


## Yuba River Safety Enhancement Project

Sierra Gold Parks Foundation  
10791 E. Empire Street  
Grass Valley, CA 95945

Jesse Locks  
SGPF, Board President  
[Jesselocks@gmail.com](mailto:Jesselocks@gmail.com)  
(916) 548-7716

A handwritten signature in black ink, appearing to read "Jesse Locks", is centered within a rectangular frame.

## TAB A. ENTITY DESCRIPTION

- a. Sierra Gold Parks Foundation (SGPF) is a non-profit 501(C)3 organization that supports park-related educational activities and helps to preserve the natural and cultural resources of western Nevada County's State Parks – Empire Mine State Historic Park, Malakoff Diggins State Historic Park, and South Yuba River State Park. In 2019, Empire Mine Park Association, Friends of Malakoff Diggins, and South Yuba River Park Association merged into one foundation – Sierra Gold Parks Foundation – with the vision to provide for the health, inspiration and education of the people of California by helping preserve the State's extraordinary biological diversity, protecting its most valuable natural and cultural resources, and creating opportunities for high quality outdoor recreation.

- b. Responsible Principals

**Paige Haller, Sierra District Public Engagement and Education Manager**

Paige is a park professional specializing in partnerships, planning, and interpretation. She has worked for California State Parks for over six years, prior to that she served as the Executive Director at Anza-Borrego Foundation and Development Director for Leave No Trace Center for Outdoor Ethics.

**Sgt. Ryan Randar, Sierra District Supervising Ranger, South Yuba River SHP, Malakoff Diggins SHP and co-supervisor at Empire Mine SHP**

Sgt. Randar's entire career has been with the Sierra District. He is the supervisor for visitor services and park rangers at Bridgeport.

**Jeremy Gayton, Sierra District Park Maintenance Chief**

Jeremy has worked for California State Parks for eight years and oversees the maintenance staff and projects for the Sierra Gold Sector which includes South Yuba River SP, Malakoff Diggins SHP, and Empire Mine SHP.

**Jesse Locks, President, SGPF**

Jesse is a marketing, communications and multimedia specialist with extensive background in production and project management. She currently works as the Executive Director for the award-winning Nevada City Film Festival and as the Online Community Manager for the Presidio Trust in San Francisco.

- c. SGPF serves a broad range of individuals, organizations, and stakeholders. First and foremost, SGPF serves millions of annual visitors to western Nevada County's state parks. Visitors range from local residents to international travelers, students from schools across the state to underrepresented communities, along with our members and donors. SGPF also serves the local businesses and governments that receive substantial support through tourism spending and taxes. And finally, SGPF supports State Parks by providing critical funding for educational and interpretive needs.

## TAB B. COVID -19 IMPACTS

- a. COVID-19 negatively impacted SGPF as an organization due to the inability to staff Visitor Centers with volunteers which generate critical revenue for State Parks. SGPF

was also unable to hold major in-person fundraising events. This was all the while State Parks were experiencing record high visitation and struggling to keep up with the demand and impact on parks infrastructure.

- b. California State Parks overall have experienced revenue loss due to limitation of visitors and parking lot closures, in addition to staffing challenges. This has resulted in inability to collect concession sales, campaign reservation fees, day-use fees, special events during a time of the pandemic.
- c. During the pandemic State Parks experienced some of their highest number of visitors. These visitors specifically sought respite along the park's trail system and river crossings. This increase in visitors brought to light the need for 1. New or updated kiosks to dispense critical information in a variety of languages to visitors, 2. 24/7 access to contactless drinking water, 3. Updated trash receptacles at heavily trafficked South Yuba River crossings including Bridgeport and HWY 49, and 4. A changeable message sign (CMS) providing real-time safety, traffic, parking, and emergency communication.

#### TAB C. PROJECT DESCRIPTION

- a. Each project is located in the state parks of western Nevada County – Empire Mine SHP, Malakoff Diggins SHP, and South Yuba River SP.
  - 1. Six new and updated trail kiosks – (3) Bridgeport, (2) Hwy 49, (1) North Columbia Schoolhouse (which serves as an important location for locals and visitors looking for cell phone reception before heading into the river canyon) – will provide visitors with critical information regarding river and fire safety, emergency contacts, environmental impact, the need to protect the local watershed and the environment, and more, all in multiple languages. These signs, in addition to a CMS sign (to be placed at either HWY 49 across from the Willo or Pleasant Valley Road before the park) will provide consistency of message and information to help make for a better-informed visitor and park user, while helping emergency responders in time of crisis. State Parks will work with the South Yuba River Public Safety Cohort members to convey the group's summer visitor safety messaging and for emergency needs – fire, landslide, traffic, etc., - as well.
  - 2. Three new contactless water stations – one at Bridgeport near the Visitor Center, one at Empire Mine SHP and another at Malakoff Diggins SHP near the bathrooms - will provide critical access to safe drinking water and limit the impacts of single-use plastics. We believe installation of outdoor, vandal resistant, ADA compliant, and weather proofed freestanding water bottle filling stations will enhance the visitors experience at the parks and will reduce the transfer of contaminants from person to person, the use of plastic bottles, and the production of waste. We also believe that the installation of water bottle filling stations provides an opportunity to educate the public about plastic wastes and to highlight the green approach undertaken by State Parks. In addition, the installation of filling stations outdoors

will allow visitors access to clean drinking water whether or not the Sales Center or Park Offices are open.

3. Eight new updated trash receptacles at high impact river crossings – Bridgeport (4) and HWY 49 (4) - will help with proper waste storage versus the current garbage cans which are frequently filled with household garbage and vandalized. These new receptacles will also eliminate issues with wildlife, water quality and helping with park aesthetics.
4. Malakoff Diggins SHP is the only camping site in our three state parks in western Nevada County. Due to its remote location it has a heightened threat of fire. Upgrading to modern campground fire rings would lessen the possibility of an escaped campfire.
5. Project Timelines  
Summer 2023  
State Parks and SGPF are committed to having all of these projects finished by the end of summer – September 2023. Once materials are ordered and delivered, maintenance staff time will be set aside to build, remove and replace.
6. These projects directly respond to the negative impacts of COVID-19 by serving the non-traditional park user by providing clear guidance and support on how to recreate responsibly while also protecting against fire danger and negative environmental impacts.

#### TAB D. COMMUNITY BENEFIT

- a. These projects will promote equitable access to recreation by providing multilingual signs or universal symbolism to help non-English speakers feel welcome, reduce risk of injury, and limit environmental impact. The increase in signage opportunities helps with educating and engaging visitors around issues of fire resilience and environmental safety. These critical updates will help in providing a clean and welcoming visitor experience, that also encourages visitors to feel a sense of pride, respect and responsibility for local natural resources.

#### TAB E. LEVERAGING PARTNERSHIPS AND RESOURCES

- a. Funds from the Nevada County Outdoor Visitor Safety Fund will be leveraged with funds from the Sierra Gold Parks Foundation, a non-profit cooperating association of the Sierra Sector of California State Parks. In addition, the Sierra Sector will provide site preparation, installation, and on-going maintenance as needed.

#### TAB F. MANAGEMENT CAPACITY AND MEASURABLE OUTCOMES

a. State Parks will manage and implement these projects. Maintenance staff will once a year clean, remove graffiti, replace parts, etc., for the items purchased indefinitely or until they are replaced. SGPF and State Parks will maintain the CMS sign and store in a secure location during the off season. Success will be measured by a reduction of incidents and use of law enforcement, a reduction in garbage, and increased visitor knowledge about the trails and river.

State park volunteer hours are already measured and reported to the state annually. Within the information submitted volunteers will be asking about communication, impact, user experience, and safety messaging. SGPF will measure the effectiveness of the kiosks against this information and adjust accordingly. SGPF will also work with the South Yuba River Public Safety Cohort member to see if messaging impacted the number of incidents on the river. SGPF will work with SYRCL to measure how the new garbage cans impacted the end of summer clean up and with State Parks on how much garbage was diverted from the landfill. The water fountains provide information on the number of plastic bottles that are offset by their use. And park staff will measure the success of the fire rings based on the number of incidents over the summer. SGPF will submit an annual report on these areas.

#### TAB G. BUDGET AND FINANCIALS

- a. Total request - \$89,200
- b. Total equipment purchases are projected to be \$109,200. These figures are based upon similar equipment purchased at other State Parks. SGPF will contribute \$20,000 and State Parks has agreed to contribute a \$40,000 match to cover maintenance to install projects and an additional \$10,000 match from law enforcement to go towards the CMS sign.

**Attachment B: Line Item Budget****Nevada County Outdoor Visitor Safety Fund- Round #2 Grants Program**

Applicant Name: Sierra Gold Parks Foundation

Project Name: Yuba River Safety Enhancement Project

**Revenue**

Outdoor Visitor Safety Fund Request Amount	\$	\$89,200
Organization Funds	\$	\$20,000
Other Partner Funds*	\$	
State Funds*	\$	\$50,000
Other Federal Funds*	\$	
<b>TOTAL REVENUE</b>	<b>\$</b>	<b>159,200</b>

**Expense**

Salaries & Benefits	\$	\$40,000
Services & Supplies	\$	\$10,000
Contracts for Service Delivery*	\$	
Equipment Purchases*	\$	\$109,200
Other Expenses*	\$	
<b>TOTAL EXPENSE</b>	<b>\$</b>	<b>159,200</b>

**NET**    \$    0*\* Please describe any of the following:*Other Partners: SGPF will contribute \$20,000.State Funding: DPR will contribute a \$40,000 match to cover maintenance to install, and an additional \$10,000 to go toward the CMS sign.

Federal Funding: \_\_\_\_\_

Contracts for Service Delivery \_\_\_\_\_

Equipment Purchases    (6) Kiosk Kits - \$3500/ea    \_\_\_\_\_  
   (1) CMS Sign - \$24,000/ea    \_\_\_\_\_  
   (3) Water Stations - \$13,500/ea    \_\_\_\_\_  
   (8) Bear Proof Trash Receptacles - \$2200/ea    \_\_\_\_\_  
   (30) Fire Rings - \$610/ea    \_\_\_\_\_

Other Expenses

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Form 990

Department of the Treasury  
Internal Revenue Service

## Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public  
Inspection

A For the 2022 calendar year, or tax year beginning , 2022, and ending , 20		
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization <b>SIERRA GOLD PARKS FOUNDATION</b> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>18787 E EMPIRE ST</b> City or town, state or province, country, and ZIP or foreign postal code <b>GRASS VALLEY, CA 95945</b>	D Employer identification number <b>94-3204916</b> E Telephone number  G Gross receipts \$ <b>187,504</b>
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(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
J Website: <b>SIERRAGOLDPARKSFOUNDATION.ORG</b>		H(c) Group exemption number
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: <b>1994</b> M State of legal domicile: <b>CA</b>

## Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <b>SUPPORTS PARK RELATED EDUCATIONAL ACTIVITIES AND HELPS PRESERVE NATURAL AND CULTURAL RESOURCES FOR EMPIRE MINE, MALAKOFF DIGGINS AND SOUTH YUBA RIVER STATE PARKS.</b>		
	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	6
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	6
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	0
	6 Total number of volunteers (estimate if necessary)	6	
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 39,740	Current Year 41,455
	9 Program service revenue (Part VIII, line 2g)	38,024	69,186
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	5,178	6,340
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	18,215	17,867
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	101,157	134,848
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25)	0	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	112,748	136,200
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	112,748	136,200
19 Revenue less expenses. Subtract line 18 from line 12	(11,591)	(1,352)	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 626,821	End of Year 604,086
	21 Total liabilities (Part X, line 26)	878	1,085
	22 Net assets or fund balances. Subtract line 21 from line 20	625,943	603,001

## 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	ROBERT COATS		Date	
	Signature of officer			
Paid Preparer Use Only	ROBERT COATS, TREASURER		Date	
	Type or print name and title			
	Print/Type preparer's name GREGORY BARKER	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed PTIN P00850586
Firm's name BARKER ACCOUNTANCY CORP		Firm's EIN		
Firm's address PO BOX 640 CHICAGO PARK CA 95712		Phone no. 530-273-8531		

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

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2022)



**Part III** Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III ☐

1 Briefly describe the organization's mission:  
SUPPORTS PARK RELATED EDUCATIONAL ACTIVITIES AND HELPS PRESERVE NATURAL AND CULTURAL RESOURCES FOR EMPIRE MINE, MALAKOFF DIGGINS AND SOUTH YUBA RIVER STATE PARKS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

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

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

4a (Code: ) (Expenses \$ 58,664 including grants of \$ ) (Revenue \$ 901 )  
RESTRICTED DONATIONS AND EXPENSES

4b (Code: ) (Expenses \$ 36,066 including grants of \$ ) (Revenue \$ 69,186 )  
GIFT SHOPS

4c (Code: ) (Expenses \$ 22,105 including grants of \$ ) (Revenue \$ )  
DIRECT SUPPORT TO STATE PARKS

4d Other program services (Describe on Schedule O.)  
(Expenses \$ 3,385 including grants of \$ ) (Revenue \$ )

4e Total program service expenses 120,220

**Part IV** Checklist of Required Schedules

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

**Part IV** Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III. ....	22	X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J. ....	23	X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a. ....	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....	24d	
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I. ....	25a	X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I. ....	25b	X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part II. ....	26	X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III. ....	27	X
28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions, for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV. ....	28a	X
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV. ....	28b	X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV. ....	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. ....	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. ....	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I. ....	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II. ....	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I. ....	33	X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1. ....	34	X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....	35a	X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2. ....	35b	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2. ....	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI. ....	37	X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O. ....	38	X

**Part V** Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. ....	1a	4
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. ....	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? .....	1c	X

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a			X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a			X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	Organizations that may receive deductible contributions under section 170(c).				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a			X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8			
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b			
10	Section 501(c)(7) organizations. Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15			X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16			X
17	Section 501(c)(21) organizations. Did the trust, or any any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17			

**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 or note to any line in this Part VI ☒

**Section A. Governing Body and Management**

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

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

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

**Section C. Disclosure**

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

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records.

ROBERT COATS (530)264-7092, 14803 ECHO RIDGE ROAD, NEVADA CITY, CA 95959

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Check if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's current key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See instructions for the order in which to list the persons above.

☒ 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/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(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) STEVE SANCHEZ DIRECTOR	1.00	X						0	0	0
(2) HANK WESTON DIRECTOR	1.00	X						0	0	0
(3) RHEA WILLIAMSON VICE PRESIDENT	2.00			X				0	0	0
(4) SYD BROWN SECRETARY	3.00			X				0	0	0
(5) ROBERT COATS TREASURER	7.00			X				0	0	0
(6) JESSE LOCKS PRESIDENT	6.00			X				0	0	0
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below 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/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(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				
(15)											
(16)											
(17)											
(18)											
(19)											
(20)											
(21)											
(22)											
(23)											
(24)											
(25)											
1b	Subtotal										
c	Total from continuation sheets to Part VII, Section A										
d	Total (add lines 1b and 1c)								0	0	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

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

**Section B. Independent Contractors**

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

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

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

**Part VIII** Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns .....	1a				
	b	Membership dues .....	1b	70			
	c	Fundraising events .....	1c	15,380			
	d	Related organizations .....	1d				
	e	Government grants (contributions) ..	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	26,005			
	g	Noncash contributions included in lines 1a-1f .....	1g	\$ 15,380			
	h	Total. Add lines 1a-1f .....		41,455			
Program Service Revenue			Business Code				
	2a	GIFT SHOPS	900099	69,186	69,186		
	b						
	c						
	d						
	e						
	f	All other program service revenue .....					
	g	Total. Add lines 2a-2f .....		69,186			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) .....		6,340			6,340
	4	Income from investment of tax-exempt bond proceeds .....					
	5	Royalties .....					
	6a	Gross rents .....	(i) Real	(ii) Personal			
	b	Less: rental expenses ..	6b				
	c	Rental income or (loss)	6c				
	d	Net rental income or (loss) .....					
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
	b	Less: cost or other basis and sales expenses ..	7b				
	c	Gain or (loss) .....	7c				
	d	Net gain or (loss) .....					
	8a	Gross income from fundraising events (not including \$ 15,380 of contributions reported on line 1c). See Part IV, line 18 .....	8a	70,523			
	b	Less: direct expenses .....	8b	52,656			
	c	Net income or (loss) from fundraising events .....		17,867			17,867
	9a	Gross income from gaming activities. See Part IV, line 19 .....	9a				
	b	Less: direct expenses .....	9b				
	c	Net income or (loss) from gaming activities .....					
	10a	Gross sales of inventory, less returns and allowances .....	10a				
b	Less: cost of goods sold .....	10b					
c	Net income or (loss) from sales of inventory .....						
Miscellaneous Revenue			Business Code				
	11a						
	b						
	c						
	d	All other revenue .....					
	e	Total. Add lines 11a-11d .....					
12	Total revenue. See instructions .....			134,848	69,186	0	24,207



**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 or note to any line 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 domestic organizations and domestic governments. See Part IV, line 21 ...				
2 Grants and other assistance to domestic individuals. See Part IV, line 22 .....				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 ....				
4 Benefits paid to or for members .....				
5 Compensation of current officers, directors, trustees, and key employees .....				
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....				
7 Other salaries and wages .....				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) ..				
9 Other employee benefits .....				
10 Payroll taxes .....				
11 Fees for services (nonemployees):				
a Management .....				
b Legal.....				
c Accounting .....	11,109		11,109	
d Lobbying.....				
e Professional fundraising services. See Part IV, line 17 .				
f Investment management fees .....				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) ..	2,136		2,136	
12 Advertising and promotion .....	985	985		
13 Office expenses .....				
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 .....	2,735		2,735	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a DPR EXPENSES	22,105	22,105		
b GIFT SHOP EXPENSES	36,066	36,066		
c RESTRICTED PROGRAM EXPENSES	58,664	58,664		
d MEMBERSHIP EXPENSES	2,400	2,400		
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e ..	136,200	120,220	15,980	0
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 SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing .....	134,374	1	137,685
	2 Savings and temporary cash investments .....	384,717	2	136,894
	3 Pledges and grants receivable, net .....		3	
	4 Accounts receivable, net .....		4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) ....		6	
	7 Notes and loans receivable, net .....		7	
	8 Inventories for sale or use .....	40,703	8	29,907
	9 Prepaid expenses and deferred charges .....		9	
	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 .....	67,027	11	299,600
	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 .....		15	
16 Total assets. Add lines 1 through 15 (must equal line 33) .....	626,821	16	604,086	
Liabilities	17 Accounts payable and accrued expenses .....	878	17	1,085
	18 Grants payable .....		18	
	19 Deferred revenue .....		19	
	20 Tax-exempt bond liabilities .....		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D .....		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		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 .....	878	26	1,085
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions .....	545,320	27	543,493
	28 Net assets with donor restrictions .....	80,623	28	59,508
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds .....		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund .....		30	
	31 Retained earnings, endowment, accumulated income, or other funds .....		31	
	32 Total net assets or fund balances .....	625,943	32	603,001
	33 Total liabilities and net assets/fund balances .....	626,821	33	604,086

**Part XI** Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	134,848
2	Total expenses (must equal Part IX, column (A), line 25)	2	136,200
3	Revenue less expenses. Subtract line 2 from line 1	3	(1,352)
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	625,943
5	Net unrealized gains (losses) on investments	5	(21,590)
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 on Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	603,001

**Part XII** Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? ..... If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	X
b Were the organization's financial statements audited by an independent accountant? ..... If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? ..... If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	2c	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? .....	3a	X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits .....	3b	

SCHEDULE A  
(Form 990)

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.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public  
Inspection

Name of the organization

Employer identification number

SIERRA GOLD PARKS FOUNDATION

94-3204916

**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 12, 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 (Form 990).)
- 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 agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: \_\_\_\_\_
- 10 ☒ 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.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.
- b ☐ Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.
- c ☐ Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.
- d ☐ Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations .....
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.  
If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	49,400	36,002	168,205	59,300	111,978	424,885
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			69,601	38,024	69,186	176,811
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 .....	49,400	36,002	237,806	97,324	181,164	601,696
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.) .....						601,696

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 Amounts from line 6 .....	49,400	36,002	237,806	97,324	181,164	601,696
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .			7,086	5,178	6,340	18,604
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
c Add lines 10a and 10b .....			7,086	5,178	6,340	18,604
11 Net income from unrelated business activities not included on 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 VI.) .....						
13 Total support. (Add lines 9, 10c, 11, and 12.) .....	49,400	36,002	244,892	102,502	187,504	620,300
14 First 5 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**

15 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f)) .....	15	97.00 %
16 Public support percentage from 2021 Schedule A, Part III, line 15 .....	16	97.44 %

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f)) ...	17	3.00 %
18 Investment income percentage from 2021 Schedule A, Part III, line 17 .....	18	3.00 %
19a 33 1/3% support tests - 2022. 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	<input checked="" type="checkbox"/>	
b 33 1/3% support tests - 2021. 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 .....	<input type="checkbox"/>	
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ...	<input type="checkbox"/>	

**Part II**

Fundraising Events. Complete if the organization answered "Yes" on 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.

		(a) Event #1 <b>MINE WINE</b> (event type)	(b) Event #2 <b>HUMBUG DAY</b> (event type)	(c) Other events <b>NONE</b> (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts .....	69,294	1,229		70,523
	2 Less: Contributions .....				
	3 Gross income (line 1 minus line 2) .....	69,294	1,229		70,523
Direct Expenses	4 Cash prizes .....				
	5 Noncash prizes .....				
	6 Rent/facility costs .....	5,130			5,130
	7 Food and beverages .....	19,819	169		19,988
	8 Entertainment .....	1,400	625		2,025
	9 Other direct expenses .....	25,368	145		25,513
	10 Direct expense summary. Add lines 4 through 9 in column (d) .....				52,656
	11 Net income summary. Subtract line 10 from line 3, column (d) .....				17,867

**Part III**

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue .....				
	2 Cash prizes .....				
Direct Expenses	3 Noncash 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	<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. Subtract line 7 from line 1, column (d) .....				

9 Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_

a Is the organization licensed to conduct gaming activities in each of these states? .....

☐ Yes ☐ No

b If "No," explain: \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? .....

☐ Yes ☐ No

b If "Yes," explain: \_\_\_\_\_

**SCHEDULE O  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

Attach to Form 990 or Form 990-EZ.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2022**

**Open to Public  
Inspection**

Name of the organization

SIERRA GOLD PARKS FOUNDATION

Employer identification number

94-3204916

**01. Committee meeting documentation (Part VI, line 8b)**

BOARD MEETINGS ARE DOCUMENTED WITH WRITTEN MINUTES. COMMITTEE MEETING ARE NOT FORMALLY  
DOCUMENTED.

**02. Form 990 governing body review (Part VI, line 11)**

THE TAX RETURN IS NOT REVIEWED BY THE BOARD BEFORE SUBMITTAL.

**03. Conflict of interest policy compliance (Part VI, line 12c)**

THE DIRECTORS FILL OUT A FORM ANNUALLY TO IDENTIFY ANY POTENTIAL CONFLICTS OF INTEREST.

**04. Governing documents, etc, available to public (Part VI, line 19)**

THE TAX RETURNS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

Client Copy

**Statement of Program Service Accomplishments****2022** PG01

Name(s) as shown on return

Your Social Security Number

SIERRA GOLD PARKS FOUNDATION

94-3204916

**FORM 990-PART III(A)  
Statement of Service Accomplishment**

Statement #4

PROGRAM SERVICE CODE

PROGRAM SERVICE EXPENSES

\$3385

GRANTS AND ALLOCATIONS INCLUDED IN ABOVE EXPENSE

\$0

PROGRAM SERVICES REVENUE

\$0

**EXPLANATION**

OTHER PROGRAM EXPENSES

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