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## Form 990

#### 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)

OMB No 1545-0047

2010

Open to Public

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Department of the Treasury Internal Revenue Service The organization may have to use a copy of this return to satisfy state reporting requirements. For the 2010 calendar year, or tax year beginning 2010, and ending C Name of organization FRIENDS OF OAKLAND FOUNDATION, INC D Employer Identification Number Check if applicable: Address change Doing Business As 47-0711028 Number and street (or P.O box if mail is not delivered to street addr) Telephone number Name change Initial return 212 N OAKLAND AVE (402) 685-5621 City, town or country State ZIP code + 4 Terminated OAKLAND Amended return NE 68045 **G** Gross receipts \$ 107,912 H(a) is this a group return for affiliates? F Name and address of principal officer: Application pending Yes X No H(b) Are all affiliates included? NE 68045 Marlene Anderson 212 N Oakland Ave Oakland If 'No,' attach a list. (see instructions) 4947(a)(1) or Tax-exempt status 501(c) ( ) < (insert no.) 527 Website: ► www.friendsofoaklandfoundation.com H(c) Group exemption number Form of organization: X Corporation Trust L Year of Formation 1987 M State of legal domicile NE Part 1 Summary Briefly describe the organization's mission or most significant activities: TO PROMOTE COMMUNITY Governance Check this box ► | I if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) Activities & Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2010 (Part V, line 2a) 5 10 Total number of volunteers (estimate if necessary) 6 15 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. b Net unrelated business taxable income from Form 990-T, line 34 7 b **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 18,956 22,500. 9 Program service revenue (Part VIII, line 2g) 20,245 -25,947. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 39,201 -3,447.12 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 21,133 85,101. Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column-(A), ling 日) EIVED b Total fundraising expenses (Part IX, column (D), line 25) 0. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 5, 7011 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) ŏ 7,204 7,950. 17 28,337 93,051. Revenue less expenses Subtract line 18 from line 12 10,864 -96,498. OGDEN. **Beginning of Current Year End of Year** Total assets (Part X, line 16) 1,332,222 1,235,724. Total liabilities (Part X, line 26) Net assets or fund balances Subtract line 21 from line 20 1,332,222 1,235,724. Signature/Block id statements, and to the best of my knowledge and belief, it is true, correct, and knowledge Sian Here Marlene Anderson Type or print name and title Print/Type preparer's name Preparer's signature X d PO1238949 08/05/11 Patricia Moderow Paid Preparer ► Patricia Moderow, CPA Firm's name Use Only ▶ 215 N. Oakland Ave. Firm's EIN - 47-0809164 Firm's address Oakland NE 68045 (402) 685-6902

May the IRS discuss this return with the preparer shown above? (see instructions)

Yes

BAA	TEEA0102 10/06/10		Form 9	90 (2010)
4e Total program service expenses	<b>▶</b> 85,121.			
(Expenses \$	including grants of \$ ) (Revenue	\$		
4d Other program services (Describe	in Schedule ().)			
				- <b></b>
		·		
COMMUNITY IMPROVEMENT	r projects	<del>_</del>		
	ED TO OTHER NON PROFIT ENTITIES FOR VARIO			
4c (Code:) (Expenses \$	68,276. including grants of \$ 68,276.)	(Revenue \$		0.)
		<i></i>	. <b></b> .	
		- <b></b>		
	REATING A NEW COMPUTER LAB			
	ED TO OAKLAND-CRAIG PARENT TEACHER ORGANI			
4b (Code: ) (Expenses \$	3 10,325. including grants of \$ 10,325.)	(Revenue \$		0.)
		<b></b>		
			· <b></b>	
	AVIAND-CDATC ADDA CONDENIO			
4a (Code:) (Expenses \$ CHARITABLE CONTRIBUT:	6,520. including grants of \$ 6,500.)  IONS_WERE_COLLECTED_AND_DISTRIBUTED_FOR_E		 L	0.)
A = 10 - 1 - 1 - 1	C 520 mildio 1 ( A C 520 )	<b>O</b> • • •	<del></del>	
expenses, and revenue, if any, for	eculon +>++ (a)(1) trusts are required to report the amount of grants a each program service reported	inu anocations t	o ouiers, the	(Old)
	evernents for each of the organization's three largest program service ection 4947(a)(1) trusts are required to report the amount of grants a	es by expenses	Section 501	(c)(3)
If 'Yes,' describe these changes or		J. F1003;		o
If 'Yes,' describe these new service  3 Did the organization cease conductions	es on Schedule O :ting, or make significant changes in how it conducts, any program se	envices?	Yes X	No
Form 990 or 990-EZ?		. [	Yes X	No
-	y significant program services during the year which were not listed o	on the prior		
TO PROMOTE COMMUNITY	SERVICES			<b>-</b>
1 Briefly describe the organization's		<del></del>	···	
	ns a response to any question in this Part III	-		П
<b>Bartillia</b> Statement of Program	n Service Accomplishments			<del> </del>
Form 990 (2010) FRIENDS OF O.	AKLAND FOUNDATION, INC	4/-071	1028	Page 2

			Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2		Χ
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		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		<u>x</u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		
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? If 'Yes,' complete Schedule D, Part I	6	х	
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		<u>x</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21; 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		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If $Yes$ , complete Schedule D, Part $V$	10	and the second	X
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
á	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a		x
ŧ	Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		<u>x</u>
•	Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		X
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		<u>x</u>
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		<u> </u>
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		Х
	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a		<u> </u>
ł	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	]	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
ŧ	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? If 'Yes,' complete Schedule F, Parts I and IV.	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		Х
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		<u> </u>
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X
20 :	aDid the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		<u> X</u>
t	olf 'Yes' to line 20a, did the organization attach its audited financial statements to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20 b		

			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? If 'Yes,' complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22	x	
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		x
248	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and	24.	!	,,
۲	complete Schedule K. If 'No,'go to line 25	24a 24b		X
		270		
•	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		
C	1 Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
<b>25</b> a	a 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		х
t	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
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		Х
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? If 'Yes,' complete Schedule L, Part III	27		х
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):			ic man.
ā	A current or former officer, director, trustee, or key employee? If Yes, complete Schedule L, Part IV	28a	ļ	Х
ł	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M .	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х_
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		Х
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2  Yes X No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
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		х
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	38	X	
BAA		Earn	. 000	(2010)

# Form 990 (2010) FRIENDS OF OAKLAND FOUNDATION, INC Part VI Statements Regarding Other IRS Filings and Tax Compliance

e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds.  a Did the organization make any taxable distributions under section 4966?  b Did the organization make any taxable distributions under section 4966?  b Did the organization make any taxable distributions under section 4966?  b Gross receipts, included on Form 990, Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  11 Section 501(c)(12) organizations. Enter:  a 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?  b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year  13 Section 501(c)(229) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans in more than one states.		Check if Schedule O contains a response to any question in this Part V	<u> </u>				$\Box$
b Enter the number of Forms W-26 included in line 1a, Enter 0- if not applicable.  1 b I of the tragmation comply with backing rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  2 a Enter the number of employees reported on Form M-3, Transmittal of Wage and Tar State.  2 a Enter the number of employees reported on Form M-3, Transmittal of Wage and Tar State.  2 b I of leads on the calendar year ending with or within the year covered by the return.  3 b If all leads one is reported on time 2b, did the organization file all required federal employment tax returns?  Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).  3 b If Ves I has tifled a Form 990-T for this year? If No, provide an explanation on Schedule 0.  4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a name of the torsegn country.  5 a Was the organization a party to a prohibited out selecter transaction at any time during the tax year?  5 a Was the organization a party to a prohibited tax selecter transaction at any time during the tax year?  5 a Was the organization aparty to a prohibited tax selecter transaction at any time during the tax year?  5 a Was the organization aparty to a prohibited tax selecter transaction or solid than year or that adductible?  5 a Was the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  5 a Yes, to line 6 as 65, did the organization file Form 8886-17?  6 a Does the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor.  6 a Post the organization and the organization in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor.  7 b If Yes, did the organization and the payor and the payor organization file and the payor and the payor and the payor a						Yes	No
c Did the organization comply with hadron withholding rules for reportable payments to vendors and reportable gaming (gambing) minimize to prize with the process of the pr	1	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a		0	5.4	
(gambling) wrinings to prize winners?  2a Enter the number of employees reported on Form W.3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return  bit at least one is reported on line 2a, did the organization file all required feedre employment tax returns?  Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  3a bit the organization have unrelated business goss income of \$1,000 or more during the year?  3b lif the's rise if filed a Form 990.1 for this year? If No, 'provide an explanation in Schedule O.  3a At any time the name of the foreign country.  5b If Yes, 'enter the name of the foreign country.  5c awas the organization a party to a prohibited tax sheller transaction?  6 If Yes, to line 5a or 55, did the organization that it was or is a party to a prohibited tax sheller transaction?  6 If Yes, to line 5a or 55, did the organization file form 8886-17?  6 Does the organization receive a payment in excess of \$75 made party to a prohibition and party for goods and services provided to the payor?  5 Diff Yes, did the organization miculae with every solicitation an express statement that such contributions or gifts were not tax deductible?  6 Diff the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?  6 Diff the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?  7 Degratizations that may receive deductible contributions under section 178(c).  8 Diff Yes, if diff the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?  9 Diff the organization section and payor?  10 Diff the organization section and payor?  11 Diff Yes, if all the organization make any funds, directly or indirectly, to pay premiums on a personal benefit contract?  12 Diff the orga		<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1 b		0	reside i	121/200
28 Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, field for the calendar year ending with or which the year covered by this return.  b) If a least one is reported on line 2a, add the organization file all required federal employment tax returns?  Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-fife (see instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  3b If Yes, end 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).  See instructions for filing requirements for Form 101 F 90-22 1, Report of Foreign Bank and Financial Accounts  Sa Was the organization on the foreign country.  See instructions for filing requirements for Form 101 F 90-22 1, Report of Foreign Bank and Financial Accounts  Sa Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any orthwholdres that were not tax deductible?  6a Doss the organization have annual gross receipts that are normally greater than \$100,000, and did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section \$170(c).  8 b) If Yes, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section \$100,000, and did the organization organization and services provided to the payor?  8 b) If Yes, did the organization for the value of the goods or services provided?  9 b) If the organization self-analysis of the goods or services provided?  9 c) If the organization for service services of \$100,000,000,000,000,000,000,000,000,000		c Did the organization comply with backup withholding rules for reportable payments to vendors (gambling) winnings to prize winners?	and r	reportable gaming	10	X	
b) If a least one is reported on line 2a, add the organization file all required federal employment tax returns?  Note, If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  b) If Yes has it filed a Form 990-T for this year? If No. 'provide an explination in Schedule O.  b) If Yes, 'enter the name of the foreign country.  See instructions for filing requirements for Form TD F-90-22 I, Report of Foreign Bank and Financial accounts.  So Was the organization in a party to a prohibited tax sheller transaction at any time during the tax year?  b) Did any taxable party notify the organization that it was or is a party to a prohibited tax sheller transaction?  c) If Yes,' to line 5 or 55, did the organization that it was or is a party to a prohibited tax sheller transaction?  c) If Yes,' to line 5 or 55, did the organization that it was or is a party to a prohibited tax sheller transaction?  c) If Yes,' to line 5 or 55, did the organization that it was or is a party to a prohibited tax sheller transaction?  c) If Yes,' to line the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?  b) If Yes, and the organization notify the control tax deductible?  c) Organizations that may receive deductible contributions under section 170(c).  a) Did the organization notify the control of the value of the goods or services provided?  c) If Yes,' indicate the number of Forms 8282 field uning the year  e) Did the organization receive a payment in excess of \$75 made partly as a contribution of the value of the organization has a party time during the during the year?  e) Did the organization received a contribution of cars, boats, arriplanes, or other vehicles, did the organization file a Form 1935.  y) If Yes,' and the organization make a distribution to a donor, donor advised funds.	2	a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax State-	2a		0		
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions) 3 a Did the organization have unrelated business gross more of \$1,000 or more during the year? 4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a brain account, or other financial account)? 5 bit Yes, enter the name of the foreign country. 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a Was the organization have annual greas receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 6 a Does the organization have annual greas receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 7 to repanizations that may receive deductible contributions under section 170(c). 8 bit Yes, indicate the number of Forms \$282 filed during the year 9 bit Heves, indicate the number of Forms \$282 filed during the year 9 bit Heves, indicate the number of Forms \$282 filed during the year 9 bit the organization received a contribution of qualified intellectual property, did the organization file Form 899 as required? 1 hit the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations. Did the supporting organizations maintaining donor advised funds. 2 polithe organization make and capital contributions under section 4966? 3 polithe organization make and capital contributions under section 49667. 3 polithe organization make and schribution of cars, boats, airplanes, or other vehicles, did the organizations. Did the supporting organizations make and s				eturns?	- V. T. V. T. T.	t -12-1 1974¢	150 September 1
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  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 bark account, securities account, or other financial account)?  5 Was the organization aparty to a prohibited tax sheller transaction 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 bark account, securities account, or other financial accounts?  5 Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?  5 Life Yes, in line 5 are 55, of the organization file form 8886-f7?  6 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?  6 Does the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  9 Diff the grapinization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  10 Press, did the organization include with every solicitation and expression or gifts were not tax deductible?  11 Press, included in the donor of the value of the goods or services provided?  12 Diff the grapinization that it was required to file form 8202?  13 If Yes, indicate the number of Forms 8282 filed during the year  14 Diff the organization received a contribution of qualified intellectual property, did the organization file a form 1086-07.  15 Diff the organization make a distribution of qualified intellectual property, did the organization file a f		· · · · · · · · · · · · · · · · · · ·					
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Bai Mile 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. X Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 1al7 **b** Enter the number of voting members included in line 1a, above, who are independent. 16 7 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 Х 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 X Did the organization make any significant changes to its governing documents 4 Х since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Х X 6 Does the organization have members or stockholders? 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? ... 7a Х **b** Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7 h Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8a X **b** Each committee with authority to act on behalf of the governing body? 86 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10a Does the organization have local chapters, branches, or affiliates? 10 a X 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? 10b 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11 a X b 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 12a X b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b 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 13 Does the organization have a written whistleblower policy? 13 14 Does the organization have a written document retention and destruction policy? 14 X 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? 飲物 a The organization's CEO, Executive Director, or top management official 15a Х b Other officers of key employees of the organization 15b 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? 16a Х 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? 16h Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > 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 X Upon request 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. State the name, physical address, and telephone number of the person who possesses the books and records of the organization. ►MARLENE ANDERSON 212 N OAKLAND AVE, OAKLAND, NE 68045 (402) 685-5621 BAA

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Form 990 (2010)

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

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

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

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

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

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee										
(A)	(B)	(B) (C)				(D)	(E)	F		
Name and title	Average	l	tion (	check	all t	hat app		Reportable	Reportable	Estimated
	hours per week (describe hours for related organiza- tions in Schedule O)	ndividi ਈ ਵਿਸ਼ਵੇਦਰ ਕਾ direx ਨਾ	anstitutional loostee	Offices	veAmulus Asy	Higt est companisated employee	Farner	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(1) SUSAN BECKNER				х						
PRESIDENT				^						
(2) MARLENE ANDERSON TREASURER				Х						
(3) PATRICIA MODEROW										
SECRETARY	]			х						
(4) BONNIE GOODRICH										
VICE-PRESIDENT				х			-	<del></del>		
(5) AARON ARLT DIRECTOR	0.00	x							ļ	
(6) DONNA BALDWIN	0.00		-					<del> </del>		
DIRECTOR	0.00	x		1	1					
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\$100,000 in compensation from the organization >

Total number of independent contractors (including but not limited to those listed above) who received more than

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						. •	-3,447.			

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns Ali other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	not include amounts reported on lines 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	78,601.	78,601.		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	6,500.		A CONTRACTOR OF THE PARTY OF TH	25
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16		0,300.	deline liby & december of the address of the west of the	A SOURCE OF THE PROPERTY OF TH
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees			用2000年1月1日 - 1月1日 - 1月	とうとはないとう かいかなかん とくからから
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
a	Management				
Ŀ	Legal				
	Accounting	360.	0.	360.	0.
	Lobbying				
	Professional fundraising services. See Part IV, line 17		"被"生"的"的"是"大型特定保险"的	<b>松阳、陈四、李明、李明、李明、李明、李明、李明、李明、李明、李明、李明、李明、李明、李明、</b>	
	Investment management fees .	6,548.	0.	6,548.	0.
	Other				
-	Advertising and promotion				
13	Office expenses	69.	0.	69.	0.
14	Information technology .		<u></u>		<u> </u>
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest		<del> </del>		<del> </del>
	Payments to affiliates				<del> </del>
22	Depreciation, depletion, and amortization	100		100	
23 24	Insurance . Other expenses. Itemize expenses not	408.	0.	408.	0.
24	covered above (List miscellaneous expenses	THE STATE OF THE	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
	of line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a	CERTIFICATES FOR SCHOLARSHIPS	20.	20.	0.	0.
Ł	WEBSITE MAINTENANCE	545.	0.	545.	0.
c					
c					
e					
f	All other expenses .				
25	Total functional expenses. Add lines 1 through 24f	93,051.	85,121.	7,930.	0.
	Joint costs. Check here □ If following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational				
BAA	campaign and fundraising solicitation .		<u> </u>	L <u>.</u>	Form <b>990</b> (2010)
~~~					. OHH 999 (CUIU)

			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash – non-interest-bearing	28,315.	1	97.
	2	Savings and temporary cash investments	310,782.	2	323,277.
	3	Pledges and grants receivable, net		3	
i	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	WIENER SEED TO SEED
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)	The second secon	6	A CONTRACTOR OF THE PROPERTY O
ŝ	7	Notes and loans receivable, net		7	
SSETS	8	Inventories for sale or use		8	
s	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis.  Complete Part VI of Schedule D	<b>全型型的现在分词形式主要</b> 。	MAGA	THE CASE WELL CELL
	b	Less: accumulated depreciation		10 c	
	11	Investments – publicly traded securities	993,125.	11	912,350.
	12	Investments – other securities. See Part IV, line 11		12	
	13	Investments – program-related. See Part IV, line 11		13	
Į	14	Intangible assets		14	
İ	15	Other assets See Part IV, line 11		15	
	16	Total assets Add lines 1 through 15 (must equal line 34)	1,332,222.	16	1,235,724.
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	·····
Ļ	20	Tax-exempt bond liabilities		20	
ÀB	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
- L - T - I	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L.	CALL TOWN THE MENER OF THE	22	marka antera ac
S	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties .		24	
ł	25	Other liabilities. Complete Part X of Schedule D		25	
İ	26	Total liabilities. Add lines 17 through 25	0.	26	0.
NET.		Organizations that follow SFAS 117, check here  and complete lines Through 29 and lines 33 and 34.	THE STATE OF THE PROPERTY OF THE PARTY OF TH	18 E	
Ą	27	Unrestricted net assets	}	27	
ASSETS	28	Temporarily restricted net assets		28	
ξļ		Permanently restricted net assets		29	· · · · · · · · · · · · · · · · · · ·
စ္စ   R		Organizations that do not follow SFAS 117, check here ► X and complete	The second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second secon	12 mgG	- ALT - MODELS - PRINCE THE BEAUTIFUL SECUL SAFETY
FUND	20	lines 30 through 34.	· · · · · · · · · · · · · · · · · · ·	l	ひがから てないろう かかかい しゅうかい かいかい かんかい
	30 ~~	Capital stock or trust principal, or current funds	<del></del>	30	<del> </del>
Ă	31	Paid-in or capital surplus, or land, building, or equipment fund	1 222 222	31	1 005 704
Ă	32	Retained earnings, endowment, accumulated income, or other funds	1,332,222.	32	1,235,724.
BALANCES	33	Total net assets or fund balances.	1,332,222.	33	1,235,724.
S	34	Total liabilities and net assets/fund balances	1,332,222.	34	1,235,724.

BAA

Form 990 (2010)

Form 990 (2010) FRIENDS OF OAKLAND FOUNDATION	, INC	47-0711028	Page 12	2
Part'XI Reconciliation of Net Assets				_
Check if Schedule O contains a response to any question	n in this Part XI			l
				_
1 Total revenue (must equal Part VIII, column (A), line 12) .		1	-3,447.	
2 Total expenses (must equal Part IX, column (A), line 25)		. 2	93,051.	_
3 Revenue less expenses Subtract line 2 from line 1 .		. 3	-96,498.	
4 Net assets or fund balances at beginning of year (must equal F	Part X, line 33, column (A))	4	1,332,222.	
5 Other changes in net assets or fund balances (explain in Sched	dule O)	. 5		
6 Net assets or fund balances at end of year. Combine lines 3, 4 column (B))	, and 5 (must equal Part X, line 33,	6	1,235,724.	
Part XII Financial Statements and Reporting				_
Check if Schedule O contains a response to any question	n in this Part XII			
1 Accounting method used to prepare the Form 990: X Cash	Accrual Other		Yes No	
If the organization changed its method of accounting from a pri in Schedule O.			marie services of the services	,
2a Were the organization's financial statements compiled or review	ved by an independent accountant?		2a X	_
<b>b</b> Were the organization's financial statements audited by an inde	ependent accountant?		2b X	_
c If 'Yes' to line 2a or 2b, does the organization have a committe review, or compilation of its financial statements and selection	e that assumes responsibility for oversight of an independent accountant?	of the audit,	2c	_
if the organization changed either its oversight process or selectin Schedule O.	tion process during the tax year, explain			Š
d if 'Yes' to line 2a or 2b, check a box below to indicate whether separate basis, consolidated basis, or both:	the financial statements for the year were	issued on a		ž.
Separate basis Consolidated basis Both	consolidated and separate basis	:		_
3a As a result of a federal award, was the organization required to Audit Act and OMB Circular A-133?	undergo an audit or audits as set forth in	the Single	3a X	_
b If 'Yes,' did the organization undergo the required audit or audit or audits, explain why in Schedule O and describe any steps to		required audit	3Ь	_
BAA			Form <b>990</b> (2010	ı)

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

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Name of the organization Employer identification number 47-0711028 FRIENDS OF OAKLAND FOUNDATION, INC Rart 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). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the hospital's 4 name, city, and state: 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) 5 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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) Ŕ community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 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 9 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). An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h 11 Type III - Other 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 If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? a Yes No A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11 g (i) A family member of a person described in (i) above? 11 g (ii) A 35% controlled entity of a person described in (i) or (ii) above? 11 g (iil) Provide the following information about the supported organization(s) h (iii) Type of organization (described on lines 1-9 above or IRC section (v) Did you notify the organization in column (i) of your support? (i) Name of supported organization (ii) EIN (vi) Is the organization in (iv) Is the (vii) Amount of support organization in column (i) listed in column (f) (see instructions)) your governing document? organized in the Yes No Yes No Yes No (A) **(B)** (C) **(D) (E)** Carrier and a very ar ask o 13 JE 24 二十二十二 Total BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule A (Form 990 or 990-EZ) 2010

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

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

Sec	tion A. Public Support					· · · · · · · · · · · · · · · · · · ·	
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2006	<b>(b)</b> 2007	<b>(c)</b> 2008	<b>(d)</b> 2009	<b>(e)</b> 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include 'unusual grants.').	10,656.	18,728.	30,090.	18,956.	22,500	. 100,930.
2	Tax revenues levied for the organization's benefit and either paid to it 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	10,656.	18,728.	30,090.	18,956.	22,500	. 100,930.
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)	ارىسىلەتلىكىدىدەردىن ئىلى ئىلارىدىد		朝秋 黄花 のいっちが 一種 ありか	THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE S		
6	Public support. Subtract line 5 from line 4	AND CASH CASH	PERSONAL PERSONAL	name de la company	<b>自然是到了那种的</b>		100,930.
Sec	tion B. Total Support			·	·		
Cale begi	ndar year (or fiscal year nning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	<b>(e)</b> 2010	(f) Total
7	Amounts from line 4 .	10,656.	18,728.	30,090.	18,956.	22,500	. 100,930.
8	Gross income from interest, dividends, payments received on securities loans, rents, royatties and income from similar sources	20,283.	47,200.	51,957.	20,245.	34,970	174,655.
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	The filter and the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second 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second second second second second second second second second second second second second second second second se	the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same 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12	Gross receipts from related activi	ities, etc (see insti	ructions) .			12	2
13	First five years. If the Form 990 organization, check this box and		tion's first, second	d, third, fourth, or	fifth tax year as a	section 501(c)	(3) ▶ □
Sec	tion C. Computation of Pul	blic Support P	ercentage			<del></del>	
14	Public support percentage for 20	•	• •	e 11, column (f))		. 14	<del></del>
15	Public support percentage from 2	2009 Schedule A,	Part II, line 14			. 15	39.83%
16a	33-1/3% support test – 2010. If t and stop here. The organization				I the line 14 is 33.	-1/3% or more,	check this box ► X
b	33-1/3% support test — 2009. If t and stop here. The organization	he organization di qualifies as a pub	d not check a box licly supported org	con line 13 or 16a ganization	a, and line 15 is 3	3-1/ <b>3</b> % or more	, check this box
17a	17a 10%-facts-and-circumstances test — 2010. 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	b 10%-facts-and-circumstances test - 2009. 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 BAA	Private foundation. If the organiz	zation did not ched	ck a box on line 1	3, 16a, 16b, 17a,			nstructions ► 1 1 990 or 990-EZ) 2010

# Schedule A (Form 990 or 990-EZ) 2010 FRIENDS OF OAKLAND FOUNDATION, INC Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Sec	tion A. Public Support	, ,		·/			<del></del>
	dar year (or fiscal yr beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	<b>(e)</b> 2010	(f) Total
	Gifts, grants, contributions and membership fees received. (Do not include	(4) 2000	(6) 250	(0) 2000	(4) 2003	(6) 2510	(i) Total
2	any 'unusual grants.') 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						
7 a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
t	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						
(	Add lines 7a and 7b.				Ţ		
	Public support (Subtract line 7c from line 6.)	general and a magnetical p	prof. processor of appear of 12	grave gente state some state and	and the state of the state of	e progres of market of the second	
Sec	tion B. Total Support		<u></u>		<del>,</del>	<del>,</del>	
Calen	dar year (or fiscal yr beginning in) ►	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	<b>(e)</b> 2010	(f) Total
10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b .  Net income from unrelated business activities not included in line 10b, whether or not the business is						
12	regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add Ins 9, 10c, 11, and 12)						
	First five years. If the Form 990 organization, check this box and	is for the organiza	tion's first, second	d, third, fourth, or	fifth tax year as a	section 501(c)(3)	. ▶□
Sec	tion C. Computation of Pul	olic Support P	ercentage				
15	Public support percentage for 20	10 (line 8, column	(f) divided by line	e 13, column (f))		15	8
16	Public support percentage from 2	2009 Schedule A,	Part III, line 15		•	. 16	8
_	tion D. Computation of Inv			?			
	Investment income percentage for				nn (f))	. 17	ક
	Investment income percentage from			•		18	8
	<b>33-1/3% support tests</b> — <b>2010.</b> If is not more than 33-1/3%, check	the organization of	did not check the	box on line 14. ar	nd line 15 is more s a publicly suppo	than 33-1/3%, and	
b	<b>33-1/3% support tests</b> — <b>2009.</b> If line 18 is not more than 33-1/3%	, check this box a	nd <b>stop here.</b> The	organization qua	alifies as a publicly	supported organiz	1/3%, and ration ►
20	Private foundation. If the organiz	ation did not ched	k a box on line 1	4, 19a, or 19b, ch	neck this box and s	see instructions .	▶ □

Schedule A	(Form 990 or 990-EZ) 2010	FRIENDS OF OAKLAN	D FOUNDATION. INC	47-0711028 Page 4
Part IV	Supplemental Informate Part II, line 17a or 17b (See instructions).	tion. Complete this part t ; and Part III, line 12. Als	o provide the explanations complete this part for an	required by Part II, line 10; my additional information.
	<del></del>			
	·			
			·	

#### SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Open to Public

Name of the organization

Department of the Treasury Internal Revenue Service

FRIENDS OF OAKLAND FOUNDATION, INC 47-0711028 Part led 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 1 Aggregate contributions to (during year) 43,500 3 Aggregate grants from (during year) . Aggregate value at end of year 952,674. Did the organization inform all donors and donor advisors in writing that the assets held in donor advised X Yes funds are the organization's property, subject to the organization's exclusive legal control? No 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? X Yes Nο Part II Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a 2b b Total acreage restricted by conservation easements 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, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? 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 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 >\$ ▶\$ (ii) Assets included in Form 990, Part X . If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 ▶\$ b Assets included in Form 990, Part X

Schedule D (Form 990) 2010 FRIEI						47-07	11028		Page 2
Part III ☐ Organizations Mainta	ining Colle	ctions o	of Art, Histo	orical	Treasures, or	Other Similar As	sets (	contin	ued)
3 Using the organization's acquisition items (check all that apply):	on, accession,	and othe	r records, che	ck any	of the following th	at are a significant us	se of its o	collectio	n
a Public exhibition			d Loan	or excl	hange programs				
<b>b</b> Scholarly research			e Other						
c Preservation for future general	ations								
4 Provide a description of the organ Part XIV.							e in		
5 During the year, did the organiza assets to be sold to raise funds r	ather than to b	e mainta	ned as part o	f the o	rganization's collec	tion?	Yes		No
<u>Part,IV</u> Escrow and Custodia 9, or reported an amo	I Arrangem ount on Forr	<b>ents.</b> C n 990, F	complete if Part X, line	orgar 21.	nization answer	ed 'Yes' to Form	990, P	art IV	, line
1a is the organization an agent, trus included on Form 990, Part X?			intermediary	for cor	ntributions or other	assets not	Yes	[	No
<b>b</b> If 'Yes,' explain the arrangement	ın Part XIV ar	nd comple	te the followin	ig table	e:				
						<b></b>	Amoun	<u>.t</u>	
<b>c</b> Beginning balance			• •	•		1c			
d Additions during the year	•	•			•	1 d			
e Distributions during the year		-	•		•	1e			
f Ending balance .				• •		<u>  1f </u>			<del></del>
2a Did the organization include an a		n 990, Pa	rt X, line 21?	•	•	••	∐ Yes	L	No
b If 'Yes,' explain the arrangement			<del></del>						
Part V Endowment Funds. Co									
	(a) Current	year	(b) Prior year	<u>r</u>	(c) Two years back	(d) Three years back		Four year	
1a Beginning of year balance						-/ January 12 to 1 Tru v a visula NA			a if is more take
<b>b</b> Contributions			<del></del>		·	\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$		なが通じい	自然化新網
c Net investment earnings, gains, and losses						File Brown that when my see 7 - also	. 1		-
d Grants or scholarships						And the second and the second	مارد مارد سام مارد المارد المارد المارد المارد	72445734-024 2	رية الإيكانية الإرتباء الإيكانية الإرتباء
<ul> <li>Other expenditures for facilities and programs</li> </ul>									No.
f Administrative expenses						ration of the contract	ر يسوي ج	gr #5	: - : - <u>: - : - :</u> :
<b>g</b> End of year balance						MERL ALBORY & FREET	F. S. Tabaneth touth	Total	Biringaria
2 Provide the estimated percentage	of the year er	nd balanc	e held as:						
a Board designated or quasi-endow	/ment ►		<b>%</b>						
<b>b</b> Permanent endowment ▶	g								
c Term endowment ►	&								
3a Are there endowment funds not in organization by:	n the possession	on of the	organizatıon t	hat are	e held and administ	tered for the	1	Yes	No
(i) unrelated organizations .							3a(i)		
(ii) related organizations							3a(ii)		х
<b>b</b> If 'Yes' to 3a(ii), are the related o	organizations li	sted as re	aured on Sch	nedule	R?		3b		
4 Describe in Part XIV the intended	•		•				<u></u> ,		<u> </u>
Part VI Land, Buildings, and I									
Description of investment		(a) Cost o	r other basis estment)	(b)	Cost or other asis (other)	(c) Accumulated depreciation	(d)	Book va	alue
<b>1a</b> Land						to the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of			
<b>b</b> Buildings .	Ţ								
c Leasehold improvements	ſ								
<b>d</b> Equipment	Ī								
e Other	<u>.</u> [								
Fotal. Add lines 1a through 1e (Column	n (d) must equ	al Form 9	90, Part X, co	olumn	(B), line 10(c).)	•	-		
BAA		-				Sche	dule <b>D</b> (	orm 99	90) 2010

Schedule D (Form 990) 2010 FRIENDS OF OAKLAN  Part VII Investments—Other Securities. See F	D FOUNDATION,	INC 47-0711028 Page
(a) Description of security or category	(b) Book value	(c) Method of valuation
(including name of security)	(b) Book Value	Cost or end-of-year market value
(1) Financial derivatives	<u> </u>	
(2) Closely-held equity interests	<u> </u>	
(3) Other	<u> </u>	
(A)		
(B)		
(C)		
<u>(a)</u>		
(F)		
(G)		
(H)		
(1)		
Total. (Column (b) must equal Form 990 Part X, column (B) line 12.)		
Part VIII Investments-Program Related. (See	Form 990, Part X.	line 13)
(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
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(8)		
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(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)	line 15)	<u> </u>
Part IX Other Assets. (See Form 990, Part X,		1 05 1 1
	scription	(b) Book value
(1)		
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Total. (Column (b) must equal Form 990, Part X, column(B)	), line 15)	<b>-</b>
Part X Other Liabilities. (See Form 990, Part	X, line 25)	
(a) Description of liability	(b) Amount	The time of the second second property with the second of the second second second
(1) Federal income taxes		可以 · · · · · · · · · · · · · · · · · · ·
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(3)		AND THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPER
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Total. (Column (b) must equal Form 990, Part X, column (B) line 25)	<b>&gt;</b>	<ul><li></li></ul>
2. FIN 48 (ASC 740) Footnote In Part XIV, provide the text of caranyzation's liability for uncertain tax positions under FIN 4	of the footnote to the or	ganization's financial statements that reports the

	<u>anni yang ngalambanan dalah kanan angara kanan kanan kanan kanan kanan kanan kanan kanan kanan kanan kanan ka</u>	-0/1	.1026	Page 4
Pai	t-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)			
2	Total expenses (Form 990, Part IX, column (A), line 25)			
3	Excess or (deficit) for the year. Subtract line 2 from line 1			
4	Net unrealized gains (losses) on investments			
5	Donated services and use of facilities			
6	Investment expenses			
7	Prior period adjustments			
8	Other (Describe in Part XIV)			
9	Total adjustments (net). Add lines 4 through 8			
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 .			
Pai	t XII. Reconciliation of Revenue per Audited Financial Statements With Revenue per R	eturn		
1	Total revenue, gains, and other support per audited financial statements	1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	Sec.		
i	Net unrealized gains on investments	2HARWA		
ı	Donated services and use of facilities 2b			
	Recoveries of prior year grants 2c	製造会		
	Other (Describe in Part XIV) 2d	2 Jak 25 - 22		
•	e Add lines 2a through 2d	2e		
3	Subtract line 2e from line 1	3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	200		
á	Investments expenses not included on Form 990, Part VIII, line 7b 4a	t. 1		
ı	Other (Describe in Part XIV.)	in chara,		
•	: Add lines <b>4a</b> and <b>4b</b>	4c		
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5		
Pai	t'XIII <sup>*</sup>   Reconciliation of Expenses per Audited Financial Statements With Expenses pe	r Ret	um	
1	Total expenses and losses per audited financial statements	1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
ä	Donated services and use of facilities			
ı	Prior year adjustments . 2b	Manage of		
•	Other losses	بتراشيتهم		
•	Other (Describe in Part XIV.)	出り手がか		
•	Add lines 2a through 2d	2e		
3	Subtract line 2e from line 1	3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	/A =		
	Investments expenses not included on Form 990, Part VIII, line 7b	473877847		
	Other (Describe in Part XIV.)	47 - 1		
	: Add lines <b>4a</b> and <b>4b</b>	4c		
Dai	t XIV. Supplemental Information	<u> </u>		
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, 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 additional information	lines 1 this pa	b and 2b; art to provide	

Schedule D (Form 990) 2010 FRIENDS OF OAKLAND FOUNDATION, INC  Rart XIV Supplemental Information (continued)	47-0711028 Pa	age <b>5</b>
RanteXIV® Supplemental Information (continued)		
		- <del>-</del> -
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		<b>_</b>
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SCHEDULE 1 (Form 990)

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

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22. ► Attatch to Form 990.

2010

OMB No. 1545-0047

Open to Publication

Employer identification number 47-0711028

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Part is | General Information on Grants and Assistance

FRIENDS OF OAKLAND FOUNDATION, INC

Department of the Treasury Internal Revenue Service Name of the organization

Partily Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II can be duplicated if additional space is needed...

**≗** □

X Yes

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Oakland Ball Association							
Oakland NE 68045	47-0751411	501(c)(4)	8,129.				quick dry for
(2) Oakland-Craig_PTO							ball fields
Oakland NE 68045	47-6001494		10,325.				computer lab
(3) Oakland Chamber of Commer 212 N Oakland Ave							
Oakland NE 68045	23-7451779	501(c)(6)	8,000.				hanging planters,
(4) OC Music Boosters							Swedish Festival
1							
2	47-6001494		10,000.				band equipment
(5)							
(6)							
<u>ω</u>							
(9)							
2 Enter total number of section 501(c)(3) and government organizations	3) and government or	ganizations					C
3 Enter total number of other organizations	Suoi		-		•		q

Schedule I (Form 990) 2010

TEEA3901 10/29/10

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

Page 2 J. Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. (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 47-0711028 \_\_any\_grant\_funds\_not\_used\_or\_misapplied\_to\_another\_project\_must\_be\_returned Scholarship checks are made payable to the recipients and their respective to the Friends of Oakland Foundation. The grant recipient also agrees to to which the grant funds will be applied. The receipt also states that All grant recipients are required to sign a receipt, stating the project (e) Method of valuation (book, FMV, appraisal, other) provide the Friends of Oakland Foundation with a progress report. (d) Amount of non-cash assistance 6,500. (c) Amount of cash grant FRIENDS OF OAKLAND FOUNDATION, INC 14 educational institutions. (b) Number of recipients (a) Type of grant or assistance Schedule I (Form 990) 2010 1 Scholarships Pt\_III\_Line\_1 Pt\_I\_Line\_2\_ Pt\_I Line\_2\_ Pt\_I Line 2\_ Pt\_I\_Line\_2\_ Pt\_I Line 2\_ Part 2 m 4 IJ 9

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Schedule I (Form 990) 2010

#### **SCHEDULE O** (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047 2010

Department of the Treasury Internal Revenue Service

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

> Attach to Form 990 or 990-EZ.

Open to Public

Name of the organization	Employer identification number			
FRIENDS OF OAKLAND FOUNDATION, INC	47-0711028			
Pt_VI-B, Line 11a FORM 990 IS NOT REVIEWED UNTIL THE ANNUAL MEMBERS' MEETING IN OCTOBER.				
ANY CHANGES NEEDED TO THE FORM WOULD HAVE TO BE	E_ADDRESSED_BY			
FILING AN AMENDED RETURN.				
Pt VI-C, Line 19 GOVERNING DOCUMENTS AND FINANACIAL STATEMENTS	ARE MAINTAINED			
BY THE TREASURER AND ARE AVAILABLE UPON REQUES	T			
Pt_VI-A, Line 6 THE CORPORATION HAS 15 MEMBERS. THESE MEMBERS	ARE VOLUNTEERS			
AND DO NOT HAVE ANY FINANCIAL INTEREST IN THE	CORPORATION.			
Pt_VI-A, Line 7a THE 15 MEMBERS OF THE CORPORATION ELECT THE GO	VERNING BOARD			
4 OFFICERS AND 3 DIRECTORS.	<b>-</b>			
Pt VI-A, Line 7b ALL DECISIONS OF THE GOVERNING BOARD MUST BE A	PPROVED BY			
THE 15 MEMBERS OF THE CORPORATION.				