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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)

Open to Public

OMB No 1545-0047

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

Inspection

A	For the	2012 calendar year, or tax year beginning JUL 1, 2012 and ending	JUN 30, 2013
	Check if	C Name of organization	D Employer identification number
_	applicable		Employer Identification Humber
	Addres	S CUACHA DECTONAL COMMUNITHY EQUADATION	
┝	lchange Name		60 0040076
누	lchange ltnitial		68-0242276
누	return	Number and street (or P.O. box if mail is not delivered to street address) Room/suit	· · · · · · · · · · · · · · · · · · ·
느	Termin	1333 ARBORETOM DRIVE, SOTTE B	(530) 244-1219
L	Amend	City, town, or post office, state, and ZIP code	G Gross receipts \$ 7,576,933.
L	Application	REDDING, CA 90003	H(a) Is this a group return
	pendin	F Name and address of principal officer: KERRY CARANCI	for affiliates? Yes X No
		SAME AS C ABOVE	H(b) Are all affiliates included? X Yes No
1	Tax-exe	empt status. X 501(c)(3) 501(c) () ((Insert no.) 4947(a)(1) or 52	If "No," attach a list. (see instructions)
J	_ Websit	e: > WWW.SHASTARCF.ORG	H(c) Group exemption number ▶
			ar of formation: 2000 M State of legal domicile: CA
	art I	Summary	
_		Briefly describe the organization's mission or most significant activities: THE FOUND	ATION PROMOTES
్రాబ్ది		PHILANTHROPHY BY CONNECTING PEOPLE WHO CARE W	
<u> </u>	1 -	Check this box if the organization discontinued its operations or disposed of mo	······································
Še.	l l	Number of voting members of the governing body (Part VI, line 1a)	3 14
₹ •	3		4 13
్త	4	Number of independent voting members of the governing body (Part VI, line 1b)	
	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	
≅≅	6	Total number of volunteers (estimate if necessary)	6 200
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), line 12 RECENTED	7a 0.
7	<u> b</u>	Net unrelated business taxable income from Form 990-T, line 34	76 76 $0.$
L C C P		led oct 28 2013	O Prior Year Current Year
<u> </u>	8	Contributions and grants (Part VIII, line 1h)	$\sqrt{36}$, 588, 667. 3, 466, 522.
35	9	Program service revenue (Part VIII, line 2g)	254,546. 356,294.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	193,987. 445,429.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e	429,351. 102,011.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	7,466,551. 4,370,256.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,460,171. 1,385,828.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0. 0.
Ś	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	277,281. 403,875.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.
e	ь	Total fundraising expenses (Part IX, column (D), line 25) > 201, 753.	
û	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	448,541. 1,340,225.
	1	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	2,185,993. 3,129,928.
	19	Revenue less expenses Subtract line 18 from line 12	5,280,558. 1,240,328.
5	g	·-··	Beginning of Current Year End of Year
Net Assets or	20	Total assets (Part X, line 16)	19,058,625. 21,285,013.
Ass	21	Total liabilities (Part X, line 26)	137,777. 163,012.
E E	22	Net assets or fund balances Subtract line 21 from line 20	18,920,848. 21,122,001.
ΓĒ	art II	Signature Block	20/320/010.
_		Ities of perjury, I declare that I have examined this return, including accompanying schedules and state	ements, and to the hest of my knowledge and helief it is
		t, and complete. Declaration of preparer (other than officer) is based on all information of which prepare	
	c, correc	t, and comprese becauting of preparer (office than officer) is based on an information of which prepare	10/22/13
۵.		Signature of afficer	Date
Sig			
He	ere	KÉRRY CARANCI, CEO Type or print name and title	
			Date Check PTIN
_		Print/Type preparer's name Preparer's signature	
Pa		HOLLY SALISBURY HOLLY Salisbury	10/03/13 sett-employed P00836978
	eparer	Firm's name MATSON AND ISOM	Firm's EIN ▶ 94-2222122
Us	e Only	Firm's address 1726 COURT STREET	,
		REDDING, CA 96001	Phone no. (530)241-2515
M:	av the If	RS discuss this return with the preparer shown above? (see instructions)	X Yes No

SHASTA REGIONAL COMMUNITY FOUNDATION

68-0242276

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Form 990 (2012)

Form 990 (2012)

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Part IV Checklist of Required Schedules

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

Form 990 (2012) SHASTA REGIONAL COMMUNITY FOUNDATION

Part IV Checklist of Required Schedules (continued)

	·		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		_X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			l
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
þ	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			٠,,
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	_26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	İ		İ
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
_	Instructions for applicable filing thresholds, conditions, and exceptions)	200		X
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
C	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
20	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
29 30	Did the organization receive unite than \$25,000 in nor cash contributions? If res, complete contributions of art, historical treasures, or other similar assets, or qualified conservation			
30	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
31	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
~_	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	<u> </u>	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	L

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Form 990 (2012) SHASTA REGIONAL COMMUNITY FOUNDATION Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V				Щ
	- •			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 8			İ
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b0			l
C	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eportable gaming			l
	(gambling) winnings to prize winners?		1c	Х	—
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				1
	filed for the calendar year ending with or within the year covered by this return	2a 8			İ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	• •	2b	X	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	3)	_		37
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	•	3a_		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	•	4.		x
L	financial account in a foreign country (such as a bank account, securities account, or other financial if "Yes," enter the name of the foreign country:	account)?	4a		
ь	See instructions for filling requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accounts			l
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	Accounts.	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction?	5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e organization solicit			
-	any contributions that were not tax deductible as charitable contributions?		6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contribute	ons or gifts			i
	were not tax deductible?	-	6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	vices provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required			
	to file Form 8282?	· i	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		7e		<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit conti		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations are instanced from the card partial properties of the card partial partial properties of the card partial		7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at		8		1
9	Sponsoring organizations maintaining donor advised funds.	any time during the year.	0		
a	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				ĺ
а	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against				ĺ
	amounts due or received from them.)	11b		İ	İ
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	l 1	12a		ļ
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			 	
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note. See the instructions for additional information the organization must report on Schedule O.				1
b	- · · · · · · · · · · · · · · · · · · ·	405			1
_	organization is licensed to issue qualified health plans	13b			1
140	Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year?	13c	14a		Х
14a	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e О	14a		^
U	in 100, has it mod a 1 om 120 to toport those payments: in 140, provide all explanation in ocheour	 		990	(2012

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

	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion 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 14		-	
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 13			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1		
_	officer, director, trustee, or key employee?	2	i	x
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
3	of officers, directors, or trustees, or key employees to a management company or other person?	3		v
	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
4		5		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	6		X
6	Did the organization have members or stockholders?	6		
7a		_		37
	more members of the governing body?	7a		<u> </u>
Þ	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	l i		
_	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	<u>8a</u>	_X_	
b	Each committee with authority to act on behalf of the governing body?	_8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	_		
<u> </u>	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			-
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	40.		
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	_11a	Λ	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	40-	v	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	<u> </u>
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Λ	<u> </u>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	40-	X	
40		12c	X	-
13	Did the organization have a written whistleblower policy?	13	X	-
14	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent	14	Λ	
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
_		45-	v	
a	The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	15a	Х	x
D	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	15b		<u> </u>
16-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
ioa	taxable entity during the year?	46-		х
_	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	16a		
D	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		
Sec	etion C. Disclosure	100		
17	List the states with which a copy of this Form 990 is required to be filed CA			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availah	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, ar	d finar	icial	
	statements available to the public during the tax year.	J 100		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	tion. 🖿	•	
	RAIANN HODGE - (503) 244-1219		_	
	1335 ARRORETIM DRIVE SUITE B REDDING CA 96003			

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization n	or any related	orga	ınıza	tion	cor	npe	nsat	ed any current officer, o	irector, or trustee.	
(A)	(B)			(0				(D)	(E)	(F)
Name and Title	Average	(do	not c	Pos				Reportable	Reportable	Estimated
	hours per	box	, unle:	ss pe	rson	s bot	han	compensation	compensation	amount of
<u></u>	week	\vdash	ceran	dad	recto	or/trus	tee)	from	from related	other
	(list any	trustee or director						the	organizations	compensation
	hours for	9	ایوا			ig ig		organization	(W-2/1099-MISC)	from the
	related	ste	ruste		40	l S		(W-2/1099-MISC)		organization
	organizations	ᆵ	onal		ploye	E 👷				and related
	below line)	Individual	Institutional trustee	Officer	Key employee	Highest compensated employee	ormer			organizations
(1) LARRY DAHL	2.00	_)	_			·		
TREASURER		X		X				0.	0.	0.
(2) MARY RICKERT	2.00									
SECRETARY		X		X		ļ		0.	0.	0.
(3) EVELYN JACOBS	2.00	1						_	_	_
DIRECTOR		X				ļ		0.	0.	0.
(4) DEANNE PARKER	2.00							_	_	_
VICE- CHAIRMAN		X		X		ļ	_	0.	0.	0.
(5) KENDELL SEAMANS	2.00	1						_	_ '	_
PAST CHAIR		X		X	<u> </u>	<u> </u>		0.	0.	0.
(6) JOSEPH TALLERICO	2.00]				i				
CHAIRMAN		X		X				0.	0.	0.
(7) WILLIAM KOHN	2.00	Į								
DIRECTOR		X				_		0.	0.	0.
(8) DORIAN AIELLO	2.00							_	_	_
DIRECTOR		X						0.	0.	0.
(9) LEO GRAHAM	2.00								_	
DIRECTOR		X	<u> </u>	<u> </u>				0.	0.	0.
(10) BARBARA CROSS	2.00							•	•	
DIRECTOR	0.00	X			_	 		0.	0.	0.
(11) JIM ZAUHER	2.00	٠,								
DIRECTOR	2 00	X				-	-	0.	0.	0.
(12) JOAN FAVERO	2.00	X						0.	0.	0.
DIRECTOR	2.00	A				<u> </u>		0.	0.	0.
(13) BRIAN MEEK	2.00	X						0.	0.	0.
DIRECTOR	40.00	^						0.	0.	
(14) KATHY JOHNSON	40.00	1		х				103,267.	0.	0.
CEO		\vdash		<u> </u>		1		103,207.		<u></u>
		1								
	<u> </u>	ļ	<u> </u>			_			_	
	ļ. <u> </u>	d								
	1	1.	1	1	I		I .		l	1.

	Section A. Officers, Directors, Trus	tees, key ⊑m	proy	ees,	, and	ם חו	gne	<u>si c</u>	ompensated Employe	es (continueu)				
	` (A)	(B)			_ (((D)	(E)			(F)	
	Name and title	Average	(do		Pos heck		than	one	Reportable	Reportable		Es	tımate	b :
		hours per	box	, unle	ss pe	rson	s bot or/trus	h an	compensation	compensation	า		ount	of
		week (list any	├			10010	1	1	from	from related			other	
		hours for	Individual trustee or director						the organization	organizations (W-2/1099-MIS			pensa	
		related	0.0	tee			sate		(W-2/1099-MISC)	(44-2/1099-14113	·,		om the anızatı	
		organizations	ruste	l trus		82	m pe		(** 27 1055 141100)			_	d relate	
		below	de al	Institutional trustee	_	l old ii	ye co	 ==					ınızatı	
		line)		Instit	Officer	Key employee	Highest compensated employee	Former						
			_											
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				'										
			_		_	<u> </u>	┞			<u>-</u>				
			<u> </u>											
1b	Sub-total								103,267.		0.			0.
С	Total from continuation sheets to Part V	II, Section A					\blacktriangleright		0.		0.			0.
d	Total (add lines 1b and 1c)						>		103,267.		0.			0.
2	Total number of individuals (including but r	ot limited to th	ose	liste	ed a	bov	e) wl	no re	eceived more than \$100	,000 of reportable	е			
	compensation from the organization													1
													Yes	No
3	Did the organization list any former officer,	director, or tru	uste	e, ke	ey er	nplo	yee	, or	highest compensated e	mployee on				
	line 1a? If "Yes," complete Schedule J for s				•		•			, ,		3		X
4	For any individual listed on line 1a, is the si			omp	ensa	atior	ano	d otl	her compensation from	the organization				
•	and related organizations greater than \$15									J		4		X
5	Did any person listed on line 1a receive or									idual for services				
•	rendered to the organization? If "Yes," com											5		X
Sec	tion B. Independent Contractors													
1	Complete this table for your five highest co	mpensated in	dene	ende	ent o	ont	racto	ors t	that received more than	\$100,000 of com	pens	ation f	rom	
•	the organization Report compensation for										F			
	(A)	uio caioridai y	<u> </u>	•••••	g .		<u> </u>	Ī	(B)	, , , , ,		(C		
	Name and business	address	N	INC	F.				Description of s	services	С	ompe		n
		-						\dashv						
				_				\dashv						
								1						
		-						\dashv						
												-		
2	Total number of independent contractors (-	ot l	mite	d to	tho	se li	stec	d above) who received n	nore than				
	\$100,000 of compensation from the organ	ization >					<u>U</u>		_					
												Form	uan /	20121

		Check if Schedule O conti	ains a response	to any question ir		<u> </u>		<u>, </u>
	•				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
इइ	1 a	Federated campaigns	. la					
ᇣ	b		1b					
۾ آھي	c		1c					
a ii	d		1d					
e,≝	e	0	` —					
ű.	f	All other contributions, gifts, grani	, 					
돌	•	similar amounts not included above	- I I	3,466,522,				
걸리	_			3,400,522,				
Contributions, Gifts, Grants and Other Similar Amounts	9	Noncash contributions included in lines Total. Add lines 1a-1f	12-11 \$		3 466 500			
<u> </u>		Total. Add lines fa-11		Business Code	3,466,522.			
.	0 -	10//			250 425	252 427		
Ş		ADMINISTRATION FEES		523930	352,437,	352,437.		
Program Service Revenue	b			523930	3,857.	3,857.	<u> </u>	
	C							
	d							
č	е			-				
_	f	All other program service reve	enue	<u> </u>	_			
\longrightarrow	9	Total. Add lines 2a-2f		•	356,294.			
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)		<u> </u>	386,528.			386 528.
	4	Income from investment of tax	x-exempt bond p	proceeds				
	5	Royalties .	····	•				
			(i) Real	(ii) Personal				
	6 a	Gross rents						
	b	Less rental expenses						
	С	Rental income or (loss)						
	d	Net rental income or (loss)	·	>				
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	3,265,578					
	b	Less: cost or other basis						
		and sales expenses	3,206,677					
	С	Gain or (loss)	58,901.			i		
i	d	Net gain or (loss)			58,901.	58,901.		
e ne	8 a	Gross income from fundraising	g events (not		·			
		including \$	of					
ě		contributions reported on line	1c). See					
Other Rever		Part IV, line 18	а					
흎	b	Less direct expenses	b					
0	С	: Net income or (loss) from fund	draising events					
		Gross income from gaming ac					<u> </u>	
		D + 0/1 - 10	a]		
	ь	Less: direct expenses	b					
		: Net income or (loss) from garr		>				
		Gross sales of inventory, less	_					
		and allowances	а					
	b	Less: cost of goods sold	b					
		: Net income or (loss) from sale	•	•				
		Miscellaneous Revenu	_	Business Code	 			
	11 a	CHNG IN VALUE REMNDR T		523930	102,011,	102,011.		
	b			223330	102,011,	104,011,	.	
							 	
	C	All other revenue						
		Total Add lines 11s 11d			100 011			
	12	Total revenue. See instructions.		. [102,011.	F17 200	0	205 500
23200 12-10		Total revenue. Occ manucions.	<u> </u>	··· · · · · · · · · · · · · · · · · ·	4,370,256.	517,206,		386 528. Form 990 (2012)
12-10	- 12							1 Olin 220 (2012)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response to any question in this Part IX (B) Program service (C) Management and general expenses (A) (D) Fundraising Do not include amounts reported on lines 6b. Total expenses 7b. 8b. 9b. and 10b of Part VIII. expenses expenses Grants and other assistance to governments and 1,250,520. 1,250,520. organizations in the United States, See Part IV, line 21 Grants and other assistance to individuals in 135,308. 135,308. the United States, See Part IV, line 22 Grants and other assistance to governments. organizations, and individuals outside the United States, See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 100,867. 25,217. 15,130. trustees, and key employees 60,520. Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 239,053. 90,170. Other salaries and wages 80,641 68,242. 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 2,692. 33,648. 14,132 16,824 Other employee benefits 30,307. 12,729. 15,154 2,424. Payroll taxes 10 Fees for services (non-employees): Management 325 325 Legal 11,400. 2,850. 5,700. 2,850. Accounting Lobbying Professional fundraising services. See Part IV, line 17 39,978. 39,978 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 2.406 2,864 458. column (A) amount, list line 11g expenses on Sch O.) 11,277. 7,072. 561 3,644. Advertising and promotion 12 8,269. 3,451. 2,409 2,409. 13 Office expenses Information technology 14 Royalties 15 73,613 18,403 36,807 18,403. 16 Occupancy 12,740. 25,642. 8,601 4,301. Travel 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Interest Payments to affiliates 21 10,111 10,111 Depreciation, depletion, and amortization 12,359. 4,002. 2,177. 6,180. Insurance 23 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 1,008,391 1,008,391 a FUND DISTRIBUTION 37,733. 11,047. 8,895. 17,791. CONTRACT SERVICES 26,164. 6,541. 13,082. REPAIRS AND MAINTENANCE 6,541. 19,214. 19,214. d WORKSHOP EXPENSE 52,885 13,146 29,980. 9,759. e All other expenses 3,129,928 2,692,203. 235,972. 201,753. Total functional expenses Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Form 990 (2012)
Part X Balance Sheet

Part X	Balance Sheet			
	Check if Schedule O contains a response to any question in this Part X			
		(A)		(B)
		Beginning of year		End of year
1	Cash - non-interest-bearing		_1	
2	Savings and temporary cash investments	2,422,743.	2	1,582,366
3	Pledges and grants receivable, net	5,667,784.	3	516,289
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			
1	employers and sponsoring organizations of section 501(c)(9) voluntary			
.	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
3 7	Notes and loans receivable, net	436,044.	7	406,240
7 8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	3,239.	9	4,460
10a	Land, buildings, and equipment: cost or other	-		
	basis. Complete Part VI of Schedule D 10a 107, 132.			
l b	Less: accumulated depreciation 10b 88,317.	26,537.	10c	18,815
11	Investments - publicly traded securities	8,624,105.	11	16,818,775
12	Investments - other securities. See Part IV, line 11		12	•
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11	1,878,173.	15	1,938,068
16	Total assets. Add lines 1 through 15 (must equal line 34)	19,058,625.	16	21,285,013
17	Accounts payable and accrued expenses	15,363.	17	4,547
18	Grants payable	106,168.	18	144,793
19	Deferred revenue		19	5,525
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.			
د	Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24) Complete Part X of			
	Schedule D	16,246.	25	8,147
26	Total liabilities. Add lines 17 through 25	137,777.	26	163,012
İ	Organizations that follow SFAS 117 (ASC 958), check here			
မွ	complete lines 27 through 29, and lines 33 and 34.			
E 27	Unrestricted net assets	584,175.		413,383
28	Temporarily restricted net assets	6,041,667.		5,459,177
29	Permanently restricted net assets	12,295,006.	29	15,249,441
구	Organizations that do not follow SFAS 117 (ASC 958), check here ▶			
<u></u>	and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds		30	
g 31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances 24 25 26 27 28 29 29 29 29 29 29 29 29 29 29 29 29 29	Retained earnings, endowment, accumulated income, or other funds	10 000 015	32	01 100 555
2 33	Total net assets or fund balances	18,920,848.	33	21,122,001
34	Total liabilities and net assets/fund balances	19,058,625.	34	21,285,013 Form 990 (2012

Form	990 (2012) SHASTA REGIONAL COMMUNITY FOUNDATION	68-02	242276	Pag	ge 12
Pa	rt XI Reconciliation 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	<u>4,370</u>		
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,129		
3	Revenue less expenses. Subtract line 2 from line 1	3	1,240		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	<u> 18,920</u>		
5	Net unrealized gains (losses) on investments	_5	960	<u>8, (</u>	<u> 25.</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	_8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9 _			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	21,122	3,0	<u>01.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				Щ
1	Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0	-	Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	l	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis			1	
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	gle Audit			ı
	Act and OMB Circular A-133?		3a		<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audıt			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u></u>	3b		
			Form 9	9 90 (2012)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
SHASTA REGIONAL COMMUNITY FOUNDATION

Employer identification number

		DIMPIN	VEGIONATI COM	TIONIT	I FOU	NDVIT	OIN		0	0-0242	4/0	
Part I	Reason	for Public Chai	r ity Status (All organız	ations mus	st complet	e this par	t.) See inst	ructions.				
he orga	inization is not a	a private foundation	because it is: (For lines 1	through 1	l1, check (only one b	ox.)					
1 🖳	A church, co	nvention of churche	es, or association of churc	ches desci	rıbed ın <mark>se</mark>	ction 170	(b)(1)(A)(i)).				
2	A school des	cribed in section 1	70(b)(1)(A)(ii). (Attach Sc	hedule E)								
3	A hospital or	a cooperative hosp	ital service organization o	described	n section	170(b)(1)	(A)(iii).					
4	A medical res	search organization	operated in conjunction	with a hos	pital descr	nbed in se	ction 170	(b)(1)(A)(ii	i). Enter	the hospital	's nan	ne,
	city, and stat											
5	An organizat	on operated for the	benefit of a college or ur	niversity ov	vned or op	erated by	a governi	mental uni	t describ	ped in		-
	section 170	(b)(1)(A)(iv). (Comp	lete Part II.)									
6	A federal, sta	ate, or local governn	nent or governmental unit	described	ın sectio	n 170(b)(1)(A)(v).					
7 X	An organizat	on that normally red	ceives a substantial part o	of its supp	ort from a	governme	ental unit c	r from the	general	public desc	nbed i	n
	section 170	(b)(1)(A)(vi). (Comple	ete Part II.)									
в <u></u>	A community	trust described in	section 170(b)(1)(A)(vi). ((Complete	Part II.)							
9 🗀	An organizat	ion that normally red	ceives. (1) more than 33 1	1/3% of its	support fr	rom contri	butions, m	nembershi	p fees, a	ınd gross red	ceipts	from
	activities rela	ited to its exempt fu	nctions - subject to certa	ın exceptio	ons, and (2	2) no more	than 33 1	/3% of its	support	t from gross	invest	ment
	income and i	unrelated business	taxable income (less sect	ion 511 ta	x) from bu	sinesses a	acquired b	y the orga	nızatıon	after June 3	iO, 197	7 5.
	See section	509(a)(2). (Complet	e Part III.)									
10 🗀	An organizat	ion organized and o	perated exclusively to te	st for publi	c safety. S	See sectio	on 509(a)(4	1).				
11 🗀	An organizat	ion organized and o	perated exclusively for th	ne benefit d	of, to perfo	rm the fu	nctions of,	or to carr	y out the	purposes o	of one	or
	more publicly	y supported organiz	ations described in section	on 509(a)(1	l) or sectio	n 509(a)(2	2). See se c	ction 509(a)(3). Ch	eck the box	that	
	describes the	e type of supporting	organization and comple	ete lines 1º	1e through	11h.						
	_ a L Type	I Б Т	ype II c Ty	ype III - Fui	nctionally i	ntegrated	·	ј 🔙 Тур	e III - No	n-functional	ly integ	grated
е 🗀	By checking	this box, I certify th	at the organization is not	controlled	directly o	r indirectly	by one o	r more disc	qualified	persons oth	ner tha	n
	foundation m	nanagers and other	than one or more publicly	supporte	d organiza	tions des	cnbed in s	ection 509	9(a)(1) or	section 509)(a)(2).	
f	If the organiz	ation received a wr	tten determination from t	he IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
	supporting o	rganization, check t	his box									
g	Since Augus	t 17, 2006, has the	organization accepted ar	ny gift or co	ontribution	from any	of the follo	owing pers	sons?			
	(i) A perso	n who directly or inc	directly controls, either al	one or tog	ether with	persons o	described	ın (iı) and (ιιί) below	/,	Yes	No
	the gov	eming body of the s	supported organization?							11g(i)		
	(ii) A family	member of a perso	n described in (i) above?							11g(iı)		
	(iii) A 35%	controlled entity of	a person described in (i) o	or (ii) above	∍ ?					11g(iii)		
h	Provide the f	following information	about the supported or	ganization((s).							
(i) Nan	ne of supported	(ii) EIN	(iii) Type of organization	(iv) Is the o	rganization	(v) Did yo	u notify the	(vi) Is	the	(vii) Amount	of mo	netary
	ganization	(,	(described on lines 1-9	in col. (i) lis			tion in col.	organization (i) organiz		1	port	ilotai y
	•		above or IRC section	governing	document?	(i) of you	r support?	\',' " Ü.S	.?		,	
			(see instructions))	Yes	No	Yes	No	Yes	No			
									ļ			
							1					
												
[otal												

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

Schedule A (Form 990 or 990-EZ) 2012

Schedule A (Form 990 or 990-EZ) 2012 SHASTA REGIONAL COMMUNITY FOUNDATION 68-02422 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) 68-0242276 Page 2

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	4144300.	1885720.	3842617.	6588667.	3466522.	19927826.
2	Tax revenues levied for the organ-						
	ization'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	4144300.	1885720.	3842617.	6588667.	3466522.	19927826.
5	The portion of total contributions				,		
	by each person (other than a						
	governmental unit or publicly				İ		
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						10875028.
6	Public support. Subtract line 5 from line 4						9052798.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	4144300.	1885720.	3842617.	6588667.	3466522.	19927826.
8	Gross income from interest,						
	dividends, payments received on						
	secunties loans, rents, royalties	i					
	and income from similar sources	114,880.	103,459.	159,899.	177,164.	386,528.	941,930.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carned on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)	-59,999.	-2,426.	395,127.	429,351.	102,011.	864,064.
11	Total support. Add lines 7 through 10						21733820.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12 1	,267,659.
13	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth ta	ix year as a section	n 501(c)(3)	
_	organization, check this box and stor						▶□
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2012 (line 6, column (f) di	ivided by line 11, c	olumn (f))		14	<u>41.65 %</u>
15	Public support percentage from 2011	Schedule A, Part	II, line 14			15	<u>42.77 %</u>
16a	33 1/3% support test - 2012. If the c	_			14 is 33 1/3% or m	nore, check this b	
	stop here. The organization qualifies		•				► [X]
k	33 1/3% support test - 2011. If the o				line 15 is 33 1/3%	or more, check t	his box
	and stop here. The organization qual						. ▶∟
172	10% -facts-and-circumstances tes	t - 2012. If the org	anization did not o	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac				•	rt IV how the orga	nization
	meets the "facts-and-circumstances"	-	•		-		. ▶∟
k	10% -facts-and-circumstances tes	-					
	more, and if the organization meets the				-		e
	organization meets the "facts-and-cire		-	•			▶∐
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17t			
					Scho	dule A (Form 990	1 AF CKK1. E 71 9019

Schedule A (Form 990 or 990 EZ) 2012 Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Sec	ction A. Public Support	now, picase com	pieto i une ii j				
ale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	: Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						
Se	ction B. Total Support						
ale	ndar year (or fiscal year beginning in) 🖊	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
t	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12)						
	First five years. If the Form 990 is for	the organization'	's first, second. the	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3) organiz	ation,
_	check this box and stop here						· ▶ □
Se	ction C. Computation of Publ	c Support Pe	ercentage				
15	Public support percentage for 2012 (I	ne 8, column (f) c	divided by line 13,	column (f))		15	%
16	Public support percentage from 2011	Schedule A, Pari	t III, line 15			16	%
Se	ction D. Computation of Inves	tment Incom	ne Percentage				
17	Investment income percentage for 20	12 (line 10c, colu	mn (f) divided by li	ne 13, column (f))		17	%
	Investment income percentage from 2	•	•	.,,		18	%
19:	33 1/3% support tests - 2012. If the	organization did	not check the box	on line 14, and line	e 15 is more than	33 1/3%, and line 1	7 is not
-	more than 33 1/3%, check this box a	-					▶□
ı	33 1/3% support tests - 2011. If the	•	•	• •	• • •	•	and
	line 18 is not more than 33 1/3%, che	ck this box and s	stop here. The org	anization qualifies	as a publicly supp	ported organization	▶□
<u>20</u>	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	his box and see ir	structions	▶ □

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions.

2012
Open to Public Inspection

Name of the organization

SHASTA REGIONAL COMMUNITY FOUNDATION

Employer identification number 68-0242276

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 30 107 Total number at end of year 2,559,647 Aggregate contributions to (during year) 1,375,147. 2 960,326. 385,362. Aggregate grants from (during year) 5,824,477. Aggregate value at end of year 20,257,914. Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds X Yes are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II | Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of an historically important land area Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2b Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) __ Yes and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art. historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

		<u>REGIONAL CO</u>					<u>-0242276 Page 2</u>
Par	t III Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, o	r Other	<u>Similar A</u>	ssets(continued)
3	Using the drganization's acquisition, accession	on, and other records	s, check any of the	following that	are a sign	ficant use o	of its collection items
	(check all that apply)						
а	Public exhibition	d	Loan or excl	hange progra	ms		
b	Scholarly research	e	Other	3			
c	Preservation for future generations	·					
	Provide a description of the organization's co	llootions and ovalain	how they further th	ho organizatio	n's avamn	t nurnana ir	Dort VIII
							i Pait Aiii.
	During the year, did the organization solicit or				er sirrillar as	seis	— , —,
	to be sold to raise funds rather than to be ma						Yes No
Гаі		gernents. Comple	te if the organizatio	n answered "	Yes" to Foi	m 990, Par	t IV, line 9, or
	reported an amount on Form 990, Par	• • •					
	Is the organization an agent, trustee, custodia	an or other intermed	ary for contribution	is or other ass	sets not inc	luded	
	on Form 990, Part X?						└── Yes
b	If "Yes," explain the arrangement in Part XIII a	and complete the fol	lowing table				
							Amount
C	Beginning balance					1c	
d	Additions during the year					1d	
е	Distributions during the year			_		1e	
f	Ending balance					1f	
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?			•	Yes No
	If "Yes," explain the arrangement in Part XIII.			provided in P	art XIII	•	
Par							
		(a) Current year	(b) Prior year	(c) Two years		Three years	back (e) Four years back
1a	Beginning of year balance	13,014,333,	7,134,369,	5,582	1 1	4.856.0	
b	Contributions	1,918,468,	5,972,385.	1	773.	586.8	
	Net investment earnings, gains, and losses	1,279,903.	117,807,	1,031		256	
d	Grants or scholarships	173,039,	210,228.	1	304.	118.0	
_	Other expenditures for facilities	175,035,	210,220,	127	. 304.	110,	72,025.
·	and programs						
f	Administrative expenses						
	· · · · · · ·	16 030 665	12 014 222	7 124	360	F F00	265 4 256 624
9	End of year balance	16,039,665,	13,014,333,	7,134	369.1	5,582,3	365. 4,856,691.
2	Provide the estimated percentage of the curr	ent year end balance		a)) neio as:			
а	Board designated or quasi-endowment		_%				
	Permanent endowment ▶ 95.30	%					
С		<u>4.70</u> %					
	The percentages in lines 2a, 2b, and 2c shou	•					
3 a	Are there endowment funds not in the posses	ssion of the organiza	ation that are held a	ınd admınıster	red for the	organizatior)
	by						Yes No
	(i) unrelated organizations						3a(i) X
	(ii) related organizations						3a(ii) <u>X</u>
b	If "Yes" to 3a(ii), are the related organizations	listed as required or	n Schedule R?				3b
4	Describe in Part XIII the intended uses of the						
Par	t VI Land, Buildings, and Equipm	ent. See Form 990	, Part X, line 10.				
	Description of property	(a) Cost or of	\ , ,	or other	. ,	ımulated	(d) Book value
		basis (investr	nent) basis	(other)	depre	ciation	
1a	Land						
ь	Buildings						l
	Leasehold improvements						
	Equipment		10	7,132.	8	8,317	18,815.
	Other	_				4	
	. Add lines 1a through 1e. (Column (d) must e	gual Form 990, Part	X. column (B), line 1	10(c).)		.	18,815.

Schedule D (Form 990) 2012

SHASTA REGIONAL COMMUNITY FOUNDATION

68-0242276 Page 3

Schedule D (Form 990) 2012

	edule D (Form 990) 2012 SHASTA REGIONAL COMMUNITY F			68-	0242276	Page 4
1	Total revenue, gains, and other support per audited financial statements		arriotorido por tr	1	5,331	001
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	- •			3,331	,001.
a	Net unrealized gains on investments	00	960,825.			
_	Donated services and use of facilities	2a	900,023.	1		
b		2b				
C	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIII)	_2d_		-		
е				_2e	960	<u>,825.</u>
3	Subtract line 2e from line 1			3	4,370	<u>.256.</u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b]		
C	Add lines 4a and 4b			_4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		· · · · · · · · · · · · · · · · · · ·	5	4,370	256.
Pa	rt XII Reconciliation of Expenses per Audited Financial Stateme	ents W	ith Expenses per	Retu	irn	
1	Total expenses and losses per audited financial statements			1	3,129	928.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		•			
а	Donated services and use of facilities	2a				
ь	Prior year adjustments	2b		1		
c	Other losses	2c		1		
d		2d		1	•	
e		_ ZU	·	ا ۱		٥
3	Subtract line 2e from line 1			2e 3	3,129	020
4	Amounts included on Form 990. Part IX, line 25, but not on line 1.			3	3,149,	720.
•		4-				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	 -	-		
þ	Other (Describe in Part XIII)	4b		- 1		•
	Add lines 4a and 4b		•	4c	2 4 6 6	0.
Pa	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) rt XIII Supplemental Information		· · · · · · · · · · · · · · · · · · ·	5	3,129	928.
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III,	lines 1	a and 4; Part IV, lines 1	b and	2b; Part V. line	4: Part
	e 2; Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to p				,	.,
	RT V, LINE 4: ENDOWMENTS ARE USED TO MAINTA				Rጥ ፑOR	
			10110 12111 00		1010	
THI	E INDIVIDUAL FUNDS SPECIFIED PURPOSE.					
	2 INDIVIDUE TOURD DEBOTE IND TOUR ODDI	•				
				_		
וגם	RT X, LINE 2: INCOME TAXES THE FOUNDATION	пус	אש ממנדעם שא	V . Tr	VEMDE	
FAI	AT A, DINE 2: INCOME TAKES THE FOUNDATION	паз	KECEIVED IA	<u> </u>	XEMP'I	
cm;	AMIC INDED CECUTON E01/G\/2\ OF MIE TAMEDAN			3.37	D 6565	
2.1.7	ATUS UNDER SECTION 501(C)(3) OF THE INTERNA	т кі	EVENUE CODE,	AN	D SECTIO	<u>N</u>
	701/2) 02 200 200 200 200 200 200 200 200 20					
<u> 23</u>	701(D) OF THE CALIFORNIA REVENUE AND TAXATI	ON (CODE, AND HA	S B	EEN	
				_		
CL	ASSIFIED AS AN ORGANIZATION THAT IS NOT A P	RIV	ATE FOUNDATI	ON	UNDER	
SE	CTION 509(A) OF THE INTERNAL REVENUE CODE.	AC(CORDINGLY, N	<u>Ю</u> Р	ROVISION	1
				Sched	dule D (Form 9	90) 2012

Schedule D (Form 990) 2012 SHASTA REGIONAL COMMUNITY FOUNDATION 68-0242276 Page 5 Part XIII Supplemental Information (continued)
FOR INCOME TAXES IS INCLUDED IN THE FINANCIAL STATEMENTS.
FASB ASC 740-10 CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES
RECOGNIZED IN THE FOUNDATION STANCIAL STATEMENTS IN ACCORDANCE WITH
FASB ASC 740, AND PRESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT
ATTRIBUTE FOR THE FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF A TAX
POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. FASB ASC 740-10
ALSO PROVIDES GUIDANCE ON DERECOGNITION AND MEASUREMENT OF A TAX POSITION
TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN.
THE FOUNDATION FILES INCOME TAX RETURNS IN THE U.S. FEDERAL JURISDICTION,
AND THE STATE OF CALIFORNIA. THE FOUNDATION S FEDERAL INCOME TAX RETURNS
FOR TAX YEARS 2009 AND BEYOND REMAIN SUBJECT TO EXAMINATION BY THE
INTERNAL REVENUE SERVICE. THE FOUNDATION S CALIFORNIA INCOME TAX RETURNS
FOR TAX YEARS 2008 AND BEYOND REMAIN SUBJECT TO EXAMINATION BY THE
FRANCHISE TAX BOARD.
THE FOUNDATION DID NOT HAVE UNRECOGNIZED TAX BENEFITS AS OF JUNE 30, 2013,
AND DOES NOT EXPECT THIS TO CHANGE SIGNIFICANTLY OVER THE NEXT 12 MONTHS.
IN CONNECTION WITH THE ADOPTION OF FASB ASC 740-10, THE FOUNDATION WILL
RECOGNIZE INTEREST AND PENALTIES ACCRUED ON ANY UNRECOGNIZED TAX BENEFITS
AS A COMPONENT OF INCOME TAX EXPENSE. AS OF JUNE 30, 2013, THE FOUNDATION
DID NOT ACCRUE INTEREST OR PENALTIES RELATED TO UNCERTAIN TAX POSITIONS.

Employer identification number 68-0242276 Open to Public OMB No 1545-0047 Inspection (h) Purpose of grant EE DETAIL PROVIDED or assistance X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ► Attach to Form 990. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (d) Amount of cash grant 1,250,520 SHASTA REGIONAL COMMUNITY FOUNDATION (c) IRC section if applicable Part I General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization SEE DETAILED LIST PROVIDED, or government Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE (Form 990) Part II

2

Schedule I (Form 990) (2012) 156. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table

232101 12-18-12

(f) Description of non-cash assistance Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed. PART I, LINE 2: REQUIRE GRANT REPORTS OF ALL GRANTEES FOR EACH GRANT AWARDED AND CONDUCT OCCASIONAL SITE VISITS TO INSURE COMPLIANCE WITH (d) Amount of non-cash assistance 135,308, (c) Amount of cash grant (b) Number of recipients 62 (a) Type of grant or assistance GRANT CONTRACTS SEE LIST OF GRANTS SCHEDULE I, Part III

Schedule I (Form 990) (2012)

232102 12-18-12

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Page 2

68-0242276

SHASTA REGIONAL COMMUNITY FOUNDATION

Schedule I (Form 990) (2012)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

SHASTA REGIONAL COMMUNITY FOUNDATION

Employer identification number

DIASIA REGIONAL COMMONITY FOUNDATION 00-02422/0
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
LEADERSHIP REDDING - THIS PROGRAM CONSISTS OF ONE YEAR PROGRAMS OF
DAY-LONG SESSIONS INTENDED TO PROVIDE ITS PARTICIPANTS WITH INFORMATION
AND OPPORTUNITIES TO PROMOTE COMMUNITY INVOLVEMENT.
EXPENSES \$ 51,166. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
IVY B. HORR ENDOWED MEDICAL EDUCATION LOAN FUND: THIS PROGRAM PROVIDES
LOW INTEREST LOANS TO STUDENTS FROM SHASTA, LASSEN, TRINITY, TEHAMA,
MODOC AND SISKIYOU COUNTIES PURSUING AN EDUCATION IN MEDICINE.
EXPENSES \$ 10,970. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
OTHER PROGRAMS
EXPENSES \$ 52,146. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
FORM 990, PART VI, SECTION B, LINE 11: LINE 11A EXPLANATION - MATSON &
ISOM CPAS PROVIDES A DRAFT IRS FORM 990 TO SRCF MANAGEMENT FOR REVIEW FOUR
WEEKS PRIOR TO THE DUE DATE OF NOVEMBER 15TH. (MATSON & ISOM CPAS ALSO
PROVIDES THE STATE OF CA TAX FORMS 199 AND RRF-1 FOR FILING.)
SRCF MANAGEMENT FORWARDS THE DRAFT IRS FORM 990 TO ALL SRCF BOARD MEMBERS
FOR REVIEW AND COMMENT, (REVIEW AND COMMENT PERIOD IS 10 DAYS).
UNLESS AN EXTENSION IS NECESSARY, THE IRS FORM 990 AND THE STATE OF CA TAX
FORMS 199 AND RRF-1 ARE FILED VIA CERTIFIED MAIL BY THE DUE DATE.

. , Sebedula O / Farm 000 at 000 F7 (0010)	_
Schedule O (Form 990 or 990 EZ) (2012) Name of the organization SHASTA REGIONAL COMMUNITY FOUNDATION	Page 2 Employer identification number 68-0242276
SIGNED BY BOARD MEMBERS AND STAFF, AND THEN THE BOARD REV	IEWS THE
STATEMENTS TO IDENTIFY ANY POTENTIAL CONFLICTS.	
FORM 990, PART VI, SECTION B, LINE 15A: THE SRCF EXECUTIV	E COMMITTEE (BOARD
CHAIR, VICE-CHAIR, SECRETARY, TREASURER, AND PAST CHAIR)	SERVES AS THE
COMPENSATION COMMITTEE (COMMITTEE). THE COMMITTEE MEETS	ANNUALLY TO REVIEW
THE CEO COMPENSATION. OFFICERS AND DIRECTORS OF SRCF ARE	NOT PAID A SALARY
OR WAGE OTHER THAN THE CEO.	
THE COMMITTEE REVIEWS COUNCIL ON FOUNDATIONS SALARY AND W	AGE SURVEY, THE
CEO EMPLOYMENT CONTRACT AND RECOMMENDS ANY AND ALL CHANGE	S TO THE BOARD OF
DIRECTORS FOR A FULL VOTE.	
FORM 990, PART VI, SECTION C, LINE 19: SRCF POSTS THE INV	ESTMENT AND FUND
MANAGEMENT, 990, AND ANNUAL AUDIT INFORMATION ON THEIR WE	BSITE AT
WWW.SHASTARCF.ORG. THE BYLAWS, ARTICLES OF INCORPORATION	AND FORM 1023 ARE
MADE AVAILABLE UPON REQUEST.	

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2012 Open to Public Inspection

Employer identification number 68-0242276

 Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
 ▶ Attach to Form 990.
 ▶ See separate instructions. SHASTA REGIONAL COMMUNITY FOUNDATION Name of the organization

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

Part

(f) Direct controlling entity			impt (a)
			related tax-exe
(e) End-of-year assets			e it had one or more
(d) Total income			rt IV, line 34 becaus
(c) Legal domicile (state or foreign country)			swered "Yes" to Form 990, Par
(b) Primary activity			ions (Complete if the organization an
(a) Name, address, and EIN (if applicable) of disregarded entity			Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a)	(Q)	(0)	(Q)	(e)	()	(9)	200.449)
Name, address, and EIN	Primary activity	Legal domicile (state or	Φ	Public charity	Direct controlling	contro	z(u), is)
of related organization		foreign country)	section	status (if section	entity	entity	0
				501(c)(3))		Yes	No
SRC REAL ESTATE FOUNDATION - 06-1797306							
1335 ARBORETUM DRIVE, SUITE B							
REDDING CA 96003	REAL ESTATE	CALIFORNIA	501(C)(3)	TYPE 1			×
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2012

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Schedule R (Form 990) 2012 SHASTA REGIONAL COMMUNITY FOUNDATION

Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EiN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity		(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income		Share of Dend-of-year at assets	(h) Disproportionate allocations?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) Standard or managing pather? (i) Dather? (65) Yes No	al or Perr	(j) (k) General or Percentage managing ownership Partne? Yes No
Part IV Identification of Related Organizations treated as a corporation or trust during the tax year.) (a) (b) (c) (d) (d) (e) (f) (g) (h) (g) (h) (g) (h) (g) (h) (g) (h) (g) (h) (g) (h) (g) (h) (g) (h) (g) (h) (g) (h) (g) (g	ganizations Taxable a proporation or trust durin	ig the tax y	corporation or Trust (C tax year.) (b) Primary activity	Complete of the (C) Legal domicile (state or foreign country)	ne organization ans (d) Direct controlling entity	n answered	(e) Type of entity (C corp., S corp, or trust)	(f) Share of total	IV, line 34 cotal	(g) Share of end-of-year assets	(h) Percentage	more relative sections age 5120 control yes	(i) Section 512(b,73) controlled entity?
										:		-	
232162 12-10-12										Sche	Schedule R (Form 990) 2012	orm 99	0) 2012

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

					;	=
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule			9 3 3 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		Tes	2
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	s with one or more re	lated organizations listed	in Parts II-IV?		1	
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				<u>6</u>		×
b Gift grant or capital contribution to related organization(s)				4		×
			-	Ş		>
c Girt, grant, or capital contribution from related organization(s)				٤		:
d Loans or loan guarantees to or for related organization(s)	:		:	₽		×
e Loans or loan quarantees by related organization(s)				1		×
• Dividends from related organization(s)				+		×
בייים ביים בייים ב					T	>
g Sale of assets to related organization(s)				<u>6</u>		∢:
h Purchase of assets from related organization(s)				£		×
j Exchange of assets with related organization(s)			:	Ţ		×
i Lease of facilities, equipment, or other assets to related organization(s)			,	1,		×
k Lease of facilities, equipment, or other assets from related organization(s)				¥		×
Performance of services or membership or fundraising solicitations for related organization(s)	ınızatıon(s)			=	•	×
m Performance of services or membership or fundraising solicitations by related organization(s)	nization(s)			1 E		×
Sharno of facilities equipment mailing lists or other assets with related organization(s)	(s)uo			5		×
Organica of activities with property of construction (c)				Ş		×
 Snaring of paid employees with related organization(s) 				2		4
						;
p Reimbursement paid to related organization(s) for expenses				4		×
q Reimbursement paid by related organization(s) for expenses				19		×
r Other transfer of cash or property to related organization(s)				1.	_	×
s Other transfer of cash or property from related organization(s)			•	18		×
	tho must complete the	is line, including covered	relationships and transaction thresholds.			
ŀ	14	17)	9			
(a) Name of other organization	(b) Transaction type (a·s)	(c) Amount involved	(a) Method of determining amount involved	nvolved		
(1)						
(2)				,		
Ę.						
(4)						
(9)						
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Schedule R (Form 990) 2012 SHASTA REGIONAL COMMUNITY FOUNDATION

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

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

(h) (i) (ii) (k)

Disproporbonate amount in box 20 managing ownership
allocations? of Schedule K-1 partner? ownership
Yes No (Form 1065) Yes No end-of-year Share of assets Share of Income total (d)

Predominant income pathersec (related, unrelated, excluded from tax under section 512-514) (ves No Legal domicile (state or foreign country) છ Primary activity Name, address, and EIN of entity

Schedule R (Form 990) 2012

Schedule R	(Form 990) 2012	SHASTA	REGIONAL	COMMUNITY	FOUNDATION	68-0242276 Page 5
Part VII	(Form 990) 2012 Supplemental Infor	mation	1120201112	00121011212		
	Complete this port to prov	udo odda		to avaction	a an Cahadula D (saa instr	untings)
	Complete this part to prov	vide additional	information for res	sponses to question	s on Schedule R (see instr	uctions).
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Schedule R (Form 990) 2012

Form 990 Schedule I Part II and Part III June 30, 2013

		Part II Line (h)		
Grant Date	<u>Grantee</u>	Program Name		Granted
12/18/2012	Redding East Rotary Foundation	Fantasy Fountain project	\$	60,620
9/5/2012	Shingletown Medical Center	roof repair & upgrade	\$	50,000
5/8/2013	City of Anderson Community Services	trail improvements	\$	50,000
5/8/2013	Yreka Community Resource Center	restoration of windows and floors	\$	48,000
	Foothill High School	Ag lab - perimeter fencing & Install of electrical	\$	40,025
	Redding East Rotary Foundation	Fantasy Fountain project	\$	40,000
	Lassen Park Foundation	trail interpretive signs	\$	33,302
	Scott Valley Theatre Company	roof replacement	\$	33,094
	Mercy Foundation North	breast ultrasound unit	\$	30,000
	Modoc County Office of Education	disc golf course	\$	29,802
	Calif. State Grange Foundation	N. Fork grange exterior wall renovation & painting	\$	27,300
	Red Bluff Joint Union High School District	purchase 1 van	\$	27,000
	Golden Age Center, Inc.	heat pump system	\$	25,000
	National Park Service Tulelake Unit	restore barracks	\$	25,000
	Intermountain Healthcare Foundation	remodel 1 labor & delivery room	\$	21,500
			\$	
	The 1010 Project	general support and matching incentive		20,000
	Global Hope	support efforts in Kenya	\$	20,000
l————	Metteer Elementary School	kindergarten playground renovation	\$	19,800
	Mt. Shasta Museum Association	event room renovation	\$	18,373
	30th Dist. Ag Assoc./Tehama District Fair	renovate and repair stall area	\$	18,085
<u> </u>	Dunsmuir Recreation & Parks District	upgrade kitchen hood	\$	17,400
	Shasta Roller Hockey League	youth hockey gear	\$	15,000
	Great Northern Corporation	free standing walk-in fridge	\$	14,000
	Siskiyou Family YMCA	general support	\$	13,350
	Alturas Garden Club	painting of Whistle Stop Depot	\$	13,250
9/24/2012	Restoration Enterprises, Inc.	housing assistance program	\$	12,338
10/10/2012	Trinity Lutheran Early Learning Center	general support	\$	12,250
	Cedarville Cemetery District	irrigation system	\$	11,800
3/1/2013	Shasta Regional Community Foundation	interfund gift	\$	11,642
	Shasta County Office of Education	Whiskeytown Environmental School special project fund	\$	10,753
5/8/2013	Millville Fire Protection District	auto extrication equip	\$	10,000
6/12/2013	Save the Children Federation	general support	\$	10,000
5/20/2013	First Baptist Church	general support	\$	10,000
	Mt. Shasta Union School District	Governance, Admin, Leadership Training & Development	\$	10,000
l	Mercy Foundation North	purchase clothing for homeless patients upon disch	\$	10,000
	Youth Violence Prevention Council of Shasta County	replace phone and computer equipment	\$	10,000
	Shasta Treatment Center	special recognition award	\$	10,000
	Anderson Fire Protection District	thermal imaging camera	\$	10,000
	Siskiyou Family YMCA	lighting upgrade in the gym	\$	9,500
	Shasta County Office of Education	Schreder Planetarium special project fund	\$	9,492
	Happy Valley Fire Protection District	thermal imaging camera	\$	9,364
	Shasta Land Trust	truck, i-pad and computer monitor	\$	9,200
	Tehama County Arts Council	green room studio equip	\$	9,075
	Hat Creek Volunteer Fire Department	extractor washing machine	\$	8,500
		furniture & therapeutic equip. for counseling cent	\$	8,145
	Northern Valley Catholic Social Service, Inc.	US Air Force memorial	\$	8,000
	Northern California Veterans Support Group		\$	
	California Department of Veterans Affairs	annual payment	\$	7,500
	Weed Revitalization Coalition	computer lab (excluding kindle fires and office su		7,500
	Halcumb Cemetery District	mower	\$	7,500
	Burney Basin Little League, Inc.	topsoil and interior of concession stand	\$	7,500
	Intermountain Healthcare Foundation	surgery/patient room renovation	\$	7,262
	Youth Violence Prevention Council of Shasta C	PlusONE program - food, fees and gift cards	\$	7,044
	Mt. Shasta Bioregional Ecology Center	Panther Meadows stewards	\$	7,000
	Mt. Shasta Bioregional Ecology Center	Panther Meadows	\$	7,000
9/24/2012	Northern Valley Catholic Social Service, Inc.	powerful parenting	\$	6,721
4/3/2013	Burney Fire Protection District	station alerting system	\$	6,697
5/8/2013	Restoration Enterprises, Inc.	dump bed trailer	\$	6,642

Form 990 Schedule I Part II and Part III June 30, 2013

	Part II Line (h)		
Grant Date Grantee	<u>Program Name</u>		ranted
9/5/2012 Tehama County Education Foundation	projector, exhibit panels, lighting and accessorie	\$	6,200
12/6/2012 Friends of Whiskeytown, Inc.	kayak shed upgrade - phase 1	\$	6,000
5/20/2013 Mt. Shasta Union School District	Sisson Elementary playground equip & fencing	\$	6,000
9/24/2012 Good News Rescue Mission	academic and job readiness services	\$	5,971
12/6/2012 Local Indians for Education, Inc.	local summer camp P'elen Boos for Native-American	\$	5,900
5/8/2013 Cottonwood Fire Protection District	dispatch equip	\$	5,779
5/8/2013 City of Anderson Community Services	Anderson River Park improvements	\$	5,450
5/8/2013 Shasta Fire Department	fire equip	\$	5,131
5/8/2013 United Way of Northern Calif	computers and tablets	\$	5,000
5/8/2013 Empire Hotel Alcoholic Rehabilitation Center,	equipment, supplies and furniture	\$	5,000
6/12/2013 Mountain Area Pregnancy Center	general support	\$	5,000
6/12/2013 The Berean Way	general support	\$	5,000
6/12/2013 Sexual Assault & Domestic Violence Center, In	general support	\$	5,000
6/12/2013 Catholic Relief Services, Inc.	general support	\$	5,000
5/20/2013 The Gaden Shartse Cultural Foundation	Monk visit	\$	5,000
9/19/2012 Burnt Ranch School District	purchase emergency alarm system	\$	5,000
9/19/2012 Foothill High School Band Boosters	purchase new marching band uniforms	\$	5,000
12/6/2012 Turtle Bay Exploration Park	support exhibition rental fee for Math Midway	\$	5,000
4/3/2013 Tri County Community Network	AV equip for VFW	\$	4,840
9/5/2012 Friends of the Old Lewiston Schoolhouse Library	storage shed	\$	4,700
5/8/2013 Shasta County Young Men's Christian Association	2 weeks of swim lessons for 1st graders	\$	4,500
7/1/2012 Shasta Energy Group dba McCloud Local First	bike racks & signs	\$	4,500
5/8/2013 Northern CA Educational Television Association	books to Head Start families	\$	4,500
12/6/2012 Shasta Treatment Center	computers & software to maximize client services	\$	4,350
5/8/2013 Lewiston Community Services District	disc golf	\$	4,298
4/3/2013 Shasta Senior Nutrition Program	dishwasher	\$	4,000
1/10/2013 Enterprise Lions Club	flag repairs and replacement	\$	4,000
5/8/2013 Northern Valley Catholic Social Service, Inc.	food distribution for Lewiston and Douglas City	\$	4,000
1/10/2013 Foundation for Promoting Arts Education	general support	\$	4,000
9/26/2012 Community Services District/Fire Department	medical equipment	\$	3,828
12/6/2012 Child Abuse Prevention Coordinating Council -	art supplies for Anderson Teen Center	\$	3,600
12/6/2012 Anderson Union High School District	surfboards and wetsuits to be kept by the school	\$	3,500
9/5/2012 McCloud Elementary School	upgrade sound system	\$	3,103
7/10/2012 Siskiyou Arts Council	\$2k writing wrkshp, \$1k A Bus	\$	3,000
9/5/2012 Trinity County Friends of the Library	book return at Weaverville location	\$	3,000
5/8/2013 United Way of Northern Calif	computers (excluding tablets)	\$	3,000
12/6/2012 NorCal Services for Deaf and Hard of Hearing	instructional materials	\$	3,000
5/8/2013 Shasta Roller Hockey League	scholarships	\$	2,685
5/8/2013 West Redding Little League	catchers gear, concession slushy machine and recyc	\$	2,602
12/6/2012 West Valley High School	baseball field scoreboard	\$	2,500
5/8/2013 Redding Piano Angels	piano purchase	\$	2,500
12/6/2012 Anderson Police Department Volunteer Patrol	purchase uniforms	\$	2,500
12/6/2012 Golden Age Center, Inc.	replace older computer equip - in class area and field	\$	2,500
5/8/2013 The Watershed Research & Training Center	camp supplies and expenses	\$	2,400
12/6/2012 City of Redding	Lake Redding Gazebo florescent lights	\$	2,400
5/8/2013 Intermountain Healthcare Foundation	30bin medication carts for long term residents	\$	2,353
12/6/2012 Shasta Lake Gateway Library	computers	\$	2,329
9/7/2012 Indian Cultural Organization	support McCloud River Restoration project	\$	2,200
12/6/2012 Legal Services of Northern California	computers	\$	2,100
5/20/2013 Siskiyou Arts Council	Dream Workshops	\$	2,000
9/26/2012 Foundation for Students of Shasta Union High	flute and cymbal for Shasta Union High Sch. Dist	\$	2,000
12/6/2012 Central Valley High School	flute and saxophone	\$	2,000
5/20/2013 Mt. Shasta Recreation & Parks District	Senior Nutrition Program & General Support	\$	2,000
12/6/2012 Anderson Middle School	supply music equipment for new incoming 5th grade	\$	2,000
12/6/2012 City of Anderson Community Services	security camera at restroom	\$	1,949
5/8/2013 Lewiston Community Services District	park benches and trashcans for disc golf course	\$	1,900
9/19/2012 Haven Humane Society, Inc	spay and neuter	\$	1,808
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Form 990 Schedule I Part II and Part III June 30, 2013

		Part II Line (h)		
Grant Date	<u>Grantee</u>	Program Name		Granted
12/6/2012	Enterprise High School	2 laptops	\$	1,600
12/6/2012	Manzanita Elementary School	purchase 2 iPads	\$	1,600
12/6/2012	Help Inc.	1 new computer	\$	1,500
5/8/2013	Coffee Creek Volunteer Fire District	3 pagers	\$	1,500
12/6/2012	Empire Hotel Alcoholic Rehabilitation Center,	establish the Red Road to Wellbriety Program for N	\$	1,500
12/6/2012	Human Response Network	booster seats	\$	1,250
12/6/2012	Burnt Ranch School District	purchase one Apple iMacs	\$	1,250
12/6/2012	Castle Rock Union Elementary	ıpad, laptop and printer	\$	1,200
8/29/2012	Mountain Valley Unified School District	Link Center's Rainbows program	\$	1,200
5/8/2013	Special Olympics Northern California, Inc.	summer and fall sports programs	\$	1,200
6/28/2013	Center for Lawful Access and Abuse Deterrence	general support - In Memory of Thomas J. Dahl	\$	1,190
9/19/2012	Redding Swim Club, Inc.	general support	\$	1,176
3/13/2013	Shasta Regional Community Foundation	interfund gift	\$	1,162
12/6/2012	West Valley High School	mixing bowls/knife set Culinary Arts Program	\$	1,100
9/19/2012	The River Exchange	general support	\$	1,043
12/6/2012	Friends of the Old Lewiston Schoolhouse Libra	100 books	\$	1,000
3/13/2013	Tulelake Basin Joint Unified School District	6th grade Outdoor School	\$	1,000
4/12/2013	Shasta Library Foundation	adult literacy program	\$	1,000
3/13/2013	Tulelake Basın Joint Unified School District	English Literature class trip to Ashland	\$	1,000
5/8/2013	Hooves for Harmony	equipment and therapy games	\$	1,000
5/20/2013	Mt. Shasta Fire Protection District	general support	\$	1,000
12/6/2012	Independent Living Services of Northern Calif	materials to assist individuals with disabilities	\$	1,000
3/13/2013	Tulelake Basın Joint Unified School District	multimedia/video production equipment	\$	1,000
7/10/2012	Great Northern Corporation	record checking classes	\$	1,000
12/6/2012	Shingletown Medical Center	purchase signage	\$	1,000
	Shasta Valley Serves	cleaning for Collier Interpretive and Information	\$	750
9/19/2012	Good News Rescue Mission	general operating	\$	603
3/13/2013	Tulelake Basın Joint Unified School District	5th grade arts integration	\$	550
3/13/2013	Tulelake Basın Joint Unified School District	special education trip to Waterworks Park	\$	534
5/20/2013	Mt. Shasta Recreation & Parks District	Community Thanksgiving dinner	\$	1,000
12/6/2012	Mountain Gate Community Services District	water foundation replacement, concrete addition	\$	500
12/6/2012	Shasta County Community Concert Association	provide busing	\$	500
3/13/2013	Tulelake Basın Joint Unified School District	school spirit murals	\$	500
6/28/2013	Cottonwood Community Library	update computer system	\$	500
	Gale Kuns Ministries Inc.	welcome gifts for incoming foster children	\$	500
3/13/2013	Tulelake Basin Joint Unified School District	read-along listening center	\$	358
9/19/2012	Shriners Hospital for Children	general operating	\$	301
9/19/2012	Shasta Women's Refuge, Inc.	general operation	\$	301
	United Methodist Church of Yreka	general support	\$	299
	Shasta Women's Refuge, Inc.	\$200 for Camp Hope & \$50 for Aaron Rader	\$	250
	Missing in America - Veterans Recovery Progra	Camp for Life	\$	200
	Road Runners Club of America	Parker Plaza	\$	100
8/30/2012	American Friends Service Committee	general support	\$	100
			\$	1,250,520
				Part III c
				sh Amount
Various	Opportunity Scholarship Fund	8 Scholarships	\$	58,508
Various	Women in Medicine Scholarship	8 Scholarships	\$	24,000
Various	Top of the State Scholarship Fund	19 Scholarships	\$	16,800
Various	Bill Cosby/Redding Sunrise Rotary Scholarship	2 Scholarships	\$	10,000
Various	Kohn Family Scholarship Fund	4 Scholarships	\$	9,000
Various	Lawson Family Scholarship Fund	2 Scholarships	\$	5,000
Various	North Valley Bank Endowed Scholarship Fund	9 Scholarships	\$	4,000
Various	Andy Allison Scholarship Fund	2 Scholarships	\$	1,500
Various	Matt Solus Memorial Scholarship Fund	2 Scholarships	\$	1,500
Various	Mt. Shasta Athletic Boosters Club	5 Scholarships	\$	1,250
+ ai 10u3	Inter Shasta Adhiede DOOStels Clab	Jo Scholarships	<u> </u>	1,230

Form 990 Schedule I Part II and Part III

1	20	2012
June	3U,	2013

		Part II Line (h)	
Grant Date	<u>Grantee</u>	Program Name	 Granted
Various	William C. Garcia Scholarship Fund	1 Scholarship	\$ 1,000
Various	California Retired Teachers Assoc, Div. 16	1 Scholarship	\$ 750
Various	Donna Borlaug Citizenship Award Fund	1 Scholarship	\$ 500
Various	FWF'62 Scholarship Fund	1 Scholarship	\$ 500
Various	Ken Putnam Choral Music Endowed Scholarship	1 Scholarship	\$ 500
Various	Shasta Natural Science Scholarship Fund	1 Scholarship	\$ 500
			\$ 135,308
 	TOTAL		\$ 1,385,828