Balance of funds to close account	idation 20-3824986  501(C)(3) 7,466  Balance of funds to close account	idation 20-3824986 501(C)(3) 4,037 To Close Fund as per Client	idation 20-3824986 501(C)(3) . 25 ACH Deposit for Wolfe - Durham Education - General	.on 94-6101905 501(C)(3) 30,450 Per Cllent Request	on 94-6101905
		EIN	20-3824986	20-3824986	20-3824986	20-3824986	94-6101905	94-6101905
11 04 AM		Name, address, and 21p	Durham Community Foundation PO Box 454 Durham, CA 95938	Durham Community Poundation 20-3824986 PO Box 454 Durham, CA 95938	Durham Community Foundation 20-3824986 PO Box 454 Durham, CA 95938	Durham Community Poundation 20-3824986 PO Box 454 Durham, CA 95938	Durham Community Legion Post 673 Po Box 336 Durham, CA 95938	Durham Community Legion Post 673 Po Box 336 Durham, CA 95938

11/20/2013				
11 04 AM			rage 2.1	
	٠		Grantee 990 - Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions	
Name, address, and 21p	EIN	IRC Code	Cash Grant Non-Cash Grant Valuation Method Descr Assistance Purpose of Giant or Assistance Fiscal Sponser	Sponser's EIN
Durham Community Legion Post 673 PO Box 336 Durham, CA 95938	94-6101905	501(C)(3)	1,499 As Per Client to Close Account	
Durham Friends of the Library PO Box 505 Durham, CA 95938	68-0339612	501(C) (3)	16,790 First Installment to Close Fund	
Durham Friends of the Library PO Box 505 Durham, CA 95938	68-0339612	501(C)(3)	12 , Balance of funds to close account	
Durham Unified School PO Box 300 Durham, CA 95938		501(C)(3)	Architecture Fees for Phase 1, Initial Fee	
Family Service Agency 1347 Grant St Red Bluff, CA 96080	94-1616456	501(C) (3)	4,249 Annie B's Fundraiser 2012	
Family Service Agency 1347 Grant St Red Bluff, CA 96080	94-1616456	501(C)(3)	2,400 Grant for General Subbort	

Grant for General Support

רי פארנו			trance Purpose of Grant or Assistance Fiscal Sponser's EIN	Donation from California Nut	restival proceeds	Annie B's Fundzaiser 2012	Grant for General Support	Table Sponsorship	Grant for General Support	Paypal Payment from H Ellzabeth Renfro
North Valley Community Foundation		Grantee 990 - Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions	Cash Grant Non-Cash Grant Valuation Method Descr Assistance	10,000	6,434		15,000	250	25,000	Q. A.
			EIN IRC Code	94-2740978 501 (C) (3)	94-2740978	94-2740978	501(C)(3)	501 (C) (3)	(5) (3)	501(C)(3)
11/20/2013	11 04 AM		Name, address, and 21p	Far West Heritage Association 270 Boeing Ave Ste 1 Chico, CA 95973	Far West Herltage Association 270 Boeing Ave Ste 1 Chico, CA 95973	Far West Heritage Association 270 Roping Ave Ste 1	Chico, CA 95973	Feeding Nations through Education PO Book 4509 Chico, CA 95927	Feeding Nations through Education PO Box 4509 Chico, CA 95927	Feeding Nations through Education PO Box 4509 Chico, CA 95927

11/20/2013  11 04 AM  Name, address, and 21P	Z : Η : : : : : : : : : : : : : : : : :	IRC Code	Cash Grant No	North Valley Community Foundation  Grantee 990 - Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions Non-Cash Grant Valuation Method Descr Assistance Pui	Purpose of Grant or Assistance Fi	Page 23 Fiscal Sponser Sponser's EIN
Forest Ranch Charter School P O Box 5 Forest Ranch, CA 95942	1 26-2908742	501 (C) (3)	) 11,419	An	Annie B's Fundraiser 2012	
Forest Ranch Volunteer Fire Dept. Inc 15535 Nopel Avenue Forest Ranch. CA 95942	e 94-2529889	501(C)(3)	17,203	An	Annie B's Fundraiser 2012	
Friends of Bidwell Park P O Box 4837 Chico, CA 95927	80-0061379	501(C)(3)	5,176	An	Annıe B's Fundraıser 2012	
Friendship Bridge 405 Urban Street, Sulte 140 Lakewood, CO 80228	84-1141078 0	501(C)(3)	5,000	Gr	Grant for General Support - Attn Michael Allen	
Gateway Science Museum 625 Esplanade Chico, CA 95929	95-1230865	501(C)(3)	150	La	Late Annse B's Donation	

24		nser Sponser's EIN						
Page		Fiscal Sponser						
		Purpose of Grant or Assistance	Annie B's Fundraiser 2012	Annie B's Pundraiser 2012	Children's Home, account #2919	Annie B's Fundraiser 2012	Grant for General Support	Annie B's Pundraiser 2012
	ons e	Descr Assistance						
North Valley Community Foundation	Grantee 990 - Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions	Valuation Method						
rth Valley Comm	Grantee 990 - Part (Grantees receiving Tax Year 2013 Region All Regions	Non-Cash Grant						
N		Cash Grant	28,202	6,464	10,371	10,533	200	15,036
		IRC Code	501(C)(3)	501(C)(3)		S01(C)(3)	501 (C) (3)	501(C)(3)
		EIN	95-1230865	54-2192527	48-1256219	80-0554487	68-0262142	68-0262142
11/20/2013 11 04 AM		Name, address, and zıp	Gateway Science Museum 625 Esplanade Chico, CA 95929	Girls incorporated PO Box 1115 Red Bluff, CA 96080	Global Outreach International PO Box 1 Tupelo, MS 38802	Gridley Historic Museum 601 Kentucky St Gridley, CA 95948	Habitat for Humanity 220 Meyers Street Chico, CA 95928	Habitat for Humanity 220 Meyers Street Chico, CA 95928

Foundation
Community
Valley
North

11/20/2013  11 04 AM  Name, address, and zip  11 06 Richards Street, Suite 505 Richards Street, Suite 605 Richards Street, Suite 1238 Arbutus Ave Chico, CA 95926  Hooker Oak Elementary 1238 Arbutus Ave Chico, CA 95926  Hocker Oak Elementary 1238 Arbutus Ave Chico, CA 95926  Anternational Foundation PO Box 23813	56-2609000 56-2609000 66-2609000	IRC Code 	Cash Grant 18,00	rt S S :	tions ore d Descr Assistance	Purpose of Grant or Assistance F Grant for General Support Annie B's Fundraiser 2012 Late Annie B's Gift Received through Paypal	Page 25 Fiscal Sponser	Sponser's EIN
Mashington, DC 20026 International Foundation PO Box 23813 Washington, DC 20026	, 53-0204604	501(C)(3)	3,700		•	Acct #878-001 Grant for General Support		_
		501(C)(3)				Grant for General Support		

Foundation	
Community	
Valley	
North	

11/20/2013 11 04 AM

Page 26

Note	International Foundation 53-0204604 PO Box 23813 Washington, DC 20026	Foundation	Sol(C)(3)	501(C)(3) 5,500 Grant for General Support	53-0204604 501(C)(3) 5,500	53-0204604 501(C)(3) 3,700	Grantee 990 - Part 2 Organizations Glantees receiving \$5000 or more    Tax Year 2013    Region All Regions EIN IRC Code Cash Grant Non-Cash Grant Valuation Method Descr Assistance Purpose of Grant or Assistance Fiscal Sponser
------	---	------------	-----------	---	-------------------------------	-------------------------------	--

Grant for General Support

Page 27			ance Purpose of Grant or Assistance Fiscal Sponser's EIN	Support of Chico Stewardship Network	Grant for General Support	Grant for General Support	Acct #878-000	Grant for General Support . July 2012	Grant for General Support
North Valley Community Foundation		Grantee 990 · Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions	Cash Grant Non-Cash Grant Valuation Method Descr Assistance	9,000	3,500	6,000	6,000	5,500	. 5,500
			IRC Code C	501(C)(3)	501 (C) (3)	501 (C) (3)	501(C)(3)	501 (C) (3)	501(C)(3)
			EIN	53-0204604	53-0204604	53-0204604	53-0204604	53-0204604	53-0204604
11/20/2013	11 04 AM		Name, address, and zıp	International Foundation PO Box 23813 Washington, DC 20026	International Foundation PO Box 21813 Washington, DC 20026				

North Valley Community Foundation	
11/20/2013	

Page 28			Descr Assistance Purpose of Grant or Assistance Fiscal Sponser's EIN	Grant for General Support	Account #878-000	Account #878-000	Transfer of Donation Received	2012 Run For Food Sponsorship	Annie B's Pundraiser 2012
North Valley Community Foundation		Grantee 990 - Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions	Non-Cash Grant Valuation Method	, 500	6,000	6,000	200	1,000	18,057
			IRC Code Cash Grant	501(C)(3)	501(C)(3)	501(C)(3)	501 (C) (3)	501(C)(3)	501(C)(3)
			EIN	53-0204604	53-0204604	53-0204604	68-0290819	68-0290819	68-0290819
11/20/2013	11 04 AM		Name, address, and 21p	International Foundation PO Box 23813 Washington, DC 20026	International Foundation PO Box 23813 Washington, DC 20026	International Foundation PO Box 23813 Washington, DC 20026	Jesus Center 1297 Park Avenue Chico, CA 95928	Jesus Center 1297 Park Avenue Chico, CA 95928	Jesus Center 1297 Park Avenue Chico, CA 95928

11/20/2013			North Valley Community Foundation	
11 04 AM				rage 29
			Grantee 990 - Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions	
Name, address, and zip	EIN	IRC Code	Cash Grant Non-Cash Grant Valuation Method Descr Assistance Purpose of Grant or Assistance	Fiscal Sponser Sponser's EIN
Kids and Creeks PO Box 3271 Chico, CA 95927	86-1078084	501(C)(3)	)(3) 8,700 Grant for General Support	
Kids and Creeks PO Box 3271 Chico, CA 95927	86-1078084	501(C)(3)	(3) 680 Grant for General Support	
Kids and Creeks PO Box 3271 Chico, CA 95927	86-1078084	501 (C) (3)	(3) 4,168 Annie B's Fundraiser 2012	
Leapingstone Foundation 7808 La Quinta Court Pleasanton, CA 94588	26-1212091	501(C)(3)	3) 8,004 Anne B's Fundraiser 2012	
Meals on Wheels - Chico P O Box 1662 Chico, CA 95927	94-1732875	501(C)(3)	.) (3) 18,120 Annie B's Fundraiser 2012	
Meals on Wheels - Chico P O Box 1662 Chico, CA 95927	94-1732875	501(C)(3)	(3) 2,000 Grant for General Support	

Foundation	
Community	
Valley	
North	

Page 30		Purpose of Grant or Assistance Fiscal Sponser Sponser's EIN	Annie B's Fundraiser 2012	Addıtıonal Annıe B's Funds	Annie B's Fundraiser 2012	/Annie B's Fundraiser 2012	Annie B's Pundraiser 2012	's Donation
		Descr Assistance Purpose of G	Annie B's Fu	Addıtıonal A	Annae B's Fu	Annze B's Fu	Annie B's Po	Late Annie B's Donation
North Valley Community Foundation	Grantee 990 - Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions	Valuation Method						
North Valley Comm	Grantee 990 - Part S Grantees receiving ( Tax Year 2013 Region All Regions	Non-Cash Grant	90	4, 60	2 4	89	48.	150
		Cash Grant	904, [[		6,342	13,368	17,184	
		IRC Code	501 (C) (3)	501 (C) (3)	501 (C) (3)	501 (C) (3)	501 (C) (3)	501(C)(3)
		EIN	80-0491477	45-3123266	45-3123266	23-7083780	95-1230865	95-1230865
11/20/2013 11 04 AM		Name, address, and zip	Mı C A S A Education 385 Ford Gridley, CA 95948	Museum of Northern Callforna Art 900 Esplanade Chico, CA 95926	Museum of Northern Callfornia Art 900 Esplanade Chico, CA 95926	Music Teacher's Association of California, Butte County Branch 7 Discovery Way Chico, CA 95973	North State Symphony 400 W lst St #805 Chico, CA 95929-0805	North State Symphony 400 W 1st St #805 Chico, CA 95929-0805

			Sponser's EIN						
15 02.00			Fiscal Sponser Sponsor						
			Purpose of Grant or Assistance F	Grant for General Support	Annie B's Fundraiser 2012	Annie B's Fundraiser 2012	RE Ann and Tam Edwards	Annie B's Pundraiser 2012	Annie B's Fundraiser 2012
		suc	Descr Assistance P	9	a	a.	K	α.	κ.
North Valley Community Foundation		Grantee 990 - Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions	Valuation Method		,				
orth Valley Com		Grantee 990 - Part : Grantees receiving : Tax Year 2013 Region All Regions	Non-Cash Grant						
Ž			Cash Grant	16,250	26,396	27,874	5, 000	5,232	13,999
			IRC Code	501 (C) (3)	501(C)(3)	501(C)(3)	\$01(C)(3)	501(C)(3)	501(C)(3)
			EIN	95-1230865	20-0984601	68-0228692	32-0026231	94-6000387	94-2207457
11/20/2013	11 04 AM		Name, address, and 21p	North State Symphony 400 W 1st St #805 Chico, CA 95929-0805	Northern Valley Catholic Social Service 10 Independence Circle Chico, CA 95973	Notre Dame School 435 Hazel St Chico, CA 95928	Orchard Church Community Ministry 818 Salem Street Chico, CA 95928	Oroville Chinese Temple and Museum 1735 Montgomery Street Oroville, CA 95965	Oroville Rescue Mission PO Box 2481 Oroville, CA 95965

North Valley Community Foundation	
11/20/2013	

11 04 AM			Y.	orth valley comm Grantee 990 - Grantees rece Tax Year 2013	NOKEN VALLEY COMMUNITY FOUNDALION  Grantee 990 - Part 2 Organizations  Grantees receiving \$5000 or more  Tax Year 2013		Page 32
Name, address, and zip	EIN	IRC Code	Cash Grant	Region All Regions Non-Cash Grant Valua	Region All Regions Non-Cash Grant Valuation Method Descr Assistance	Purpose of Grant or Assistance	Fiscal Sponser Sponser's EIN
le Rescue Mi: 2481 1e, CA 95965	94-2207457	501(C)(3)				Grant for General Support	
Oroville YMCA 1684 Robinson St Oroville, CA 95965	94-1156634	501(C)(3)	22,209			Annıe B's Fundraiser 2012	
Our Lady of Lourdes Catholic School 74l Ware Avenue Colusa, CA 95932	94-2515733	501(C)(3)	12,851			Annie B's Fundraiser 2012	
Paradise Animal Shelter Helpers PO Box 1021 Paradise, CA 95967		501(C)(3)	1,200			Grant for General Support	
Paradise Animal Shelter Helpers PO Box 1021 Paradise, CA 95967		501(C)(3)	2,810			Quarterly Distribution	
Paradise Animal Shelter Helpers PO Box 1021 Paradise, CA 95967		501(C)(3)	2, 993			Quarterly Distribution	

ition	
nity Foundation	
alley Community	
North Valley	

11/20/2013 11 04 AM			z	North Valley Community Foundation	Page 33
				Grantee 990 - Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions	
Name, address, and zip	EIN	IRC Code	Cash Grant	Non-Cash Grant Valuation Method Descr Assistance Purpose of Grant or Assistance	or Assistance Fiscal Sponser Sponser's EIN
Paradise Animal Shelter Helpers PO Box 1021 Paradise, CA 95967		501(C)(3)	2,993	Grant for general support	support
Paradise Animal Shelter Helpers PO Box 1021 Paradise, CA 95967		501(C)(3)	1,000	00 Grant for General Support	Support
Paradise Animal Shelter Halpers PO Box 1021 Paradise, CA 95967		501 (C) (3)	2,810	110 Quarterly Distribution	Ę
Paradise Animal Shelter Helpers PO Box 1021 Paradise, CA 95967		501(C)(3)	2,993	93 Quarterly Dividend	
Paradise Hospice 5974 Pentz Road Paradise, CA 95969	68-0002188	501(C)(3)	2,993	93 Quarterly Dividend	
Paradise Hospice 5974 Pentz Road Paradise, CA 95969	68-0002188	501(C)(3)	200	.00 Grant for General Support	Support

11/20/2013			North Valley Community Foundation	
11 04 AM				rage 34
			Grantee 990 - Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions	
Name, address, and zip	EIN	IRC Code	Cash Grant Non-Cash Grant Valuation Method Descr Assistance	Purpose of Grant or Assistance Fiscal Sponser Sponser's EIN
Paradise Hospice 5974 Pentz Road Paradise, CA 95969	68-0002188	501(C)(3)	2,993	Quarterly Distribution
Paradise Hospice 5974 Pentz Road Paradise, CA 95969	68-0002188	501(C)(3)	2,993	Grant for general support
Paradise Hospice 5974 Pentz Road Paradise, CA 95969	68.0002188	501(C)(3)	2,810	Quarterly Distribution
Paradise Hospice 5974 Pentz Road Paradise, CA 95969	68-0002188	501 (C) (3)	2,810	Quarterly Distribution
Paradise Performing Arts Center P O Box 1124 Paradise, CA 95967	94-2681738	501 (C) (3)	2,000	Grant for General Support
Paradise Performing Arts Center P O Box 1124 Paradise, CA 95967	94-2681738	501 (C) (3)	7.2	Final distribution to close

uo	
oundation	
y Fou	
munıt	
r Commun i	
Valley C	
North V	
ž	
١	
1013	
20/2013	
77	

		Sponser Sponser's EIN						
Page		Purpose of Grant or Assistance Fiscal Sponser	Annie B's Fundraiser 2012	Funds to close account	Annie B's Fundraiser 2012	Grant for General Support	Grant for Safe Water Project	Annie B's Pundraiser 2012
North Valley Community Foundation	Grantee 990 - Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions	Non-Cash Grant Valuation Method Descr Assistance Purpos	Annie	Funds	Аппле	Grant	Grant	Amile
North Va	Grai Grai Tax Reg	Cash Grant Non-Ca	8 ° ° 8 ° 8 ° 8 ° 8 ° 8 ° 8 ° 8 ° 8 ° 8	1,468	6,831	000'9	2,645	8,917
		IRC Code	501(C)(3)	501(C)(3)	501(C)(3)	\$01(C)(3)	501(C)(3)	501(C)(3)
		EIN	94-2681738	94-2681738	94-1674265	20-3416077	20-3416077	80-0490627
11/20/2013 11 04 AM		Name, address, and zip	Paradise Performing Arts Center P O Box 1124 Paradise, CA 95967	Paradise Performing Arts Center P O Box 1124 Paradise, CA 95967	Paradise Symphony Society P O Box 1892 Paradise, CA 95967	Seeds of Hope PO Box 897 Chico, CA 95927	Seeds of Hope PO Box 897 Chico, CA 95927	Sherwood Montessorn 746 Moss Avenue Chico, CA 95926

uc	
North Valley Community Foundation	

Page 36			Fiscal Sponser Sponser's EIN						
			Purpose of Grant or Assistance F	Annie B's Fundraiser 2012	Grant for General Support	Annie B's Fundraiser 2012	Annie B's Fundraiser 2012	Annie B's Fundraiser 2012	Grant for General Support
North Valley Community Foundation		Grantee 990 - Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions	Grant Valuation Method Descr Assistance		•				
North V		Gre Gra Tao	Cash Grant	7,306	2,500	017,7	8,120	4, 303	9) 600
			IRC Code	501(C)(3)	501(C)(3)	501 (C) (3)	501(C)(3)	501(C)(3)	5 501(C)(3)
			EIN	94-2628842	27-2177467	27-2177467	94-1746468	95-4545206	95-4545206
11/20/2013	11 04 AM		Name, address, and 21p	Tehama County Museum PO Box 275 Tehama, CA 96090	Tehama Together, Inc 332 Pine Street Suite L Red Bluff, CA 96080	Tehama Together, Inc 332 Pine Street Suite L Red Bluff, CA 96080	The ARC of Butte County, Inc PO Box 3697 Chico, CA 95927	The Esplanade House 181 E Shasta Ave Chico, CA 95973	The Esplanade House 181 E. Shasta Ave Chico, CA 95973

11/20/2013 11 04 AM Name, address, and zıp The Esplanade House The Esplanade House Chico, CA 95973	EIN 	IRC Code	Morth Valley Community Foundation  Grantees 120 - Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions  Cash Grant Non-Cash Grant Valuation Method Descr Assistance  Cash Grant Non-Cash Grant or Assistance	Page 37
The Esplanade House 181 E Shasta Ave Chico, CA 95973 The Esplanade House	95-4545206	501(C)(3)	Subsidy for June, July and August 2012 August 2012 Sept., Oct., Nov & Dec 2012 Subsidy	
181 E Shasta Ave Chico, CA 95973 The Esplanade House 181 E Shasta Ave Chico, CA 95973	95-4545206	501(C)(3)	3) 25,500 Subsidy for March, April and May 2012 May 2012 34,000 January, February, March, April 2013 Subsidy	
The Hope Center 1950 Kitrick Ave , Suite A Oroville, CA 95966 The Hope Center 1950 Kitrick Ave , Suite A Oroville, CA 95966	20-1594318	501(C)(3)	3) 2,000 Grant for General Support 1,000 Grant for General Support Stant for General Support	

oundation
<u>н</u> >-
Communit
Valley (
North 1

11/20/2013			North Valley Community Foundation	
11 04 AM				
			Grantee 990 - Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions	
Name, address, and zip	EIN	IRC Code	Cash Grant Non-Cash Grant Valuation Method Descr Assistance Purpose of Grant or Assistance Fiscal Sponser's EIN	SEIN
The Hope Center 1950 Kitrick Ave , Suite A Oroville, CA 95966	20-1594318	501(C)(3)	5,036 Annie B's Fundraiser 2012	
The Salvation Army 13404 Browns Valley Drive Chico, CA 95973	94-1156347	501(C)(3)	3,677 Annie B's Fundraiser 2012	
The Salvation Army 13404 Browns Valley Drive Chico, CA 95973	94-1156347	501(C)(3)	150 Late Annie B's Donation	
The Salvation Army 13404 Browns Valley Drive Chico, CA 95973	94-1156347	501(C)(3)	392 Grant for General Support	
The Salvation Army 13404 Browns Valley Drive Chico, CA 95973	94-1156347	501(C)(3)	1,300 Grant for General Support	
Work Training Center 2255 Fair Street Chico, CA 95928-6747	94-1540883	501(C)(3)	6,143	

			Sponser's EIN							
92.60	הר ה		Fiscal Sponser							
			Descr Assistance Purpose of Grant or Assistance		Niger and Zambia Water Projects		Grant for General Support		West Africa Water Projects	
		suc	Descr Assistance							
unity Foundation		Grantee 990 - Part 2 Organizations Grantees receiving \$5000 or more Tax Year 2013 Region All Regions	Non-Cash Grant Valuation Method							
North Valley Community Foundation		Grantee 990 - Part Crantees receiving Tax Year 2013 Region All Regions	Non-Cash Grant		0		0		00	7.5
			IRC Code Cash Grant		24,000		12,000		12,000	2,391,427
			IRC Code		501(C)(3)		501(C)(3)		501(C)(3)	
			EIN	95-3202116		95-3202116		95-3202116		
11/20/2013	11 04 AM		Name, address, and zıp	World Vision		World Vision		World Vision		Total