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Form **990** 

Department of the Treasury

## **Return of Organization Exempt From Income Tax**

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

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

OMB No 1545-0047 2008

Open to Public

	r the		lendar vea	r, or tax year beginning 10-01-200	18 and ending 09-30-2009	<u> </u>		Inspection
		pplicable		C Name of organization	oo and ending 05-50-200.	,	D Employer ider	ntification number
	dress ch	•	Please use IRS	Points of Light Foundation			65-020664:	L
_ □ Na	me cha	nae	label or print or	Doing Business As			E Telephone nu	mber
	tıal retu	-	type. See Specific			No.	(404) 979-2	900
_	mınatıc		Instruc- tions.	Number and street (or P O box if ma 600 Means Street NW Suite 210	il is not delivered to street addres	ss) Room/suite	<b>G</b> Gross receipts \$	31,392,474
Am	ended	return		City or town, state or country, and ZI Atlanta, GA 30318	P + 4	•		
Ap	plication	n pending		, manua, 5, 1 55525				
				ne and address of principal officer	•	H(a) Is thu	s a group return	
			Michell 600 Mi	e Nunn EANS STREET NW STE 210		affilia	tes?	⊤Yes 🔽 No
				TA,GA 30318		H(b) Are all	affiliates include	d?
			_					see instructions)
				) ( 3 ) ◀ (insert no )	r   527	H(c) Grou	p exemption num	nber ►
J W	ebsite	e: F www	v poıntsoflı	ght org				
<b>К</b> Тур	e of org	ganızatıon	✓ Corporat	ion		<b>L</b> Year of fo	rmation 1990 <b>M</b>	State of legal domicile GA
Pa		Sumr						
	1	THEPR	IMARY PU	e organization's mission or most :   RPOSE OF THE POINTS OF LIG   HANGES THE WORLD	-	SPIRE, EQUI	P, AND MOBILI	ZE PEOPLE TO TAKE
ဥ		ACTION	V THAT CI	HANGES THE WORLD				
Governance								
<u>₹</u>	,	Charlet	hia hay <b>b</b> F	6+b		-f +b	250/ of the page	
			·	if the organization discontinued				
න් ග	3			nembers of the governing body (P				
Activities	4			ndent voting members of the gove		)		129
춫	5			nployees (Part V, line 2a)				
ă	6			llunteers (estimate if necessary) ted business revenue from Part V				
		-		7a 7b				
	B	Net unit	erateu busi	ness taxable income from Form 9	Deia	or Year	Current Year	
	8	Contrib	outions and	d grants (Part VIII, line 1h) .		PIIO	23,288,662	25,094,789
9	9			revenue (Part VIII, line 2g)			6,568,968	6,145,117
Ravenue	10			me (Part VIII, column (A), lines 3		802,080	-5,573	
2	11			art VIII, column (A), lines 5, 6d,			002,000	0
	12		•	dd lines 8 through 11 (must equa		•		
				<u> </u>			30,659,710	31,234,333
	13			ar amounts paid (Part IX, column			9,941,700	12,549,899
	14			or for members (Part IX, column (A				0
8	15	Salarıe 10)	s, other co	ompensation, employee benefits (	Part IX, column (A), lines 5	;-	8,396,969	8,507,792
Expenses	16a	•	sional fund	raising fees (Part IX, column (A),		, ,	55,252	
ž	Ь	Total fur	ndraising exp	enses (Part IX, column (D), line 25) • 72			·	
Ш	17			(Part IX, column (A), lines 11a-1		18,023,416	9,742,558	
	18			Add lines 13–17 (must equal Pari			36,362,085	30,855,501
	19	Revenu	ue less exp	penses Subtract line 18 from line	12		-5,702,375	378,832
<u>광</u>						Beginni	ng of Year	End of Year
and Table	20	Totala	ssets (Pai	rt X, line 16)			14,020,086	12,256,582
Net Assets or Fund Balances	21			Part X, line 26)			10,062,185	7,919,849
2 E	22		-	d balances Subtract line 21 from			3,957,901	4,336,733
Pa	rt II	Signa	ature Blo	ock				
Sigr Her	1	Under per and believed with the second secon	enalties of peef, it is true, *  **  ature of office	erjury, I declare that I have examined the correct, and complete Declaration of pre		d on all informati I		
			or print nam					
		Preparer's			s	Check If	Preparer's identify (see instructions)	ring number
Paid	arer <sup>i</sup> c		<u> </u>	- L CDANT TUODATTOWN	(	empolyed 🕨 🦵		
Use (	arer's Onlv	ıf self-em		<u> </u>			EIN 🕨	
J J G 1	J.⊓y	address,	and ZIP + 4	1100 PEACHTREE ST STE 1200			Dhone no 1 / / /	14) 220 2000
				ATLANTA, GA 30309			Phone no 🕨 (40	
May	the IR	S discus	s this retu	rn with the preparer shown above?	(see instructions)			▼ Yes

Pari	Statement of Program Service Accomplishments (see instructions.)  Briefly describe the organization's mission
Point redef organ	of Light Institute inspires, equips and mobilizes people to take action that changes the world. The Institute has a global focus to e volunteerism and civic engagement for the 21st century, putting people at the center of community problem solving. We are zed to innovate, incubate and activate new ideas that help people act upon their power to make a difference. Points of Light Institute es dynamic business units that share our mission. HandsOn Network (the largest volunteer network in the U.S.), MissionFish and the ncubator, which includes generationOn (a youth volunteer division), AmeriCorps Alums, and global and corporate volunteerism.
2	Old the organization undertake any significant program services during the year which were not listed on
	he prior Form 990 or 990-EZ?
3	Old the organization cease conducting, or make significant changes in how it conducts, any program services?
4	Describe the exempt purpose achievements for each of the organization's three largest program services 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 illocations to others, the total expenses, and revenue, if any, for each program service reported
4a	(Code ) (Expenses \$ 2,564,656 including grants of \$ 429,050) (Revenue \$ 367,452)  POINTS OF LIGHT INSTITUTE POINTS OF LIGHT INSTITUTE CELEBRATES PEOPLE CHANGING THE WORLD THROUGH SERVICE THROUGH ROBUST RECOGNITION AND MARKETING PROGRAMS MILLIONS OF PEOPLE GIVE THEIR TIME, TALENT AND ENERGY TO HELP STRENGTHEN COMMUNITIES AROUND THE WORLD OUR VOLUNTEERS RANGE FROM CHILDREN TO OLDER ADULTS, TO BUSINESSES AND COMMUNITY ORGANIZATIONS, AND ALL SHARE IN COMMON THE ACT OF CHOOSING TO MAKE A DIFFERENCE. IT IS THROUGH THEIR STORIES THAT PEOPLE ARE INSPIRED TO SERVE AND BEGIN TO RECOGNIZE THEIR PERSONAL POWER TO TRANSFORM THEMSELVES AND THE WORLD AROUND THEM. WE RECOGNIZED OVER 300,000 PEOPLE FOR THEIR VOLUNTEER AND COMMUNITY SERVICE WORK INDIVIDUALS AND ORGANIZATIONS WERE RECOGNIZED THROUGH PRESIDENTIAL VOLUNTEER SERVICE AWARDS (PVSA), NATIONAL VOLUNTEER WEEK, CORPORATE ENGAGEMENT AWARD OF EXCELLENCE AND THROUGH OUR DAILY POINT OF LIGHT AWARDS. WE ALSO CREATED CUSTOMIZED CORPORATE RECOGNITION PROGRAMS INCLUDING L'OREAL WOMEN OF WORTH AND CLIFFORD'S BE BIG THROUGH SCHOLASTIC. WE ALSO WORKED WITH SEVERAL CORPORATIONS ON MARKETING CAMPAIGNS SUCH AS NIKE GAMECHANGERS AND STARBUCKS "I'M IN" PLEDGE TO SERVICE.
4b	(Code ) (Expenses \$ 11,399,507 Including grants of \$ 2,983,315) (Revenue \$ 1,617,509)  HANDS ON NETWORK HANDS ON NETWORK, THE VOLUNTEER-FOCUSED ARM OF POINTS OF LIGHT INSTITUTE, IS THE LARGEST VOLUNTEER NETWORK IN THE NATION AND INCLUDES 250 HANDS ON ACTION CENTERS IN 16 COUNTRIES THE NETWORK INCLUDES MORE THAN 70,000 CORPORATE, FAITH AND NON-PROFIT ORGANIZATIONS THAT ARE ANSWERING THE CALL TO SERVE AND CREATING SCALED IMPACT IN 2009, HANDS ON THE NETWORK DELIVERED APPROXIMATELY 30 MILLION HOURS OF VOLUNTEER SERVICES WITH A MARKET VALUE OF \$626 MILLION HANDS ON NETWORK ENGAGED 5 MILLION VOLUNTEERS AND VOLUNTEER LEADERS SUPPORTING THEIR LOCAL COMMUNITIES HANDS ON NETWORK PROVIDED 10 MILLION INDIVIDUALS AND NON-PROFIT, GOVERNMENT AND CORPORATIONS WITH 'HOW-TO' TOOLKITS AND MARKETING RESOURCES IN SUPPORT OF THEIR VOLUNTEER EFFORTS THROUGH SIGNATURE EVENTS SUCH AS MAKE A DIFFERENCE DAY, MLK DAY AND NATIONAL VOLUNTEER WEEK WE MOBILIZED MILLIONS WITH 21ST CENTURY TECHNOLOGY AND PROVIDED HUNDREDS OF ORGANIZATIONS WITH VOLUNTEER MANAGEMENT SOFTWARE TO TRACK VOLUNTEERS AND COMMUNITY PROJECTS
4c	(Code ) (Expenses \$ 12,450,745 Including grants of \$ 9,084,609 ) (Revenue \$ 4,160,156 )  MISSIONFISH Missionfish is a social enterprise of Points of Light that provides people with a way to use their purchasing power to support causes that matter to them. In partnership with eBay, Missionfish enables people to designate a portion of their online sales and purchases to charity. Since 2003, more than \$162 million charitable dollars have been raised for over 22,000 nonprofits worldwide through Missionfish.
	(Code ) (Expenses \$ 670,865 including grants of \$ 52,925 ) (Revenue \$ 0 ) CIVIC INCUBATOR
4d	Other program services (Describe in Schedule O ) (Expenses \$ 670,865 including grants of \$ 52,925 ) (Revenue \$ 0 )
4e	Total program service expenses▶\$ 27,085,773 (Must equal Part IX, Line 25, column (B).)

Part IV	Checklist of	Required	Schedules
	CHCCKHSCOL	ive quii e u	Julicadios

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where 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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII .	12	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b	Yes	
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, Part II	15	Yes	
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, Part III	16		No
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17	Yes	
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Νo
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No
21	Did the organization report more than \$5,000 on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Νo
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule  J	23	Yes	
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 questions 24b-24d and complete Schedule K. If "No," go to question 25	24a		No
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No

### Part IV Checklist of Required Schedules (Continued)

			Yes	No
8	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part			
		28a		No
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		Νο
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c		No
9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
0	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
1	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
4	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
5	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		Νο
6	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		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No

orm	990 (2008)			Page
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
	1a 83			
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
_	<b>1b</b> 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1c	Yes	
2a	gaming (gambling) winnings to prize winners?		162	
Za	Statements filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
	<b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2Ь	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		No
Ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country ►UK			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νο
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		Νο
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).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		No
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		No
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
•	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		Νο
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νο
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		No
9	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			

12b

## Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

	Section	Α.	Governing	Body	and	Manag	jement
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	<u> </u>		Yes	No			
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, $pr\infty ess$ , or changes in Schedule O. See instructions.						
1a	Enter the number of voting members of the governing body 1a 24						
Ь	Enter the number of voting members that are independent 1b 24						
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		Νο			
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νο			
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νο			
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νο			
6	Does the organization have members or stockholders?	6		Νο			
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νο			
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νο			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following						
а	The governing body?	8a	Yes				
b	Each committee with authority to act on behalf of the governing body?	8b	Yes				
9a	Does the organization have local chapters, branches, or affiliates?	9a	Yes				
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b	Yes				
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	Yes				
11	11 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						
Se	ction B. Policies						
			Yes	No			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes				
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes				
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes				
13	Does the organization have a written whistleblower policy?	13	Yes				
14		13					
15	Does the organization have a written document retention and destruction policy?	14	Yes				
	Does the organization have a written document retention and destruction policy?						
	Did the process for determining compensation of the following persons include a review and approval by						
а	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	14	Yes				
а	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. The organization's CEO, Executive Director, or top management official?	14 15a	Yes				
a b	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. The organization's CEO, Executive Director, or top management official?	14 15a	Yes	No			
a b 16a	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. The organization's CEO, Executive Director, or top management official?	14 15a 15b	Yes	No			
a b 16a b	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. The organization's CEO, Executive Director, or top management official?	15a 15b	Yes	No			
a b 16a b	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. The organization's CEO, Executive Director, or top management official?	15a 15b 16a	Yes Yes Yes				

- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website. Upon request
- 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 See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization 
  KRISTINA TECCE

600 MEANS ST NW STE 210 ATLANTA, GA 30318 (404) 556-5937

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

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

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

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

Check this box if the organization did not compensate any officer, director, trustee or key employee										
		<b>(C)</b> Position (check all that apply)			(D)	(5)	<b>(F)</b> Estimated			
(A) Name and Title	(B) Average hours per week	x <u>I</u> ndividual	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	amount of other compensation from the organization and related organizations
Neil Bush TRUSTEE	5 0	Х						0	0	0
Jean Case TRUSTEE	5 0	Х						0	0	0
Raymond G Chambers TRUSTEE	5 0	Х						0	0	0
STEVE CRANFORD TRUSTEE	5 0	Х						0	0	0
Jım Geiger TRUSTEE	5 0	Х						0	0	0
JOHN GROMPERTS TRUSTEE	5 0	Х						0	0	0
JEFFREY K HAIDET TRUSTEE	5 0	Х						0	0	0
MARIAN L HEARD TRUSTEE	5 0	X						0	0	0
JEFF HOFFMAN TRUSTEE	5 0	X						0	0	0
AJ JOHNSON TRUSTEE	5 0	Х						0	0	0
MICHAEL KAY TRUSTEE	5 0	Х						0	0	0
PATRICE KEEGAN TRUSTEE	5 0	Х						0	0	0
SHERRY LANSING TRUSTEE	5 0	X						0	0	0
KATHERINE LAUDERDALE TRUSTEE	5 0	Х						0	0	0
SCOTT LORENZ TRUSTEE	5 0	Х						0	0	0
J BRADY LUM TRUSTEE	5 0	Х						0	0	0
DIANE MELLEY TRUSTEE	5 0	Х						0	0	0

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

		<b>(C)</b> Position (check all that apply)						(D)	(E)	<b>(F)</b> Estimated
( <b>A</b> ) Name and Title	(B) Average hours per week	x <u>I</u> ndividual	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	( <b>D)</b> Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	amount of other compensation from the organization and related organizations
BERNARD J MILANO TRUSTEE	5 0	Х						0	0	(
BRAD SHAW TRUSTEE	5 0	Х						0	0	(
DR JUDITH AM SMITH TRUSTEE	5 0	Х						0	0	(
SILDA A WALL TRUSTEE	5 0	Х						0	0	(
TERRY WILLIAMS TRUSTEE	5 0	Х						0	0	(
SENATOR HARRIS WOFFORD TRUSTEE	5 0	x						0	0	(
MARILEE CHINNICI- ZUERCHER TRUSTEE	5 0	Х						0	0	C
MARCIA BULLARD TRUSTEE	5 0	Х						0	0	(
Tracy Hoover COS	55 0			х				147,398	0	(
Mendith Rentz COO	55 0			х				131,960	0	(
Michelle Nunn CEO	55 0			х				197,506	0	(
KRISTINA TECCE CFO	55 0			х				154,007	0	(
Amy Smith President (HON)	55 0					х		144,422	0	(
Megan McCamey President, CI	55 0					х		117,319	0	(
Sean Milliken President, MF	55 0					х		124,022	0	(
Oktay Dogramacı	55 0					х		131,032	0	(
Andrew Drake	55 0					х		129,712	0	(
1b Total						_		1,277,378	0	0

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ►14

			Yes	NO
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes,"</i> complete Schedule <i>J</i> for such individual	3		No
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	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule I for such person	5		No

#### **Section B. Independent Contractors**

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
The August Jackson Company 7830 Old Georgetown Road 3rd fl Bo BETHESDA, MD 20814	Production Mgmt	766,341
MN Technology PO Box 481 OAKTON, VA 22124	Computer Technology	623,944
SMG 747 Howard Street SAN FRANCISCO, CA 94103	Facility Management	350,399
NETDESQ 42879 Lindsey Heights Place ASHBURN, VA 20148	Web Technology	318,540
The Maverick Group 356 Brady Place ALPHARETTA, GA 30004	Production company	303,000
3. Total number of independent contractors (including those in 1) who received more than s	100 000 in compensation	

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization ►13

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	( <b>D)</b> Revenue excluded from tax under sections 512,513,or 514
3 22	1a	Federated campaigns 1a					
and other similar amounts	b	Membership dues 1b	2,912				
ا ≩ٍّ؞ُ	c	Fundraising events 1c					
: <del>`</del>	d	Related organizations 1d					
?≝	e		4,238				
{·፟፟፟፟፟	f	All other contributions, gifts, grants, and <b>1f</b> 18,417	 7.639	ł			
<u> 2</u>	•	similar amounts not included above					
} ॗ	g	Noncash contributions included in					
[ 말	h	Innes 1a-1f \$ <b>Total.</b> Add lines 1a-1f	▶	25,094,789			
) re							
e l	_	Business C					
Lex	2a	TRAINING & CONSULTING 9	00,099	462,039	462,039		
<u> 2</u> 28	b	CONFERENCES 9	00,099	1,155,470	1,155,470		
95	c	MISSIONFISH 9	00,099	4,160,156	4,160,156		
<u>.</u>	d	CERTIFICATE FEES 99	00,099	367,452	367,452		
<u>"</u>	e						
<u>ē</u>	f	All other program service revenue					
Program Service Revenue	_	Total Addings 25 26		e 44= · · ·			
	g 2	Total. Add lines 2a-2f	+	6,145,117			
	3	Investment income (including dividends, interest	<u>.</u>	45,317			45,317
		and other similar amounts)		13,317			+3,31.
	4 5		•	0			
	3	(i) Real (ii) Person		, and the second			
	6a	Gross Rents (I) Real (II) Person	lai				
	ь	Less rental					
	_	expenses Rental income					
	С	or (loss)					
	d	Net rental income or (loss)	<b>P</b>				
		(i) Securities (ii) O the	r				
	7a	Gross amount 107,251 from sales of					
		assets other than inventory					
	b	Less cost or 158,141 other basis and					
		sales expenses					
	С	Gain or (loss) -50,890					
	d	Net gain or (loss)	. 🏲	-50,890			-50,890
	8a	standard sta					
<u> </u>	ь	Less direct expenses b					
;	С	Net income or (loss) from fundraising events	<b> -</b>	0			
	9a	Gross income from gaming activities See Part IV, line 19					
	ь	Less direct expenses b					
	c	·	.►	О			
-	10a	Gross sales of inventory, less returns and allowances .					
	Ь	Less cost of goods sold b					
	c	Net income or (loss) from sales of inventory	<b>-</b>	0			
ŀ		Miscellaneous Revenue Business Co					
ŀ	11a	543,1133					
	ь						
	C	A II ohlan navanis					
	d	All other revenue		0			
	e 12	Total Add lines 11a-11d		31,234,333	6,145,117		-5,573
	12	<b>Total Revenue.</b> Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e	<b> </b>	31,234,333	5,173,117		-5,57.

## Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

A	Section 501(c)(3) and 501(c)(4) organizations m Il other organizations must complete column (A) but are not required to			(D).	
Do no	ot include amounts reported on lines 6b, p, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	9,340,670	9,340,670		<u> </u>
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	3,209,229	3,209,229		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	677,912	341,699	336,213	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	19,808	19,808		
7	Other salaries and wages	6,737,933	5,235,771	1,126,303	375,859
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	129,635	97,584	25,498	6,553
9	Other employee benefits	364,076	252,938	66,091	45,047
10	Payroll taxes	578,428	435,419	113,771	29,238
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	475,385	409,117	66,268	
С	Accounting	140,156		140,156	
d	Lobbying	0			
е	Professional fundraising See Part IV, line 17	55,252			55,252
f	Investment management fees	0			
g	Other	5,922,751	5,441,664	349,650	131,437
12	Advertising and promotion	0			
13	Office expenses	1,303,081	920,351	367,506	15,224
14	Information technology	0			
15	Royalties	0			
16	Occupancy	766,069	539,572	205,416	21,081
17	Travel	751,166	596,730	113,427	41,009
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	50,000	39,720	7,550	2,730
20	Interest	118,628	118,628		
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	33,102	24,832	6,809	1,461
23 24	Insurance	61,280	43,281	17,283	716
а	MISC EXPENSES	120,940	18,760	102,180	
a b		120,540	10,730	102,100	
c					
d					
e f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	30,855,501	27,085,773	3,044,121	725,607
26	Joint Costs. Check here F if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	30,033,301	21,003,113	3,074,121	723,007

Pa	rt X	Balance Sheet				<u> </u>	~g~	
				(A) Beginning of year		-	-	
	1	Cash—non-interest-bearing		2,491,011	1		1,750,081	
	2	Savings and temporary cash investments	•	4,072,750	2		4,107,919	
	3	Pledges and grants receivable, net		6,578,940	3	•	4,872,112	
	4	Accounts receivable, net		126,754	4		1,135,867	
	5	Receivables from current and former officers, directors, trustees, other related parties   Complete Part II of Schedule L			5			
	6	Receivables from other disqualified persons (as defined under sec persons described in section 4958(c)(3)(B) Complete Part II of Sc			6			
	7	Notes and loans receivable, net			7			
ets	8	Inventories for sale or use			8			
88	9	Prepaid expenses and deferred charges		444,335	9		136,635	
⋖	10a	ı	<b>10a</b> 1,665,594					
	b	Less accumulated depreciation Complete Part VI of	<b>10b</b> 1,411,626	306,296	10c		253,968	
	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			15			
	16	Total assets. Add lines 1 through 15 (must equal line 34)		14,020,086		1:	2 256 582	
	17	Accounts payable and accrued expenses .	•	3,669,371	17			
	18	Grants payable		5,555,571	18		4, 100,000	
	19	Deferred revenue		1,034,434	_		1 763 353	
				1,004,404			1,700,000	
Liabilities 5	20	Tax-exempt bond liabilities			20			
	21 22	Escrow account liability <i>Complete Part IV of Schedule D</i> Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			21			
		persons Complete Part II of Schedule L		22				
	23	Secured mortgages and notes payable to unrelated third parties		1,965,626	_		1,415,626	
	24	Unsecured notes and loans payable			24	2 4,1 3 4,8 4,8 4 1,1 5 3 7 3 8 7 4 5 6 12,2 7 4,1 8 9 1,7 0 1 1 2 3 1,4 4 5 5 5 6 7,9 7 -2,8 8 2,7 9 4,3 0 1 1 22 3 4,3		
	25	Other liabilities Complete Part X of Schedule D		3,392,754	25		585,270	
	26	Total liabilities. Add lines 17 through 25		10,062,185	-		-	
w о т w т Assets or Fund Balances Liabilities Assets		Organizations that follow SFAS 117, check here ► ✓ and comple through 29, and lines 33 and 34.	te lines 27				, , , , , , , , , , , , , , , , , , , ,	
ă	27	Unrestricted net assets		-5,129,701	27	-:	2.842.371	
<u>छ</u>	28	Temporarily restricted net assets		4,774,081	28			
<u> </u>	29	Permanently restricted net assets		4,313,521	29			
Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ► and lines 30 through 34.	complete	1,010,021			1,002,000	
ō	30	Capital stock or trust principal, or current funds			30			
	31	Paid-in or capital surplus, or land, building or equipment fund			31			
Š	32	Retained earnings, endowment, accumulated income, or other fund			32			
	33	Total net assets or fund balances		3,957,901	33		4 336 733	
ž	34	Total liabilities and net assets/fund balances		14,020,086			12,256,582 4,155,600 1,763,353 1,763,353 1,763,353 1,763,353 2,796,769 4,382,335 4,336,733 12,256,582 7es No No	
Pa	rt XI			,020,000	<u> </u>	•		
		· ····································				Voc	No	
1	Acco	ounting method used to prepare the Form 990 Cash 🗸 A	ccrual $\Gamma$ Other			165	140	
2a	Were	the organization's financial statements compiled or reviewed by ar	n independent account	ant?	2a		No	
b	Were	the organization's financial statements audited by an independent	accountant?		2b	Yes		
C		es" to 2a or 2b, does the organization have a committee that assun , review, or compilation of its financial statements and selection of			2c	Yes		
	Sıngl	result of a federal award, was the organization required to undergoe Audit Act and OMB Circular A-133?			3a	Yes		
b	If "Y€	es," did the organization undergo the required audit or audits? .			3b	Yes		

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As Filed Data -

DLN: 93493228001460

Employer identification number

OMB No 1545-0047

### **SCHEDULE A** (Form 990 or 990EZ)

Department of the Treasury

Name of the organization

Internal Revenue Service

## **Public Charity Status and Public Support**

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)nonexempt charitable trusts. Attach to Form 990 or Form 990-EZ. See separate instructions.

Open to Public Inspection

Points	of Ligh	it Foundation							• •			
									-020664			
	rt I			harity Status (to be co					Instruct	ions)		
	organı:			ation because it is (Please								
1	<u> </u>			nurches, or association of ch			Section 1	170(b)(1)(	(A)(i).			
2		A school d	escribed in <b>Sec</b> i	t <b>ion 170(b)(1)(A)(ii).</b> (Atta	ch Schedu	ıle E )						
3	Г	A hospital	or a cooperativ	e hospital service organizati	ıon descrı	bed in <b>Sec</b>	t ion 170(l	b)(1)(A)(i	i <b>ii).</b> (Attac	h Schedu	le H)	
4	Г	A medical	research organı	zatıon operated ın conjunctı	on with a	hospital d	escribed i	n Section	170(b)(1)	(A)(iii). E	nter the	
		•	name, city, and									
5	Г	An organiz	atıon operated f	or the benefit of a college or	universit	y owned o	roperated	l by a gove	ernmental	unıt desc	rıbed ın	
		Section 170	)(b)(1)(A)(iv).	(Complete Part II )								
6	Г	A federal, s	tate, or local g	overnment or governmental	unıt desci	rıbed ın <b>Se</b>	ction 170	(b)(1)(A)	(v).			
7	굣	Anorganiza	ation that norm	ally receives a substantial p	art of its	support fro	om a gove	rnmental ι	ınıt or fror	n the gene	eral public	
		described i	n Section 170(l	o)(1)(A)(vi) (Complete Par	tII)							
8	Γ	A commun	ty trust describ	oed in <b>Section 170(b)(1)(A)</b>	(vi) (Com	nplete Par	tII)					
9	Γ	An organiza	ation that norm	ally receives (1) more than	3 3 1/3% 0	of its supp	ort from c	ontributior	ns, membe	rship fees	s, and gross	
		receipts fro	m activities re	lated to its exempt functions	s—s ubject	to certair	n exceptio	ns, and (2	) no more	than 331/	′3% of	
		ıts support	from gross inve	estment income and unrelate	ed busines	ss taxable	ıncome (l	ess sectio	on 511 ta:	x) from bu	sınesses	
		acquired by	the organizati	on after June 30, 1975 See	Section 5	509(a)(2).	(Complet	e Part III	)			
10	$\vdash$	An organization organized and operated exclusively to test for public safety See Section 509(a)(4). (See instructions)										
11	$\Gamma$	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of										
				orted organizations describe						Section 5	<b>09(a)(3).</b> Ch	eck
		_		type of supporting organiza		omplete II Functioi -			n <b>d</b>	Γ <sub>Type</sub>	III - Other	
e	_	•		rtify that the organization is			-					
-	,	•		agers and other than one or			•			•	•	
		section 50		, and the second		, , , ,					( /( /	
f		_		d a written determination fro	m the IRS	5 that it is	a Type I,	Type II o	r Type III	supportin	ng organizatio	<u>, n</u>
_		check this		the erappization accepts	d any aift	ar aantrib	ution from	any of the				ı
g		following pe		as the organization accepted	u any gni	or continu	ution nom	ally of the	;			
				r indirectly controls, either a	alone or to	ogether wi	th persons	describe	d ın (ıı)		Yes N	<u> </u>
		and (III) be	ow, the governi	ng body of the the supported	d organiza	ition?				11g	(i) N	<u> </u>
		(ii) a family	/ member of a p	erson described in (i) above	?					11g(		0
		(iii) a 35%	controlled enti	ty of a person described in (	(ı) or (ıı) a	bove?				11g(		0
h		Provide the	following infori	mation about the organizatio	ns the org	ganızatıon	supports				- 1	_
	(i) Na	ame of	(ii) EIN	(iii) Type of organization	(iv) I	(s the	(v) Did y	ou notify	(vi) I	s the	(vii) A mour	nt of
		oorted		(described on lines 1-9	_	ation in		nızatıon		ation in	support?	,
	Orgar	nization		above or IRC section (See Instructions))		listed in		i) of your port?		rganized US?		
				(See Instructions))		verning ment?	Supp	סוני	In the	057		
					Yes	No	Yes	No	Yes	No	1	
					1	† <del>.</del>	1	<del>                                     </del>	1	† <del>.</del>	1	
											1	
											<u> </u>	
								-		<del>                                     </del>		
					ļ	1	-	-		<del>                                     </del>	-	

Total

# Support Schedule for Organizations Described in IRC 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.)

	(Complete only if you chec	ked the box o	n line 5, 7, or	8 of Part I.)				
Pι	ıblic Support							
Cale	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e)	2008	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	18,343,465	20,611,072	19,022,882	23,288,662		25,094,789	106,360,870
2	Tax revenues levied for the organization's							
_	benefit and either paid to or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to the organization without charge							
4	Total. Add line 1-3	18,343,465	20,611,072	19,022,882	23,288,662		25,094,789	106,360,870
5	The portion of total contribution by each							
	person (other than a government unit or							
	publicly supported organization) included							23,422,703
	on line 1 that exceed 2% of the amount							
	shown on line 11, column (f)							
6	Public Support subtract line 5 from line							
Ü	4							82,938,167
T	otal Support		•		•		<u>-</u>	
	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
7	A mounts from line 4	18,343,465	611,613	19,022,882	23,288,662		25,094,789	106,360,870
8	Gross income from interest, dividends,							
	payments received on securities loans, rents, royalties and income from similar	418,152	611,613	352,900	226,853		45,317	1,654,835
	sources							
9	Net income from unrelated business							
	activities, whether or not the business is							
	regularly carried on							
10	Other income Do not include gain or loss							
	from the sale of capital assets (Explain in Part IV )							
11	Total Support (Add lines 7 through 10)							108,015,705
12	Gross receipts from related activities, etc	(See instruction	<u> </u>			12		
							(2)	26,022,125
13	First Five Years. If the Form 990 is for the organization, check this box and stop here	organization's fil	rst, secona, tnire	a, fourth, or fifth	tax year as a 5	O I (C)(	.3)	<b>▶</b> ┌
	organization, check this box and <b>stop here</b>							-1
C	omputation of Public Support Perc	entage						
14	Public Support Percentage for 2008 (line 6		ed by line 11 co	lumn (f))		14		76.783 %
15	Public Support Percentage for 2007 Sched		•	( //		15		98.029 %
162	33 1/3% Test - 2008. If the organization did	d not chack the l	ov on line 13 a	and line 14 is 33	3 1/3% or more		this hav	
	and <b>stop here.</b> The organization qualifies as				, 1/3 /0 OI MOTE,	CHCCK	tills box	<b>▶</b> ▽
b	33 1/3% Test - 2007. If the organization di		_		15 is 33 1/3% o	r more	, check th	•
	box and stop here. The organization qualifie							▶□
17a	10% Facts and Circumstances Test - 2008.	-						
	more, and if the organization meets the "fac							
	organization meets the "facts and circumst			•		-		<b>▶</b> □
Ь	10% Facts and Circumstances Test - 2007.							
	more, and if the organization meets the "fac the organization meets the "facts and circu							
18	<b>Private Foundation.</b> If the organization did							-1
	instructions	Strock the be	15, 10	, , _ , _ , _ , _ , _ , _ , _ ,	D, CHOCK CHIS	20X G	500	<b>▶</b> □

Pa	Support Schedule for On (Complete only if you ched				)(2)		
	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
2	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 1-5						
7a	A mounts included on lines 1, 2, and 3						
	received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of 1% of						
	the total of lines 9, 10c, 11, and 12 for						
	the year or \$5,000						
c	Total of lines 7a and 7b						
8	Public Support (Substract line 7c from						
·	line 6)						
To	tal Support		•	•			
Cale	ndar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	<b>(f)</b> Total
9	A mounts 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 30 June, 1975						
С	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						
12	from the sale of capital assets						
	(Explain in Part IV )						
13	Total Support (Add lines 9, 10c, 11 and						
	12)						
14	First Five Years If the Form 990 is for the	organization's fi	rst, second, thir	d, fourth, or fifth	ntax year as a 5	01(c)(3) organı	zation,
	check this box and <b>stop here</b>						▶□
	mputation of Public Support Perc					<del></del>	
15	Public Support Percentage for 2008 (line		•	olumn (f))		15	
16	Public Support Percentage for 2007 Sche	dule A , Part IV -	A, line 27g			16	
	mputation of Investment Income			40 1 1			
17	Investment Income Percentage for 2008 (			-	))	17	
18	Investment Income Percentage from 2007	'Schedule A , Pa	rt IV-A, line 27	h		18	

19a 33 1/3% Tests - 2008. 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 **33 1/3% Tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

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

Schedule A (Form 990 or 990-EZ) 2008

**▶**□

Part IV	<b>Supplemental Information.</b> Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)					
	Facts and Circumstances Test					

Schedule A (Form 990 or 990-EZ) 2008

## OMB No 1545-0047

**SCHEDULE C** 

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Open to Public Inspection

To be completed by organizations described below. Attach to Form 990 or Form 990-EZ

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities)

- ◆ Section 501(c)(3) organizations complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations complete Part I-A only

◆ Se◆ SeIf the	ection 501(c)(3) organizations that ection 501(c)(3) organizations that	t have filed Form 5768 (election under state NOT filed Form 5768 (election under state NOT filed Form 5768 (election under state), to Form 990, Part IV, Line 5 (Prozations complete Part III	section 501(h)) co nder section 501(h	omplete Part II-A Do not cor	mplete Part II-B
Na	me of the organization nts of Light Foundation				tification number
Par		y all organizations exempt ι e the instructions for Schedule C		65-0206641 <b>501(c) and section</b>	527
1	Provide a description of the or	ganızatıon's dırect and ındırect politic	al campaign activ	vities in Part IV	
2	Political expenditures				\$
3	Volunteer hours				
Par	<b>To be completed b</b> for Schedule C for de	y all organizations exempt ι etails.)	ınder section	<b>501(c)(3).</b> (See the	nstructions
1	Enter the amount of any excise	e tax incurred by the organization und	er section 4955		\$
2	Enter the amount of any excise	e tax incurred by organization manage	ers under section	4955	\$
3	If the organization incurred in a	a section 4955 tax, did it file Form 47	'20 for this year?		┌ Yes ┌ No
4a	Was a correction made?				┌ Yes ┌ No
b	If "Yes," describe in Part IV				
Par		y all organizations exempt u for Schedule C for details.)	ınder section	501(c), except sect	ion 501(c)(3).
1	Enter the amount directly expe	ended by the filing organization for sec	tion 527 exempt	function activities	\$
2	Enter the amount of the filing of 527 exempt funtion activities	rganızatıon's ınternal funds contrıbut	ed to other organ	ızatıons for section	\$
3	Total of direct and indirect exe 1120-POL, line 17b	mpt function expenditures Add lines	1 and 2 and ente	r here and on Form	\$
4	Did the filing organization file <b>F</b>	Form 1120-POL for this year?			┌ Yes ┌ No
5	were made Enter the amount p political contributions received	nd Employer Identification Number (E paid and indicate if the amount was pa d and promptly and directly delivered action committee (PAC) If additional	id from the filing to a separate pol	organization's own interna itical organization, such as	l funds or were s a separate
	(a) Name	( <b>b)</b> Address	(c) EIN	(d) A mount paid from filing organization's internal funds If none, enter - 0 -	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0 -

or Panerwork Reduction Act Notice, see the instructions for Form 990	Cat No 500	0845 Schedule C (	Form 990 or 990-F7) 2008
		internal funds If none, enter - 0 -	directly delivered to a separate political organization If none, enter -0-

P		organizations exempt under section 501(c		768
	Check If the filing organization	belongs to an affiliated group checked box A and "limited control" provisions apply		
		bbying Expenditures— es" means amounts paid or incurred.)	(a) Filing Organization's Totals	<b>(b)</b> A ffiliated Group Totals
1a	Total lobbying expenditures to influe	nce public opinion (grass roots lobbying)		
b	Total lobbying expenditures to influe	nce a legislative body (direct lobbying)		
c	Total lobbying expenditures (add line	es 1a and 1b)		
d	Other exempt purpose expenditures			
e	Total exempt purpose expenditures	(add lines 1c and 1d)		
f	columns—	the amount from the following table in both		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
 g	Grassroots nontaxable amount (ente	r 25% of line 1f)		
h	Subtract line 1g from line 1a Enter -	0 - If line g is more than line a		
i	Subtract line 1f from line 1c Enter -	0- ıflıne fıs more than lıne c		
j	If there is an amount other than zero section 4911 tax for this year?	on either line 1h or line 1i, did the organization file Form	4720 reporting	┌ Yes ┌ No

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 1a through 1f of the instructions.)

	Lobbying Expenditures During 4-Year Averaging Period									
	Calendar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	<b>(c)</b> 2007	( <b>d)</b> 2008	(e) Total				
2a	Lobbying non-taxable amount	1,000,000	1,000,000			2,000,000				
<b>b</b>	Lobbying ceiling amount (150% of line 2a, column(e))					3,000,000				
c	Total lobbying expenditures	120,000	120,000			240,000				
_d	Grassroots non-taxable amount	250,000	250,000			500,000				
е —	Grassroots ceiling amount (150% of line d, column (e))					750,000				
f	Grassroots lobbying expenditures									

	5768 (election under section 501(h)). (See the instructions for Schedule (		_		h \
		Ì	a)	·	b)
		Yes	No	Am	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?		Νo		
b	Paid staff or management (include compensation in expenses reported on lines c through i)?	Yes			
c	Media advertisements?		Νo		
d	Mailings to members, legislators, or the public?		Νo		
e	Publications, or published or broadcast statements?		Νo		
f	Grants to other organizations for lobbying purposes?		Νo		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes			25,00
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?		Νo		
i	Other activities If "Yes," describe in Part IV	Yes			25,00
j	Total lines 1c through				50,00
_	11		l		
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Νo		
	If "Yes" enter the amount of any tax incurred under section 4912				
_	If "Yes" enter the amount of any tax incurred by organization managers under section 4912		l		
d	, ,		No		
ar	To be completed by all organizations exempt under section 501(c)(4) section 501(c)(6). (See the instructions for Schedule C for details.)	), section	501(0	:)(5),	or ——
			_	Ye	es No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	

3 Did the organization agree to carryover lobbying and political expenditures from the prior year?

Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes." (See the instructions for Schedule C for details.)

1	Dues, assessments and similar amounts from members	1 \$	
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current Year	2a \$	
b	Carryover from last year	2b \$	
c	Total	2c \$	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3 \$	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4 \$	
5	Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)	5 \$	

#### Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Ident if ier	Return Reference	Explanation
Lobbying Activities	Schedule C, Part II-B, Line 1b & 1I	The Foundation has a staff member who is compensated to advocate for legislation that is to further the organization's mission. As a result, the Foundation worked to ensure the passage of the Serve America Act in 2009

Part IV Supplemental II	Part IV Supplemental Information					
Ident if ier	Return Reference	Explanation				

Schedule C (Form 990 or 990EZ) 2008

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For Paperwork Reduction Act Notice, see the Intructions for Form 990

DLN: 93493228001460

OMB No 1545-0047

Department of the Treasury

**SCHEDULE D** (Form 990)

**Supplemental Financial Statements** ▶ Attach to Form 990. To be completed by organizations that

Open to Public

Schedule D (Form 990) 2008

epartment of the Treaternal Revenue Serv	answered res, to be	orm 990, Part IV, line 6, 7, 8, 9, 10, 11, or :	12.	Inspection
	organization		Employer ident	ification number
Points of Light F	foundation		65-0206641	
	rganizations Maintaining Donor Ac			ints. Complete if the
0	rganization answered "Yes" to Form 99	0, Part IV, line 6. (a) Donor advised funds	/b) Funds a	nd other accounts
L Total nur	mber at end of year	(a) Donor advised funds	( <b>b)</b> Fullus a	ild other accounts
	te contributions to (during year)			
55 5	te grants from (during year)			
	te value at end of year			
	organization inform all donors and donor advi e the organization's property, subject to the		oradvised	┌ Yes ┌ No
used onl	organization inform all grantees, donors, and y for charitable purposes and not for the ben ssible private benefit?		may be	┌ Yes
Part II C	onservation Easements. Complete	ıf the organızatıon answered "Yes" to	o Form 990, Pai	rt IV, line 7.
Pres Prot Pres	(s) of conservation easements held by the or servation of land for public use (e g , recreati section of natural habitat servation of open space e lines 2a-2d if the organization held a quali st day of the tax year	on or pleasure)  Preservation of an Preservation of ce	rtified historic str	ucture
	,		Hel	d at the End of the Year
<b>a</b> Total n	umber of conservation easements		2a	
<b>b</b> Total a	creage restricted by conservation easement	s	2b	
<b>c</b> Numbe	r of conservation easements on a certified hi	storic structure included in (a)	2c	
<b>d</b> Numbe	r of conservation easements included in (c) a	acquired after 8/17/06	2d	
Number	of conservation easements modified, transfe	rred, released, extinguished, or terminate	d by the organiza	tion during
the taxa	ble year ►			
Number	of states where property subject to conserva	ation easement is located 🕨		
Does the	e organization have a written policy regarding nent of the conservation easements it holds?	the periodic monitoring, inspection, viola	ations, and	┌ Yes
Staffor	volunteer hours devoted to monitoring, inspe	cting and enforcing easements during the	year ►	
' A mount	of expenses incurred in monitoring, inspecti	ng, and enforcing easements during the ye	ear ► \$	
	ch conservation easement reported on line 2	(d) above satisfy the requirements of sec	tion	<b></b>
	4)(B)(ı) and 170(h)(4)(B)(ıı)?			☐ Yes ☐ No
balance	(IV, describe how the organization reports co sheet, and include, if applicable, the text of t nization's accounting for conservation easen	he footnote to the organization's financial	•	
	rganizations Maintaining Collectio omplete if the organization answered '		or Other Simi	lar Assets.
art, histo	ganization elected, as permitted under SFAS orical treasures, or other similar assets held in Part XIV, the text of the footnote to its fin	for public exhibition, education or research	ch in furtherance o	
historica	ganization elected, as permitted under SFAS il treasures, or other similar assets held for j the following amounts relating to these items	oublic exhibition, education, or research in		· · · · · · · · · · · · · · · · · · ·
(i) <sub>Reve</sub>	nues included in Form 990, Part VIII, line 1		<b>►</b> \$	
(ii) <sub>Asse</sub>	ets included in Form 990, Part X		<b>►</b> \$	
	ganization received or held works of art, histo amounts required to be reported under SFA	· · · · · · · · · · · · · · · · · · ·	or financial gain, p	rovide the
<b>a</b> Revenue	s included in Form 990, Part VIII, line 1		<b>►</b> \$	
<b>b</b> Assets 1	ncluded in Form 990, Part X		<b>►</b> \$	

Cat No 52283D

حصد	•••• Organizations Maintaining Co	<u>liections of Art</u>	<u>, His</u>	tori	<u>cai ir</u>	easui	res, or O	tne	1 31111111	11 ASS	ets (co	ontinued)
	Using the organization's accession and other items (check all that apply)	records, check any	of th	ne fol	lowing t	hat are	a significa	nt u	se of its o	ollectio	n	
а	Public exhibition		d	Γ	Loan	orexch	ange progr	ams				
ь	Scholarly research		e	Γ	Other	•						
c	Preservation for future generations											
	Provide a description of the organization's co Part XIV	llections and expla	ın hov	w the	y furthe	r the o	rganızatıon	's ex	empt pur	pose in		
	During the year, did the organization solicit of assets to be sold to raise funds rather than t								ılar	Г	Yes	┌ No
Part	Trust, Escrow and Custodial A Part IV, line 9, or reported an am						nızatıon a	nsw	ered "Ye	es" to F	orm 9	90,
	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	diary	for c	ontribu	tions o	r other ass	ets r	not	Γ	Yes	┌ No
Ь	If "Yes," explain why in Part XIV and comple	te the following tabl	le				Γ			A mot	ınt	
c	Beginning balance							1c				
_	Additions during the year						<b>-</b>	1d				
	Distributions during the year						<b>-</b>	1e				
_	Ending balance						 	1f				
	Enumy balance Did the organization include an amount on Fo	orm 990 Part V line	2712				L				Yes	┌ No
			= 21'							1	163	1 140
Pari	If "Yes," explain the arrangement in Part XIV  Endowment Funds. Complete i		ane	:Wer	ad "Ve	s" to F	orm gan	Dar	t IV line	10 د		
FGI	Endownient i unus: complete i	(a)Current Year		Prior			o Years Back				)Four Y	ears Back
1a	Beginning of year balance	3,981,055		-				<del>                                     </del>			-	
	Contributions	68,814										
c	Investment earnings or losses	-33,787										
d	Grants or scholarships											
	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance	4,016,082										
2	Provide the estimated percentage of the yea	r end balance held a	is									
а	Board designated or quasi-endowment 🕨	100 %										
b	Permanent endowment 🕨											
c ·	Term endowment 🕨											
3a .	Are there endowment funds not in the posses	ssion of the organiza	ation	thata	are held	d and ac	dministered	l for	the			
	organization by									- ···	Yes	No
	(i) unrelated organizations							٠		3a(i)	-	No
	(ii) related organizations									3a(ii) 3b	<u> </u>	No I
	Describe in Part XIV the intended uses of the	·						•			1	<u> </u>
- Part						90. Pa	rt X. line	10.				
	<u>,                                      </u>	<u>,</u>	0		a) Cost o		(b)Cost or o					
	Description of investment				sis (inve		basis (oth		(c) Depi	reciation	(d) B	ook value
<b>1</b> a L	and		•									
<b>b</b> B	uildings											
	easehold improvements				863	3,632		698,185		165,447		
c L												
	quipment						801	,962		713,441		88,521
d E	quipment						801	,962		713,441		88,521

Part VII Investments-Other Securities. See	Form 990, Part X, line 1	2.
(a) Description of security or category (including name of security)	<b>(b)</b> Book value	<b>(c)</b> Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12 ) ►  Part VIII Investments—Program Related. See	o Form 000 Part V Juno	12
		(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13 )		
Part IX Other Assets. See Form 990, Part X, III		1 #25
(a) Descrip	otion	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1		
Part X Other Liabilities. See Form 990, Part X		•
(a) Description of Liability	(b) A mount	
Federal Income Taxes		
LINE OF CREDIT	585,270	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25 ) ▶	585,270	

Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemer	าts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	31,234,333
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	30,855,501
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	378,832
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	378,832
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Retu	r <b>n</b>
1	Total revenue, gains, and other support per audited financial		32,467,456
	statements	1	
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments		
b	Donated services and use of facilities		
с	Recoveries of prior year grants		
d	Other (Describe in Part XIV)	_	
e	Add lines 2a through 2d	2e	1,233,123
3	Subtract line <b>2e</b> from line <b>1</b>	3	31,234,333
4	A mounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
Ь	Other (Describe in Part XIV)		
С	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	31,234,333
	Reconciliation of Expenses per Audited Financial Statements With Expenses		
1	Total expenses and losses per audited financial statements	1	32,088,624
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Losses reported on Form 990, Part IX, line 25		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	1,233,123
3	Subtract line <b>2e</b> from line <b>1</b>	3	30,855,501
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)		
С	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	30,855,501

#### Part XIV 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 XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Ident if ier	Return Reference	Explanation
Endowment funds	,	The organization's endowment funds are used for general support of the organization
Land, Buildings, and Equipment	· · · · · · · · · · · · · · · · · · ·	The cost, depreciation, and book value for equipment also include furniture and fixtures
Footnote for Uncertain Tax Positions	· · · · · · · · · · · · · · · · · · ·	The organization was not required to adopt FIN 48 for the current fiscal year

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As Filed Data -

DLN: 93493228001460

OMB No 1545-0047

2008

Open to Public **Inspection** 

**Employer identification number** 

### SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

**Statement of Activities Outside the United States** 

Name of the organization

Points of Light Foundation 65-0206641

General Information on Activities Outside the United States. Complete if the organization answered

"Yes" to Form 990, Part IV, line 14b. For grantmakers. 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 ▼ Yes 

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

Activites per Region (Use Schedule F-1 (Form 990) if additional space is needed.)

<b>3</b> Activites per Region (U	se Schedule F-1	(Form 990) if add	ditional space is needed )		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
Europe (Including Iceland and Greenland)	1	3	Grantmakıng		4,082,873
Greemand)					
Totals	1	3			4,082,873
For Paperwork Reduction Act No	tice, see the instri	uctions for Form 9	90. Cat No !	50082W <b>S</b>	chedule F (Form 990) 2008

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	<b>(f)</b> Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other
		Europe/Iceland/Green	land DONOR ADVISED FUND GRANT PAYMENTS	2,564,456	various			FMV
		East Asia/Pacific	FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING	44,000	VARIOUS			FMV

	F-1 (Form 990) if a			tea States. Complete	if the organization a	inswered "Yes" to Form	990, Part IV, line 16.
(a) Type of grant or assistance	( <b>b)</b> Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non- cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
	1	1				l	

Schedule F (Form 990) 2008

Part IV Supplemental Information  Complete this part to provide the information required in Part I, line 2, and any other additional information.						
Identifier	ReturnReference	Explanation				
Activities Outside the US	Part IV , Part I , Line 2	The organization's procedures for monitoring the use of grant funds outside the U S is set forth to ensure that all grantees are eligible for funds regardless of amount awarded. We have a compliance document that is used to monitor all grantees over \$1,000 Monitoring is completed through desk reviews or on-site visits.				

Software ID:

**Software Version:** 

**EIN:** 65-0206641

Name: Points of Light Foundation

Form 990 Schedule F Part II - Grants and Other Assistance to Organizations or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
			DONOR ADVISED FUND GRANT PAYMENTS	2,564,456	various			FMV
		·	FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING	44,000	VARIOUS			FM∨

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As Filed Data -

DLN: 93493228001460

OMB No 1545-0047

2008

Open to Public Inspection

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

**Supplemental Information Regarding** 

**Fundraising or Gaming Activities** 

Name of the organization Points of Light Foundation Employer identification number

Points of Light Foundation					65 030664		
					65-020664		
Part I Fundraising A	Activities. Complet	e if the o	rganızat	ion answered "Yes"	to Form 990, Part I\	/, line 17.	
1 Indicate whether the org	ganızatıon raısed funds	through a	ny of the	following activities Ch	eck all that apply		
a 🔽 Mail solicitations				e Solicitation of	non-government grants	;	
<b>b</b> F Email solicitations	government grants						
c Phone solicitations	g Special fundraising events						
d 🔽 In-person solicitation	-						
Did the organization have or key employees listed  If "Yes," list the ten high to be compensated at le	ın Form 990, Part VII nest paid individuals o	() or entity r entities (1	ın conne fundraıse	ction with professional rs) pursuant to agreem	fundraising activities? ents under which the fu		
(i) Name of Individual		(iii) fundrais custo	erhave	(iv) Gross receipts	(v) A mount paid to (or retained by)	(vi) A mount paid to	
or entity (fundraiser)	(ii) Activity	control of		from activity	fundraiser listed in	(or retained by)	
, ,		contribi	utions?		col (i)	organization	
		Yes	No				
DINI Partners	Fundraising Consulting		No		55,282	2	
 Total			<u> </u>				

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

 ${\tt AZ,AR,CA,DC,GA,IL,IN,MA,MI,MN,MS,NJ,ND,WI}$ 

			(a) Event #1	<b>(b)</b> Event #2	(c) O ther Events	(d) Total (Add col (a	a) through
			(event type)	(event type)	(total number)		.c <i>))</i>
IKUE	1	Gross receipts					
Revenue	2	Less Charitable contributions					
	3	Gross revenue (line 1 minus line 2)					
	4	Cash Prizes					
ses	5	Non-cash Prizes					
Expenses	6	Rent/Facility costs					
	7	Other direct expenses					
Direct	8	Direct expense summary Add lin	es 4 through 7 ın columr	n (d)	🛌		
	9	Net income summary Combine III	•				
Par	t II	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	art IV, line 19, or repo	orted more	than
Revenue			(a) Bıngo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Total ga col (a) throu	
<u>~</u>	1	Gross revenue					
မှ	2	Cash prizes					
pens	3	Non-cash prizes					
Direct Expenses	4	Rent/facility costs					
$\overline{a}$	5	Other direct expenses					
Δ						<del>_</del>	
<u> </u>	6	Volunteer labor	┌ Yes	┌──Yes <u>%</u> ┌──No	┌ Yes% ┌ No		
	6 7	Volunteer labor  Direct expense summary Add line	_ No				
<u> </u>	7		s 2 through 5 in column		No ▶		
<u>□</u> 9 a	<b>7</b> <b>8</b> Ent	Direct expense summary Add line	S 2 through 5 in column  abine lines 1 and 7 in column  ation operates gaming ac	(d)	►		Yes No
9	<b>7 8</b> Ent	Direct expense summary Add line  Net gaming income summary Com  ter the state(s) in which the organiza	S 2 through 5 in column  abine lines 1 and 7 in column  ation operates gaming ac	(d)	►		Yes No
9 a b	7 8 Ent Is t If " Wei	Direct expense summary Add line  Net gaming income summary Com  ter the state(s) in which the organization licensed to operate	S 2 through 5 in column bine lines 1 and 7 in column ation operates gaming acgaming acgaming activities in eac	Mo  (d)			Yes No
9 a b	7 8 Ent Is t If " Wet If " -	Direct expense summary Add line  Net gaming income summary Com  ter the state(s) in which the organization licensed to operate  No," Explain  re any of the organization's gaming	s 2 through 5 in column  abine lines 1 and 7 in column  ation operates gaming ac gaming activities in eac	(d)	No	· 9a	Yes No

			 <del></del>
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Provide 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 contract with a third party from whom the organization receives gaming revenue?	15a	
Ь	If "Yes," enter the amount of gaming revenue received by the organization <b>&gt;</b> \$ and the amount of gaming revenue retained by the third party <b>&gt;</b> \$		
c	If "Yes," enter name and address		
	Name Name		
	Address 🟲		
16	Gaming manager information		
	Name 🟲		
	Gaming manager compensation 🕨 \$		
	Description of services provided 🟲		
	Director/officer Employee Independent contractor		
17	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year 📂 💲		

Software ID: Software Version:

**EIN:** 65-0206641

Name: Points of Light Foundation

#### Form 990 Schedule G - Licensed States

L	icensed States

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Schedule I

**Grants and Other Assistance to Organizations,** Governments and Individuals in the U.S.

OMB No 1545-0047

DLN: 93493228001460

Department of the Treasury Internal Revenue Service Name of the organization

(Form 990)

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

Open to Public Inspect ion

Employer identification number

Points of Light Foundation						65-0206641	
		nts and Assistance				•	
<ul> <li>Does the organization mathematics the selection criteria use</li> <li>Describe in Part IV the organization</li> </ul>	d to award the gra	nts or assistance?					F Yes Γ I
Form 990, Part Part IV and Sch	IV, line 21 for ar ledule I-1 if addi	ny recipient that rece tional space is	eived more than \$5,0	00. Check this box	tes. Complete if the case if no one recipient rec	ceived more than \$5,	
1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	, , , , ,	(h) Purpose of grant or assistance
See Additional Data Table							
<ul><li>Enter total number of seconganizations</li><li>Enter total number of other contents.</li></ul>		· · · · · · ·			•		257
For Paperwork Peduction Act No.				Cat No. 50055			hedule I (Form 990) 2008

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	( <b>b)</b> Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

## **Part IV** Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

See Additional Data Table

Ident if ier	Return Reference	Explanation
Grants and Assistance		The organization's procedures for monitoring the use of grant funds in the US is set forth to ensure that all grantees are eligible for funds regardless of amount awarded. We have a compliance document that is used to monitor all grantees over \$1,000. Monitoring is completed through desk reviews or on-site visits.

Software ID: Software Version:

**EIN:** 65-0206641

Name: Points of Light Foundation

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
2nd Harvest Food Bnk & Santa Clara & San Mateo Cnt		501(c)(3)	16,346				DONOR ADVISED FUND GRANT PAYMENTS
A Commitment To Our Roots		501(c)(3)	5,128				DONOR ADVISED FUND GRANT PAYMENTS
A Place To Bark		501(c)(3)	23,825				DONOR ADVISED FUND GRANT PAYMENTS
AAA Academy For Children		501(c)(3)	6,376				DONOR ADVISED FUND GRANT PAYMENTS
AbilityFirst-Established in 1926 as the Crippled C		501(c)(3)	6,420				DONOR ADVISED FUND GRANT PAYMENTS
A halı Elephants		501(c)(3)	11,907				DONOR ADVISED FUND GRANT PAYMENTS
Almost Heaven Golden Retriever Rescue & Sanctuary		501(c)(3)	15,775				DONOR ADVISED FUND GRANT PAYMENTS
A merican Breast Cancer Foundation		501(c)(3)	24,987				DONOR ADVISED FUND GRANT PAYMENTS
A merican Cancer Society - Great Lakes Division		501(c)(3)	10,551				DONOR ADVISED FUND GRANT PAYMENTS
A merican Cancer Society Inc		501(c)(3)	108,053				DONOR ADVISED FUND GRANT PAYMENTS

(a) Name and address of organization or government	( <b>b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
A merican Cancer Society's Eastern Division		501(c)(3)	11,343				DONOR ADVISED FUND GRANT PAYMENTS
American Diabetes Assn		501(c)(3)	5,592				DONOR ADVISED FUND GRANT PAYMENTS
A merican Forest Fnd		501(c)(3)	13,429				DONOR ADVISED FUND GRANT PAYMENTS
A merican Heart A ssociation		501(c)(3)	10,310				DONOR ADVISED FUND GRANT PAYMENTS
A merican Heart Association National Center		501(c)(3)	41,436				DONOR ADVISED FUND GRANT PAYMENTS
A merican Philatelic Society		501(c)(3)	6,275				DONOR ADVISED FUND GRANT PAYMENTS
A merican Red Cross		501(c)(3)	131,527				DONOR ADVISED FUND GRANT PAYMENTS
American Red Cross of Central Texas		501(c)(3)	7,869				DONOR ADVISED FUND GRANT PAYMENTS
A merica's Second Harvest		501(c)(3)	62,410				DONOR ADVISED FUND GRANT PAYMENTS
ANGEL ACRES HORSE HAVEN RESCUE INC		501(c)(3)	18,018				DONOR ADVISED FUND GRANT PAYMENTS

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Angel Horse Rescue Inc		501(c)(3)	16,623				DONOR ADVISED FUND GRANT PAYMENTS
Angelwish Inc		501(c)(3)	5,771				DONOR ADVISED FUND GRANT PAYMENTS
Animal Outreach Humane Society		501(c)(3)	22,079				DONOR ADVISED FUND GRANT PAYMENTS
Arts for LearningMiami Inc		501(c)(3)	7,135				DONOR ADVISED FUND GRANT PAYMENTS
ASPCA American Soc the Prevof Cruelty to Animal		501(c)(3)	63,668				DONOR ADVISED FUND GRANT PAYMENTS
A utism Speaks		501(c)(3)	9,960				DONOR ADVISED FUND GRANT PAYMENTS
A von Foundation		501(c)(3)	26,568				DONOR ADVISED FUND GRANT PAYMENTS
Basset Buddies Rescue of Texas		501(c)(3)	6,537				DONOR ADVISED FUND GRANT PAYMENTS
Best Friends Animal Society		501(c)(3)	42,304				DONOR ADVISED FUND GRANT PAYMENTS
Big Cat Rescue		501(c)(3)	6,917				DONOR ADVISED FUND GRANT PAYMENTS

Form 990,Schedule I,	Part II, Gra	nts and Other A	ssistance to Gov	ernments and C	rganizations in	the United States	3
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Blind Cat Rescue & Sanctuary Inc		501(c)(3)	70,099				DONOR ADVISED FUND GRANT PAYMENTS
BloodWater Mission		501(c)(3)	5,130				DONOR ADVISED FUND GRANT PAYMENTS
Books for America		501(c)(3)	6,428				DONOR ADVISED FUND GRANT PAYMENTS
Border Collie Rescue of Northern California Inc		501(c)(3)	8,533				DONOR ADVISED FUND GRANT PAYMENTS
Boys & Girls Clubs of America		501(c)(3)	10,620				DONOR ADVISED FUND GRANT PAYMENTS
C3 Colorectal Cancer Coalition		501(c)(3)	7,887				DONOR ADVISED FUND GRANT PAYMENTS
California Rescue Dog Association		501(c)(3)	8,514				DONOR ADVISED FUND GRANT PAYMENTS
CATS RULE Feline Rescue		501(c)(3)	18,965				DONOR ADVISED FUND GRANT PAYMENTS
Charity Global charity water		501(c)(3)	8,793				DONOR ADVISED FUND GRANT PAYMENTS
Children International		501(c)(3)	12,109				DONOR ADVISED FUND GRANT PAYMENTS

Form 990,Schedule I,	Part II, Gra	ants and Other A	ssistance to Gov	ernments and O	rganizations in	the United States	1
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Children of Fallen Soldiers Relief Fund		501(c)(3)	151,274				DONOR ADVISED FUND GRANT PAYMENTS
Children's Healthcare of Atlanta		501(c)(3)	6,624				DONOR ADVISED FUND GRANT PAYMENTS
Children's Hospice Care Coalition		501(c)(3)	44,488				DONOR ADVISED FUND GRANT PAYMENTS
Children's Miracle Network		501(c)(3)	39,562				DONOR ADVISED FUND GRANT PAYMENTS
Child's Play		501(c)(3)	12,321				DONOR ADVISED FUND GRANT PAYMENTS
Chimp Haven		501(c)(3)	8,294				DONOR ADVISED FUND GRANT PAYMENTS
Communities In Schools- -National Network		501(c)(3)	8,905				DONOR ADVISED FUND GRANT PAYMENTS
Computers for Youth		501(c)(3)	5,535				DONOR ADVISED FUND GRANT PAYMENTS
Connecticut Humane Society		501(c)(3)	11,041				DONOR ADVISED FUND GRANT PAYMENTS
Conservation International		501(c)(3)	16,040				DONOR ADVISED FUND GRANT PAYMENTS

Form 990,Schedule I, I	Part II, Gra	ints and Other A	ssistance to Gov	vernments and C	)rganizations in	the United States	5
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Cystic Fibrosis Foundation	_	501(c)(3)	5,355				DONOR ADVISED FUND GRANT PAYMENTS
Doctors Without Borders USA (Medecins Sans Fronti		501(c)(3)	30,032				DONOR ADVISED FUND GRANT PAYMENTS
Dogs Deserve Better	_	501(c)(3)	33,740				DONOR ADVISED FUND GRANT PAYMENTS
DonorsChoose Inc	_	501(c)(3)	13,245				DONOR ADVISED FUND GRANT PAYMENTS
Dream Fnd	_	501(c)(3)	22,321				DONOR ADVISED FUND GRANT PAYMENTS
Dress for Success Worldwide		501(c)(3)	9,059				DONOR ADVISED FUND GRANT PAYMENTS
Earthwatch Institute		501(c)(3)	5,994				DONOR ADVISED FUND GRANT PAYMENTS
Educate the Children		501(c)(3)	6,395				DONOR ADVISED FUND GRANT PAYMENTS
Entertainment Industry Foundation		501(c)(3)	8,947				DONOR ADVISED FUND GRANT PAYMENTS
Equality Now	_	501(c)(3)	8,685				DONOR ADVISED FUND GRANT PAYMENTS

(a) Name and address of organization or government	( <b>b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Expansion of Horse Program for 30 Horses - a Globa		501(c)(3)	12,417				DONOR ADVISED FUND GRANT PAYMENTS
Feed The Children		501(c)(3)	58,854				DONOR ADVISED FUND GRANT PAYMENTS
Fırst Book		501(c)(3)	7,996				DONOR ADVISED FUND GRANT PAYMENTS
First Evangelical Church		501(c)(3)	5,085				DONOR ADVISED FUND GRANT PAYMENTS
Forget Me Not Animal Shelter of Ferry County		501(c)(3)	12,620				DONOR ADVISED FUND GRANT PAYMENTS
Foundation for the Carolinas		501(c)(3)	5,151				DONOR ADVISED FUND GRANT PAYMENTS
Gift of Life Transplant House		501(c)(3)	6,770				DONOR ADVISED FUND GRANT PAYMENTS
Give 600 Students Access to Music Education - a Gl		501(c)(3)	7,626				DONOR ADVISED FUND GRANT PAYMENTS
Glide		501(c)(3)	10,743				DONOR ADVISED FUND GRANT PAYMENTS
Global Green USA		501(c)(3)	7,106				DONOR ADVISED FUND GRANT PAYMENTS

Form 990,Schedule I, F	Part II, Gra	ants and Other A	ASSISTANCE to Gov	<u>ernments and O</u>	rganizations in	the United States	<b>.</b>
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GlobalGıvıng		501(c)(3)	5,270				DONOR ADVISED FUND GRANT PAYMENTS
Goodwill of SFO San Mateo & Marin Cty		501(c)(3)	5,392				DONOR ADVISED FUND GRANT PAYMENTS
Guardian Angels For Soldier's Pet		501(c)(3)	15,722				DONOR ADVISED FUND GRANT PAYMENTS
Habitat for Humanity International		501(c)(3)	52,549				DONOR ADVISED FUND GRANT PAYMENTS
Happy PAWS Haven Inc		501(c)(3)	41,943				DONOR ADVISED FUND GRANT PAYMENTS
Heifer International		501(c)(3)	32,107				DONOR ADVISED FUND GRANT PAYMENTS
Helping Hands Ministries Inc		501(c)(3)	5,671				DONOR ADVISED FUND GRANT PAYMENTS
HER2 Support Group		501(c)(3)	20,251				DONOR ADVISED FUND GRANT PAYMENTS
Homes for Our Troops		501(c)(3)	21,618				DONOR ADVISED FUND GRANT PAYMENTS
Hope in Bloom Inc		501(c)(3)	12,110				DONOR ADVISED FUND GRANT PAYMENTS

(a) Name and address of	<b>(b)</b> EIN	(c) IRC Code	(d) A mount of cash	(e) A mount of non-	(f) Method of	(g) Description of	(h) Purpose of grant
organization or government	(-,	section if applicable	grant	cash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
Hunger Related Events dba Taste of the NFL		501(c)(3)	7,692				DONOR ADVISED FUND GRANT PAYMENTS
In Defense of Animals		501(c)(3)	11,640				DONOR ADVISED FUND GRANT PAYMENTS
International Breast Cancer Research Foundation		501(c)(3)	8,108				DONOR ADVISED FUND GRANT PAYMENTS
International Children's Heart Foundation		501(c)(3)	7,491				DONOR ADVISED FUND GRANT PAYMENTS
International Fund for Animal Welfare		501(c)(3)	11,898				DONOR ADVISED FUND GRANT PAYMENTS
Italy Earthquake Relief - a GlobalGiving Project		501(c)(3)	23,535				DONOR ADVISED FUND GRANT PAYMENTS
It's Meow or Never Animal Rescue - Sanctuary		501(c)(3)	13,827				DONOR ADVISED FUND GRANT PAYMENTS
Jimmie Johnson Foundation		501(c)(3)	57,925				DONOR ADVISED FUND GRANT PAYMENTS
Juvenile Diabetes Research Foundation (JDRF)		501(c)(3)	10,037				DONOR ADVISED FUND GRANT PAYMENTS
KIDS CANCER CONNECTION		501(c)(3)	26,919				DONOR ADVISED FUND GRANT PAYMENTS

(a) Name and address of organization or government	( <b>b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Kittens Inc		501(c)(3)	16,393				DONOR ADVISED FUND GRANT PAYMENTS
Leukemia & Lymphoma Society		501(c)(3)	23,740				DONOR ADVISED FUND GRANT PAYMENTS
Lollipop Theater Network		501(c)(3)	9,196				DONOR ADVISED FUND GRANT PAYMENTS
Love-A-Stray Animal Rescue		501(c)(3)	38,168				DONOR ADVISED FUND GRANT PAYMENTS
Make-A-Wish Foundation		501(c)(3)	37,773				DONOR ADVISED FUND GRANT PAYMENTS
Making Footballs that Can Save Lives in Africa - a		501(c)(3)	6,287				DONOR ADVISED FUND GRANT PAYMENTS
Malarıa No More		501(c)(3)	8,000				DONOR ADVISED FUND GRANT PAYMENTS
March of Dimes		501(c)(3)	8,091				DONOR ADVISED FUND GRANT PAYMENTS
Marianas Psychiatric Foundation		501(c)(3)	11,760				DONOR ADVISED FUND GRANT PAYMENTS
Marine Toys for Tots Fnd		501(c)(3)	119,080				DONOR ADVISED FUND GRANT PAYMENTS

Form 990,Schedule I, P	art II, Gra	<u>nts and Other A</u>	ssistance to Gov	ernments and O	rganizations in	the United States	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Mount Sinai School of Medicine of NYU		501(c)(3)	6,586				DONOR ADVISED FUND GRANT PAYMENTS
Music For Troops Inc		501(c)(3)	8,869				DONOR ADVISED FUND GRANT PAYMENTS
MusiCares Foundation		501(c)(3)	5,996				DONOR ADVISED FUND GRANT PAYMENTS
Musicians On Call		501(c)(3)	48,775				DONOR ADVISED FUND GRANT PAYMENTS
Natural Resources Defense Council		501(c)(3)	16,776				DONOR ADVISED FUND GRANT PAYMENTS
NetDay		501(c)(3)	5,235				DONOR ADVISED FUND GRANT PAYMENTS
Neurofibromatosis Inc		501(c)(3)	35,321				DONOR ADVISED FUND GRANT PAYMENTS
New Orleans Area Habitat for Humanity		501(c)(3)	26,539				DONOR ADVISED FUND GRANT PAYMENTS
null		501(c)(3)	12,674				DONOR ADVISED FUND GRANT PAYMENTS
O ceana		501(c)(3)	11,298				DONOR ADVISED FUND GRANT PAYMENTS

Form 990,Schedule I,	, Part II, Gra	ants and Other A	ssistance to Go	vernments and (	Organizations in	the United States	\$
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Oıkocredit USA		501(c)(3)	5,289				DONOR ADVISED FUND GRANT PAYMENTS
One Laptop Per Child (OLPC Foundation)	_	501(c)(3)	23,388				DONOR ADVISED FUND GRANT PAYMENTS
One Million Lights	_	501(c)(3)	6,539				DONOR ADVISED FUND GRANT PAYMENTS
O peration Smile	_	501(c)(3)	8,589				DONOR ADVISED FUND GRANT PAYMENTS
O xfam A merica	_	501(c)(3)	15,587				DONOR ADVISED FUND GRANT PAYMENTS
Perfect Harmony Animal Rescue & Sanctuary		501(c)(3)	15,880				DONOR ADVISED FUND GRANT PAYMENTS
ProActive Faith Ministries Inc		501(c)(3)	7,062				DONOR ADVISED FUND GRANT PAYMENTS
Providing Continued Education for 10000 Teachers		501(c)(3)	5,980				DONOR ADVISED FUND GRANT PAYMENTS
RADD	_	501(c)(3)	8,348				DONOR ADVISED FUND GRANT PAYMENTS
Rainforest Foundation	_	501(c)(3)	11,012				DONOR ADVISED FUND GRANT PAYMENTS

Form 990, Schedule I, F	Part II, Gra	ints and Other A	ssistance to Gov	ernments and O	rganizations in	the United States	}
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Rancho Coastal Humane Society		501(c)(3)	12,141				DONOR ADVISED FUND GRANT PAYMENTS
Rebuilding Together		501(c)(3)	47,161				DONOR ADVISED FUND GRANT PAYMENTS
Red Bank Veterinary Foundation		501(c)(3)	13,724				DONOR ADVISED FUND GRANT PAYMENTS
Renovate Three Elementary Schools in Laos - a Glob		501(c)(3)	5,714				DONOR ADVISED FUND GRANT PAYMENTS
Restore Australia's Forest After Wildfires - a Glo		501(c)(3)	63,566				DONOR ADVISED FUND GRANT PAYMENTS
Restore Historic Castle in Szadvar Hungary - a Gl		501(c)(3)	12,493				DONOR ADVISED FUND GRANT PAYMENTS
Right To Play		501(c)(3)	7,089				DONOR ADVISED FUND GRANT PAYMENTS
Rwanda Radio Project for Orphans - a GlobalGiving		501(c)(3)	7,050				DONOR ADVISED FUND GRANT PAYMENTS
Saint Vincent Catholic Medical Centers		501(c)(3)	9,760				DONOR ADVISED FUND GRANT PAYMENTS
Samaritan's Purse		501(c)(3)	8,862				DONOR ADVISED FUND GRANT PAYMENTS

Form 990,Schedule I,	Part II, Gr	ants and Other	Assistance to Gov	ernments and C	rganizations in	the United States	3
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Save a Child's Heart Foundation		501(c)(3)	38,590				DONOR ADVISED FUND GRANT PAYMENTS
Save the Children		501(c)(3)	41,951				DONOR ADVISED FUND GRANT PAYMENTS
Save the Children 2004 Tsunami Relief Fund		501(c)(3)	20,480				DONOR ADVISED FUND GRANT PAYMENTS
Second Chance Animal Rescue & Adoptions Inc		501(c)(3)	31,634				DONOR ADVISED FUND GRANT PAYMENTS
Send a Child in India to School for a Year - a Glo		501(c)(3)	12,488				DONOR ADVISED FUND GRANT PAYMENTS
Share Our Strength		501(c)(3)	53,215				DONOR ADVISED FUND GRANT PAYMENTS
Sheltie Rescue of Central Indiana		501(c)(3)	12,971				DONOR ADVISED FUND GRANT PAYMENTS
Shepherd's Hope Inc		501(c)(3)	10,470				DONOR ADVISED FUND GRANT PAYMENTS
SHOPA Kids in Need Foundation		501(c)(3)	20,208				DONOR ADVISED FUND GRANT PAYMENTS
Sidelines Club		501(c)(3)	8,300				DONOR ADVISED FUND GRANT PAYMENTS

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Skye's Spirit Wildlife Rehabilitation Center		501(c)(3)	22,050				DONOR ADVISED FUND GRANT PAYMENTS
Society of Singers Inc		501(c)(3)	5,067				DONOR ADVISED FUND GRANT PAYMENTS
Solar Electric Light Fund (SELF)		501(c)(3)	25,843				DONOR ADVISED FUND GRANT PAYMENTS
Sports 4 All Foundation		501(c)(3)	9,150				DONOR ADVISED FUND GRANT PAYMENTS
St Jude Children's Research Hospital		501(c)(3)	226,101				DONOR ADVISED FUND GRANT PAYMENTS
Stand Up To Cancer		501(c)(3)	35,979				DONOR ADVISED FUND GRANT PAYMENTS
Starlight Starbright Children's Foundation		501(c)(3)	8,008				DONOR ADVISED FUND GRANT PAYMENTS
Stefan Adelipour for Life Foundation		501(c)(3)	8,412				DONOR ADVISED FUND GRANT PAYMENTS
Susan G Komen Breast Cancer Fnd		501(c)(3)	207,933				DONOR ADVISED FUND GRANT PAYMENTS
The Breast Cancer Research Foundation		501(c)(3)	50,725				DONOR ADVISED FUND GRANT PAYMENTS

Form 990,Schedule I,	Part II, Gra	ants and Other A	Assistance to Gov	ernments and O	rganizations in	the United States	<b>S</b>
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable		(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant
The Children's Aid Society		501(c)(3)	8,665				DONOR ADVISED FUND GRANT PAYMENTS
The Elizabeth Glaser Pediatric AIDS Foundation		501(c)(3)	29,144				DONOR ADVISED FUND GRANT PAYMENTS
The Ellie Fund for Breast Cancer		501(c)(3)	12,912				DONOR ADVISED FUND GRANT PAYMENTS
The Family Giving Tree		501(c)(3)	5,868				DONOR ADVISED FUND GRANT PAYMENTS
The Humane Society of the United States		501(c)(3)	124,420				DONOR ADVISED FUND GRANT PAYMENTS
The Marine Mammal Center		501(c)(3)	11,586				DONOR ADVISED FUND GRANT PAYMENTS
The Mr Holland's Opus Foundation		501(c)(3)	7,736				DONOR ADVISED FUND GRANT PAYMENTS
The Nature Conservancy		501(c)(3)	15,208				DONOR ADVISED FUND GRANT PAYMENTS
The Ovarian Cancer Research Fund		501(c)(3)	9,244				DONOR ADVISED FUND GRANT PAYMENTS
The Philadelphia Foundation		501(c)(3)	8,064				DONOR ADVISED FUND GRANT PAYMENTS

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Pink Shamrock Foundation		501(c)(3)	9,817				DONOR ADVISED FUND GRANT PAYMENTS
The Salvation Army National Headquarters		501(c)(3)	56,847				DONOR ADVISED FUND GRANT PAYMENTS
The Senior Care Disabilities Foundation		501(c)(3)	9,630				DONOR ADVISED FUND GRANT PAYMENTS
The Smile Train		501(c)(3)	6,230				DONOR ADVISED FUND GRANT PAYMENTS
The Tap Project by UNICEF - Clean Drinking Water f		501(c)(3)	21,187				DONOR ADVISED FUND GRANT PAYMENTS
The Tony Stewart Foundation		501(c)(3)	5,097				DONOR ADVISED FUND GRANT PAYMENTS
The V Foundation for Cancer Research		501(c)(3)	11,894				DONOR ADVISED FUND GRANT PAYMENTS
Tıbet House New York		501(c)(3)	6,527				DONOR ADVISED FUND GRANT PAYMENTS
Trust for the Future		501(c)(3)	5,640				DONOR ADVISED FUND GRANT PAYMENTS
Turtle Ridge Wildlife Center		501(c)(3)	9,527				DONOR ADVISED FUND GRANT PAYMENTS

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
United States Fund for UNICEF		501(c)(3)	38,300				DONOR ADVISED FUND GRANT PAYMENTS
United Way of Greater Cincinnati		501(c)(3)	13,612				DONOR ADVISED FUND GRANT PAYMENTS
USA HARVEST INC		501(c)(3)	6,345				DONOR ADVISED FUND GRANT PAYMENTS
USO World Headquarters (United Service Organizatio		501(c)(3)	17,750				DONOR ADVISED FUND GRANT PAYMENTS
VH1 Save The Music		501(c)(3)	15,561				DONOR ADVISED FUND GRANT PAYMENTS
Victory Junction Gang Camp		501(c)(3)	13,238				DONOR ADVISED FUND GRANT PAYMENTS
Wild Side of the Mountain Sanctuary		501(c)(3)	17,254				DONOR ADVISED FUND GRANT PAYMENTS
Wolf Conservation Center		501(c)(3)	11,534				DONOR ADVISED FUND GRANT PAYMENTS
Women for Women International		501(c)(3)	7,449				DONOR ADVISED FUND GRANT PAYMENTS
Women's Heart Fnd		501(c)(3)	22,098				DONOR ADVISED FUND GRANT PAYMENTS

nts and Other A	ssistance to Go	vernments and (	Organizations in	the United State	es
(c) IRC Code section if applicable		(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant
501(c)(3)	21,434				DONOR ADVISED FUND GRANT PAYMENTS
501(c)(3)	39,566				DONOR ADVISED FUND GRANT PAYMENTS
501(c)(3)	91,379				DONOR ADVISED FUND GRANT PAYMENTS
501(c)(3)	28,413				DONOR ADVISED FUND GRANT PAYMENTS
501(c)(3)	12,590				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING
501(c)(3)	15,375				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING
501(c)(3)	10,000				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING
501(c)(3)	18,000				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING
501(c)(3)	28,279				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING
501(c)(3)	6,000				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING
501	(c)(3)	(c)(3) 6,000	(c)(3) 6,000	(c)(3) 6,000	(c)(3) 6,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States **(b)** EIN (c) IRC Code (d) A mount of cash (e) A mount of non-(a) Name and address of (f) Method of (a) Description of (h) Purpose of grant section cash valuation (book, non-cash assistance organization grant or assistance FMV, appraisal, or government ıf applıcable assistance other) Chicago Cares 196,436 **FUNDING TO** 501(c)(3) PROMOTE **EFFECTIVE** VOLUNTEERING Children for Children 501(c)(3) 7,000 **FUNDING TO** PROMOTE EFFECTIVE VOLUNTEERING ConKerr Cancer 30,000 501(c)(3) **FUNDING TO** PROMOTE EFFECTIVE VOLUNTEERING 16,000 Corporate Hartz 501(c)(3) **FUNDING TO** PROMOTE **EFFECTIVE** VOLUNTEERING 18,944 **FUNDING TO** FIRSTLINK Inc 501(c)(3) PROMOTE EFFECTIVE VOLUNTEERING Greater DC Cares 501(c)(3) 32,405 **FUNDING TO** PROMOTE EFFECTIVE VOLUNTEERING Greater Philadelphia 501(c)(3) 91,400 **FUNDING TO** Cares PROMOTE EFFECTIVE VOLUNTEERING 198,588 Hands on Atlanta 501(c)(3) **FUNDING TO** PROMOTE **EFFECTIVE** VOLUNTEERING 108,623 **FUNDING TO** Hands on Bay Area 501(c)(3) PROMOTE **EFFECTIVE** VOLUNTEERING 11,333 Hands On Central 501(c)(3) **FUNDING TO** California PROMOTE EFFECTIVE VOLUNTEERING

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code (d) A mount of cash (e) A mount of non-(f) Method of (a) Description of (h) Purpose of grant section valuation (book, non-cash assistance organization grant cash or assistance if applicable FMV, appraisal, or government assistance other) 38,106 **FUNDING TO** Hands On Charlotte 501(c)(3) PROMOTE **EFFECTIVE** VOLUNTEERING 124,275 Hands On Greater 501(c)(3) **FUNDING TO** Portland PROMOTE EFFECTIVE VOLUNTEERING Hands on Greater 14.760 501(c)(3) **FUNDING TO** PROMOTE Richmond EFFECTIVE VOLUNTEERING Hands On Greenville 501(c)(3) 20,222 **FUNDING TO** PROMOTE **EFFECTIVE** VOLUNTEERING 19,700 Hands On Gulf Coast 501(c)(3) **FUNDING TO** PROMOTE EFFECTIVE VOLUNTEERING Hands on Hartford 501(c)(3) 48,563 **FUNDING TO** PROMOTE EFFECTIVE VOLUNTEERING Hands on Miami 501(c)(3) 125,809 **FUNDING TO** PROMOTE EFFECTIVE VOLUNTEERING 9,292 Hands On Miami at 501(c)(3) **FUNDING TO** United Way PROMOTE **EFFECTIVE** VOLUNTEERING Hands on Nashville 95,324 **FUNDING TO** 501(c)(3) PROMOTE EFFECTIVE VOLUNTEERING 62,949 Hands on New Orleans 501(c)(3) **FUNDING TO** PROMOTE EFFECTIVE VOLUNTEERING

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (d) A mount of cash (e) A mount of non-(a) Name and address of **(b)** EIN (c) IRC Code (f) Method of (q) Description of (h) Purpose of grant organization section grant cash valuation (book, non-cash or assistance if applicable FMV, appraisal, or government assistance assistance other) 501(c)(3) Hands On North Texas 36,650 **FUNDING TO** PROMOTE **EFFECTIVE** VOLUNTEERING 501(c)(3) Hands on 14.577 **FUNDING TO** SacramentoV olunteer PROMOTE Center **EFFECTIVE** VOLUNTEERING 501(c)(3) Hands on Twin Cities 108,090 **FUNDING TO** PROMOTE **EFFECTIVE** VOLUNTEERING HandsOn Jacksonville 501(c)(3) 61,191 **FUNDING TO** PROMOTE **EFFECTIVE** VOLUNTEERING 501(c)(3) Home Depot Incentives 30,000 **FUNDING TO** Incorporated PROMOTE **EFFECTIVE** VOLUNTEERING Jersey Cares 501(c)(3) 49,343 **FUNDING TO** PROMOTE **EFFECTIVE** VOLUNTEERING LA Works 501(c)(3) 57,550 **FUNDING TO** PROMOTE **EFFECTIVE** VOLUNTEERING Make A Difference 501(c)(3) 176,915 **FUNDING TO** PROMOTE **EFFECTIVE** VOLUNTEERING Metro Volunteers 501(c)(3) 79,464 **FUNDING TO** PROMOTE **EFFECTIVE** VOLUNTEERING Michigan Nonprofit 501(c)(3) 17,456 **FUNDING TO** PROMOTE Association **EFFECTIVE** 

VOLUNTEERING

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (b) EIN (c) IRC Code (d) A mount of cash (e) A mount of non-(a) Description of (a) Name and address of (f) Method of (h) Purpose of grant section valuation (book, non-cash assistance organization grant cash or assistance FMV, appraisal, or government if applicable assistance other) **FUNDING TO** Mitra Technology 501(c)(3) 14,412 Foundation PROMOTE **EFFECTIVE** VOLUNTEERING MONTGOMERY CTY VOL 501(c)(3) 10,000 **FUNDING TO** CENTER-CVC PROMOTE EFFECTIVE VOLUNTEERING New York Cares 150,814 501(c)(3) **FUNDING TO** PROMOTE EFFECTIVE VOLUNTEERING North Coast Opportunities 501(c)(3) 21,569 **FUNDING TO** PROMOTE **EFFECTIVE** VOLUNTEERING Ovarian Cancer Research 55,000 **FUNDING TO** 501(c)(3) Fund PROMOTE EFFECTIVE VOLUNTEERING Pass It Along 501(c)(3) 67,040 **FUNDING TO** PROMOTE EFFECTIVE VOLUNTEERING Pittsburgh Cares 501(c)(3) 34,872 **FUNDING TO** PROMOTE EFFECTIVE VOLUNTEERING Prince George's Volunteer 7,444 501(c)(3) **FUNDING TO** Center Inc PROMOTE **EFFECTIVE** VOLUNTEERING Seattle Works 10,504 **FUNDING TO** 501(c)(3) PROMOTE EFFECTIVE VOLUNTEERING 15,000 Service for Peace- New 501(c)(3) **FUNDING TO** York PROMOTE EFFECTIVE VOLUNTEERING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Target Commercial Interiors		501(c)(3)	29,935				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING
The Vol Cntr of Lewis Mason & Thurston Counties		501(c)(3)	17,170				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING
The Vol Ctr Of Greensboro Inc		501(c)(3)	7,000				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING
United Way for Southeastern Michigan		501(c)(3)	19,000				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING
United Way of Central Minnesota		501(c)(3)	24,211				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING
United Way of Central Texas		501(c)(3)	30,240				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING
United Way of Larimer County Volunteer Center		501(c)(3)	15,285				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING
Utah Food Bank Services		501(c)(3)	7,650				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING
Volunteer 21		501(c)(3)	20,000				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING
Volunteer Action Center		501(c)(3)	25,500				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING

Form 990,Schedule I,	Part II, Gra	ants and Other A	Assistance to Go	vernments and	Organizations i	the United State	es
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
V olunteer Broward		501(c)(3)	14,512				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING
V olunteer Canada		501(c)(3)	63,200				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING
Volunteer Center of Gloucester County		501(c)(3)	7,150				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING
Volunteer Center of North Texas		501(c)(3)	48,123				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING
Volunteer Center of Northwest Suburban Chicago		501(c)(3)	38,791				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING
VOLUNTEER CENTER OF THE LEHIGH VALLEY		501(c)(3)	47,101				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING
Volunteer Center Orange County		501(c)(3)	24,867				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING
V olunteer Ctr O range County		501(c)(3)	12,746				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING
VOLUNTEER FAIRFAX		501(c)(3)	9,000				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING
V olunteer Florida		501(c)(3)	11,495				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING

Form 990,Schedule I,	Part II, Gra	ants and Other A	Assistance to Go	vernments and	Organizations in	the United State	s
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Volunteer Frederick Inc		501(c)(3)	32,221				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING
VOLUNTEER HOUSTON		501(c)(3)	30,900				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING
Volunteer Macon Inc		501(c)(3)	40,940				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING
VOLUNTEER MEMPHIS		501(c)(3)	15,000				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING
Volunteer Mobile Inc		501(c)(3)	11,333				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING
Volunteer San Diego		501(c)(3)	42,385				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING
Volunteer Services of Manatee County		501(c)(3)	7,500				FUNDING TO PROMOTE EFFECTIVE VOLUNTEERING

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As Filed Data -

DLN: 93493228001460

OMB No 1545-0047

Schedule J (Form 990)

**Compensation Information** 

2008

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Inspection

Department of the Treasury Internal Revenue Service

ın Part III

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

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

**Employer identification number** Name of the organization Points of Light Foundation 65-0206641 **Questions Regarding Compensation** Νo Yes 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 First class or charter travel Housing allowance or residence for personal use Payments for business use of personal residence Travel for companions Health or social club dues or initiation fees Tax idemnification and gross-up payments Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain **1**b 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? 2 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a Receive a severance payment or change of control payment? Νo 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Νo 4c Νo Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III 501(c)(3) and 501(c)(4) organizations only must complete lines 5-8. 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? 5a Νo 5b Νo Any related organization? If "Yes," to line 5a or 5b, describe in Part III 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 The organization? 6a Νo 6b Any related organization? Νo If "Yes," to line 6a or 6b, describe in Part III 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 Νo Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was

subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe

Νo

### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space 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) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name	(B) Breakdown of	f W-2 and/or 1099-MI	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
Michelle Nunn (1		0	0	0	0	197,506 0	
KRISTINA TECCE (1		0	0	0	0	154,007 0	
(i	)						
(i	)						
(i							
(i							
(i							
(i							
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(i							
(i	)						

## Part III Supplemental Information

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

Ident if ier	Return Reference	Explanation

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DLN: 93493228001460

OMB No 1545-0047

2008

Open to Public Inspection

# **SCHEDULE 0**

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Information to Form 990**

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

**Name of the organization**Points of Light Foundation

Employer identification number

65-0206641

ldentifier	Return Reference	Explanation
New Program Service	Form 990, Part III, Line 2/4d Other Program Services	The Civic Incubator The Civic Incubator creates innovation in civic action - bringing together and supporting emerging service solutions and new ideas through social enterprise, mergers, and joint ventures Currently it is incubating AmeriCorps Alums, generationOn, which is our youth services division, global volunteerism (international HandsOn action centers), and corporate strategy and volunteerism (Corporate Service Council)

ldentifier	Return Reference	Explanation
	Form 990, Part VI, Section A, Line 10	The organization presents the Form 990 at Finance Committee meetings. All board members are invited, and the Form 990 and related materials are sent to the entire board.

ldentifier	Return Reference	Explanation
Conflict of Interest policy	Form 990, Part VI, Section B, Line 12c	The Board signs conflict of interest statements on an annual basis. These statements are reviewed by the governance committee, and any issues are addressed on a case-by-case basis.

ldentifier	Return Reference	Explanation
Compensation reviews & approval process	LSection B. Line	The Executive Committee acts as the Compensation Committee, whose responsibilities include reviewing and approving salaries for officers and/or key employees. The committee's review process includes a comparison of salaries to those of other similar non-profit organizations.

ldentifier	Return Reference	Explanation
Administrative documents publicized	· · ·	The Foundation makes governing documents, conflict of interest policies, and financial statements available to the public. This information is available upon request.

ldentifier	Return Reference	Explanation
Audited Financial Statements	Form 990, Part XI, Line 2b	The organization's financial statements were audited on a consolidated basis

#### DLN: 93493228001460

# OMB No 1545-0047

2008

**Open to Public** Inspection

#### **SCHEDULE R Related Organizations and Unrelated Partnerships** (Form 990)

Department of the Treasury Internal Revenue Service

Attach to Form 990. To be completed by organizations that answerd "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37. ► See separate instructions.

Name of the organization Points of Light Foundation	Employer ident	Employer identification number					
Tollies of Eight Foundation				65-0206641			
Part I Identification of Disregarded Entities							
(A) Name, address, and EIN of disregarded entity	( <b>B)</b> Primary activity	(C) Legal domicile (state or foreign country)	<b>(D)</b> Total income	<b>(E)</b> End-of-year assets	<b>(F)</b> Direct controlling entity		
Part II Identification of Related Tax-Exempt Organizat	tions						
(A) Name, address, and EIN of related organization	<b>(B)</b> Primary activity	(C) Legal domicile (state or foreign country)	( <b>D</b> ) Exempt Code section	Public charity stat (if section 501(c)(	tus (F) Direct controlling (3)) entity		
Children for Children Foundation							
6 East 43rd Street 25 Floor New York, NY10017 13-3880287	Youth Service	NY	501(c)(3)	7			
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(A) Name, address, and EIN of related organization	Prin	(B) nary activity	(C) Legal domicile (state or foreign country)	<b>(D)</b> Direct controlling entity	(E) Predominant income(related investment, unrelated)	d, Shai	<b>(F)</b> ire of total income	( <b>G)</b> Share of end-of- year assets	(H Disprop allocat	I) ortionate tions?	(I) Code V—UBI amount on Box 20 of K-1	Gene mana parti	agıng
									Yes	No		Yes	No
Part IV Identification of	Related	l Organizations	Taxable as	a Corporation	or Trust	•							
(A) Name, address, and EIN of related org		(B) Primary activity		(C) Legal domicile (state or foreign country)	Direct o	<b>D)</b> ontrolling itity	(E) Type of entity (C corp, S corp or trust)	(F) Share of total income	end	( <b>G)</b> Share of d-of-yea assets	( <b>H)</b> Percentage r ownership		

(6)

Dart V	Transactions with	Datatad	Organizations
	II alisaciiolis Willi	Relateu	OI Uallizations

Part V Transactions with Related Organizations							
Note. Complete line 1 if any entity is listed in Parts II, III or IV			7	Yes	No		
f 1 During the tax year, did the orgranization engage in any of the following transa	actions with one or more related organizations listed in Parts I	I-IV?					
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlle	d entity	J	1a		No		
<b>b</b> Gift, grant, or capital contribution to other organization(s)		Į	1b \	Yes			
<b>c</b> Gift, grant, or capital contribution from other organization(s)		[1	1c		No		
<b>d</b> Loans or loan guarantees to or for other organization(s)		[1	1d		No		
<b>e</b> Loans or loan guarantees by other organization(s)		[1	1e		No		
<b>f</b> Sale of assets to other organization(s)		Į	1f		No		
<b>g</b> Purchase of assets from other organization(s)		L <sup>1</sup>	1g		No		
h Exchange of assets		<u>[</u> 1	1h		No		
i Lease of facilities, equipment, or other assets to other organization(s)		<u>[</u> :	1i		No		
j Lease of facilities, equipment, or other assets from other organization(s)							
k Performance of services or membership or fundraising solicitations for other organization(s)							
l Performance of services or membership or fundraising solicitations by other organization(s)							
m Sharing of facilities, equipment, mailing lists, or other assets							
n Sharing of paid employees		<u>[</u> 1	1n \	Yes			
• Reimbursement paid to other organization for expenses		<u>[</u> 1	10		No		
<b>p</b> Reimbursement paid by other organization for expenses		_1	1p		No		
<b>q</b> O ther transfer of cash or property to other organization(s)			1q		No		
r Other transfer of cash or property from other organization(s)		<u>[</u> :	1r		No		
2 If the answer to any of the above is "Yes," see the instructions for informat	tion on who must complete this line, including covered relation	ships and transaction thresholds					
(A)	(B) Transaction	(c)					
Name of other organization(s)	type(a-r)	Amount Involved					
(1)							
(2)							
(3)							
(4)		<del> </del>					
(4)							
(5)		+					
X-,	1						

## Part VI Unrelated Organizations Taxable as a Partnership

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

									_			
<b>(A)</b> Name, address, and EIN of entity	<b>(B)</b> Primary activity	<b>(C)</b> Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		<b>(E)</b> Share of end-of-year assets	<b>(F)</b> Disproprtionate allocations?		( <b>G)</b> Code V—UBI amount on Box 20 of K-1	(H) General or managing partner?	
			Yes	No		Yes	No		Yes	No		
			•	•		•		Cabadul	D / Form			