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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)

Department of the Treasury Internal Revenue Service

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

Form 990 header section containing organization name (ROBERT TOIGO FOUNDATION), address (180 GRAND AVENUE, OAKLAND, CA), and identification numbers.

Table with 3 main columns: Description, Prior Year, Current Year. Rows include Revenue (Total: 4,058,725) and Expenses (Total: 4,095,398).

Signature Block section with signature of Nancy Sims, President, dated 10-1-10.

Preparer's information section for Armanino McKenna LLP, dated 9/29/10.

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

SCANNED NOV 03 2010

RECEIVED OCT 18 2010 OGDEN UT IRS-OSC

Handwritten numbers 215 and 15

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission: SEE SCHEDULE O FOR CONTINUATION
THE ROBERT TOIGO FOUNDATION WAS FOUNDED IN 1989 TO ADDRESS THE LACK OF
DIVERSITY WITHIN THE FINANCE INDUSTRY. THE FOUNDATION'S FOCUS IS TO
IDENTIFY AND SUPPORT THE NEXT GENERATION OF TALENT FOR FINANCE THROUGH
FELLOWSHIP, LEADERSHIP DEVELOPMENT AND CAREER MANAGEMENT SERVICES.

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

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

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

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

4 Describe the 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 allocations to others, the total expenses, and revenue, if any, for each program service reported.

SEE SCHEDULE O FOR CONTINUATION(S)

4a (Code:) (Expenses \$ 1,312,428. including grants of \$ 465,000.) (Revenue \$ 14,100.)
FELLOWSHIP PROGRAMMING

THE FOUNDATION INVESTMENT OF MORE THAN \$1.2 MILLION IN 2009 IN MBA
FELLOWSHIP PROGRAMMING DIRECTLY BENEFITS AND SUPPORTS MORE THAN 130
MINORITY MBA STUDENTS PARTICIPATING IN THE PROGRAM. AS A KEY COMPONENT
TO OUR MISSION TO CHANGE THE FACE OF FINANCE, THE FOUNDATION INCREASED
ITS INVESTMENTS IN THIS AREA AS A REFLECTION OF THE CHANGING EMPLOYMENT
LANDSCAPE AND OVERALL ECONOMIC ISSUES. THE DEDICATION OF PROFESSIONAL
RESOURCES NECESSARY TO SERVE THIS NATIONALLY DISBURSED GROUP ALLOWED
FOR BOTH AN EARLIER AND STRONGER PRESENCE OF THE FOUNDATION IN
RECRUITMENT ACTIVITIES (CONFERENCES, WEBINARS AND AD PLACEMENT), AS
WELL AS THE ABILITY TO BUILD GREATER CONNECTIONS WITH STUDENTS,

4b (Code:) (Expenses \$ 723,871. including grants of \$) (Revenue \$ 5,375.)
APEX LEADERSHIP PROGRAM

TOIGO MINORITY MBA STUDENTS BENEFITED FROM AN EXPANDED OFFERING OF
TOIGO'S APEX TRAINING EVENTS IN 2009. THE FOUNDATION INVESTS \$10,000
PER STUDENT IN THEIR EDUCATION AND PROFESSIONAL DEVELOPMENT PURSUITS-
ABOVE AND BEYOND THEIR MBA CURRICULUM. THE FOUNDATION'S TRAINING
PROGRAM LINE-UP WAS EXPANDED TO ADDRESS THE NEEDS OF TODAY'S NEWEST
GENERATION OF MINORITY MBA STUDENTS INCLUDING ENHANCED CAREER COACHING,
COUNSELING AND LEADERSHIP DEVELOPMENT TRAINING (BOTH SOFT SKILLS AND
TECHNICAL SKILLS). THESE WORKSHOPS AND LEARNING SESSIONS WERE DESIGNED
BY THE FOUNDATION IN COLLABORATION WITH PROFESSIONAL FACILITATORS
AND/OR TRAINING ORGANIZATIONS TO PRESENT BOTH THEORETICAL AS WELL AS

4c (Code:) (Expenses \$ 561,085. including grants of \$) (Revenue \$ 31,731.)
CAREER MANAGEMENT

TOIGO'S CAREER MANAGEMENT SERVICES RAMPED UP SIGNIFICANTLY IN 2009 TO
ADDRESS ACCELERATED JOB DISPLACEMENT AND CAREER COUNSELING DEMANDS
WITHIN OUR NETWORK OF 800+ MINORITY FINANCE PROFESSIONALS. AN EXPANDED
CAREER COACHING PLATFORM WAS LAUNCHED PROVIDING A RESOURCE OF SENIOR
CONTRACTORS WITH EXPERIENCE IN FINANCE AND HUMAN RESOURCES TO ADDRESS
THE VARIED NEEDS OF YOUNG PROFESSIONALS FROM THE EARLY STAGE TO
MID-CAREER AND SENIOR MANAGEMENT LEVELS. THIS TEAM ALSO ENGAGED IN
PROACTIVE OUTREACH TO PROSPECTIVE EMPLOYER FIRMS TO INTRODUCE THE
FOUNDATION AND PROMOTE ITS JOB PLACEMENT SERVICE. THE FOUNDATION
EXPANDED SUBSCRIBERS AND JOB POSTINGS BY EMPLOYERS ON ITS TOIGOPRO JOB

4d Other program services. (Describe in Schedule O.)
 (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ► \$ 2,597,384.

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>		X
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? <i>If "Yes," complete Schedule C, Part III</i>		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11	Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	X	
	<ul style="list-style-type: none"> • Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i> • Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i> • Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i> • Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i> • Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> • Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? <i>If "Yes," complete Schedule D, Part X.</i> 		
12	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i>	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional</i>		
		Yes	No
12A			X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
14b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X

Part IV Checklist of Required Schedules (continued)

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

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

Section A. Governing Body and Management

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

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

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

Section C. Disclosure

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

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request

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.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: PATRISHA GILL - (510) 763-5771
180 GRAND AVENUE, NO. 900, OAKLAND, CA 94612

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's **current** key employees. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
NANCY SIMS PRESIDENT	70.00			X		X	255,685.	0.	11,208.	
MARCOS RODRIGUEZ CHAIRMAN	1.00	X		X			0.	0.	0.	
DENISE NAPPYER VICE CHAIR	1.00	X		X			0.	0.	0.	
ANDREA BELDECOS SECRETARY	1.00	X		X			0.	0.	0.	
WALT KOZIOL TREASURER	1.00	X		X			0.	0.	0.	
SUE TOIGO FOUNDER	1.00	X		X			0.	0.	0.	
BARBARA NOVICK GOVERNING BOARD MEMBER	1.00	X					0.	0.	0.	
CHUCK VALDES GOVERNING BOARD MEMBER	1.00	X					0.	0.	0.	
DAVID FANN GOVERNING BOARD MEMBER	1.00	X					0.	0.	0.	
DWIGHT SKERRITT GOVERNING BOARD MEMBER	1.00	X					0.	0.	0.	
IVAN GALLEGOS GOVERNING BOARD MEMBER	1.00	X					0.	0.	0.	
JAMES MITCHELL JR. GOVERNING BOARD MEMBER	1.00	X					0.	0.	0.	
JANE BUYERS RUSSO GOVERNING BOARD MEMBER	1.00	X					0.	0.	0.	
JANICE COOK ROBERTS GOVERNING BOARD MEMBER	1.00	X					0.	0.	0.	
JAY FERGUSON GOVERNING BOARD MEMBER	1.00	X					0.	0.	0.	
JOSE FERNANDEZ GOVERNING BOARD MEMBER	1.00	X					0.	0.	0.	
MELVIN LINDSEY GOVERNING BOARD MEMBER	1.00	X					0.	0.	0.	

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
MICOLYN YALONIS GOVERNING BOARD MEMBER	1.00	X						0.	0.	0.
ROBERT JONES GOVERNING BOARD MEMBER	1.00	X						0.	0.	0.
SHAKA RASHEED GOVERNING BOARD MEMBER	1.00	X						0.	0.	0.
SHELLEY SMITH GOVERNING BOARD MEMBER	1.00	X						0.	0.	0.
TERRY L. JONES GOVERNING BOARD MEMBER	1.00	X						0.	0.	0.
VICTOR MACFARLANE GOVERNING BOARD MEMBER	1.00	X						0.	0.	0.
VICTOR MIRAMONTES GOVERNING BOARD MEMBER	1.00	X						0.	0.	0.
WILLIAM COBB, JR. GOVERNING BOARD MEMBER	1.00	X						0.	0.	0.
1b Total								255,685.	0.	11,208.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **1**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
GILL'S BUSINESS SERVICES 15 MICHELSON COURT, SACRAMENTO, CA 95835	FINANCIAL & PAYROLL ACCOUNTING, HR/BENEF	164,340.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **1**

Part VIII Statement of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c	737,984.			
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	3084684.			
	g Noncash contributions included in lines 1a-1f \$					
	h Total. Add lines 1a-1f		3822668.			
	Program Service Revenue	2 a CAREER FAIR FEES	Business Code: 561300	25,360.	25,360.	
b FELLOWSHIP APP. FEES		611710	16,750.	16,750.		
c OTHER PROGRAM REV.		900099	9,096.	9,096.		
d						
e						
f All other program service revenue						
g Total. Add lines 2a-2f			51,206.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		3,628.		3,628.	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross Rents	(i) Real				
		(ii) Personal				
		b Less: rental expenses				
		c Rental income or (loss)				
	d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
		b Less: cost or other basis and sales expenses				
		c Gain or (loss)				
	d Net gain or (loss)					
	8 a Gross income from fundraising events (not including \$ 737,984. of contributions reported on line 1c). See Part IV, line 18	a	228500.			
		b Less: direct expenses	b	537110.		
c Net income or (loss) from fundraising events			<308,610.>		<308610.>	
9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities					
10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b				
	c Net income or (loss) from sales of inventory					
Miscellaneous Revenue		Business Code				
11 a	a					
	b					
	c					
	d All other revenue					
e Total. Add lines 11a-11d						
12 Total revenue. See instructions		3568892.	51,206.	0.	<304982.>	

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	465,000.	465,000.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	266,893.	232,197.	13,344.	21,352.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	461,505.	289,041.	73,241.	99,223.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	101,182.	16,937.	78,367.	5,878.
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal	27,945.	22,915.	3,074.	1,956.
c Accounting	162,848.	133,536.	17,913.	11,399.
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other	543,070.	405,008.	99,830.	38,232.
12 Advertising and promotion	56,308.	43,344.	5,400.	7,564.
13 Office expenses	10,615.	5,759.	3,797.	1,059.
14 Information technology				
15 Royalties				
16 Occupancy	129,206.	116,047.	13,104.	55.
17 Travel	150,368.	128,175.	12,256.	9,937.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	367,103.	345,602.	7,164.	14,337.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	57,740.	47,347.	6,351.	4,042.
23 Insurance	9,098.	6,580.	2,284.	234.
24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a UNCOLLECTIBLE RECEIVABLES	263,466.	263,466.		
b DISCOUNT ON PLEDGES	34,927.	34,927.		
c TELEPHONE	25,240.	17,971.	4,336.	2,933.
d PRINTING	14,661.	12,996.	269.	1,396.
e MAINTENANCE & REPAIRS	14,160.	6,694.	7,310.	156.
f All other expenses	6,571.	3,842.	1,878.	851.
25 Total functional expenses. Add lines 1 through 24f	3,167,906.	2,597,384.	349,918.	220,604.
26 Joint costs Check here <input type="checkbox"/> 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				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year	
Assets	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments	1,282,675.	2	766,601.
	3	Pledges and grants receivable, net	3,307,359.	3	4,452,053.
	4	Accounts receivable, net	13,260.	4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	90,176.	9	49,421.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	465,723.		
	10b	Less: accumulated depreciation	358,192.	10c	107,531.
	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	10,035.	15	10,085.
16	Total assets. Add lines 1 through 15 (must equal line 34)	4,856,231.	16	5,385,691.	
Liabilities	17	Accounts payable and accrued expenses	99,465.	17	228,104.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	99,465.	26	228,104.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	757,259.	27	<231,290.>
	28	Temporarily restricted net assets	3,999,507.	28	5,388,877.
	29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	4,756,766.	33	5,157,587.
34	Total liabilities and net assets/fund balances	4,856,231.	34	5,385,691.	

Part XI Financial Statements and Reporting

- 1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
- b Were the organization's financial statements audited by an independent accountant?
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2009)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization

ROBERT TOIGO FOUNDATION

Employer identification number

13-3565420

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

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

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

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

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

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

Schedule A (Form 990 or 990-EZ) 2009

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2,833,586.	3,301,113.	5,572,111.	4,256,130.	3,822,668.	19,785,608.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	2,833,586.	3,301,113.	5,572,111.	4,256,130.	3,822,668.	19,785,608.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						3,814,643.
6 Public support. Subtract line 5 from line 4						15,970,965.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	2,833,586.	3,301,113.	5,572,111.	4,256,130.	3,822,668.	19,785,608.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	50,076.	119,623.	111,160.	40,052.	3,628.	324,539.
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.)		41,875.				41,875.
11 Total support. Add lines 7 through 10						20,152,022.
12 Gross receipts from related activities, etc. (see instructions)					12	1,718,527.

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	79.25 %
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	80.37 %

16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

Schedule A (Form 990 or 990-EZ) 2009

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶

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

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

Schedule D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization **ROBERT TOIGO FOUNDATION** Employer identification number **13-3565420**

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

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

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

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

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

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

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

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

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

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

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

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

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

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

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

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

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

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

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

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2** Provide the estimated percentage of the year end balance held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment _____ %
 - c Term endowment _____ %
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|-----------------------------|-----|----|
| (i) unrelated organizations | | |
| (ii) related organizations | | |
- b** If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?
- 4** Describe in Part XIV the intended uses of the organization's endowment funds.

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other		465,723.	358,192.	107,531.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				107,531.

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	3,568,892.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	3,167,906.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	400,986.
4	Net unrealized gains (losses) on investments	4	<165.>
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 through 8	9	<165.>
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	400,821.

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

1	Total revenue, gains, and other support per audited financial statements	1	3,543,800.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	<165.>
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	10,000.
e	Add lines 2a through 2d	2e	9,835.
3	Subtract line 2e from line 1	3	3,533,965.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	34,927.
c	Add lines 4a and 4b	4c	34,927.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	3,568,892.

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

1	Total expenses and losses per audited financial statements	1	3,142,979.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	10,000.
e	Add lines 2a through 2d	2e	10,000.
3	Subtract line 2e from line 1	3	3,132,979.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	34,927.
c	Add lines 4a and 4b	4c	34,927.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	3,167,906.

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 X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

FELLOWSHIPS PAID BACK TO ORGANIZATION: 10000.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

DISCOUNT ON PLEDGES: 34927.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

Part XIV Supplemental Information (continued)

FELLOWSHIPS PAID BACK TO ORGANIZATION: 10000.

PART XIII, LINE 4B - OTHER ADJUSTMENTS:

DISCOUNT ON PLEDGES: 34927.

Part III Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col (c))		
		2009 GALA EVENT (event type)	2010 GALA EVENT (event type)	NONE (total number)			
Revenue	1	Gross receipts	893,134.	73,350.		966,484.	
	2	Less: Charitable contributions	664,634.	73,350.		737,984.	
	3	Gross income (line 1 minus line 2)	228,500.			228,500.	
Direct Expenses	4	Cash prizes					
	5	Noncash prizes					
	6	Rent/facility costs	85,451.			85,451.	
	7	Food and beverages	219,709.			219,709.	
	8	Entertainment	51,527.			51,527.	
	9	Other direct expenses	180,423.			180,423.	
	10	Direct expense summary. Add lines 4 through 9 in column (d)					(537,110)
	11	Net income summary. Combine line 3, column (d), and line 10					<308,610.>

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

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

	Yes	No
9 Enter the state(s) in which the organization operates gaming activities: _____ a Is the organization licensed to operate gaming activities in each of these states? b If "No," explain: _____	9a	
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? b If "Yes," explain: _____	10a	
11 Does the organization operate gaming activities with nonmembers?	11	
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12	

13 Indicate the percentage of gaming activity operated in:

- a The organization's facility
- b An outside facility

13a		%
13b		%

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

Name ▶ _____

Address ▶ _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?

- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer
 Employee
 Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

	Yes	No
13a		
13b		
14		
15a		
16		
17a		

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
STUDENT SCHOLARSHIPS	190	465,000.	0. FMV		STUDENT SCHOLARSHIPS

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

SCHEDULE I, PART I, LINE 2: DETAILED RECORDS ARE KEPT OF THE GRANTS AND ASSISTANCE PROVIDED TO INDIVIDUALS AND ORGANIZATIONS.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

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Part I Questions Regarding Compensation

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

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

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

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

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

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

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

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** 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.

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

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

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

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

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

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

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

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

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

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2009

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

TOIGO IS THE ONLY NON-PROFIT INITIATIVE THAT IS SOLELY DEDICATED TO THE
FIELD OF FINANCE AND TOUCHES THE SPAN OF ACADEMIC AND PROFESSIONAL
CAREER FROM PRE-MBAS THROUGH POST-MBA. SIMPLY STATED, THE TOIGO
FOUNDATION ASPIRES TO "CHANGE THE FACE OF FINANCE" BY IDENTIFYING
FUTURE FINANCE LEADERS WHO DEMONSTRATE THROUGH THEIR ACHIEVEMENTS HOW
COMPANIES CAN EMBRACE DIVERSITY TO BUILD MORE SUCCESSFUL ORGANIZATIONS
AND AT THE SAME TIME PROMOTE A NEW MODEL OF LEADERSHIP IN OUR GLOBAL
ECONOMY.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

PROSPECTIVE APPLICANTS AND ACADEMIC INSTITUTIONS. THE FOUNDATION
HOSTED SEVERAL EDUCATIONAL NETWORKING EVENTS FOR PROSPECTIVE MBAS
PROVIDING ELEMENTS OF THE PROGRAM AND APPLICATION PROCESS. THESE
EVENTS WERE HOSTED DIRECTLY BY THE FOUNDATION OR IN COLLABORATION WITH
ORGANIZATIONS FOCUSED ON BUSINESS SCHOOL RECRUITMENT AND WERE AIMED AT
EDUCATING PROSPECTIVE MINORITY MBA STUDENTS ABOUT THE VALUE OF AN
ADVANCED BUSINESS EDUCATION, THE CAREER POSSIBILITIES WITHIN THE
FINANCE INDUSTRY, AND TOIGO'S ROLE IN FOSTERING LEADERSHIP AND CAREER
ACHIEVEMENT. ADDITIONALLY THE FOUNDATION MADE INVESTMENTS TO ENHANCE
ITS STUDENT SELECTION PROCESS ENGAGING FINANCE INDUSTRY PROFESSIONALS
AND POST-GRADUATE PARTICIPANTS IN THE PROCESS. OUR NEW, MORE RIGOROUS
PROCESS ENSURES THAT FINAL SELECTION OF FELLOWS RESULTS IN THE
SELECTION OF HIGH POTENTIAL LEADERSHIP TALENT. THE FOUNDATION FUNDED
MORE THAN \$515,000 DOLLARS IN TUITION PAYMENTS AND INTERNSHIP STIPENDS
AS PART OF OUR ANNUAL CONTRIBUTION TO THE COST OF EDUCATION FOR THESE

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SELECTED MINORITY MBA STUDENTS. THE FOUNDATION DELIVERED ITS ANNUAL
NEW FELLOW ORIENTATION IN 2009 OFFERING A NEW EDUCATION CURRICULUM
ADDRESSING TIMELY ECONOMIC ISSUES AND INVESTMENT TOPICS, ALONG WITH A
TECHNICAL SKILLS ASSESSMENT TOOL TO BETTER DETERMINE POSITIONING OF
EACH STUDENTS RELATIVE TO THEIR KNOWLEDGE OF FINANCIAL TERMINOLOGY AND
QUANTITATIVE PROCESSES.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:
PRACTICAL, "REAL WORLD" LEARNING PRINCIPLES AND SKILL BUILDING. THE
SETTINGS FOR THESE WORKSHOPS BRING TOGETHER THE NATIONAL TOIGO
FELLOWSHIP CLASS AND OFFER THE FOUNDATION AN OPPORTUNITY TO DELIVER
MORE THAN ITS FOCUSED SKILLS-BASED CURRICULUM. THE GATHERINGS ALSO
HELP TO INSTILL THE TOIGO BRAND, THE IMPORTANCE OF INCLUSION AND
DIVERSE LEADERSHIP AND COMMUNITY GIVEBACK.

A KEY ELEMENT IN TOIGO'S APEX LEADERSHIP INITIATIVES IS THE
FOUNDATION'S DEVELOPMENT AND PUBLICATION OF THOUGHT LEADERSHIP INSIGHTS
AND PERSPECTIVES MADE AVAILABLE TO THE FINANCE INDUSTRY. TOPICS FOCUS
ON DIVERSITY, RETENTION AND EMPLOYMENT PRACTICES, AND PROVIDE FINANCE
FIRMS- AND FINANCE TEAMS AT FORTUNE 500 CORPORATIONS- WITH NEW INSIGHTS
INTO ISSUES FACING THEIR MINORITY MBA WORKFORCE. IN 2009, THE
FOUNDATION PUBLISHED LEADING INDICATORS, WHICH FEATURED THE SENTIMENTS
OF TODAY'S MINORITY PROFESSIONAL REGARDING THEIR CAREER DECISIONS GIVEN
THE UNCERTAINTY OF THE FINANCIAL MARKETS AND JOB PROSPECTS, ALONG WITH
THEIR CONTINUED COMMITMENT TO FINANCE LONG-TERM.

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FURTHER, THE FOUNDATION INTRODUCED ITS KNOWLEDGE MANAGEMENT FUNCTION WITH THE IMPLEMENTATION OF AN INTEGRATED DATA MANAGEMENT SYSTEM TO ACCOMMODATE THE INPUT AND MAINTENANCE OF DATA ACROSS ALL CONSTITUENT DATABASES AND TO CAPTURE MORE TIMELY AND ACCURATE INFORMATION FROM OUR FELLOW ADMINISTRATION AND CAREER MANAGEMENT DEPARTMENTS. THE ALLOCATION OF HUMAN CAPITAL AND FINANCIAL RESOURCES TO ESTABLISH A COMPREHENSIVE-TECHNOLOGY PLATFORM SIGNIFICANTLY ENHANCES THE FOUNDATION'S ABILITY TO ANALYZE AND REPORT ON PROGRAM AND PARTICIPANT PERFORMANCE AND TO CREATE AN EFFECTIVE TOOL FOR OUTREACH TO OUR GROWING NATIONAL PROFESSIONAL NETWORK.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:
BANK TO INCREASE THE OPPORTUNITIES AVAILABLE FOR TOIGO TALENT TO VIEW. THE TOIGOPRO JOB BANK WAS MODIFIED TO PROVIDE GREATER SEARCH CAPABILITIES AND REPORTING ON JOB PLACEMENTS. ADDITIONALLY, THE FOUNDATION ORGANIZED CAREER TREKS TO A HOST OF INDUSTRY EVENTS FOR FELLOWS ACTIVE IN THE JOB MARKET.

WITH RESPECT TO THE EMPLOYMENT NEEDS OF OUR POST-GRADUATE POPULATION, THE FOUNDATION INTRODUCED THE MID-CAREER TALENT CONNECTION WHICH SERVES AS A FORUM FOR EXPERIENCED TALENT AND EMPLOYERS TO DISCUSS CAREER OPPORTUNITIES AND TALENT. HOSTED TWICE IN 2009 (SPRING AND FALL) BROUGHT MORE THAN 25 FIRMS AND 100 TALENTED INDIVIDUALS TOGETHER IN EACH EVENT IN KEEPING WITH THE FOUNDATION'S MISSION AROUND RECRUITMENT AND RETENTION OF DIVERSE TALENT WITHIN FINANCIAL SERVICES. THE CONVERSATIONS THAT ENSUED AND THE SUCCESSFUL EMPLOYMENT OFFERS THAT

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WERE EXTENDED, REINFORCES THE VALUE OF THIS PROGRAM OFFERING, AT
MINIMUM, ANNUALLY.

FORM 990, PART VI, SECTION B, LINE 11: THE GOVERNING BOARD OF DIRECTORS
HAS DELEGATED THE REVIEW OF THE ANNUAL TAX FILING (FORM 990) TO THE FINANCE
AND AUDIT COMMITTEES OF THE BOARD PRIOR TO PRESENTATION TO THE FULL BOARD.
THE FOLLOWING ARE THE SPECIFIC PROCESSES THE ORGANIZATION USES TO REVIEW
FORM 990. THIS DOCUMENT IS PREPARED BY AN INDEPENDENT CPA FIRM. THE TOIGO
FOUNDATION CURRENTLY HOLDS A 4- STAR RATING FROM CHARITY NAVIGATOR.

THE INITIAL REVIEW OF 990 IS REVIEWED BY THE FOUNDATION'S INDEPENDENT
BOOKKEEPER FOR ACCURACY.

THE 2ND REVIEW IS PERFORMED BY THE PRESIDENT.

THE FINAL REVIEW IS COMPLETED BY THE FINANCE AND AUDIT COMMITTEES.

ONCE THE DRAFT IS APPROVED BY THE FINANCE AND AUDIT COMMITTEES, THE CPA IS
INSTRUCTED TO PREPARE A FINAL COPY OF THE FINAL RETURN, INCLUDING ALL
SCHEDULES.

THE FINAL 990 RETURN IS THEN PRESENTED TO THE GOVERNING BOARD BY THE
FINANCE AND AUDIT COMMITTEES.

FORM 990, PART VI, SECTION B, LINE 12C: THE FOUNDATION HAS A CONFLICT OF
INTEREST POLICY WHICH OUTLINES THE PROCESS TO COMMUNICATE, EVALUATE AND

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ADDRESS ANY POTENTIAL CONFLICT OF INTEREST AND THE SPIRIT OF FULL

DISCLOSURE ON ANY MATTERS THAT MAY APPEAR IN QUESTION. THE EXECUTION OF

THIS POLICY RESTS IN THE HANDS OF THE NOMINATING AND BOARD GOVERNANCE

COMMITTEE AND EXECUTIVE COMMITTEE.

FORM 990, PART VI, SECTION B, LINE 15: THE RESPONSIBILITY FOR DETERMINING

THE COMPENSATION OR ADJUSTMENTS TO CEO COMPENSATION IS THE WORK OF THE

EXECUTIVE COMMITTEE WHOSE MEMBERSHIP CONSISTS OF CHAIRS OF THE EXECUTIVE,

FINANCE, PROGRAMS, AUDIT, AND DEVELOPMENT COMMITTEES, ALONG WITH THE

FOUNDER. THE INDIVIDUALS IN THESE ROLES BRING MANAGEMENT, FINANCE, HUMAN

RESOURCES AND NON-PROFIT BACKGROUND INTO THE DISCUSSION AROUND ANNUAL JOB

PERFORMANCE, COMPARABLE SALARIES AND RANGES. SHOULD THERE BE A REQUIREMENT

FOR COMPENSATION DATA OR BENEFITS ANALYSIS, INDEPENDENT COMPENSATION

CONSULTANTS ARE BROUGHT IN TO ADVISE THE EXECUTIVE COMMITTEE IN MAKING

THEIR DECISIONS. THIS COMMITTEE ROTATES ON A PERIODIC BASIS TO ENSURE

OBJECTIVITY AND RELEVANT PERSPECTIVE.

THE PRESIDENT RECEIVES AN ANNUAL EVALUATION WHICH WAS LAST PERFORMED

DECEMBER 2009.

FORM 990, PART VI, SECTION C, LINE 19: ANNUAL FINANCIAL INFORMATION IS

PART OF THE FOUNDATION'S ANNUAL REPORT WHICH IS POSTED ON THE WEB SITE AND

MADE AVAILABLE TO ANYONE, UPON REQUEST.

IN ADDITION TO THE FINANCE COMMITTEE, THE AUDIT COMMITTEE WILL ALSO BE

REVIEWING FORM 990.

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Department of the Treasury
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