



LTCC Foundation Finance Committee Meeting AGENDA

Regular Meeting

Monday, April 21, 2014
Lake Tahoe Community College
Room E103
4:30 p.m.

Call to Order

I. Discussion and Reports

- A. Quarterly Financial Report (DeFranco)
- B. Overview of Foundation Funds (DeFranco/McVean)
- C. LTCCD Bond Survey Results and Campaign Support (Murillo)
- D. Fill the Frame Campaign Report (McVean)
- E. March 29, 2014 Art Auction Update (McVean)
- F. Book Lending Program Update (McVean/Cliff)
- G. ESL Student Scholarship (Cliff)

II. Action Items

- A. Approval of March 17, 2014 Finance Committee Meeting Minutes
- B. Approval of LTCC Foundation 2012 Tax Return

III. Next Regular Meeting – May 19, 2014 at 4:30 p.m., Room A106

IV. Adjournment

LTCC FOUNDATION
FY 13/14 Budget vs Actual
At March 31, 2014

	FY 13/14 Revised Budget July 1, 2013 - June 30, 2014		3rd Quarter Actual Jan. 1, 2014 - March 31, 2014		Year-to-Date Actual July 1, 2013 - March 31, 2014		Year-to-Date Variance FY 13/14 Budget vs Actual	
	Unrestricted	Restricted	Unrestricted	Restricted	Unrestricted	Restricted	Unrestricted	Restricted
Beginning Balance (@ 7/1/13)	331,287	1,034,934			331,287	1,034,934		
Revenues								
Annual Fund	40,000		1,539		23,781		(16,219)	0
Taste of Gold	40,000		2,800		39,080		(920)	0
President's Circle	10,000						(10,000)	0
Art Auction	5,000	5,000					(5,000)	(5,000)
Other Revenue Sources		40,000					0	(40,000)
Program Support		15,000		12,896		63,525	0	48,525
Scholarships & Awards		60,000		7,476		34,792	0	(25,208)
Investment Income	14,000		1,711	2,610	8,865	13,378	(5,135)	13,378
Total Income	109,000	120,000	6,050	22,981	71,726	111,695	(37,274)	(8,305)
Expenses								
* Director/Special Assistant Salary	40,050		4,610		22,179		(17,872)	0
* Director/Special Assistant Benefits	15,460		2,331		9,713		(5,747)	0
CalWORKS Student	3,100				1,371		(1,729)	0
Taste of Gold	6,000				7,997		1,997	0
Art Auction Expenses			407		407			0
Advertising	3,000						(3,000)	0
Marketing & Promotion	4,400		969		1,240		(3,160)	0
Meeting Supplies	1,500		26		138		(1,362)	0
Office Supplies					458		458	0
Bank Service Charges	390						(390)	0
Printing & Reproduction	1,500				1,285	847	(215)	847
Credit Card/PayPal Fees	400		156		291		(109)	0
Investment Expense	1,000		241	362	704	1,057	(296)	1,057
Program Funding	15,000	20,000	199	8,063	7,211	25,044	(7,789)	5,044
Foundation for the Future	10,000	15,000	11,000		11,688		1,688	(15,000)
Scholarships & Awards		60,000		9,158	236	51,458	236	(8,542)
Ascending Sculpture Project		25,000				15,221	0	(9,779)
Miscellaneous					20		20	0
5% contingency	7,200						(7,200)	0
Total Expenses	109,000	120,000	19,938	17,583	64,937	93,629	(44,470)	(26,371)
Net Income/(Loss) from Operations	0	0	(13,888)	5,398	6,789	18,066	6,789	18,066
Unrealized Gain/(Loss) on Investments					23,187	39,965	23,187	39,965
Ending Balance (@ 3/31/14)	331,287	1,034,934	(13,888)	5,398	361,263	1,092,965	29,976	58,031

* March 2014 payroll not included

LTCC FOUNDATION

Unrestricted

	FY 12/13 Budget July 1, 2012 - June 30, 2013	FY 12/13 Actual July 1, 2012 - June 30, 2013	FY 13/14 Revised Budget July 1, 2013 - June 30, 2014	FY 13/14 Actual July 1, 2013 - March 31, 2014
Revenues	\$ 112,700	\$ 131,909	\$ 109,000	\$ 71,726
Expenses	\$ 112,700	\$ 81,464	\$ 109,000	\$ 64,937
Net Income/(Loss)	<u>\$ -</u>	<u>\$ 50,445</u>	<u>\$ -</u>	<u>\$ 6,789</u>

LTCC Foundation
FY 2013 - 2014
Fiscal Year-to-Date at March 31, 2014

Revenue

Unrestricted	\$ 71,726	
Restricted	<u>111,695</u>	
Total Revenue		\$ 183,421

Operating Expenses

Unrestricted	\$ 45,801	
Restricted	<u>1,904</u>	
Total Operating Expenses		\$ 47,706

Scholarships & Program Support

Unrestricted	\$ 19,135	
Restricted	<u>91,724</u>	
Total Scholarships & Program Support		\$ 110,860

Net Income/(Loss)		<u>\$ 24,855</u>
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**LTCC Foundation
ANNUAL FUND**

FY11-12/FY 12-13/FY 13-14 Revenue Comparison

Qtr #	Quarter Period	FY 11-12	FY 12-13	FY 13-14	FY 12-13 to FY 13-14 \$ Change	FY 12-13 to FY 13-14 % Change
Q1	July 1 - September 30	\$ 2,342	\$ 6,474	\$ 6,759	\$ 285	4%
Q2	October 1 - December 31	15,549	12,797	8,589	\$ (4,208)	-33%
Q3	January 1 - March 31	4,673	6,410	1,539	\$ (4,871)	-76%
Q4	April 1 - June 30	6,283	58,443			
FY TOTAL		\$ 28,847	\$ 84,125	\$ 16,887	\$ (8,795)	-34%

LTCC Foundation
 Balance Sheet
 At March 31, 2014

	Unrestricted	Temporarily Restricted	Permanently Restricted	Total
Assets				
Current Assets				
Checking/Savings	53,770	126,018		179,788
Money Market	10,085	30,034		40,120
Accounts Receivable	491	216		707
Total Current Assets	64,346	156,268	0	220,615
Other Assets				
General Investment 01	111,362	75,416		186,778
AAUW Investment (see Money Market, restricted)				0
Haldan Art Gallery Investment		118,481		118,481
Matt Luerken Memorial Investment		8,375		8,375
Foundation Endowment	128,950	115,099		244,049
General Investment 02	56,762			56,762
Endowment Challenge		195,025	345,000	540,025
K Baretta Mem Endowment		122	10,000	10,122
S Fatehyar Mem Endowment		204	11,300	11,504
W Strong Mem Endowment		412	45,000	45,412
Osher Endowment (Held with Fiscal Agent)			13,334	13,334
Total Other Assets	297,074	513,135	424,634	1,234,842
Total Assets	361,420	669,403	424,634	1,455,457
Liabilities				
Accounts Payable	156	1,072		1,229
Total Current Liabilities	156	1,072	0	1,229
Net Assets				
Beginning Balance	331,287	610,300	424,634	1,366,221
Net Income/(Loss) from Operations & Investments	29,976	58,031		88,007
Ending Balance	361,263	668,331	424,634	1,454,228
Total Liabilities & Net Assets	361,420	669,403	424,634	1,455,457

**LTCC Foundation
TASTE OF GOLD**

	2012 Income Actual	2013 Income Budget	2013 Income* Actual
Sponsorships	\$ 17,850	\$ 17,500	\$ 26,750
Ticket Sales	11,710	16,875	9,675
Auction	4,610	6,500	2,505
Donations	<u>125</u>	<u> </u>	<u>150</u>
Total	<u>\$ 34,295</u>	<u>\$ 40,875</u>	<u>\$ 39,080</u>

*At March 31, 2014

Sponsorships pending:	Wells Fargo Bank	<u>1,250</u>
	TOTAL pending	<u>\$ 1,250</u>

LAKE TAHOE COMMUNITY COLLEGE FOUNDATION FINANCE COMMITTEE

 DISCUSSION & REPORTS ACTION ITEMS

DATE: March 19, 2014

TO: Foundation Board

FROM: Superintendent/President

SUBJECT: LTCCD Bond Survey Results and Campaign Support

In May 2013, the Lake Tahoe Community College (LTCC) leadership proposed a plan of action for ensuring the fiscal stability of LTCC. This proposal included containing costs, enrollment management, new programs and services, and a potential general obligation bond (GOB). The GOB will assist in covering the costs of deferred maintenance; modernizing classrooms, laboratories and technology; leveraging state capital outlay funds for consolidating and remodeling programs locations for improved learning environments, and cost effectiveness.

The Board of Trustees directed staff to move forward and pursue the components of the plan "Investing in Our Future." A major component of this plan is consideration of a GOB to help provide local investment to support the efforts of the LTCC faculty, staff, management and Board to revitalize the college. The College issued a Request for Qualifications (RFQ) for firms to conduct a bond measure survey to assess the community's support of local property tax. Three firms responded to the RFQ, and Fairbank, Maslin, Maullin, Metz & Associates (FM3) were chosen to conduct a survey after reviewing proposals, and conducting reference checks.

Attached is a summary of the bond measure survey, to be presented by Shakari Byerly of FM3.

*Fairbank,
Maslin,
Maullin,
Metz &
Associates*

FM3

*Public Opinion Research
& Strategy*

TO: Interested Parties

FROM: Fairbank, Maslin, Maullin, Metz & Associates

RE: Summary of Voter Survey Results – Lake Tahoe Community College Bond

DATE: April 4, 2014

From March 20-30, 2014 Fairbank, Maslin, Maullin, Metz & Associates (FM3) completed a telephone survey of 350 South Lake Tahoe voters to assess public attitudes toward Lake Tahoe Community College (LTCC) and a potential bond measure to finance College infrastructure improvements and upgrades.¹ **The survey results indicate that the public holds very favorable views of LTCC, and believes a need exists for additional funding.** In this context, there is solid consensus that LTCC should make additional investments in facility and technology upgrades to ensure that local students and residents within the community have access to high quality educational opportunities through the College. The survey results show that more than three in five voters (64%) would support a potential bond measure to fund infrastructure improvements and campus and classroom technology upgrades—a support level well above the 55 percent vote threshold required for passage under Proposition 39.

The balance of this memorandum outlines these and other key findings from the survey.

Voters hold highly positive perceptions of the College and the Board of Trustees. Views of LTCC are overwhelmingly positive, with 93 percent of voters indicating that they have a “favorable” view of the College. This includes a full 71 percent who say they have a “very favorable” view. Opinions of the Board of Trustees are also positive, with a majority of constituents (55%) expressing a favorable view. Notably, a substantial proportion (39%) indicated that they were not familiar enough with the Board to offer an opinion.

¹ **Methodology:** From March 20-2014, FM3 completed a survey of 350 registered voters residing within the boundaries of the Lake Tahoe Community College District who are likely to cast ballots in the November 2014 general election. The margin of sampling error for the full sample is +/-5.2%. Some results do not total to 100% because of rounding.

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Voters view LTCC as a valued community resource that serves local residents well. There is strong consensus that LTCC plays an important role in providing affordable higher education options and job training for local students and residents pursuing a college degree, entering the workforce directly after high school, or training for new professions. Consistent with this finding, fully 90 percent of voters believe the College does a good job of serving the residents in their local area.

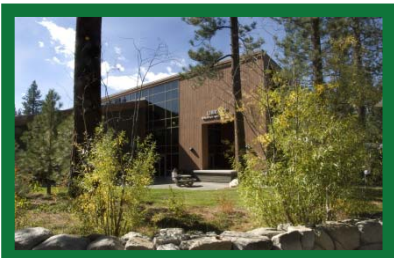
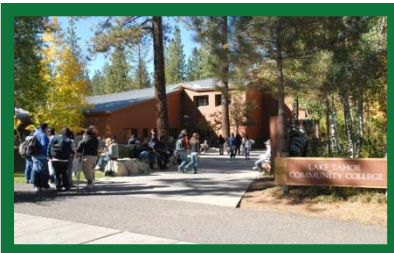
The public places a high priority on making campus infrastructure improvements that will enhance the College’s ability to prepare students for four-year universities and train for high quality jobs and careers. After being presented with a list of potential community college budget priorities, voters overwhelmingly rated priorities linked to college advancement, career technical education and technological upgrades at the top of the list, including:

- Preparing Lake Tahoe Community College students for four-year colleges (78% “extremely”/“very important”)
- Expanding opportunities for students to take university courses at Lake Tahoe Community College (67% “extremely”/“very important”)
- Upgrading campus/classroom technology to meet the standards of 21st Century computing and instruction (63% “extremely”/“very important”)
- Upgrading career/technical job training centers (59% “extremely”/“very important”)

In making infrastructure improvement and upgrades, voters place a very high value on ensuring that these improvements are made in such a way as to retain the natural character of the campus and surrounding environment, including protecting scenic views and open space—62 percent identify this as an “extremely” or “very important” priority.

While constituents support additional investments in improving campus facilities and technology, they realize that local schools lack adequate funding, and strong percentages would support a local bond measure to fund repairs, upgrades and improvements. More than two-thirds of respondents (68%) believe that LTCC is in need of at least some additional funding—this figure includes 30 percent of voters who identify the need for additional local community college funding as “great.” In keeping with this view, a solid majority (64%) would support a LTCC bond measure that would enable the College to make upgrades to facilities that support the College’s commitment to preparing students to obtain a four-year college degree or receive career/workforce training.

Overall, the survey results demonstrate that Lake Tahoe Community College is held in high regard and that the community supports investments that will help the College continue to offer high quality educational opportunities.



Lake Tahoe Community College Bond Measure Survey

Survey Conducted March 20-30, 2014

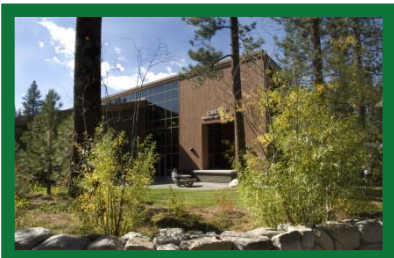
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Fairbank, Maslin, Maullin, Metz & Associates - FM3
Public Opinion Research & Strategy

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Methodology

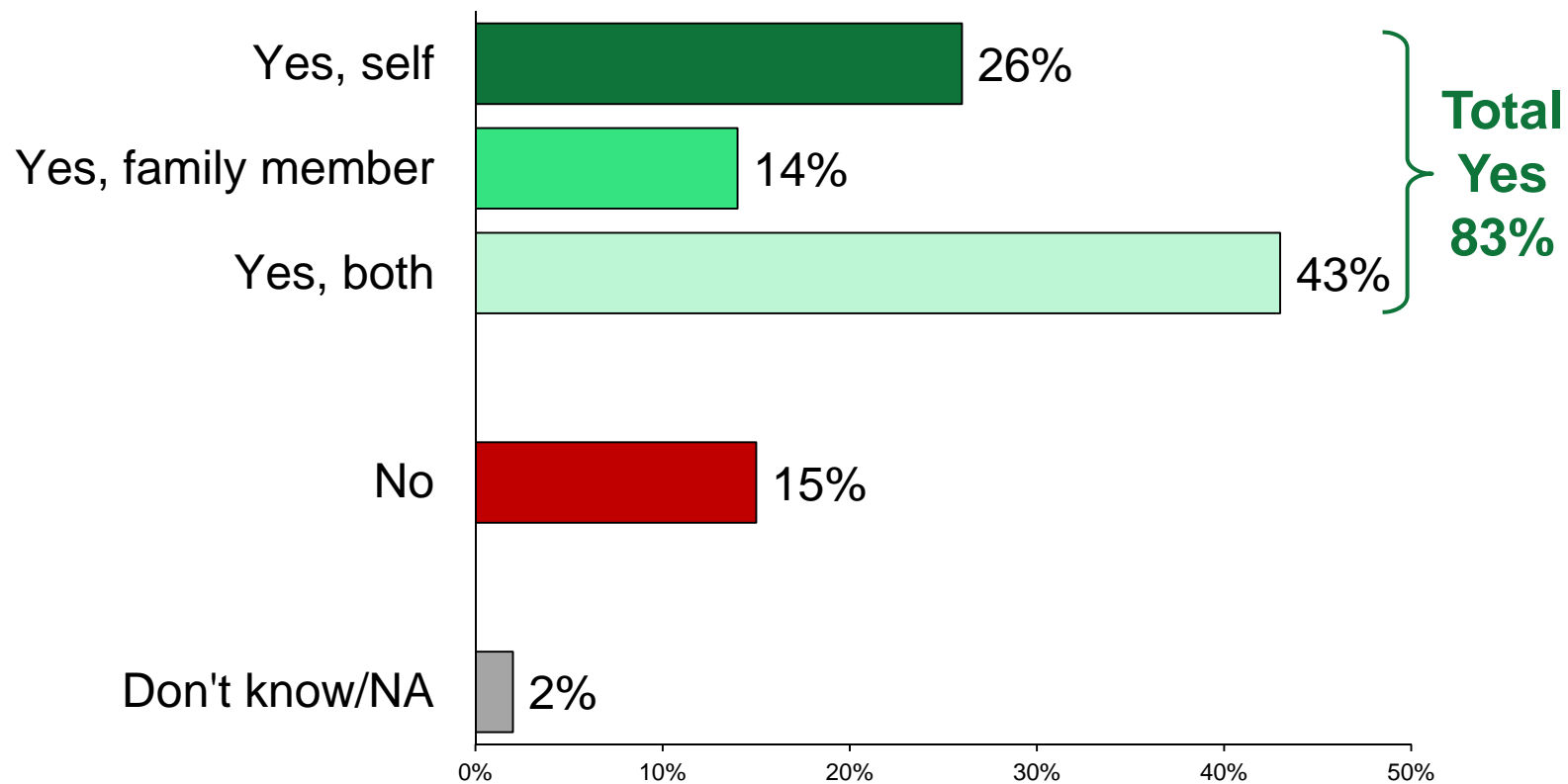
- Telephone survey of 350 randomly-selected Lake Tahoe Community College District voters.
- Interviews were conducted via landline and cell phones, March 20-30, 2014.
- The margin of sampling error is +/-5.2 percent at the 95 percent confidence level; margins of error for population subgroups will be higher.
- Some percentages do not sum to 100% due to rounding.



Issue Context

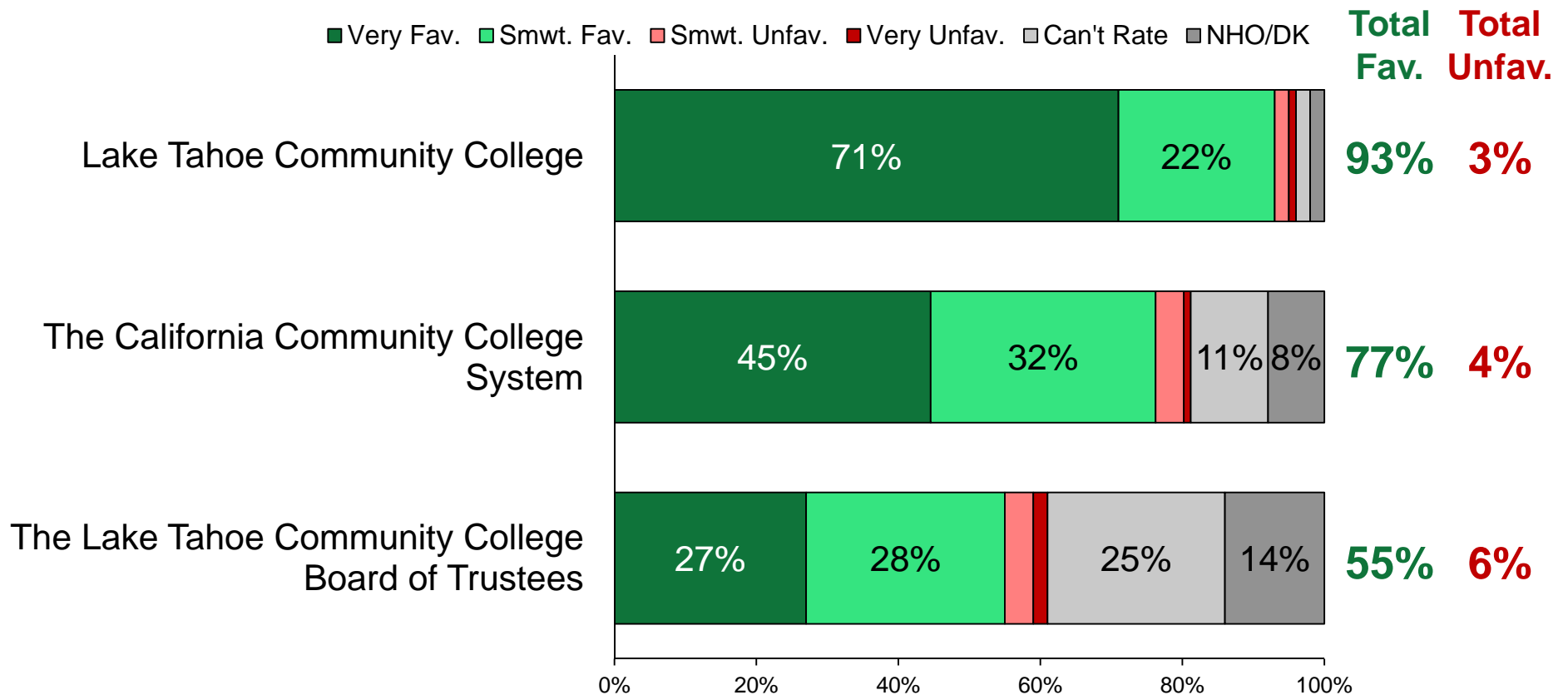
An overwhelming majority of voters have a direct connection to the College.

Have you or someone in your immediate family ever attended or taken courses at Lake Tahoe Community College?



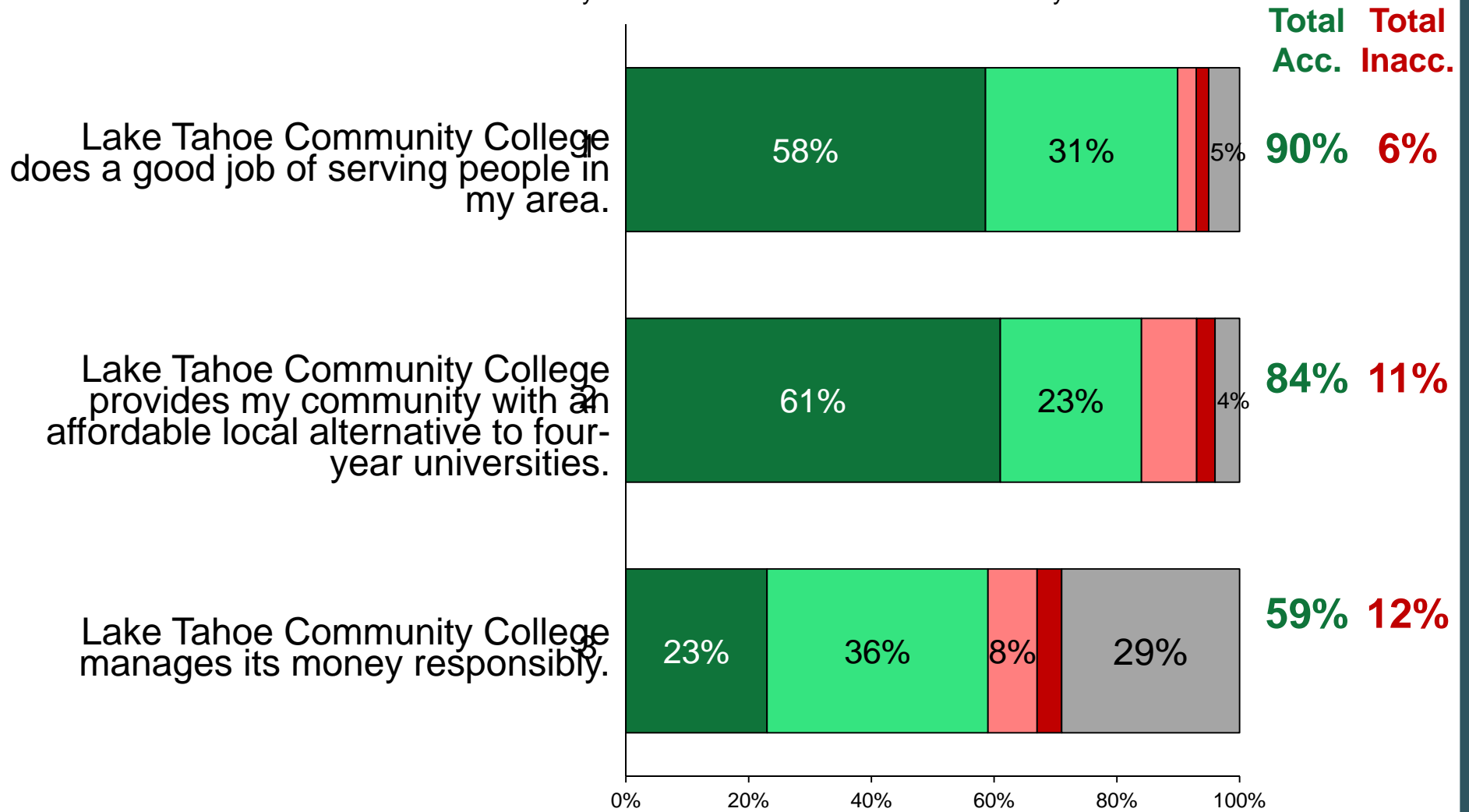
Perceptions of the College are highly favorable.

I'm going to read you the names of some public entities and education institutions. For each organization you have heard of, please tell me whether you have an overall favorable or unfavorable opinion of that institution.



Voters believe the College serves local residents well, and provides an affordable alternative to 4-year universities.

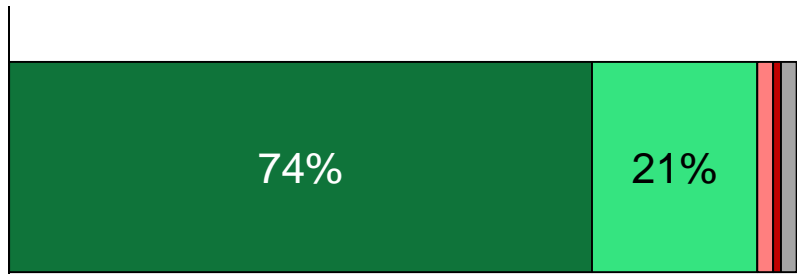
■ Very Acc. ■ Smwt. Acc. ■ Smwt. Inacc. ■ Very Inacc. ■ DK/NA



Voters view community colleges as having an important role to play in workforce development and training.

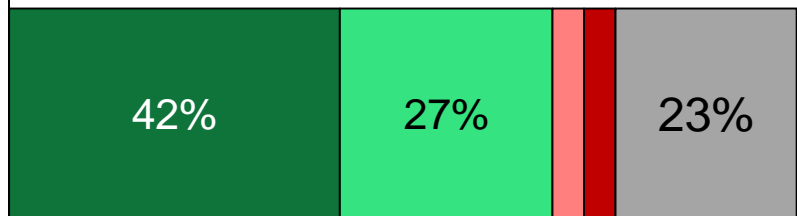
■ Very Acc. ■ Smwt. Acc. ■ Smwt. Inacc. ■ Very Inacc. ■ DK/NA

In the current economic environment, we need community colleges to provide job training and education for people entering the workforce or training for new professions.



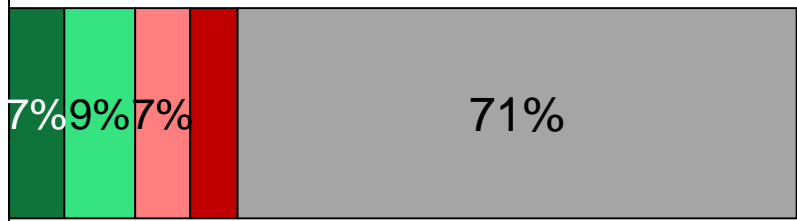
Total Acc. 95%
Total Inacc. 4%

Lake Tahoe Community College has cut classes that used to be offered to the local community.



Total Acc. 69%
Total Inacc. 8%

Lake Tahoe Community College has never passed a bond measure.

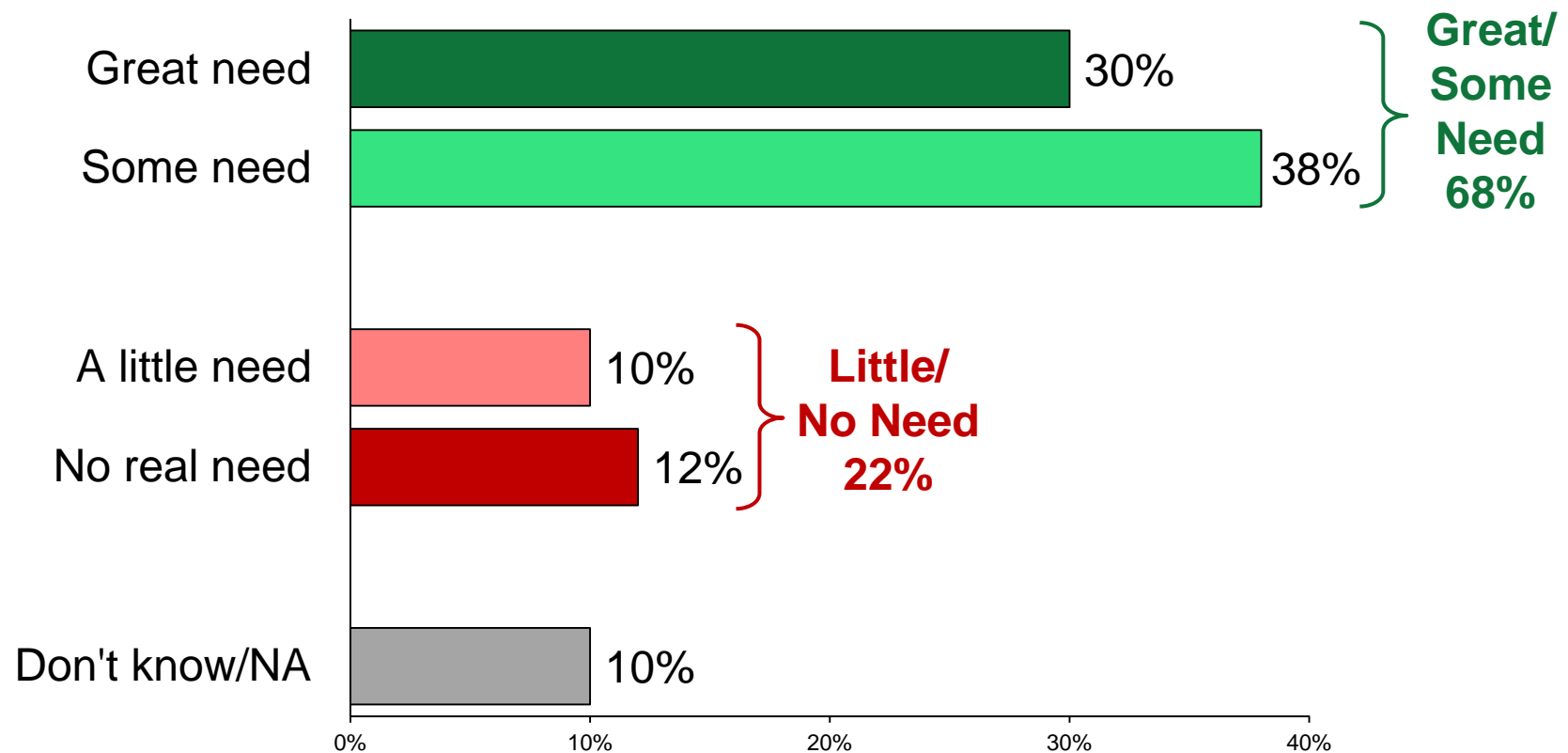


Total Acc. 16%
Total Inacc. 13%

0% 20% 40% 60% 80% 100%

Over two thirds of voters see at least some need for additional funding for the community college.

Generally speaking, would you say that the local community college in your area has a great need for additional funding, some need, a little need, or no real need for additional funding?





Attitudes Toward a Potential LTCC Bond Measure

Ballot Question Tested

LAKE TAHOE COMMUNITY COLLEGE CAMPUS SAFETY, REPAIR AND WORKFORCE TRAINING MEASURE.

To improve safety and prepare students for jobs and four-year colleges by:

Modernizing and expanding firefighter, law enforcement and career/technical job-training centers;

Replacing aging classrooms/science laboratories;

Upgrading technology;

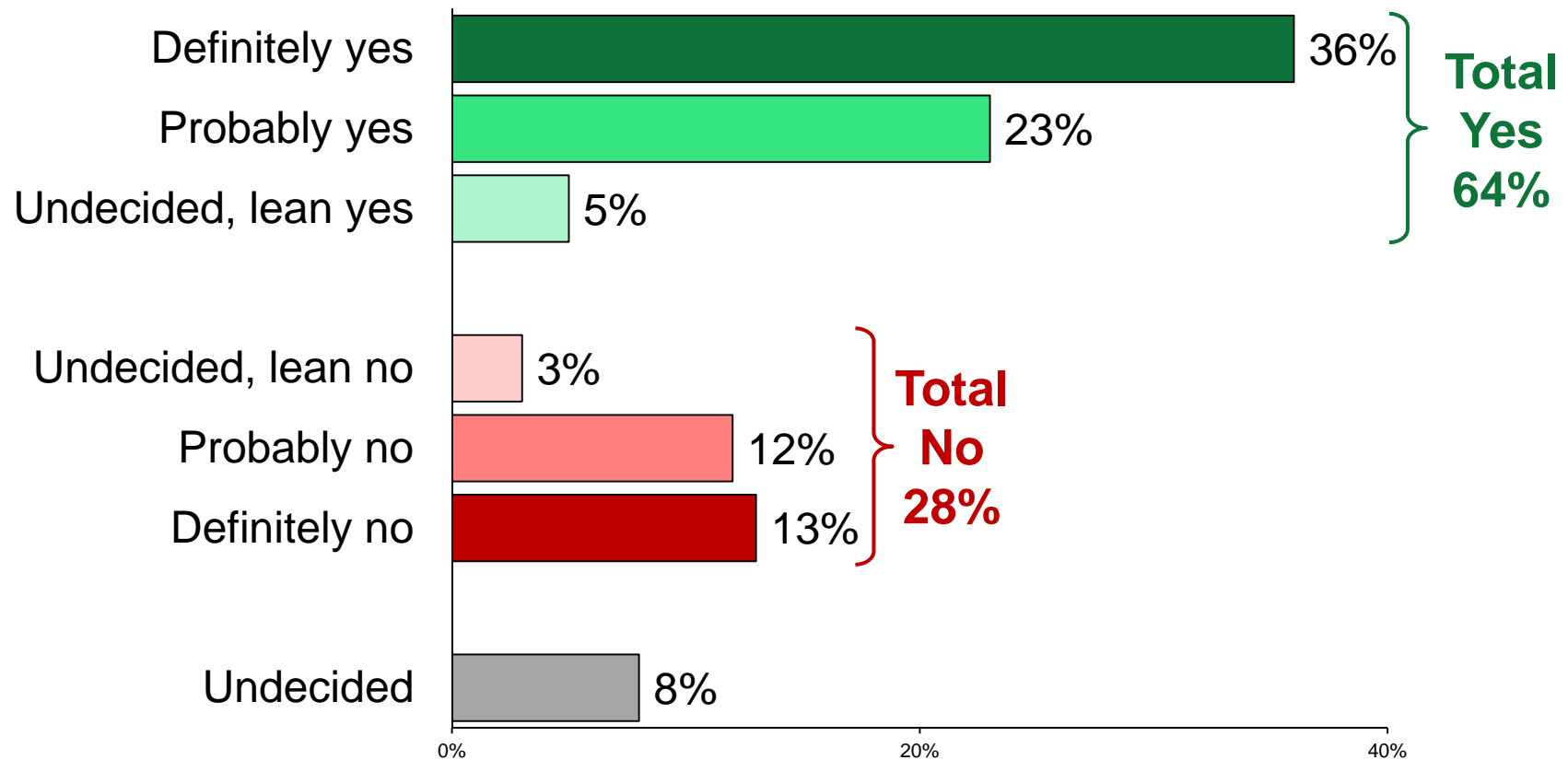
Improving energy efficiency, security systems and access for the disabled; and

Acquiring, constructing and repairing facilities, sites and equipment

Shall Lake Tahoe Community College issue \$55 million in bonds at legal rates, with citizens' oversight, annual audits and no money for administrators' salaries?

A solid majority of voters say they would support a \$55 million LTCC bond measure.

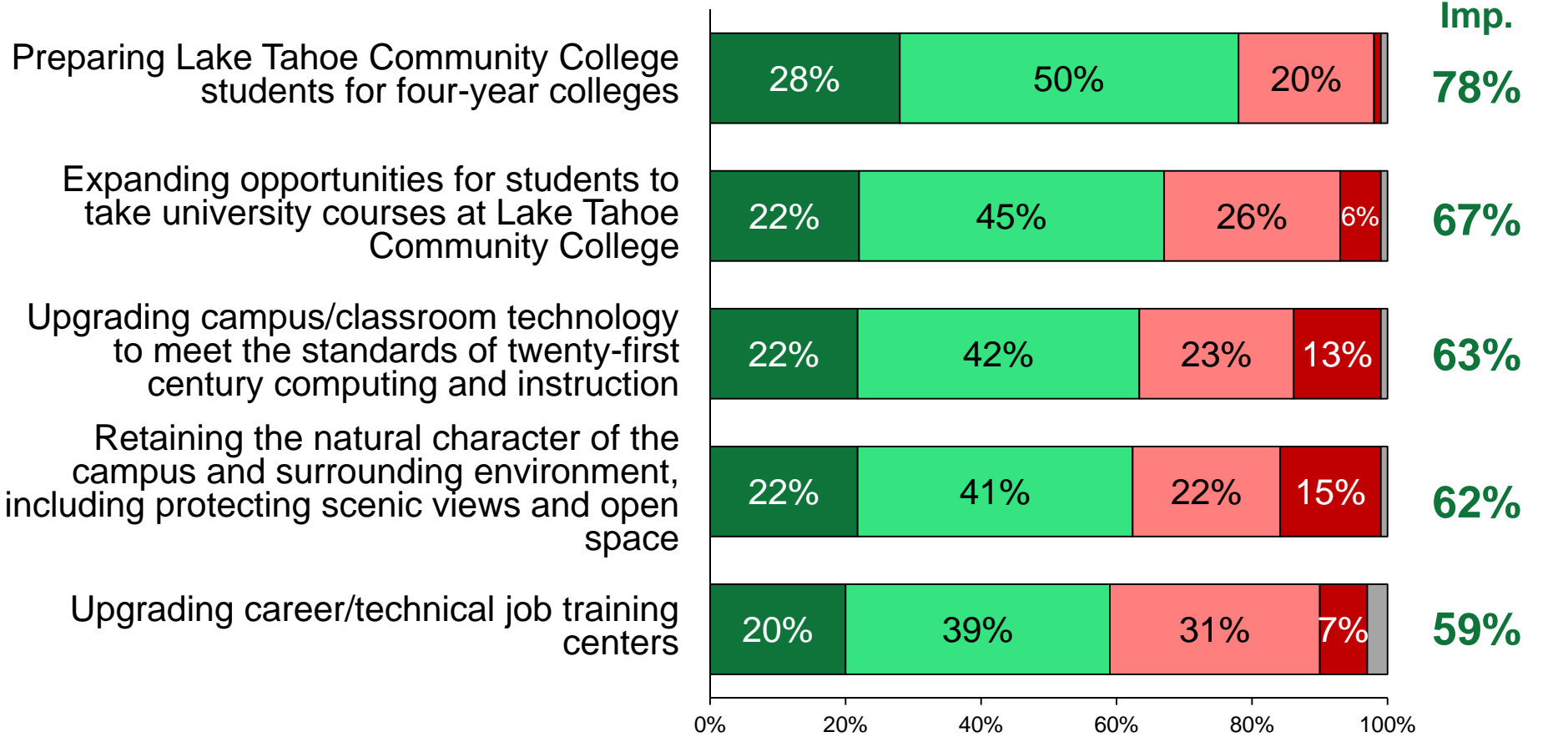
If the vote on this measure were held today, would you vote yes in favor of it or vote no to oppose it?



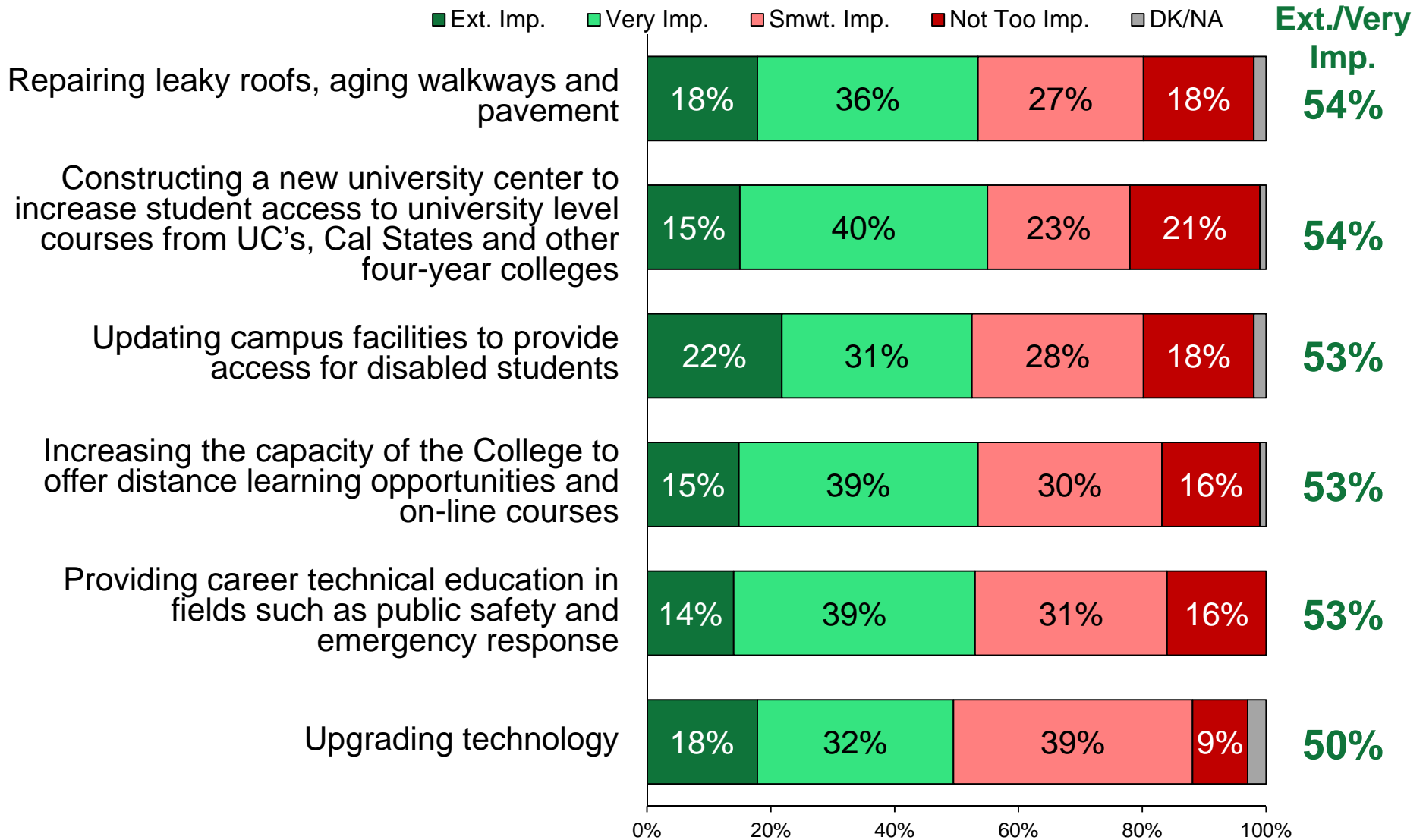
Preparing students for universities stands out as a top-tier priority for bond measure funding.

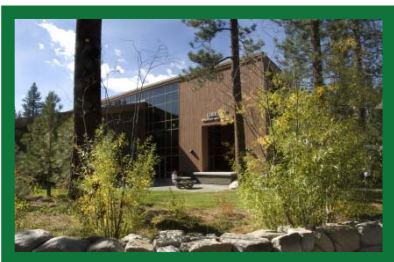
I am going to read you a list of types of projects that could be funded by this measure. Please tell me how important it is to you that each project be undertaken: extremely important, very important, somewhat important, or not too important?

■ Ext. Imp. ■ Very Imp. ■ Smwt. Imp. ■ Not Too Imp. ■ DK/NA **Ext./Very Imp.**



A number of additional project priorities are viewed as highly important.





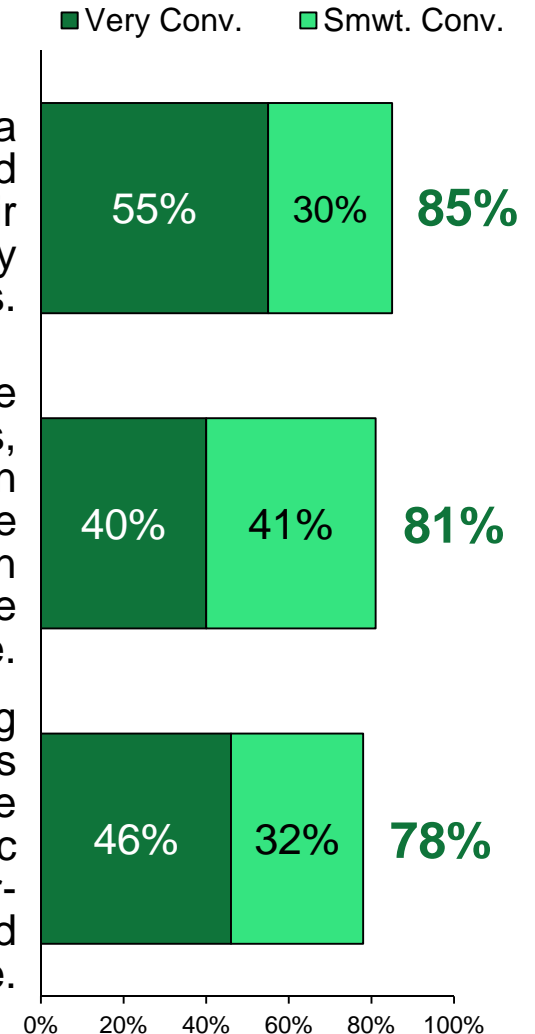
Reactions to Statements For and Against a Potential Measure

Helping to ensure that LTCC can continue to provide high quality, affordable college options underlies voter support for the measure.

(AFFORDABILITY) Over the past several years the costs of attending a public university in California has skyrocketed. As a result, more and students are relying on community colleges for some or all of their education. This measure will help ensure that our local community college can provide high quality, affordable college options.

(LOCAL ASSET) For over 40 years Lake Tahoe Community College has been a valuable local resource, providing training for local workers, adult education and enrichment courses and access to higher education for generations of area residents. Residents also benefit from College arts, culture and recreational facilities. This measure will help maintain high quality educational opportunities and community amenities at the College.

(HIGH SCHOOLS) Lake Tahoe Community College has strong partnerships with local K-12 schools to help ensure that all students have the opportunity to go to College. This measure will expand the College's ability to support college readiness programs in local public schools and offer high school students advanced classes and career-technical education, preparing them for jobs and saving time and money on their way to a four-year degree.

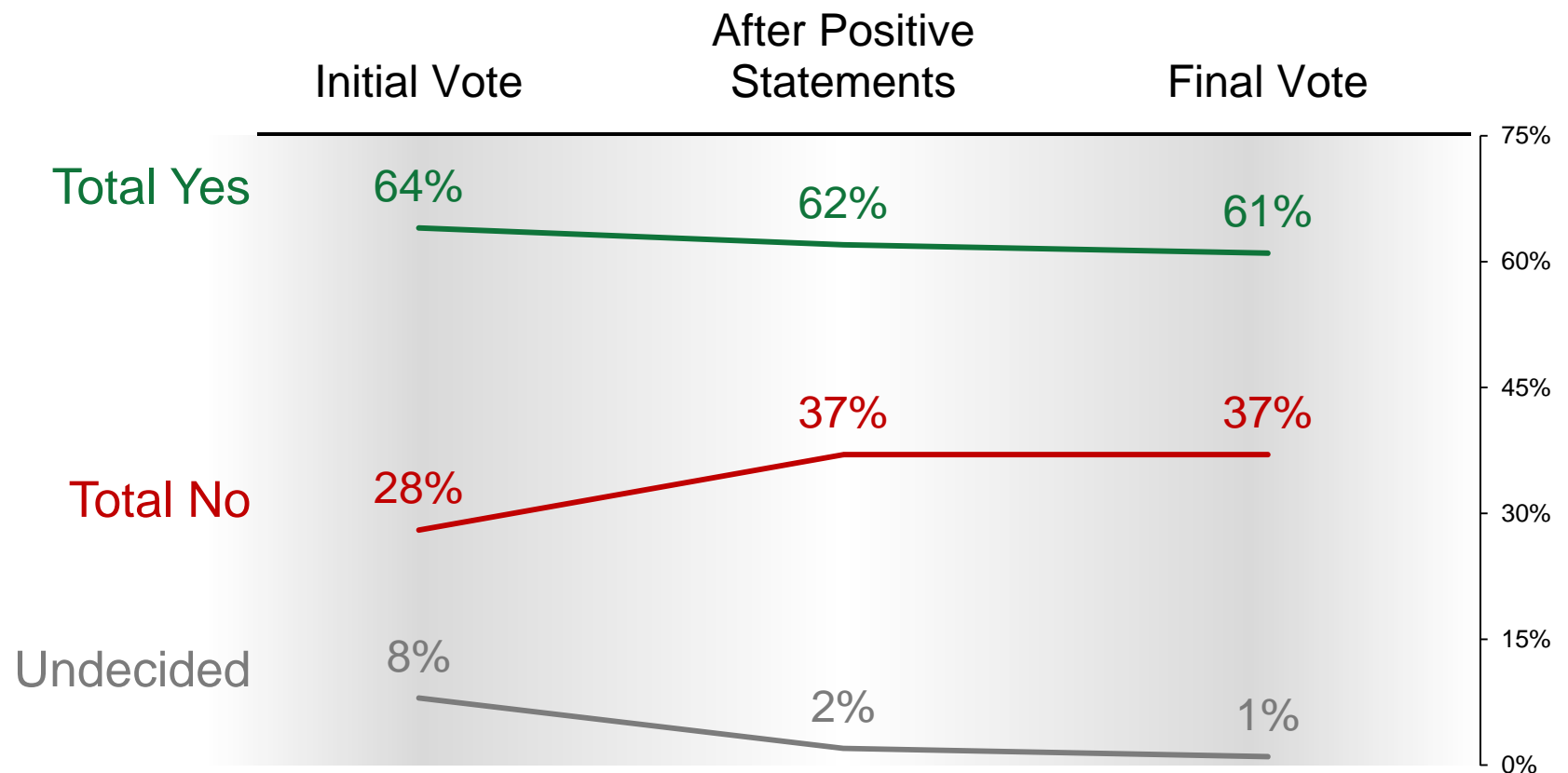


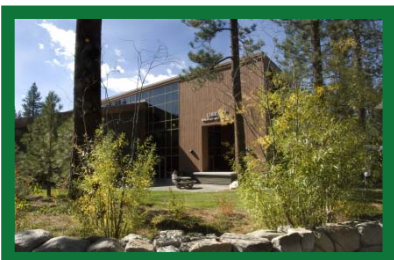
Opposition Message

Opponents of this measure say we simply cannot afford any new taxes, especially when there are higher priorities we should be focusing on, such as creating more jobs and preventing cuts to public safety and elementary and high schools. They also say the College administration cannot be trusted to spend funds from this measure wisely and that money from this measure will be wasted. Opponents say that instead of asking taxpayers for more dollars the College should scale back excessive compensation for staff and administrators because the State is being bankrupted by excessive pensions and retirement benefits for public employees.

Support for a potential bond measure remains above the required 55 percent vote threshold over the course of the survey.

If the vote on this measure were held today, would you vote yes in favor of it or vote no to oppose it?





Conclusions

Conclusions

- Voters hold highly favorable views of the College and see it as a valued community resource.
- Although awareness of College fiscal issues is relatively low, a majority of voters believe the College is in need of additional funding.
- In this context, a 64 percent majority indicates support for of a potential LTCC bond measure—a level well above the required 55% vote threshold.
- Voters place an especially high priority on making investments that will enable the College to continue to provide local students with high quality, affordable college and workforce development opportunities.

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Barkley Sculpture Project

Date	Description	Income	Expense	Balance	Comments
12/08/08	Kitt Barkley	\$ 20,000.00		\$ 20,000.00	Barkley Sculpture (1/2)
05/01/09	David Foster		\$ 5,000.00	\$ 15,000.00	Barkley Sculpture Project
03/18/10	David Foster		\$ 5,000.00	\$ 10,000.00	Barkley Sculpture Project
01/11/13	Robert C & Geraldine Williams	\$ 2,000.00		\$ 12,000.00	Barkley Sculpture Project
07/09/13	Mussi Artworks Foundry		\$ 13,189.00	\$ (1,189.00)	1st of 3 equal installments
08/09/13	AFA Supplies		\$ 1,185.16	\$ (2,374.16)	Barkley Sculpture Project
12/20/13	Katherine M Barkley	\$ 20,000.00		\$ 17,625.84	Barkley Sculpture (2/2)
04/01/14	Structural Engineer		\$ 2,500.00	\$ 15,125.84	2nd of 3 equal installments
04/15/14	Mussi Artworks Foundry		\$ 13,189.00	\$ 1,936.84	
	Subtotal	\$ 42,000.00	\$ 40,063.16	\$ 1,936.84	

Fill the Frame Campaign

10/22/13	Adele Lucas	\$ 500.00		\$ 2,436.84	Fill the Frame Campaign
10/22/13	Joe & Deanna Brothers	\$ 125.00		\$ 2,561.84	Fill the Frame Campaign
10/22/13	Joe Tillson	\$ 125.00		\$ 2,686.84	Fill the Frame Campaign
10/17/13	RD & FP Alling	\$ 1,500.00		\$ 4,186.84	Fill the Frame Campaign
10/21/13	Novasel Family	\$ 1,000.00		\$ 5,186.84	Fill the Frame Campaign
10/28/13	Kerry S David	\$ 5,000.00		\$ 10,186.84	Fill the Frame Campaign
11/01/13	Fast Print		\$ 847.19	\$ 9,339.65	Fill the Frame Campaign
12/20/13	Robert & Catherine Cliff	\$ 250.00		\$ 9,589.65	Fill the Frame Campaign
12/20/13	Roberta L Mason	\$ 1,000.00		\$ 10,589.65	Fill the Frame Campaign
01/05/14	Marvin Peterson	\$ 1,000.00		\$ 11,589.65	Fill the Frame Campaign
01/27/14	Pilot Brands	\$ 2,500.00		\$ 14,089.65	Fill the Frame Campaign
01/27/14	Gary & Tracy Saunders	\$ 1,000.00		\$ 15,089.65	Fill the Frame Campaign
01/28/14	David Hollis	\$ 250.00		\$ 15,339.65	Fill the Frame Campaign
01/29/14	Paula Gibson	\$ 250.00		\$ 15,589.65	Fill the Frame Campaign
01/31/14	Doug Wilson Construction	\$ 500.00		\$ 16,089.65	Fill the Frame Campaign
01/31/14	Allan & Diane Bisbee	\$ 250.00		\$ 16,339.65	Fill the Frame Campaign
02/05/14	Linda Groth	\$ 250.00		\$ 16,589.65	Fill the Frame Campaign
02/21/14	Mary & Fenn Barkley	\$ 1,000.00		\$ 17,589.65	Fill the Frame Campaign
02/21/14	Ed Laine	\$ 250.00		\$ 17,839.65	Fill the Frame Campaign
02/21/14	Stella & Darin Roper	\$ 250.00		\$ 18,089.65	Fill the Frame Campaign
02/25/14	Kenneth Jillson	\$ 200.00		\$ 18,289.65	Fill the Frame Campaign
02/27/14	DW & EL Correa	\$ 1,000.00		\$ 19,289.65	Fill the Frame Campaign
03/26/14	Duncan Evans	\$ 300.00		\$ 19,589.65	Fill the Frame Campaign
03/27/14	Jeff and Kasey DeFranco	\$ 250.00		\$ 19,839.65	Fill the Frame Campaign
04/08/14	Mike Hack - Morgan Stanley	\$ 250.00		\$ 20,089.65	Fill the Frame Campaign
04/10/14	Madeleine Howard - Ovation, NZ	\$ 1,000.00		\$ 21,089.65	Fill the Frame Campaign
	Subtotal	\$ 20,000.00	\$ 847.19		
2/21/2014	Current Totals	\$ 62,000.00	\$ 40,910.35	\$ 21,089.65	

Future Expenses - Barkley Sculpture Project

Date	Description	Income	Expense	Balance	Comments
NOT PAID	Mussi Artworks Foundry		\$ 13,189.00	\$ 7,900.65	3rd of 3 equal installments
	Remaining Foundation Commitment	\$ -		\$ 7,900.65	Barkley Sculpture Project



LTCC Foundation Finance Committee Meeting AGENDA

Regular Meeting

Monday, March 17, 2014
Lake Tahoe Community College
Room A106
4:30 p.m.

Attendance: Ron Alling, Julie Booth, Bob Cliff, Kerry David, Jeff DeFranco, Avril Harcourt, Bob Novasel, Aaron McVean, Kindred Murillo, Terri Montgomery

Call to Order

The meeting was called to order by Bob Novasel at 4:41 p.m.

I. Discussion and Reports

- A. Annual Fiscal Year 2012/13 Audit Report
(Terri Montgomery, Partner, Vavrinek, Trine, Day & Co., LLP)

Terry Montgomery reviewed the Foundation's annual fiscal year report. Terry noted page 20 is specific to the Foundation.

It was noted that the most important language was that the Opinion states that the financial statements "present fairly, in all material respects, the financial position" of the Foundation as a component of the District.

- B. Progress on 2012 Foundation Tax Return (Montgomery)

Terry noted the IRS re-designed the 990 form five years ago. Major changes include information about the Foundation's operational procedures. The state of California posts them on GuideStar's website automatically (<http://www.guidestar.org/>). This provides transparency for the community, grant funders and potential employees to identify clear and concise procedures of the organization. Description of the Foundation's Mission is one item that staff will review. When items of this nature change, it is recommended to update the language to stay consistent.

The additional 990 questions will be circulated to the Finance Committee for review; this will exclude donor information. The tax return is due to the IRS on May 15, 2014. The draft of the 990 will come before the next Finance Committee Meeting on April 21, 2014. (*Attachment B*)

C. LTCCD Bond Campaign Report (Murillo)

Dr. Kindred Murillo circulated a General Obligation Bond (GOB) timeline. The next step is to survey the community's registered voters to ensure there is support to move forward. Clarification on district boundaries and voter eligibility was discussed. The cost to a property owner could range from \$15 to \$25 (which is the maximum amount). On April 8, 2014, these survey results will be provided to the LTCCD Board of Trustees for direction on moving forward. If the GOB is in support from the community, the Foundation Board would have the opportunity to contribute to the Political Action Committee. Typically, GOB campaigns can cost approximately \$40-50k for professional consulting, and vendors in the community often offer discounted services and goods. (*Attachment C*)

D. Fill the Frame Campaign Report (McVean)

Aaron McVean reviewed the latest totals of the Fill the Frame Campaign. The Foundation committed \$16,000 however \$18,200 has been raised. Staff met with the artist today and the project is moving forward. Discussion on what to do with any funds left over from the campaign was reviewed. (*Attachment D*)

II. Action Items

- A. Approval of Reinstatement of funds for the Physical Science Scholarship in the Amount of \$10,544.71
Moved Novasel/Seconded David, approved unanimously.

Jeff DeFranco noted donor funds specific to a physical science scholarship in 2011 was identified as restricted funds; this action item will return funds from the unrestricted general funds account to a restricted scholarship account.

- B. Approval of Sponsorship and Support for the LTCCD 40th Anniversary Celebration on June 7, 2014 (Murillo)
Moved Novasel/Seconded Cliff, approved unanimously.
- C. Approval of Campaign and Support for a LTCCD 40th Anniversary Commemorative Book (Murillo)
Moved Novasel/Seconded David, approved unanimously.
- D. Approval of 2012/13 Good Neighbor Policy Reimbursement (Murillo)
Moved David/Seconded Novasel, approved unanimously.

Dr. Murillo noted SB 1024 (former bill was SB 329) is moving forward in an effort

to restore the good neighbor policy. She will provide updates as this item progresses.

- E. Approval to Fund the 2013/14 Faculty Awards in the Amount of \$2,000.00
Moved Alling/Seconded Novasel, approved unanimously with the amendment of presenting this award each year in honor of Bob & Kathy Cliff.

The award will continued to be presented during the annual graduation commencement ceremony.

- F. Approval of Setting an Additional Finance Committee Meeting April 21, 2014
Moved David/Seconded Novasel, approved unanimously.

- G. Recommendation of Membership Nomination, Paul Camacho
Moved Novasel/Seconded Cliff, approved unanimously.

Discussion related to hosting a board retreat to identify the major structure of committees, responsibilities, membership, and commitment levels took place. It was noted Friday's are optimal.

III. Next Regular Meeting – April 21, 2014 at 4:30 p.m.

IV. Adjournment

The meeting was adjourned at 6:07 p.m.

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2012 calendar year, or tax year beginning 7/01, **2012, and ending** 6/30, **2013**

B Check if applicable:	C	D Employer Identification Number
<input type="checkbox"/> Address change	LAKE TAHOE COMMUNITY COLLEGE FOUNDATION ONE COLLEGE DRIVE SOUTH LAKE TAHOE, CA 96150	68-0383810
<input type="checkbox"/> Name change		E Telephone number
<input type="checkbox"/> Initial return		530-541-4660
<input type="checkbox"/> Terminated		G Gross receipts \$
<input type="checkbox"/> Amended return		227,659.
<input type="checkbox"/> Application pending	F Name and address of principal officer:	H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Same As C Above	H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'No,' attach a list. (see instructions)
I Tax-exempt status	<input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	H(c) Group exemption number ▶
J Website: ▶	N/A	
K Form of organization:	<input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	L Year of Formation: 1995 M State of legal domicile: CA

Part I Summary

	1 Briefly describe the organization's mission or most significant activities: <u>THE MISSION OF THE FOUNDATION IS TO WORK FOR EDUCATIONAL EXCELLENCE BY ASSISTING AND ENCOURAGING INVESTMENT IN THE DEVELOPMENT AND GROWTH OF EDUCATIONAL OPPORTUNITIES AT LAKE TAHOE COMMUNITY COLLEGE DISTRICT.</u>			
Activities & Governance	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	3 Number of voting members of the governing body (Part VI, line 1a).....	3		12
	4 Number of independent voting members of the governing body (Part VI, line 1b).....	4		12
	5 Total number of individuals employed in calendar year 2012 (Part V, line 2a).....	5		0
	6 Total number of volunteers (estimate if necessary).....	6		20
	7a Total unrelated business revenue from Part VIII, column (C), line 12.....	7a		0.
	7b Net unrelated business taxable income from Form 990-T, line 34.....	7b		0.
Revenue	8 Contributions and grants (Part VIII, line 1h).....		Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g).....		236,949.	180,321.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d).....		36,349.	30,130.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e).....		10,117.	17,208.
	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12).....		283,415.	227,659.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3).....		51,324.	117,142.
	14 Benefits paid to or for members (Part IX, column (A), line 4).....			
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10).....		119,683.	
	16a Professional fundraising fees (Part IX, column (A), line 11e).....			
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 4,773.			
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e).....		127,525.	21,855.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25).....		298,532.	138,997.	
19 Revenue less expenses. Subtract line 18 from line 12.....		-15,117.	88,662.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16).....		Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26).....		1,257,334.	1,400,811.
	22 Net assets or fund balances. Subtract line 21 from line 20.....		13,670.	34,590.
			1,243,664.	1,366,221.

Part II Signature Block

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

Sign Here	Signature of officer	Date	
	JEFF DEFRANCO		Treasurer
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	Firm's name ▶ Vavrinek, Trine, Day & Co., LLP		Check <input type="checkbox"/> if self-employed <input type="checkbox"/> PTIN
	Firm's address ▶ 5000 Hopyard Road, Suite 335 Pleasanton, CA 94588-3351		Firm's EIN ▶
			Phone no. (925) 734-6600

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

THE MISSION OF THE FOUNDATION IS TO WORK FOR EDUCATIONAL EXCELLENCE BY ASSISTING AND ENCOURAGING INVESTMENT IN THE DEVELOPMENT AND GROWTH OF EDUCATIONAL OPPORTUNITIES AT LAKE TAHOE COMMUNITY COLLEGE DISTRICT.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes No

If 'Yes,' describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes No

If 'Yes,' describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 69,239. including grants of \$) (Revenue \$)

CONTRIBUTIONS TO COLLEGE DEPARTMENTS IN ORDER TO SUPPORT STUDENT ACTIVITIES, EDUCATIONAL PROJECTS, AND TECHNOLOGICAL UPGRADES.

4b (Code:) (Expenses \$ 61,940. including grants of \$) (Revenue \$)

SCHOLARSHIPS AWARDED TO STUDENTS OF LAKE TAHOE COMMUNITY COLLEGE DISTRICT.

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services. (Describe in Schedule O.)

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

4e Total program service expenses 131,179.

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.....	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?.....	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.....		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.....		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III.....		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.....		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.....		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.....		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.....		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.....	X	
11 If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI.....		X
b Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.....		X
c Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII.....		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.....	X	
e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X.....		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X.....		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII.....		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.....	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E.....		X
14a Did the organization maintain an office, employees, or agents outside of the United States?.....		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.....		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.....		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.....		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions).....		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.....	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.....		X
20 a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H.....		X
b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?.....		

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If 'Yes,' complete Schedule I, Parts I and II.</i>	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? <i>If 'Yes,' complete Schedule I, Parts I and III.</i>	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? <i>If 'Yes,' complete Schedule J.</i>	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, and that was issued after December 31, 2002? <i>If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25.</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If 'Yes,' complete Schedule L, Part I.</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If 'Yes,' complete Schedule L, Part I.</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If 'Yes,' complete Schedule L, Part II.</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part III.</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV.</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV.</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If 'Yes,' complete Schedule L, Part IV.</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M.</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M.</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I.</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete Schedule N, Part II.</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I.</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1.</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		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)? <i>If 'Yes,' complete Schedule R, Part V, line 2.</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2.</i>		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? <i>If 'Yes,' complete Schedule R, Part VI.</i>		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.	X	

BAA

Form 990 (2012)

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. <input type="text" value="0"/>		
1 b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. <input type="text" value="0"/>		
1 c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? <input type="checkbox"/>		
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. <input type="text" value="0"/>		
2 b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)		
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3 b	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O.		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
4 b	If 'Yes,' enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5 b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5 c	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
6 b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7 a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
7 b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		
7 c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7 d	If 'Yes,' indicate the number of Forms 8282 filed during the year. <input type="text"/>		
7 e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7 f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7 g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7 h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
9 a	Did the organization make any taxable distributions under section 4966?		
9 b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
10 a	Initiation fees and capital contributions included on Part VIII, line 12. <input type="text"/>		
10 b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. <input type="text"/>		
11	Section 501(c)(12) organizations. Enter:		
11 a	Gross income from members or shareholders. <input type="text"/>		
11 b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) <input type="text"/>		
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12 b	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year. <input type="text"/>		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13 a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13 b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans. <input type="text"/>		
13 c	Enter the amount of reserves on hand. <input type="text"/>		
14 a	Did the organization receive any payments for indoor tanning services during the tax year?		X
14 b	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O.		

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

Section A. Governing Body and Management

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

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed ▶ CA
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. See Schedule O
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization:
 ▶ KINDRED MURILLO ONE COLLEGE DRIVE SOUTH LAKE TAHOE CA 96150 530-541-4660

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

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

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

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DIANE BISBEE Trustee	1 0	X						0.	0.	0.
(2) DR DEANNA BROTHERS Trustee	1 0	X						0.	0.	0.
(3) BOB CLIFF Trustee	1 0	X						0.	0.	0.
(4) KERRY DAVID Trustee	1 0	X						0.	0.	0.
(5) JEFF DEFRANCO Treasurer	2.5 50	X		X				0.	65,564.	0.
(6) ADELE LUCAS Trustee	1 0	X						0.	0.	0.
(7) JANET SMITH Trustee	1 0	X						0.	0.	0.
(8) JEFF TILLMAN Trustee	1 0	X						0.	0.	0.
(9) JOE TILLSON Trustee	1 0	X						0.	0.	0.
(10) LEON MALMED Trustee	1 0	X						0.	0.	0.
(11) ROBERT NOVASEL President	1 0	X		X				0.	0.	0.
(12) KINDRED MURILLO Secretary	5 50	X		X				0.	172,500.	0.
(13) PETER BOSTIC Executive Dir.	25 50			X				0.	0.	0.
(14) MELONIE GUTTRY Executive Dir.	40 0			X				0.	82,053.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(15) -----									
(16) -----									
(17) -----									
(18) -----									
(19) -----									
(20) -----									
(21) -----									
(22) -----									
(23) -----									
(24) -----									
(25) -----									
1 b Sub-total						0.	320,117.	0.	
c Total from continuation sheets to Part VII, Section A						0.	0.	0.	
d Total (add lines 1b and 1c)						0.	320,117.	0.	
2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 0									

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶ 0

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns	1 a				
	b Membership dues	1 b				
	c Fundraising events	1 c 17,850.				
	d Related organizations	1 d				
	e Government grants (contributions)	1 e				
	f All other contributions, gifts, grants, and similar amounts not included above	1 f 162,471.				
	g Noncash contributions included in Ins 1a-1f: \$					
	h Total. Add lines 1a-1f		180,321.			
	2 a Business Code					
	b -----					
c -----						
d -----						
e -----						
f All other program service revenue						
g Total. Add lines 2a-2f						
PROGRAM SERVICE REVENUE	3 Investment income (including dividends, interest and other similar amounts)		30,130.		30,130.	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross rents	(i) Real				
		(ii) Personal				
		b Less: rental expenses				
		c Rental income or (loss)				
	d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
		b Less: cost or other basis and sales expenses				
		c Gain or (loss)				
	d Net gain or (loss)					
	8 a Gross income from fundraising events (not including \$ 17,850. of contributions reported on line 1c). See Part IV, line 18	a 17,208.				
		b Less: direct expenses	b			
c Net income or (loss) from fundraising events			17,208.		17,208.	
9 a Gross income from gaming activities. See Part IV, line 19		a				
b Less: direct expenses	b					
c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b				
	c Net income or (loss) from sales of inventory					
11 a Miscellaneous Revenue						
b -----						
c -----						
d All other revenue						
e Total. Add lines 11a-11d						
12 Total revenue. See instructions			227,659.	0.	0.	

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Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	57,077.	57,077.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	60,065.	60,065.		
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	2,487.	1,319.	1,168.	
g Other. (If line 11g amt exceeds 10% of line 25, column (A) amt, list line 11g expenses on Sch O)	3,048.			3,048.
12 Advertising and promotion	673.		673.	
13 Office expenses	2,206.		556.	1,650.
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <u>RESTRICTED PROGRAM EXPENSE</u>	12,162.	12,162.		
b <u>GRANT EXPENSES</u>	556.	556.		
c <u>Printing and Publications</u>	498.		498.	
d <u>MISCELLANEOUS</u>	225.		150.	75.
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	138,997.	131,179.	3,045.	4,773.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
ASSETS	1 Cash – non-interest-bearing.....	114,002.	1	184,334.
	2 Savings and temporary cash investments.....	286,408.	2	40,095.
	3 Pledges and grants receivable, net.....		3	
	4 Accounts receivable, net.....		4	60.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.....		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L.....		6	
	7 Notes and loans receivable, net.....		7	
	8 Inventories for sale or use.....		8	
	9 Prepaid expenses and deferred charges.....	1,395.	9	2,625.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.....	10a		
	b Less: accumulated depreciation.....	10b		10c
	11 Investments – publicly traded securities.....		11	
	12 Investments – other securities. See Part IV, line 11.....		12	
	13 Investments – program-related. See Part IV, line 11.....		13	
	14 Intangible assets.....		14	
	15 Other assets. See Part IV, line 11.....	855,529.	15	1,173,697.
16 Total assets. Add lines 1 through 15 (must equal line 34).....	1,257,334.	16	1,400,811.	
LIABILITIES	17 Accounts payable and accrued expenses.....	1,865.	17	20,515.
	18 Grants payable.....		18	
	19 Deferred revenue.....	11,805.	19	14,075.
	20 Tax-exempt bond liabilities.....		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D.....		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L.....		22	
	23 Secured mortgages and notes payable to unrelated third parties.....		23	
	24 Unsecured notes and loans payable to unrelated third parties.....		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D.....		25	
	26 Total liabilities. Add lines 17 through 25.....	13,670.	26	34,590.
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets.....	268,433.	27	345,447.
	28 Temporarily restricted net assets.....	550,597.	28	590,140.
	29 Permanently restricted net assets.....	424,634.	29	430,634.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds.....		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund.....		31	
	32 Retained earnings, endowment, accumulated income, or other funds.....		32	
	33 Total net assets or fund balances.....	1,243,664.	33	1,366,221.
34 Total liabilities and net assets/fund balances.....	1,257,334.	34	1,400,811.	

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Form 990 (2012)

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	227,659.
2	Total expenses (must equal Part IX, column (A), line 25)	2	138,997.
3	Revenue less expenses. Subtract line 2 from line 1	3	88,662.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,243,664.
5	Net unrealized gains (losses) on investments	5	33,895.
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	1,366,221.

Part XII Financial Statements and Reporting

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

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

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Form 990 (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 LAKE TAHOE COMMUNITY COLLEGE FOUNDATION	Employer identification number 68-0383810
----------------------------------------------------------------------------	-----------------------------------------------------

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

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

- 1 A church, convention of churches or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions – subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III – Functionally integrated d Type III – Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11 g (i)	
(ii) A family member of a person described in (i) above?	11 g (ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11 g (iii)	
- h Provide the following information about the supported organization(s).

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants'.)	294,797.	343,989.	361,390.	236,949.	180,321.	1,417,446.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						0.
3 The value of services or facilities furnished by a governmental unit to the organization without charge.						0.
4 Total. Add lines 1 through 3.	294,797.	343,989.	361,390.	236,949.	180,321.	1,417,446.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						0.
6 Public support. Subtract line 5 from line 4.						1,417,446.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4.	294,797.	343,989.	361,390.	236,949.	180,321.	1,417,446.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	29,846.	23,650.	38,290.	36,349.	30,130.	158,265.
9 Net income from unrelated business activities, whether or not the business is regularly carried on.						0.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) See Part IV.			1,013.	1,050.	16,695.	18,758.
11 Total support. Add lines 7 through 10.						1,594,469.
12 Gross receipts from related activities, etc (see instructions).					12	0.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here .						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)).	14	88.90 %
15 Public support percentage from 2011 Schedule A, Part II, line 14.	15	76.76 %
16a 33-1/3% support test – 2012. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.	<input checked="" type="checkbox"/>	
b 33-1/3% support test – 2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.	<input type="checkbox"/>	
17a 10%-facts-and-circumstances test – 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.	<input type="checkbox"/>	
b 10%-facts-and-circumstances test – 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.	<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.	<input type="checkbox"/>	

Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Support

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

Section B. Total Support

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

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

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

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

19a **33-1/3% support tests – 2012.** If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization. ▶

b **33-1/3% support tests – 2011.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization. ▶

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

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

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LAKE TAHOE COMMUNITY COLLEGE FOUNDATION

68-0383810

Part II, Line 10 - Other Income

<u>Nature and Source</u>	<u>2012</u>	<u>2011</u>	<u>2010</u>	<u>2009</u>	<u>2008</u>
Total	<u>\$ 16,695.</u>	<u>\$ 1,050.</u>	<u>\$ 1,013.</u>	<u>\$ 0.</u>	<u>\$ 0.</u>

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Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ **Attach to Form 990, Form 990-EZ, or Form 990-PF**

OMB No. 1545-0047

2012

Name of the organization LAKE TAHOE COMMUNITY COLLEGE FOUNDATION	Employer identification number 68-0383810
----------------------------------------------------------------------------	-----------------------------------------------------

Organization type (check one):

Filers of:

Form 990 or 990-EZ

Section:

- 501(c)(3) (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization

Form 990-PF

- 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc. purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc. purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc. contributions of \$5,000 or more during the year. ▶ \$ _____

Caution: An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it **must** answer 'No' on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2, of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990EZ, Schedule B (Form 990, 990-EZ, or 990-PF) (2012) **or 990-PF.**

Name of organization LAKE TAHOE COMMUNITY COLLEGE FOUNDATION	Employer identification number 68-0383810
------------------------------------------------------------------------	-----------------------------------------------------

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BOYS AND GIRLS CLUB OF LAKE TAHOE P.O. BOX 17864 SOUTH LAKE TAHOE, CA 96151	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II if there is a noncash contribution.)</small>
2	CAMP RICHARDSON RESORT P.O. BOX 9028 SOUTH LAKE TAHOE, CA 96158	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II if there is a noncash contribution.)</small>
3	ALBERTA CROOK P.O. BOX 10095 LAHAINA, HI 96761	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II if there is a noncash contribution.)</small>
4	JESSICA LEDBETTER 575 STATE ROUTE 88 GARDNERVILLE, NV 89410	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II if there is a noncash contribution.)</small>
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II if there is a noncash contribution.)</small>
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II if there is a noncash contribution.)</small>

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Name of organization

Employer identification number

LAKE TAHOE COMMUNITY COLLEGE FOUNDATION

68-0383810

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	N/A		

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Name of organization: LAKE TAHOE COMMUNITY COLLEGE FOUNDATION
 Employer identification number: 68-0383810

Part III Exclusively religious, charitable, etc, individual contributions to section 501(c)(7), (8) or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry.

For organizations completing Part III, enter total of *exclusively* religious, charitable, etc, contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) \$ N/A
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	N/A		

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

**SCHEDULE D
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No. 1545-0047

2012

Open to Public Inspection

Name of the organization

Employer identification number

LAKE TAHOE COMMUNITY COLLEGE FOUNDATION

68-0383810

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1 a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If 'Yes,' explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1 c |
| d Additions during the year | 1 d |
| e Distributions during the year | 1 e |
| f Ending balance | 1 f |
- 2 a Did the organization include an amount on Form 990, Part X, line 21? Yes No
- b If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. Yes No

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

	(a) Current	(b) Prior year	(c) Two years	(d) Three years	(e) Four years
1 a Beginning of year balance	611,856.	652,568.	440,059.	394,403.	394,403.
b Contributions	6,000.		6,500.	10,800.	
c Net investment earnings, gains, and losses	17,064.	25,376.	277,713.	34,856.	
d Grants or scholarships	60,065.	66,088.	71,604.		
e Other expenditures for facilities and programs			100.	0.	
f Administrative expenses					
g End of year balance	574,855.	611,856.	652,568.	440,059.	394,403.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment ▶ 30.00 %
 - b Permanent endowment ▶ 15.00 %
 - c Temporarily restricted endowment ▶ 55.00 %
- The percentages in lines 2a, 2b, and 2c should equal 100%.

- 3 a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---------------------------------------------------------------------------------------|--------|----|
| (i) unrelated organizations | 3a(i) | X |
| (ii) related organizations | 3a(ii) | X |
| b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ▶ 0.

Part VII Investments – Other Securities. See Form 990, Part X, line 12. N/A

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives.....		
(2) Closely-held equity interests.....		
(3) Other		
(A) -----		
(B) -----		
(C) -----		
(D) -----		
(E) -----		
(F) -----		
(G) -----		
(H) -----		
(I) -----		
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.) . . . ▶		

Part VIII Investments – Program Related. See Form 990, Part X, line 13. N/A

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) . . . ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	1,173,697.
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, column (B), line 15.) ▶	1,173,697.

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

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

2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

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

1	Total revenue, gains, and other support per audited financial statements		1	353,321.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	a Net unrealized gains on investments	2 a 33,895.		
	b Donated services and use of facilities	2 b 91,767.		
	c Recoveries of prior year grants	2 c		
	d Other (Describe in Part XIII.)	2 d		
	e Add lines 2 a through 2 d		2 e	125,662.
3	Subtract line 2 e from line 1		3	227,659.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4 a		
	b Other (Describe in Part XIII.)	4 b		
	c Add lines 4 a and 4 b		4 c	
5	Total revenue. Add lines 3 and 4 c . (This must equal Form 990, Part I, line 12.)		5	227,659.

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

1	Total expenses and losses per audited financial statements		1	230,764.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	a Donated services and use of facilities	2 a 91,767.		
	b Prior year adjustments	2 b		
	c Other losses	2 c		
	d Other (Describe in Part XIII.)	2 d		
	e Add lines 2 a through 2 d		2 e	91,767.
3	Subtract line 2 e from line 1		3	138,997.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4 a		
	b Other (Describe in Part XIII.)	4 b		
	c Add lines 4 a and 4 b		4 c	
5	Total expenses. Add lines 3 and 4 c . (This must equal Form 990, Part I, line 18.)		5	138,997.

Part XIII Supplemental Information

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

Part V, Line 4 - Intended Uses Of Endowment Fund

THE ENDOWMENT FUNDS ARE USED FOR SCHOLARSHIPS FOR STUDENTS ATTENDING LAKE TAHOE COMMUNITY COLLEGE DISTRICT.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 17, 18,
or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2012

Open to Public
Inspection

Name of the organization

LAKE TAHOE COMMUNITY COLLEGE FOUNDATION

Employer identification number

68-0383810

Part I Fundraising Activities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- | | |
|--------------------------------------------------------------------|-------------------------------------------------------------------------|
| a <input type="checkbox"/> Mail solicitations | e <input type="checkbox"/> Solicitation of non-government grants |
| b <input type="checkbox"/> Internet and email solicitations | f <input type="checkbox"/> Solicitation of government grants |
| c <input type="checkbox"/> Phone solicitations | g <input type="checkbox"/> Special fundraising events |
| d <input type="checkbox"/> In-person solicitations | |

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If 'Yes,' list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total						0.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

REVENUE	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
	TASTE OF GOLD (event type)	(event type)	None (total number)	(add column (a) through column (c))
1	Gross receipts	35,058.		35,058.
2	Less: Charitable contributions	17,850.		17,850.
3	Gross income (line 1 minus line 2)	17,208.		17,208.
DIRECT EXPENSES	4	Cash prizes		
	5	Noncash prizes		
	6	Rent/facility costs		
	7	Food and beverages		
	8	Entertainment		
	9	Other direct expenses		
	10	Direct expense summary. Add lines 4 through 9 in column (d)		
11	Net income summary. Combine line 3, column (d), and line 10			17,208.

Part III Gaming. Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

REVENUE	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
	(add column (a) through column (c))			
1	Gross revenue			
DIRECT EXPENSES	2	Cash prizes		
	3	Non-cash prizes		
	4	Rent/facility costs		
	5	Other direct expenses		
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
7	Direct expense summary. Add lines 2 through 5 in column (d)			
8	Net gaming income summary. Combine lines 1, column (d) and line 7			

9 Enter the state(s) in which the organization operates gaming activities: _____
 a Is the organization licensed to operate gaming activities in each of these states? Yes No
 b If 'No,' explain: _____

10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No
 b If 'Yes,' explain: _____

- 11 Does the organization operate gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity operated in:

a The organization's facility	13 a	%
b An outside facility	13 b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15a Does the organization have a contact with a third party from whom the organization receives gaming revenue? Yes No
- b If 'Yes,' enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____
- c If 'Yes,' enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

- 17 Mandatory distributions
- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2012

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

Name of the organization

Employer identification number

LAKE TAHOE COMMUNITY COLLEGE FOUNDATION

68-0383810

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. See Part IV

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) LAKE TAHOE COMMUNITY COLLEGE ONE COLLEGE DRIVE S. LAKE TAHOE, CA 96150	80-0543620	GOVNT	57,077.	0.			CONTRIBUTIONS TO COLLEGE DEPARTMENT
(2) -----							
(3) -----							
(4) -----							
(5) -----							
(6) -----							
(7) -----							
(8) -----							

DRAFT

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

3 Enter total number of other organizations listed in the line 1 table ▶ 0

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 SCHOLARSHIPS AND GRANTS	117	60,065.			
2					
3					
4					
5					
6					
7					

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.

Part I, Line 2 - Procedures for Monitoring Use of Grants Funds in U.S.

GRANTS AND OTHER ASSISTANCE TO INDIVIDUALS - THE FOUNDATION PROVIDES SCHOLARSHIPS TO STUDENTS ATTENDING LAKE TAHOE COMMUNITY COLLEGE. THE FUNDS ARE DISTRIBUTED DIRECTLY TO THE STUDENT. ALL STUDENTS COMPLETE A SCHOLARSHIP FORM ON WHICH THEY MUST INDICATE AND AGREE TO HOW THE FUNDS WILL BE USED FOR ALLOWABLE EDUCATIONAL EXPENSES.

GRANTS AND OTHER ASSISTANCE TO GOVERNMENTS AND ORGANIZATIONS - FOUNDATION PROVIDES PARTIAL STAFFING FUNDING TO LAKE TAHOE COMMUNITY COLLEGE FOR STAFF IN SUPPORT OF THE FOUNDATION. DIRECT STAFF TIME ATTRIBUTED TO THE FOUNDATION IS INVOICED ON A MONTHLY BASIS PER THE AGREEMENT BETWEEN THE FOUNDATION AND LAKE TAHOE COMMUNITY COLLEGE DISTRICT

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ **Complete if the organization answered 'Yes' to Form 990, Part IV, line 23.**
▶ **Attach to Form 990. ▶ See separate instructions.**

OMB No. 1545-0047

2012

Open to Public Inspection

Name of the organization

LAKE TAHOE COMMUNITY COLLEGE FOUNDATION

Employer identification number

68-0383810

Part I Questions Regarding Compensation

1 a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--------------------------------------------------------------------|--------------------------------------------------------------------------|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain.

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--------------------------------------------------------------|--------------------------------------------------------------------------|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? **4 a**
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? **4 b**
- c** Participate in, or receive payment from, an equity-based compensation arrangement? **4 c**
- If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? **5 a**
- b** Any related organization? **5 b**
- If 'Yes' to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? **6 a**
- b** Any related organization? **6 b**
- If 'Yes' to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III. **7**

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If 'Yes,' describe in Part III. **8**

9 If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? **9**

	Yes	No
1 b		
2		
4 a		X
4 b		X
4 c		X
5 a		X
5 b		X
6 a		X
6 b		X
7		X
8		X
9		

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2012

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable columns (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns(B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation				
1 KINDRED MURILLO Secretary	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	172,500.	0.	0.	0.	0.	172,500.	0.
2	(i)							
	(ii)							
3	(i)							
	(ii)							
4	(i)							
	(ii)							
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

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Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, for Part II. Also complete this part for any additional information.

Lined area for supplemental information with dashed horizontal lines.

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SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2012

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

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or 990-EZ.

Name of the organization

Employer identification number

LAKE TAHOE COMMUNITY COLLEGE FOUNDATION

68-0383810

Form 990, Part VI, Line 11b - Form 990 Review Process

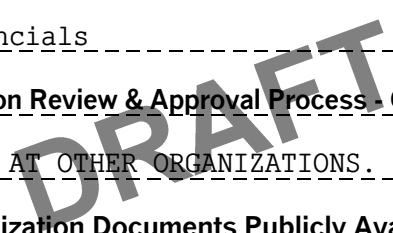
THE FORM 990 IS INITIALLY REVIEWED BY KEY STAFF WORKING WITH THE FOUNDATION,
INCLUDING THE LAKE TAHOE COMMUNITY COLLEGE PRESIDENT (SECRETARY TO THE BOARD), VICE
PRESIDENT OF ADMINISTRATIVE SERVICES (FOUNDATION TREASURER), ACCOUNTING STAFF
SUPPORTING THE FOUNDATION, AND THE FOUNDATION EXECUTIVE DIRECTOR. FORM 990 IS THEN
BROUGHT TO THE FOUNDATION FINANCE COMMITTEE FOR REVIEW. THE COMMITTEE IS MADE UP OF
THE FOUNDATION BOARD CHAIR AND OTHER BOARD MEMBERS ALONG WITH SOME OF THE
AFOREMENTIONED STAFF. FORM 990 IS THEN SUBMITTED. THE FOUNDATION BOARD IS PROVIDED
WITH A COPY OF THE 990 FORM IN THE FOUNDATION BOARD PACKET FOLLOWING SUBMISSION.
ONCE SUBMITTED THE FORM 990 WILL ALSO BE POSTED ONLINE AT
<http://ltcc.edu/web/donate/financials>

Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO, Top Management

COMPARISON TO SIMILAR POSITIONS AT OTHER ORGANIZATIONS.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

DOCUMENTS, POLICIES, AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST.



SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No. 1545-0047

2012

Open to Public Inspection

Name of the organization

LAKE TAHOE COMMUNITY COLLEGE FOUNDATION

Employer identification number

68-0383810

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) ----- ----- -----					
(2) ----- ----- -----					
(3) ----- ----- -----					

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) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Sec 512(b)(13) controlled entity?	
						Yes	No
(1) LAKE TAHOE COMMUNITY COLLEGE DISTR ONE COLLEGE DRIVE SOUTH LAKE TAHOE, CA 96150 80-0543620	COMMUNITY COLLEGE DISTRICT	CA	GOVNT	N/A	N/A		X
(2) ----- ----- -----							
(3) ----- ----- -----							
(4) ----- ----- -----							

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 country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) ----- ----- -----												
(2) ----- ----- -----												
(3) ----- ----- -----												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Sec 512(b)(13) controlled entity?	
								Yes	No
(1) ----- ----- -----									
(2) ----- ----- -----									
(3) ----- ----- -----									

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.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties or **(iv)** rent from a controlled entity.....
- b** Gift, grant, or capital contribution to related organization(s).....
- c** Gift, grant, or capital contribution from related organization(s).....
- d** Loans or loan guarantees to or for related organization(s).....
- e** Loans or loan guarantees by related organization(s).....

- f** Dividends from related organization(s).....
- g** Sale of assets to related organization(s).....
- h** Purchase of assets from related organization(s).....
- i** Exchange of assets with related organization(s).....
- j** Lease of facilities, equipment, or other assets to related organization(s).....

- k** Lease of facilities, equipment, or other assets from related organization(s).....
- l** Performance of services or membership or fundraising solicitations for related organization(s).....
- m** Performance of services or membership or fundraising solicitations by related organization(s).....
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s).....
- o** Sharing of paid employees with related organization(s).....

- p** Reimbursement paid to related organization(s) for expenses.....
- q** Reimbursement paid by related organization(s) for expenses.....

- r** Other transfer of cash or property to related organization(s).....
- s** Other transfer of cash or property from related organization(s).....

	Yes	No
1 a		X
1 b	X	
1 c		X
1 d		X
1 e		X
1 f		X
1 g		X
1 h		X
1 i		X
1 j		X
1 k		X
1 l		X
1 m	X	
1 n	X	
1 o		X
1 p		X
1 q		X
1 r		X
1 s		X

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2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)	LAKE TAHOE COMMUNITY COLLEGE DISTRICT	b	57,077.	
(2)	LAKE TAHOE COMMUNITY COLLEGE DISTRICT	m	91,767.	
(3)				
(4)				
(5)				
(6)				

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.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 Form (1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1) ----- ----- -----													
(2) ----- ----- -----													
(3) ----- ----- -----													
(4) ----- ----- -----													
(5) ----- ----- -----													
(6) ----- ----- -----													
(7) ----- ----- -----													
(8) ----- ----- -----													

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Part VII **Supplemental Information**

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

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Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

► **File a separate application for each return.**

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

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

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

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

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

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

Enter filer's identifying number, see instructions

Type or print	Name of exempt organization or other filer, see instructions. LAKE TAHOE COMMUNITY COLLEGE FOUNDATION	Employer identification number (EIN) or 68-0383810
	Number, street, and room or suite number. If a P.O. box, see instructions. ONE COLLEGE DRIVE	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. SOUTH LAKE TAHOE, CA 96150	

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

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

- The books are in the care of ► KINDRED MURILLO

Telephone No. ► 530-541-4660 FAX No. ► _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box. If it is for part of the group, check this box . . . and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 2/15, 20 14, to file the exempt organization return for the organization named above.

The extension is for the organization's return for:

- calendar year 20 ____ or
- tax year beginning 7/01, 20 12, and ending 6/30, 20 13.

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

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

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

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box. **Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

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

Enter filer's identifying number, see instructions

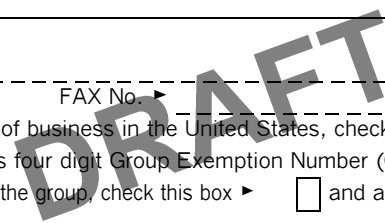
Type or print	Name of exempt organization or other filer, see instructions. LAKE TAHOE COMMUNITY COLLEGE FOUNDATION	Employer identification number (EIN) or 68-0383810
	Number, street, and room or suite number. If a P.O. box, see instructions. Vavrinek, Trine, Day & Co., LLP 5000 Hopyard Road, Suite 335	Social security number (SSN)
File by the extended due date for filing your return. See instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Pleasanton, CA 94588-3351	

Enter the Return code for the return that this application is for (file a separate application for each return)..... **01**

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

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

- The books are in care of ▶ KINDRED MURILLO
Telephone No. ▶ 530-541-4660 FAX No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box . . . ▶ . If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all members the extension is for.



- I request an additional 3-month extension of time until 5/15, 2014.
- For calendar year _____, or other tax year beginning 7/01, 2012, and ending 6/30, 2013.
- If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return Change in accounting period
- State in detail why you need the extension. . . Taxpayer respectfully requests additional time to gather information necessary to file a complete and accurate tax return.

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

Signature and Verification must be completed for Part II only.

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

Signature ▶ _____ Title ▶ **Treasurer** Date ▶ _____

California Exempt Organization Annual Information Return

Calendar Year 2012 or fiscal year beginning month 07 day 01 year 2012, and ending month 06 day 30 year 2013

Corporation/Organization Name: LAKE TAHOE COMMUNITY COLLEGE FOUNDATION
 Address (suite, room, or PMB no.): ONE COLLEGE DRIVE
 City: SOUTH LAKE TAHOE
 State: CA ZIP Code: 96150
 California corporation number: 463508
 FEIN: 68-0383810

- A First Return Yes No
- B Amended Return Yes No
- C IRC Section 4947(a)(1) trust Yes No
- D Final Return Dissolved Surrendered (Withdrawn)
 Merged/Reorganized Enter date: _____

- E Check accounting method:
 1 Cash 2 Accrual 3 Other
- F Federal return filed?
 1 990T 2 990 (PF) 3 Sch H (990)
- G Is this a group filing for the subordinates/affiliates? Yes No
 If 'Yes,' attach a roster. See instructions
- H Is this organization in a group exemption? Yes No
 If 'Yes,' What's the parent's name? _____
- I Did the organization have any changes in its activities, governing instrument, articles of incorporation, or bylaws that have not been reported to the Franchise Tax Board? Yes No
 If 'Yes,' explain, and attach copies of revised documents.

- J If exempt under R&TC Section 23701d, has the organization during the year: (1) participated in any political campaign, or (2) attempted to influence legislation or any ballot measure, or (3) made an election under R&TC Section 23704.5 (relating to lobbying by public charities)? Yes No
 If 'Yes,' complete and attach form FTB 3509.
- K Is the organization exempt under R&TC Section 23701g? Yes No
 If 'Yes,' enter gross receipts from nonmember sources \$ _____
- L If organization is exempt under R&TC Section 23701d and is exclusively religious, educational, or charitable, and is supported primarily (50% or more) by public contributions, check box. No filing fee is required.
- M Is the organization a Limited Liability Company? Yes No
- N Did the organization file Form 100 or Form 109 to report taxable income? Yes No
- O Is the organization under audit by the IRS or has the IRS audited in a prior year? Yes No

CACA1112L 10/11/12

Part I Complete Part I unless not required to file this form. See General Instructions B and C.

Receipts and Revenues	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8.	●	1	47,338.
	2	Gross dues and assessments from members and affiliates.	●	2	
	3	Gross contributions, gifts, grants, and similar amounts received. SEE .SCH. .B.	●	3	180,321.
	4	Total gross receipts for filing requirement test. Add line 1 through line 3. This line must be completed. If the result is less than \$50,000, see General Instruction B...	●	4	227,659.
	5	Cost of goods sold.	●	5	
	6	Cost or other basis, and sales expenses of assets sold.	●	6	
	7	Total costs. Add line 5 and line 6.		7	
	8	Total gross income. Subtract line 7 from line 4.	●	8	227,659.
Expenses	9	Total expenses and disbursements. From Side 2, Part II, line 18.	●	9	138,997.
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8.	●	10	88,662.
Filing Fee	11	Filing fee \$10 or \$25. See General Instruction F.		11	10.
	12	Total payments.		12	
	13	Penalties and Interest. See General Instruction J.		13	
	14	Use tax. See General Instruction K.	●	14	
	15	Balance due. Add line 11, line 13, and line 14. Then subtract line 12 from the result.		15	10.
Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.				
	Signature of officer	Title TREASURER	Date	● Telephone 530-541-4660	
Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	● PTIN	
	Firm's name (or yours, if self-employed) and address	VAVRINEK, TRINE, DAY & CO., LLP 5000 HOPYARD ROAD, SUITE 335 PLEASANTON, CA 94588-3351			● FEIN
				● Telephone (925) 734-6600	
May the FTB discuss this return with the preparer shown above? See instructions. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					

Part II Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts — complete Part II or furnish substitute information.

Receipts from Other Sources	1	Gross sales or receipts from all business activities. See instructions.	●	1	
	2	Interest	●	2	30,130.
	3	Dividends	●	3	
	4	Gross rents	●	4	
	5	Gross royalties	●	5	
	6	Gross amount received from sale of assets (See instructions)	●	6	
	7	Other income. Attach schedule.	●	7	17,208.
Expenses and Disbursements	8	Total gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1.		8	47,338.
	9	Contributions, gifts, grants, and similar amounts paid. Attach schedule.	●	9	117,142.
	10	Disbursements to or for members	●	10	
	11	Compensation of officers, directors, and trustees. Attach schedule.	●	11	0.
	12	Other salaries and wages	●	12	
	13	Interest	●	13	
	14	Taxes	●	14	
	15	Rents	●	15	
	16	Depreciation and depletion (See instructions)	●	16	
	17	Other Expenses and Disbursements. Attach schedule.	●	17	21,855.
	18	Total expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9.		18	138,997.

Schedule L Balance Sheets		Beginning of taxable year		End of taxable year	
		(a)	(b)	(c)	(d)
Assets					
1	Cash		400,410.		224,429.
2	Net accounts receivable				60.
3	Net notes receivable				
4	Inventories				
5	Federal and state government obligations				
6	Investments in other bonds				
7	Investments in stock				
8	Mortgage loans				
9	Other investments Attach schedule.	ST. 4	855,529.		1,173,697.
10 a	Depreciable assets				
b	Less accumulated depreciation				
11	Land				
12	Other assets. Attach schedule.	STM. 5	1,395.		2,625.
13	Total assets		1,257,334.		1,400,811.
Liabilities and net worth					
14	Accounts payable		1,865.		20,515.
15	Contributions, gifts, or grants payable				
16	Bonds and notes payable				
17	Mortgages payable				
18	Other liabilities. Attach schedule.	STM. 6	11,805.		14,075.
19	Capital stock or principle fund		1,243,664.		1,366,221.
20	Paid-in or capital surplus. Attach reconciliation.				
21	Retained earnings or income fund				
22	Total liabilities and net worth		1,257,334.		1,400,811.

Schedule M-1 Reconciliation of income per books with income per return
Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$50,000

1	Net income per books	●	88,662.	7	Income recorded on books this year not included in this return. Attach sch.	●	
2	Federal income tax	●		8	Deductions in this return not charged against book income this year.	●	
3	Excess of capital losses over capital gains	●			Attach schedule.	●	
4	Income not recorded on books this year.	●		9	Total. Add line 7 and line 8		
	Attach schedule.	●		10	Net income per return.		
5	Expenses recorded on books this year not deducted in this return. Attach schedule	●			Subtract line 9 from line 6.		88,662.
6	Total. Add line 1 through line 5.		88,662.				

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

California Copy
Schedule of Contributors

▶ **Attach to Form 990, Form 990-EZ, or Form 990-PF**

OMB No. 1545-0047

2012

Name of the organization LAKE TAHOE COMMUNITY COLLEGE FOUNDATION	Employer identification number 68-0383810
----------------------------------------------------------------------------	-----------------------------------------------------

Organization type (check one):

Filers of:

Form 990 or 990-EZ

Section:

- 501(c)(3) (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization

Form 990-PF

- 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules

- For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc. purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc. purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc. contributions of \$5,000 or more during the year. ▶ \$ _____

Caution: An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it **must** answer 'No' on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2, of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990EZ, Schedule B (Form 990, 990-EZ, or 990-PF) (2012) **or 990-PF.**

Name of organization LAKE TAHOE COMMUNITY COLLEGE FOUNDATION	Employer identification number 68-0383810
------------------------------------------------------------------------	-----------------------------------------------------

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BOYS AND GIRLS CLUB OF LAKE TAHOE P.O. BOX 17864 SOUTH LAKE TAHOE, CA 96151	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II if there is a noncash contribution.)</small>
2	CAMP RICHARDSON RESORT P.O. BOX 9028 SOUTH LAKE TAHOE, CA 96158	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II if there is a noncash contribution.)</small>
3	ALBERTA CROOK P.O. BOX 10095 LAHAINA, HI 96761	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II if there is a noncash contribution.)</small>
4	JESSICA LEDBETTER 575 STATE ROUTE 88 GARDNERVILLE, NV 89410	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II if there is a noncash contribution.)</small>
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II if there is a noncash contribution.)</small>
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II if there is a noncash contribution.)</small>

DRAFT

Name of organization

Employer identification number

LAKE TAHOE COMMUNITY COLLEGE FOUNDATION

68-0383810

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	N/A		

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Name of organization: LAKE TAHOE COMMUNITY COLLEGE FOUNDATION
 Employer identification number: 68-0383810

Part III Exclusively religious, charitable, etc, individual contributions to section 501(c)(7), (8) or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry.

For organizations completing Part III, enter total of *exclusively* religious, charitable, etc, contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) \$ N/A
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	N/A		

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

IF PAID ELECTRONICALLY: DO NOT FILE THIS FORM

WHERE TO FILE: Using black or blue ink, make check or money order payable to the 'Franchise Tax Board.' Write the corporation number or FEIN and '2012 FTB 3539' on the check or money order. Detach form below. Enclose, but **do not** staple, payment with form and mail to:

**FRANCHISE TAX BOARD
PO BOX 942857
SACRAMENTO CA 94257-0531**

Make all checks or money orders payable in U.S. dollars and drawn against a U.S. financial institution.

WHEN TO FILE: **Calendar year corporations – File and Pay by March 15, 2013**
Fiscal year filers – See instructions
Employees' trust and IRA – File and Pay by April 15, 2013
Calendar year exempt organizations – File and Pay by May 15, 2013

When the due date falls on a weekend or holiday, the deadline to file and pay without penalty is extended to the next business day.

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ONLINE SERVICES: Corporations can make payments online with Web Pay for Businesses. After a one-time online registration, corporations can make an immediate payment or schedule payments up to a year in advance. Go to ftb.ca.gov for more information.

----- DETACH HERE ----- IF NO PAYMENT IS DUE OR PAID ELECTRONICALLY, DO NOT MAIL THIS FORM ----- DETACH HERE -----

CAUTION: You may be required to pay electronically, see instructions.

TAXABLE YEAR	Payment for Automatic Extension for Corps and Exempt Orgs	CALIFORNIA FORM
2012		3539 (CORP)

0463508	LAKE 68-0383810	12	FORM 3
TYB 07-01-12	TYE 06-30-13		
LAKE TAHOE COMMUNITY COLLEGE FOUNDATION			
KINDRED MURILLO			
ONE COLLEGE DRIVE			
SOUTH LAKE TAHOE CA 96150			
530-541-4660			
TOTAL PAYMENT AMT			10.

LAKE TAHOE COMMUNITY COLLEGE FOUNDATION

68-0383810

Statement 1
Form 199, Part II, Line 7
Other Income

Income from Special Events..... \$ 17,208.
 Total \$ 17,208.

Statement 2
Form 199, Part II, Line 11
Compensation of Officers, Directors, Trustees and Key Employees

Current Officers:

<u>Name and Address</u>	<u>Title and Average Hours Per Week Devoted</u>	<u>Compen- sation</u>	<u>Contri- bution to EBP & DC</u>	<u>Expense Account/ Other</u>
DIANE BISBEE ONE COLLEGE DRIVE SOUTH LAKE TAHOE, CA 96150	Trustee 1.00	\$ 0.	\$ 0.	\$ 0.
PETER BOSTIC ONE COLLEGE DRIVE SOUTH LAKE TAHOE, CA 96150	Executive Dir. 25.00	0.	0.	0.
DR DEANNA BROTHERS ONE COLLEGE DRIVE SOUTH LAKE TAHOE, CA 96150	Trustee 1.00	0.	0.	0.
BOB CLIFF ONE COLLEGE DRIVE SOUTH LAKE TAHOE, CA 96150	Trustee 1.00	0.	0.	0.
KERRY DAVID ONE COLLEGE DRIVE SOUTH LAKE TAHOE, CA 96150	Trustee 1.00	0.	0.	0.
JEFF DEFRANCO ONE COLLEGE DRIVE SOUTH LAKE TAHOE, CA 96150	Treasurer 2.50	0.	0.	0.
ADELE LUCAS ONE COLLEGE DRIVE SOUTH LAKE TAHOE, CA 96150	Trustee 1.00	0.	0.	0.
JANET SMITH ONE COLLEGE DRIVE SOUTH LAKE TAHOE, CA 96150	Trustee 1.00	0.	0.	0.
JEFF TILLMAN ONE COLLEGE DRIVE SOUTH LAKE TAHOE, CA 96150	Trustee 1.00	0.	0.	0.
JOE TILLSON ONE COLLEGE DRIVE SOUTH LAKE TAHOE, CA 96150	Trustee 1.00	0.	0.	0.

LAKE TAHOE COMMUNITY COLLEGE FOUNDATION

68-0383810

Statement 2 (continued)
Form 199, Part II, Line 11
Compensation of Officers, Directors, Trustees and Key Employees

Current Officers:

Name and Address	Title and Average Hours Per Week Devoted	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
LEON MALMED ONE COLLEGE DRIVE SOUTH LAKE TAHOE, CA 96150	Trustee 1.00	\$ 0.	\$ 0.	\$ 0.
ROBERT NOVASEL ONE COLLEGE DRIVE SOUTH LAKE TAHOE, CA 96150	President 1.00	0.	0.	0.
KINDRED MURILLO ONE COLLEGE DRIVE SOUTH LAKE TAHOE, CA 96150	Secretary 5.00	0.	0.	0.
MELONIE GUTTRY ONE COLLEGE DRIVE SOUTH LAKE TAHOE, CA 96150	Executive Dir. 40.00	0.	0.	0.
Total		<u>\$ 0.</u>	<u>\$ 0.</u>	<u>\$ 0.</u>

Statement 3
Form 199, Part II, Line 17
Other Expenses

Advertising and Promotion.....	\$ 673.
GRANT EXPENSES.....	556.
Investment management fees.....	2,487.
MISCELLANEOUS.....	225.
Office Expenses.....	2,206.
Other fees.....	3,048.
Printing and Publications.....	498.
RESTRICTED PROGRAM EXPENSE.....	12,162.
Total	<u>\$ 21,855.</u>

Statement 4
Form 199, Schedule L, Line 9
Other Investments

.....	\$ 1,173,697.
Total	<u>\$ 1,173,697.</u>

Statement 5
Form 199, Schedule L, Line 12
Other Assets

Prepaid Expenses and Deferred Charges.....	2,625.
Total	<u>\$ 2,625.</u>

Statement 6
Form 199, Schedule L, Line 18
Other Liabilities

Deferred Revenue.....	14,075.
Total	<u>\$ 14,075.</u>

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IN

MAIL TO:
 Registry of Charitable Trusts
 P.O. Box 903447
 Sacramento, CA 94203-4470
 Telephone: (916) 445-2021

WEBSITE ADDRESS:
<http://ag.ca.gov/charities/>

ANNUAL REGISTRATION RENEWAL FEE REPORT TO ATTORNEY GENERAL OF CALIFORNIA

Sections 12586 and 12587, California Government Code
 11 Cal. Code Regs. sections 301-307, 311 and 312

Failure to submit this report annually no later than four months and fifteen days after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of \$800, plus interest, and/or fines or filing penalties as defined in Government Code Section 12586.1. IRS extensions will be honored.



State Charity Registration Number <u>CT 39726</u> <u>LAKE TAHOE COMMUNITY COLLEGE FOUNDATION</u> <small>Name of Organization</small> <u>ONE COLLEGE DRIVE</u> <small>Address (Number and Street)</small> <u>SOUTH LAKE TAHOE, CA 96150</u> <small>City or Town State ZIP Code</small>	Check if: <input type="checkbox"/> Change of address <input type="checkbox"/> Amended report Corporate or Organization No. <u>463508</u> Federal Employer ID No. <u>68-0383810</u>
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ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, 311 and 312)
 Make Check Payable to Attorney General's Registry of Charitable Trusts

Gross Annual Revenue	Fee	Gross Annual Revenue	Fee	Gross Annual Revenue	Fee
Less than \$25,000	0	Between \$100,001 and \$250,000	\$50	Between \$1,000,001 and \$10 million	\$150
Between \$25,000 and \$100,000	\$25	Between \$250,001 and \$1 million	\$75	Between \$10,000,001 and \$50 million	\$225
				Greater than \$50 million	\$300

PART A – ACTIVITIES

For your most recent full accounting period (beginning 7/01/12 ending 6/30/13) list:
 Gross annual revenue \$ 227,659. Total assets \$ 1,400,811.

PART B – STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT

Note: If you answer 'yes' to any of the questions below, you must attach a separate sheet providing an explanation and details for each 'yes' response. Please review RRF-1 instructions for information required.

	Yes	No
1 During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof either directly or with an entity in which any such officer, director or trustee had any financial interest?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2 During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3 During this reporting period, did non-program expenditures exceed 50% of gross revenues?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4 During this reporting period, were any organization funds used to pay any penalty, fine or judgment? If you filed a Form 4720 with the Internal Revenue Service, attach a copy.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5 During this reporting period, were the services of a commercial fundraiser or fundraising counsel for charitable purposes used? If 'yes,' provide an attachment listing the name, address, and telephone number of the service provider.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6 During this reporting period, did the organization receive any governmental funding? If so, provide an attachment listing the name of the agency, mailing address, contact person, and telephone number.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7 During this reporting period, did the organization hold a raffle for charitable purposes? If 'yes,' provide an attachment indicating the number of raffles and the date(s) they occurred.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8 Does the organization conduct a vehicle donation program? If 'yes,' provide an attachment indicating whether the program is operated by the charity or whether the organization contracts with a commercial fundraiser for charitable purposes.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9 Did your organization have prepared an audited financial statement in accordance with generally accepted accounting principles for this reporting period?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Organization's area code and telephone number 530-541-4660
 Organization's e-mail address _____

I declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, it is true, correct and complete.

JEFF DEFRANCO <small>Signature of authorized officer</small>	TREASURER <small>Title</small>	
<small>Printed Name</small>	<small>Date</small>	