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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

Open to Public Inspection

OMB No 1545-0047

Α	For th	ie 2010 calendar year, or tax year beginning JULI, 2010 and ending	U	ON 30, 201	1			
В	Check i applicat	C Name of organization		D Employer ident	ification number			
	Addr chan Nam	9 FIRELIGHT FOUNDATION						
<u>_</u>	lchan	ge Doing Business As		27-	2795006			
	Initia retur Term	Number and street (or P.U. box if mail is not delivered to street address) Room/s	urte	E Telephone num	ber -429-8750			
<u> </u>	lated Ame	adod						
느	lretur]Appl	City or town, state or country, and ZIP + 4		G Gross receipts \$	9,140,788.			
L	trou	SANTA CROZ, CA 95000		H(a) Is this a group				
	pone	F Name and address of principal officer:PETER LAUGHARN		for affiliates?	Yes X No			
		SAME AS C ABOVE		H(b) Are all affiliates	ıncluded? Yes No			
ī	Tax-e	cempt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or □	527	If "No." attach	a list. (see instructions)			
		ite: WWW.FIRELIGHTFOUNDATION.ORG		H(c) Group exemp				
			/ear (M State of legal domicile; CA			
	art I		Gai	or tormation, 2010	We State of legal doffliche. C21			
			שת	CDANIEC EC	APDICAN			
8	1	Briefly describe the organization's mission or most significant activities: TO PROVI	DE	TODENIA TT	AFRICAN			
훒	1	COMMUNITY-BASED ORGANIZATIONS THAT IMPROVE C						
Ĕ	2	Check this box if the organization discontinued its operations or disposed of i	nore	than 25% of its net	assets.			
Š	3	Number of voting members of the governing body (Part VI, line 1a)	_	<u>[</u>	3 8			
9	4	Number of independent voting members of the governing body (Part VI, line 1b)		. [4	4 8			
ŝ	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)		· [:	5 13			
Į	6	Total number of volunteers (estimate if necessary)	•		6 20			
Activities & Governance	7.	Total unrelated business revenue from Part VIII, column (C), line 12		· · ·	'a 0.			
ĕ	1	Net unrelated business taxable income from Form 990-T, line 34		· · · -	ъ 0.			
	╁╌	Net unreated business taxable income from Form 950-1, line 34	_					
	1	0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Prior Year	Current Year 8,887,038.			
9	8	Contributions and grants (Part VIII, line 1h)	├ ─		0,007,030.			
ē	9	Program service revenue (Part VIII, line 2g)	<u> </u>		0.000			
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u> </u>		9,835.			
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u></u>		68,915.			
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<u>L_</u>		8,965,788.			
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)			2,062,600.			
	14	Benefits paid to or for members (Part 1x, Column (A) Trie 4)			0.			
Ø	15	Salanes, other compensation, employee benefits (Part X, column (A), lines 5-10)			1,083,328.			
Expenses	16a	Professional fundraising feest Part IX, column (A), line 11e)			0.			
ğ		Total fundraising expenses (Fart IX, column (D), line 23)	1 ide 23 € 245,608.					
ŭ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f(V)	┌─		937,085.			
	18		 		4,083,013.			
	19	Total expenses. Add lines 13-1 (must equal Part IX, columnt (A), line 25) Revenue less expenses. Subtract line 18 from line 12	├─		4,882,775.			
_ 0		nevenue less expenses. Subtract line-to-trout-time uz V	Ba	plantag of Current Voc				
ets or	ہے اف	Total Control Control	Dei	glaning of Current Yea	End of Year 5,485,034.			
85,5	20	Total assets (Part X, line 16)	-					
Net Asse	21	Total liabilities (Part X, line 26)		·····	602,259.			
		Net assets or fund balances. Subtract line 21 from line 20	L	· · · · · · · · · · · · · · · · · · ·	4,882,775.			
	art II	<u>. l +/. l </u>						
Una	ler per	alties of perjuly, I declare that have examined this return, including accompanying schedules and st	ateme	ents, and to the best of	my knowledge and belief, it is			
true	e, corre	ct, and complete. Declaration of preparer (other than efficer) is based on all information of which prep	arer	has any knowledge.				
		May by John /						
Sig	jn 💮	Signature of officer		Date	_			
He	re	Richard Han Starter Scracy regs	r re	1 2 1981	2012			
		Type or print name and title		791				
_		Print/Type preparer's name Reparer's signature . 1	70	ate Check	PTIN			
Pal	id	FRANK H. SMITH Frank H. Smith	ما	2/08/12 d sett-emp	loved			
	parer	Firm's name RAFFA, P.C.		Firm's EIN				
	e Only	Firm's address 1899 L STREET NW, SUITE 900		181113 - 111	<u>^</u>			
Ų O (_ Jy	WASHINGTON, DC 20036		Phone no.	202-822-5000			
				1 Filolie no.				
ıvıa	y uie	RS discuss this return with the preparer shown above? (see instructions)			. LALIYes LINo			

LHA For Paperwork Reduction Act Notice, see the separate instructions.

SCANNED FEB 2 8 2012

032001 02-22-11

Form 990 (2010) FIRELIGHT FOUNDATION
Part IV Checklist of Required Schedules

	,		Yes	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<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		_X_
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		_X_
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
9	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			'
•	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	- 1 1 1		
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X_
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b				
	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b	X	<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization		,	1
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	X	<u> </u>
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,		ŀ	 ₩
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	-	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		x
46	1c and 8a? If "Yes," complete Schedule G, Part II	18		┢┸
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40	1	х
0 0-	complete Schedule G, Part III	19 20a	 	X
	Did the organization operate one or more hospitals? If "Yes," complete Schedule H If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that	<u> zua</u>	\vdash	
U	operate one or more hospitals must attach audited financial statements (see instructions)	20b	l	
	operate one of more hospitale must attach addited interioral statements (see instructions)		990	2010)
			- 1	/

Pai	t 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			İ
	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	1	Х
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		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete		1	
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	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	Ì	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	1		
	Schedule L, Part I	25b		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? If "Yes," complete Schedule L, Part II	26		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? If "Yes," complete			
	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A STATE OF THE STA	28a		X _
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			ł
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			1
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			1
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			1
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	<u> </u>	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	38	X	
		Form	990	(2010)

032004 12-21-10

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
ь	Enter the number of Forms W-2G included in line 1a Enter -0 if not applicable 1b	1		
¢	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	_
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 13			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	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?	За		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			- T
	any contributions that were not tax deductible?	6a		Х
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
7	were not tax deductible?	6b		
7 a	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
a b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	ٿ		
•	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.		_	~
a	Did the organization make any taxable distributions under section 4966?	9a		ļ
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1		
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter	1		
'' a	Gross income from members or shareholders	İ .		
	Gross income from other sources (Do not net amounts due or paid to other sources against	1		
•	amounts due or received from them.)			İ
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	<u> </u>		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	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			
С	Enter the amount of reserves on hand			
14a	3 3 3 3 3	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		Form	990	(2010)

032005 12-21-10

Form 990 (2010) FIRELIGHT FOUNDATION 27-2795006 Part VI | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 8 b Enter the number of voting members included in line 1a, above, who are independent 1h Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision X of officers, directors or trustees, or key employees to a management company or other person? X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 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 $\overline{\mathbf{x}}$ b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X a The governing body? 8a X Each committee with authority to act on behalf of the governing body? 8b 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 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? 10a b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with those of the organization? X 11a 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise X to conflicts? 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe X in Schedule O how this is done 12c X 13 Does the organization have a written whistleblower policy? 13 X 14 Does the organization have a written document retention and destruction policy? 14 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? X a The organization's CEO, Executive Director, or top management official 15a X Other officers or key employees of the organization 15b 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 X taxable entity during the year? 16a 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 List the states with which a copy of this Form 990 is required to be filed ▶CA 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

Se	ctio	n C.	Disc	losure
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public inspection. Indicate how you make these available. Check all that apply

Another's website 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: JANE STOKES - 831-429-8750

740 FRONT STREET, NO. 380, SANTA CRUZ, CA 95060

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.

Check this box if neither the organic	zation nor any related	orga	nıza	tion	cor	nper	<u>nsat</u>	sated any current officer, director, or trustee.					
(A)	(B)	(C)						(D)	(E)	(F)			
Name and Title	Average	١		Pos				Reportable	Reportable	Estimated			
	hours per week (describe	 	heck	c all 1		app		compensation from the	compensation from related organizations	amount of other compensation			
	hours for related organizations ın Schedule	Individual trustee or director	Institutional trustee	Officer	ey employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations			
TOTAL OLGOV	O)	=	=	0	×	Ŧ =	T.						
KERRY OLSON PRESIDENT	5.00	x	1	х			1	0.	0.	0.			
DAVE KATZ	3.00	<u> </u>	├	<u> </u>		┢		- 0.	0.				
DAVE RATZ VICE-PRESIDENT/SECRETARY	1.00	X		x	ļ	1		0.	0.	0			
JONATHAN LEWIS	1.00	^	├	A	-	⊢	-						
TREASURER	1.00	X	Ì	x				0.	0.	0.			
BARBARA FAGEN-SMITH	1.00	 ^	├	<u> </u>		-	-	•					
BOARD MEMBER	1.00	x						0.	0.	0			
GEOFF FOSTER		 	 	 	╁		-						
BOARD MEMBER	1.00	$ \mathbf{x} $		1				0.	0.	0			
ROWLAND HOBBS			 		╁		_						
BOARD MEMBER	1.00	x						0.	0.	0			
DIANA AUBORG MILNER				†			Г						
BOARD MEMBER	1.00	X	1					0.	0.	0			
CATHERINE MILTON	i i												
BOARD MEMBER	1.00	X					ļ	0.	0.	0			
PETER LAUGHARN			Π										
EXECUTIVE DIRECTOR	40.00	ļ	<u> </u>	X	ļ	┡	<u> </u>	108,000.	0.	13,675			
			-	<u> </u>									
				ļ	<u> </u>								
		_	-	\vdash	\vdash		-						
			-		\vdash		-						
		H	\vdash	\vdash	\vdash	-	\vdash						
					L					Form 990 (2010			

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rai	Section A. Officers, Directors, Tru	· · · · · · · · · · · · · · · · · · ·	nplo	yee			High	est	Compensated Employ	ees (continuea)				
(A)		(B)			(C				(D)	(E)			(F)	
	Name and title	Average	Ι.		Pos				Reportable	Reportable		Es	timate	ed
		hours per	(cl	neck	all	that	арр	ly)	compensation	compensatio			nount	of
		week	ă						from	from related			other	
		(describe hours for	direct				L		the	organizations			pensa	
		related	, i	stee			sate		organization	(W-2/1099-MIS	(C)		om th	
		organizations	Trust Trust	ğ		e e	la de		(W-2/1099-MISC)			-	anızat	
		in Schedule	dual	tiona		[원	st co	₩.					d relat	
		0)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				Orga	ınızati	Ulis
		<u>'</u>				F		_						
			_											
								İ						
							Π						•	
			_											
				\vdash		-	-	-						-
			<u> </u>			_	 	L		,				
			_			-	-	-						
1b	Sub-total								108,000.		0	1	3,6	75.
C	Total from continuation sheets to Part V	II, Section A							0.		0.			0.
<u>d</u>	Total (add lines 1b and 1c)						<u> </u>		108,000.		0.	1	<u>3,6</u>	75 <u>.</u>
2	Total number of individuals (including but r	ot limited to th	nose	liste	ed al	bov	e) wl	no r	eceived more than \$100),000 in reportabl	е			
	compensation from the organization									<u>.</u>				1
											ı		Yes	No
3	Did the organization list any former officer,			, ke	y en	nplo	yee,	or t	nighest compensated ei	mployee on				- -
	line 1a? If "Yes," complete Schedule J for s	uch individual										3		X
4	For any individual listed on line 1a, is the si	•		•					•	the organization			+	
	and related organizations greater than \$15	0,000? If "Yes,	" co	mple	ete S	Sch	edul	e J i	for such individual			4		Х
5	Did any person listed on line 1a receive or	accrue compe	nsat	ion f	rom	an	y uni	elat	ted organization or indiv	idual for services				
	rendered to the organization? If "Yes," con	plete Schedul	<u>e J 1</u>	or s	uch	per:	son					5		X
Sec	tion B. Independent Contractors													
1	Complete this table for your five highest countries the organization.	mpensated in	depe	ende	ent c	ont	racto	ors t	that received more than	\$100,000 of com	npens	ation	from	
	(A)							Ī	(B)			(0)	
	Name and business	address						_	Description of s	services	C	ompe	nsatio	n
			-											
														-
	Total number of independent contractors (including but r	not li	mito	d to	the	با مور	ster	d above) who received a	nore than				
_	\$100,000 in compensation from the organi	_	iot II	mie	u 10		0	3150	above, who received t	nore triail				
												Form	990 (2010)

Form 990 (2010) FIRELIGHT FOUR Part IX Statement of Functional Expenses

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

	All other organizations must com			e columns (B), (C), and (D,	
	not include amounts reported on lines 6b, 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	8,000.	8,000.		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16	2,054,600.	2,054,600.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	244,523.	133,999.	86,072.	24,452
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	680,265.	398,150.	169,582.	112,533
8	Pension plan contributions (include section 401(k)			,	
~	and section 403(b) employer contributions)	14,207.	8,974.	2,628.	2.605
9	Other employee benefits	68,047.	42,462.	13,629.	2,605 11,956
10	Payroll taxes	76,286.	46,189.	18,103.	11,994
11	Fees for services (non-employees):	,			/554
	Management				
b	Legal				
2	Accounting				
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	283,128.	125,501.	151,127.	6,500
12	Advertising and promotion	7,700.	3,496.	2,811.	1,393
13	Office expenses	65,573.	30,875.	27,026.	7,672
14	Information technology	2,074.	980.	865.	229
15	Royalties	2,074.		003.	227
16	Occupancy	93,338.	61,699.	15,570.	16,069.
17	Travel	113,615.	96,610.	2,143.	14,862
	•	113,013.	70,010.	2,143.	14,002
18	Payments of travel or entertainment expenses			1	
10	for any federal, state, or local public officials	133,644.	109,087.	15,869.	8,688
19	Conferences, conventions, and meetings	100,044.	103,007.	13,003.	0,000
20	Interest Poyments to office to a				
21	Payments to affiliates	33,560.	20,517.	7,700.	5,343
22	Depreciation, depletion, and amortization	9,166.	4,161.	3,346.	1,659
23	Other expanses Itemyze expanses not covered	3,100.	4,101,	3,340.	1,009.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule 0.)				
а	WORKSHOPS & TRAINING	85,800.	85,800.		
b	INV. VALUATION LOSS	42,999.		42,999.	
С	SUBSCRIPTIONS	30,601.	6,276.	8,555.	15,770
d	RESEARCH DOCUMENTATION	20,308.	20,308.		
e	HONORARIA EXPENSES	7,400.	5,266.	34.	2,100
f	All other expenses	8,179.	4,668.	1,728.	1,783
25	Total functional expenses. Add lines 1 through 24f	4,083,013.	3,267,618.	569,787.	245,608
26	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 campaign and fundraising solicitation				
02201	0 12-21-10				Farm 990 (2010)

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Pai	rt X	Balance Sheet	***************************************		
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	ü	1	339.
	2	Savings and temporary cash investments		2	2,380,639.
	3	Pledges and grants receivable, net		3	3,036,443.
	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	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	ŀ	employers and sponsoring organizations of section 501(c)(9) voluntary		-	
Ø		employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	38,599.
	10a	Land, buildings, and equipment cost or other	!		
	1	basis. Complete Part VI of Schedule D 10a 53,574.			1
	l .	Less: accumulated depreciation 10b 33,560.	0.	10c	20,014.
	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	9,000.
	15	Other assets. See Part IV, line 11	0.	15	5,485,034.
	16 17	Total assets. Add lines 1 through 15 (must equal line 34)	0.	16 17	173,834.
	18	Accounts payable and accrued expenses Grants payable		18	396,500.
	19	Deferred revenue		19	330,3001
	20	Tax-exempt bond liabilities	-	20	
"	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees,		21	
Ē		highest compensated employees, and disqualified persons. Complete Part II			1
Ë		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	0.	25	31,925.
	26	Total liabilities. Add lines 17 through 25	0.	26	602,259.
		Organizations that follow SFAS 117, check here			
S		lines 27 through 29, and lines 33 and 34.			
Š	27	Unrestricted net assets	4 4-	27	389,870.
sala	28	Temporanly restricted net assets		28	4,492,905.
ğ	29	Permanently restricted net assets		29	
Ē		Organizations that do not follow SFAS 117, check here and			
þ		complete lines 30 through 34.		_ ;	
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
et.	32	Retained earnings, endowment, accumulated income, or other funds		32	
Z	33	Total net assets or fund balances	0.	33	4,882,775.
	34	Total liabilities and net assets/fund balances	0.	34	5,485,034.

Form	990 (2010) FIRELIGHT FOUNDATION	27-27	95006	Pa	ge 12
Pa	rt XI	Reconciliation of Net Assets				
		Check if Schedule O contains a response to any question in this Part XI				
1	Total	revenue (must equal Part VIII, column (A), line 12)	1	8,96		
2	Total	l expenses (must equal Part IX, column (A), line 25)	2	4,08		
3	Reve	enue less expenses. Subtract line 2 from line 1	3	4,88	2,7	<u>75.</u>
4	Net a	assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			0.
5	Othe	r changes in net assets or fund balances (explain in Schedule O)	5			0.
6	Net a	assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	4,88	2,7	<u>75.</u>
Pa	rt XII	Financial Statements and Reporting				
		Check if Schedule O contains a response to any question in this Part XII				<u>Ш</u>
					Yes	No
1	Acco	ounting method used to prepare the Form 990 LLL Cash X Accrual LLL Other				
	If the	e organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.			
2a	Were	e the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b	Were	e the organization's financial statements audited by an independent accountant?		2b	X	
С	If "Ye	es" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audıt,			
	revie	w, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the	e organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			ا ا
d	lf "Ye	es" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a			i '
	sepa	rate basis, consolidated basis, or both				
	LX	Separate basis Consolidated basis Both consolidated and separate basis		_		
За	As a	result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audıt			
	Act a	and OMB Circular A-133?		3a		X
b	If "Y€	es," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or au	idits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b		<u>L</u>
				Form	990 ((2010)

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

Name of the organization

Inspection Employer identification number

			HT FOUNDATIO						4 /	7-2795006		
Part I	Reason	for Public Chari	ty Status (All organiza	ations mus	st complet	e this part	.) See inst	ructions.				
The organ	zation is not a	private foundation b	pecause it is: (For lines 1	through 1	1, check o	only one b	ox)					
1 🛄	A church, cor	nvention of churches	, or association of churc	ches desci	nbed in se	ction 170((b)(1)(A)(i).	•				
2	A school des	cribed in section 17 0	0(b)(1)(A)(ii). (Attach Sch	nedule E.)								
з 🔲	A hospital or	a cooperative hospit	al service organization d	described i	n section	170(b)(1)(A)(ıii).					
4 🔲	A medical res	earch organization o	perated in conjunction v	with a hos	pıtal descr	nbed in se	ction 170	(b)(1)(A)(iii). Enter th	he hospital's name,		
	city, and state	e:										
5 🗀	An organizati	on operated for the t	penefit of a college or un	niversity ov	vned or op	erated by	a governr	nental unit	describe	ed in		
	section 170	(b)(1)(A)(iv). (Comple	te Part II.)									
6 🔲	A federal, sta	te, or local governme	ent or governmental unit	described	ın sectio	n 170(b)(1)(A)(v).					
7 X	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). (Complet	te Part II.)									
в 🗀	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)											
9 🗀	An organizati	on that normally rece	eives: (1) more than 33 1	/3% of its	support fr	om contril	butions, m	embership	o fees, an	nd gross receipts from		
	activities rela	ted to its exempt fur	octions - subject to certa	ın excepti	ons, and (2	2) no more	than 33 1	/3% of its	support	from gross investment		
	income and u	inrelated business ta	axable income (less sect	ion 511 ta	x) from bu	sinesses a	cquired b	y the orga	nization a	after June 30, 1975		
	See section	509(a)(2). (Complete	Part III.)									
10	•		erated exclusively to tes	-	-							
11 📖			erated exclusively for th									
	more publicly	supported organiza	tions described in section	on 509(a)(⁻	1) or section	n 509(a)(2	?). See sec	tion 509(a	a)(3). Che	eck the box that		
			organization and comple						_	1 .		
	a L Type I				e III - Func	•	-		d└─	Type III - Other		
e 📖			t the organization is not									
			han one or more publicly						(a)(1) or s	section 509(a)(2).		
f			ten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
		rganization, check th							0	Ll		
g			rganization accepted an							Vac Na		
			rectly controls, either ale	one or tog	etner with	persons c	iescribea	in (ii) and (i	iii) below,			
	•	• •	upported organization?							11g(i)		
	•	=	n described in (i) above?		-0					11g(ii) 11g(iii)		
		-	person described in (i) o							[119(111/]		
h	Provide the t	ollowing information	about the supported org	ganization	(S).							
		(1) 5111	(iii) Type of	(iv) Is the c	rganization	(v) Did you	i notify the	(vi) Is	the	(vii) Amount of		
. ,	of supported anization	(ii) EIN	organization		sted in your		ion in col.	organizátic (i) organiz	n in col.	(vii) Amount of support		
UI Y	amzation		(described on lines 1-9 above or IRC section		document?			U.S.	.?	oupport		
			(see instructions))	Yes	No	Yes	No	Yes	No			
					ĺ							
		_		-								
					1							
	<u>—</u>											
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Total												
TULAI		L	!		<u> </u>							

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

Schedule A (Form 990 or 990-EZ) 2010

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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	ndar year (or fiscal year beginning in) 🖊	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	Gifts, grants, contributions, and						
	membership fees received (Do not	1					
	include any "unusual grants.")	<u> </u>			0.	8887038.	8887038.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to	1					
	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					8887038.	8887038.
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,						E446004
	column (f)						5416324.
	Public support. Subtract line 5 from line 4	<u> </u>	<u> </u>	<u> </u>	L		3470714.
	ction B. Total Support	 			T		<u></u>
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010 8887038.	(f) Total 8887038.
7	Amounts from line 4		ļ		<u> </u>	8667036.	8667036.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties					817.	817.
	and income from similar sources			-		01/•	017.
9	Net income from unrelated business						
	activities, whether or not the	1			ì		
	business is regularly carried on			 			
10	Other income Do not include gain						
	or loss from the sale of capital					53,283.	53,283.
	assets (Explain in Part IV.)		<u> </u>			33,203.	8941138.
	Total support. Add lines 7 through 10			<u></u>	.1	40	07411301
	Gross receipts from related activities	•	•	and for other and files	lay waar aa a aast.	12	
13	First five years. If the Form 990 is fo		s iirst, second, th	ira, iourin, or ilith i	lax year as a section	11 30 1(0)(3)	$\triangleright [X]$
Se	organization, check this box and storection C. Computation of Pub	ic Support Pe	ercentage	·			
	Public support percentage for 2010 (-	column (fi)		14	%
	Public support percentage from 2009			· ····································		15	%
	33 1/3% support test - 2010.If the o			on line 13, and line	14 is 33 1/3% or m	nore, check this bo	x and
	stop here. The organization qualifies						ightharpoons
t	33 1/3% support test - 2009.If the o	organization did no	ot check a box on	line 13 or 16a, and	line 15 is 33 1/3%	or more, check th	nis box
	and stop here. The organization qua						▶□
178	10% -facts-and-circumstances tes	it - 2010.If the orc	ganization did not	check a box on lin	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						▶└
ŧ	10% -facts-and-circumstances tes	st - 2009.If the org	ganization did not	check a box on lin	e 13, 16a, 16b, or ⁻	17a, and line 15 is	10% or
	more, and if the organization meets t						
	organization meets the "facts-and-cir						▶□
18	Private foundation. If the organization						ns ►L
_					Sch	edule A (Form 990	or 990-EZ) 2010

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Schedule A (Form 990 or 990-EZ) 2010 Part III | Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Support		,					
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009		(e) 2010	(f) Total
1 Gifts, grants, contributions, and			1				
membership fees received. (Do not							ļ
include any "unusual grants.")					1		
2 Gross receipts from admissions,							
merchandise sold or services per-							
formed, or facilities furnished in		ł	1		1		ł
any activity that is related to the organization's tax-exempt purpose					1		
3 Gross receipts from activities that			-	-	\dagger		
are not an unrelated trade or bus-							
iness under section 513					Ì		
+		<u> </u>	 	 	+		
4 Tax revenues levied for the organ-					1		
ization's benefit and either paid to					1		
or expended on its behalf		ļ	ļ — — —		↓		
5 The value of services or facilities					ļ		
furnished by a governmental unit to		1	1	1)		1
the organization without charge			ļ <u></u>	<u> </u>			
6 Total. Add lines 1 through 5							
7a Amounts included on lines 1, 2, and							
3 received from disqualified persons				1			
b Amounts included on lines 2 and 3 received							
from other than disqualified persons that				1	İ		ſ
exceed the greater of \$5,000 or 1% of the amount on line 13 for the year				I.			
c Add lines 7a and 7b		 			+-		
		 	<u> </u>	+	+	· · · · · · · · · · · · · · · · · · ·	
8 Public support (Subtractline 7c from line 6.) Section B. Total Support	<u> </u>	L	<u> </u>				
		(1) 0007	(-).0000	(-1) 0000		(=) 2010	(6) Total
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	+	(e) 2010	(f) Total
9 Amounts from line 6			ļ	 	+		
10a Gross income from interest, dividends, payments received on							
securities loans, rents, royalties							
and income from similar sources							<u></u>
b Unrelated business taxable income							
(less section 511 taxes) from businesses							
acquired after June 30, 1975							
c Add lines 10a and 10b					1		
11 Net income from unrelated business	·	 	 	 	1		<u> </u>
activities not included in line 10b,							
whether or not the business is							
regularly carried on	 -	 	 	 	+		
or loss from the sale of capital							
assets (Explain in Part IV)		 	 	 	+-		
13 Total support (Add lines 9, 10c, 11, and 12)		<u> </u>	<u> </u>	1			
14 First five years. If the Form 990 is for	the organization	's first, second, thi	rd, fourth, or fifth	tax year as a sect	on 50	1(c)(3) organı	zation,
check this box and stop here							
Section C. Computation of Publ	c Support Pe	ercentage					
15 Public support percentage for 2010 (I	ine 8, column (f) (divided by line 13,	column (f))		15		9
16 Public support percentage from 2009	Schedule A. Par	t III, line 15			16		9
Section D. Computation of Inves)				
17 Investment income percentage for 20					17		9/
18 Investment income percentage from 2		• • • • • • • • • • • • • • • • • • • •	15, 55141111 (1)/		18		9
•			on line 14 and lin	ne 15 is more than		3% and line	
19a 33 1/3% support tests - 2010. If the						ozo, and inte	17 IS HOL
more than 33 1/3%, check this box as		•				00 4 /00 /	
b 33 1/3% support tests - 2009. If the							
line 18 is not more than 33 1/3%, che							` ▶⊨
20 Private foundation. If the organization	n did not check a	a box on line 14, 19	a, or 19b, check				<u> </u>
032023 12-21-10				Sc	hedul	e A (Form 9	90 or 990-F7) 201

Part IV							- p	explana	tions require	d by Part II, line 10, Part II, line 17a or 17	age 4 b,
	and Part	III, line 12.	Also co	mplete this	s part fo	r any addit	ional informat	tion. (See	nstructions	s).	
SCHEDUL	EA,	PART	II,	LINE	10,	EXPL	NATION	FOR	OTHER	INCOME:	
OTHER I	NCOM	E									-0
SERVICE	FEE	S									
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		_	-								
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		· · · · · ·			·						

SCHEDULE D

(Fdrm 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.

QU IU
Open to Public
Inspection

OMB No 1545-0047

► Attach to Form 990. ► See separate instructions.

Name of the organization FIRELIGHT FOUNDATION

Employer identification number 27-2795006

Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Fund	s 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 v	vriting that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor ad		used only
	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?		Yes No
Pai		anization answered "Yes" to Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	ducation) Preservation of an hi	storically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied 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
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stri	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 8/17/06, and not on a historic struc	ture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by th	e organization during the tax
	year ▶		•
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	t holds?	L Yes L No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements durin	g the year ▶ \$
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 17	0(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		└── Yes No
9	In Part XIV, describe how the organization reports conservati		
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes	s the organization's accounting for
	conservation easements.		
Pa	rt III Organizations Maintaining Collections o		Other Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public ext	nibition, education, or research in further	ance of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that descri		
b	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, ea	ducation, or research in furtherance of p	ublic 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 tre	asures, or other similar assets for financ	al gaın, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
b	Assets included in Form 990, Part X		▶ \$

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

Schedule D (Form 990) 2010

	dule D (Form 990) 2010 FIRELIGHT FOUNDATION				2/95006 Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to	Audited I	inancial Stat	emen	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		8,965,788.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		4,083,013.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		4,882,775.
4	Net unrealized gains (losses) on investments		4		
5	Donated services and use of facilities		5		
6	Investment expenses		6		
7	Prior period adjustments		7		
8	Other (Describe in Part XIV.)		8		
9	Total adjustments (net). Add lines 4 through 8		9		0.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and	d 9	10		4,882,775.
Pa	t XII Reconciliation of Revenue per Audited Financial Stateme	nts With I	Revenue per	Retur	n
1	Total revenue, gains, and other support per audited financial statements			1	9,068,116.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	2a		ł	
b	Donated services and use of facilities	2b	102,328		
c	Recovenes of prior year grants	2c	· · · · · · · · · · · · · · · · · · ·	1	
d	Other (Describe in Part XIV)	2d	- -	┪	
e	Add lines 2a through 2d			7 2e	102,328.
3	Subtract line 2e from line 1			3	8,965,788.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			۳	0,200,.001
٠,	· · · ·	140			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		-	
b	Other (Describe in Part XIV)	40		\dashv $_{a}$	0.
c	Add lines 4a and 4b			4c	8,965,788.
5 Da	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) rt XIII Reconciliation of Expenses per Audited Financial Stateme	ente With	Evnenses ne		
		CIILO WILLI	Expenses pe		4,185,341.
1	Total expenses and losses per audited financial statements			1	4,100,041.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1	102,328		1
а	Donated services and use of facilities	2a	102,320	4	
b	Prior year adjustments	2b		4	
C	Other losses	2c	<u> </u>	4	
d	Other (Describe in Part XIV.)	2d	· · · · · · · · · · · · · · · · · · ·	_	100 000
е	Add lines 2a through 2d			2e	102,328.
3	Subtract line 2e from line 1			3	4,083,013.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
С	Add lines 4a and 4b			4c	0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	4,083,013.
	rt XIV Supplemental Information			-	
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part II	I. lines 1a an	d 4. Part IV. lines	1b and	2b, Part V, line 4, Part
	e 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also comp				
	RT X, LINE 2: IN ACCORDANCE WITH ACCOUNTING				
			<u> </u>		
(A	SC) TOPIC 740, INCOME TAXES, FIRELIGHT HAS	EVALUZ	ATED ITS	INCO	ME TAX
•					
PO	SITIONS FOR THE YEAR ENDED JUNE 30, 2011, A	AND DE	TERMINED	THAT	THERE WERE
<u> </u>					
NO	MATERIAL UNCERTAIN TAX POSITIONS. ACCORD	INGLY.	FIRELIGH	т на	S NOT
RF	COGNIZED ANY LIABILITY FOR UNRECOGNIZED IN	соме т	AX.		
	COC. LLD III. DIIIDIDIII I ON ONNOCOMILIDD IN	+1			
					
_					
	· · · · · · · · · · · · · · · · · · ·			<u> </u>	dula D (Farra 200) 0040
				⇒cne	dule D (Form 990) 2010

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

FIRELIGHT FOUND	ATION			27-27950	06
		ctivities Out	side the United States. Comple		
to Form 990, Part			1-1		
<u> </u>	•		ds to substantiate the amount of the gra selection criteria used to award the gra		Yes No
2 For grantmakers. Descri	ribe in Part V the	organization's p	procedures for monitoring the use of gi	rant funds outside the United Sta	ates.
			n be duplicated if additional space is r		(0.T.)
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
SUB-SAHARAN AFRICA	0	0	GRANTS GIVEN		2,039,600.
NORTH AMERICA	0	0	GRANTS GIVEN		15,000.
3 a Sub-total		0			2,054,600.
b Total from continuation sheets to Part I	(0_			_ 0.
c Totals (add lines 3a					2 054 600.

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

Schedule F (Form 990) 2010

Page 2

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any 27-2795006 FIRELIGHT FOUNDATION

Schedule F (Form 990) 2010

Part II

ck this box if no one recipient received more than \$5,000	
receiv	
no one recipient	
f no one	
30 Check this box if no	
5,000 Check t	
5,0	
ore than \$	
t who received more	
ent who i	
Ŧ	

133 valuation (book, FMV, appraisal, other) (i) Method of (h) Description of non-cash assistance (g) Amount of non-cash assistance 0 0. 。 0 Ö 。 。 Ö Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by cash disbursement 27 000 WIRE TRANSFER 30,000 MIRE TRANSFER 22,000 WIRE TRANSFER 20,000 WIRE TRANSFER 15,000 WIRE TRANSFER 9,000, WIRE TRANSFER 15,000 WIRE TRANSFER 9,000.WIRE TRANSFER (f) Manner of of cash grant (e) Amount CAPACITY BUILDING AND OPERATIONAL SUPPORT DPERATIONAL SUPPORT OPERATIONAL SUPPORT TRENGTHENING AND (d) Purpose of ORGANIZATIONAL grant AND EDUCATION STRENGTHENING STRENGTHENING AGRICULTURE AGRICULTURE EDUCATION ECONOMIC SCONOMIC SCONOMIC (c) Region Part II can be duplicated if additional space is needed SUB-SAHARAN AFRICA SUB-SAHARAN AFRICA SUB-SAHARAN SUB-SAHARAN UB-SAHARAN SUB-SAHARAN SUB-SAHARAN SUB-SAHARAN AFRICA AFRICA AFRICA AFRICA AFRICA AFRICA (b) IRS code section and EIN (if applicable) (a) Name of organization 0

SEE PART V FOR COLUMN (D) DESCRIPTIONS the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities

Schedule F (Form 990) 2010

ဗ

Page 2		(i) Method of valuation (book, FMV, appraisal, other)									
	1)	(h) Description of non-cash assistance									
27-2795006	390), Part II, line 1	(g) Amount of non-cash assistance	0	0	0.	0.	0.	0	0.	0	
27-27	(Schedule F (Form 9	(f) Manner of cash disbursement	10,300,WIRE TRANSFER	9,000, WIRE TRANSFER	9,000, WIRE TRANSFER	12,000 WIRE TRANSFER	9,000.WIRE TRANSFER	9,000.WIRE TRANSFER	15,000.WIRE TRANSFER	12,000,WIRE TRANSFER	
	United States.	(e) Amount of cash grant	10,300.	,000,6	, 000 , 6	12,000.	000'6	000'6	15,000,	12,000.	
ION	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line	(d) Purpose of grant	ECONOMIC STRENGTHENING	ECONOMI C STRENGTHENING	AGRICULTURE	ECONOMIC STRENGTHENING	OPERATIONAL SUPPORT	ECONOMIC STRENGTHENING	AGRICULTURE	EDUCATION	
FIRELIGHT FOUNDATION	Assistance to Organiza	(c) Region	SUB-SAHARAN AFRICA	SUB-SAHARAN APRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN
FIREL	Grants and Other	(b) IRS code section and EIN (if applicable)									
Schedule F (Form 990)	Part II Continuation of	1 (a) Name of organization									

Schedule F (Form 990) Part II Continuation o	FIREL of Grants and Other	FIRELIGHT FOUNDATION Other Assistance to Organization	(Form 990) FIRELIGHT FOUNDATION 27-2795006 Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, Ine 1)	United States.	27-27 (Schedule F (Form 9	27-2795006 F (Form 990), Part II, line 1)		Page 2
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	OPERATIONAL SUPPORT	9,000.	WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	OPERATIONAL SUPPORT	9,000.	WIRE TRANSFER	.0		
		SUB-SAHARAN AFRICA	EARLY CHILDHOOD DEVELOPMENT	13,000.	WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	OPERATIONAL SUPPORT	.000,6	WIRE TRANSFER	•0	:	
		SUB-SAHARAN AFRICA	ECONOMIC	8,600	8,600.WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	BDUCATION	.000,6	WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	ORGANIZATIONAL CAPACITY BUILDING	10,000.	WIRE TRANSFER	0	:	
		SUB-SAHARAN AFRICA	OPERATIONAL SUPPORT	15,000,151	WIRE TRANSFER	0.		
		SUB-SAHARAN APRICA	EDUCATION AND OPERATIONAL SUPPORT	22,000.	22,000.WIRE TRANSFER	0.		
032182 12-21-10			32					

Pagé 2		(i) Method of valuation (book, FMV, appraisal, other)	•								
	1)	(h) Description of non-cash assistance									
27-2795006	90), Part II, line	(g) Amount of non-cash assistance	0.	0.	0.0	0	0	0	0	0	
27-27	(Schedule F (Form 9	(f) Manner of cash disbursement	22,000, WIRE TRANSFER	14,500, WIRE TRANSFER	9,000, WIRE TRANSFER	9,000.WIRE TRANSFER	WIRE TRANSFER	15,000,WIRE TRANSFER	9,000. WIRE TRANSFER	9,000.WIRE TRANSFER	12,000,WIRE TRANSFER
	United States.	(e) Amount of cash grant	22,000.	14,500.	.000,6	.000,6	23,400.	15,000,	.000,6	.000,6	12,000.
ION	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)	(d) Purpose of grant	EDUCATION AND EARLY CHILDHOOD DEVELOPMENT	OPERATIONAL SUPPORT AND EARLY CHILDHOOD DEVELOPMENT	ECONOMIC STRENGTHENING	OPERATIONAL SUPPORT	ECONOMIC STRENGTHENING AND LIVING ENVIRONMENTS	AGRICULTURE	EDUCATION	EDUCATION	OPERATIONAL SUPPORT
FIRELIGHT FOUNDATION	Assistance to Organiza	(c) Región	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA
FIREL	Grants and Other	(b) IRS code section and EIN (if applicable)									
Schedule F (Form 990)	Part II Continuation of	1 (a) Name of organization									

Schedule F (Form 990) Part II Continuation of	FIREL of Grants and Other	FIRELIGHT FOUNDATI	(Form 990) FIRELIGHT FOUNDATION 27-2795006 Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)	United States.	Schedule F (Form 9	27-2795006 F (Form 990), Part II, line 1)	11	Page 2
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	неалтн/ ні	9,000.	9,000, WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	PSYCHOSOCIAL SUPPORT	9,000.	9,000, WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	OPERATIONAL SUPPORT	9,000,WIRE	WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	EDUCATION	15,000.	WIRE TRANSFER	0		
		SUB-SAHARAN APRICA	PSYCHOSOCIAL SUPPORT	15,000.	15,000,WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	неалтн/ ніv	.000,6	WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	PSYCHOSOCIAL SUPPORT	15,000.	WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	EDUCATION	15,000.	WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	неалтн/ ніv	9,000.	9,000, WIRE TRANSFER	0		
032182 12-21-10			34					

Pagé 2		(i) Method of valuation (book, FMV, appraisal, other)									
	1)	(h) Description of non-cash assistance									
27-2795006	90), Part II, line	(g) Amount of non-cash assistance	0.	0.	0	0.	0.	0.	0.	0.	0
27-27	(Schedule F (Form 9	(f) Manner of cash disbursement	9,000.WIRE TRANSFER	000.WIRE TRANSFER	15,000.WIRE TRANSFER	WIRE TRANSFER	WIRE TRANSFER	WIRE TRANSFER	WIRE TRANSFER	9,000.WIRE TRANSFER	WIRE TRANSFER
	United States.	(e) Amount of cash grant	.000,6	.000,6	15,000.	28,000.	10,000.	.000,6	12,200.	9,000.	22,000.
ION	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)	(d) Purpose of grant	OPERATIONAL SUPPORT	ECONOMIC STRENGTHENING	ORGANIZATIONAL CAPACITY BUILDING	OPERATIONAL SUPPORT	PSYCHOSOCIAL SUPPORT	EDUCATION	OPERATIONAL SUPPORT	BDUCATION	EARLY CHILDHOOD DEVELOPMENT AND OPERATIONAL SUPPORT
FIRELIGHT FOUNDATI	Assistance to Organiza	(c) Region	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN APRICA
FIREL	f Grants and Other	(b) IRS code section and EIN (if applicable)									
Schedule F (Form 990)	Part II Continuation of						_	_	-		

Schedule F (Form 990) Part II Continuation o	FIREL of Grants and Other	FIRELIGHT FOUNDATION and Other Assistance to Organizations	(Form 990) FIRELIGHT FOUNDATION 27-2795006 Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)	United States.	27-2795006 (Schedule F (Form 990), Part I	95006 90), Part II, line 1		Page 2
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	EDUCATION	14,000.	14,000.WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	INTERMEDIARY COMMUNITY GRANTMAKING	9,000.	9,000.WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	CHILD PROTECTION/RIGHTS	75,000.	WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	AGRICULTURE	.000,6	WIRE TRANSFER	0.	:	
		SUB-SAHARAN AFRICA	OPERATIONAL SUPPORT	.000,6	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	ECONOMIC	9,000.	9,000.WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	AGRICULTURE	9,000.	WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	CHILD PROTECTION/RIGHTS	15,000.	15,000,WIRE TRANSFER	0		
		SUB-SAHARAN APRICA	OPERATIONAL SUPPORT AND EDUCATION	16,000.	16,000.WIRE TRANSFER	0		

Schedule F (Form 990) Part II Continuation o	FIREL of Grants and Other	FIRELIGHT FOUNDATION nd Other Assistance to Organizations	F (Form 990)	United States.	2 / - 2 / Schedule F (Form 9	Z / - Z / 9 5 U U B F (Form 990), Part II, line 1)		Page 2
	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	PSYCHOSOCIAL SUPPORT	9,000.	9,000.WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	EDUCATION	9,000.	WIRE TRANSFER	0		
		SUB-SAHARAN APRICA	ECONOMIC	9,000.	WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	ORGANIZATIONAL CAPACITY BUILDING	9,000 WIRE	WIRE TRANSFER	0		:
		SUB-SAHARAN APRICA	EDUCATION AND PSYCHOSOCIAL SUPPORT	14,000.	WIRE TRANSFER	0.		
-		SUB-SAHARAN AFRICA	OPERATIONAL SUPPORT	000'6	9,000.WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	OPERATIONAL SUPPORT	.000,6	WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	PSYCHOSOCIAL SUPPORT	9,000.WIRE	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	ECONOMIC STRENGTHENING	.000,6	WIRE TRANSFER	0		
032182 12-21-10			37					
12-21-10			3./					

Schedule F (Form 990) Part II Continuation of	FIREL Grants and Other (b) IRS code section	FIRELIGHT FOUNDATION nd Other Assistance to Organizations de section	(Form 990) FIRELIGHT FOUNDATION 27–2795006 Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1) (b) IRS code section (d) Purpose of (e) Amount of (g) Amount of (h) Manner of (g) Amount of (h) Respectively.	United States.	27-2795006 (Schedule F (Form 990), Part I	95006 90), Part II, line 1 (g) Amount of	=	Pagé 2
and EIN (if	and EIN (if applicable)	(c) Region	grant	+	cash disbursement	non-cash assistance	of non-cash assistance	valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	ECONOMIC STRENGTHENING	19,000.	19,000.WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	EDUCATION	.000,6	000.WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	OPERATIONAL SUPPORT	.000,6	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	OPERATIONAL SUPPORT	000'6	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	EDUCATION	15,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	OPERATIONAL SUPPORT	.000,6	9,000.WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	OPERATIONAL SUPPORT	12,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	EDUCATION	.000,6	9,000.WIRE TRANSFER	0.		
		SUB-SAHARAN APRICA	ORGANIZATIONAL CAPACITY BUILDING AND PSYCHOSOCIAL SUPPORT	22,000.	22,000.WIRE TRANSFER	0		

Page 2	ion (i) Method of valuation (book, FMV, appraisal, other)									
	(h) Description of non-cash assistance									
27-2795006	(g) Amount of non-cash assistance	0.	0.	0.	0	0.	0	0.	.0	c
27-27 Schodule F (Form)	(f) Manner of cash disbursement	20,000.WIRE TRANSFER	22,000.WIRE TRANSFER	28,000.WIRE TRANSFER	WIRE TRANSFER	WIRE TRANSFER	12,000.WIRE TRANSFER	WIRE TRANSFER	9,000.WIRE TRANSFER	TA 000 TA
United States	(e) Amount of cash grant	20,000.	22,000.	28,000.	22,000.	22,000.	12,000.	.000,6	.000,6	47
(Form 990) FIRELIGHT FOUNDATION 27-2795006	(d) Purpose of grant	EDUCATION AND OPERATIONAL SUPPORT	EARLY CHILDHOOD DEVELOPMENT	AGRICULTURE AND CHILD PROTECTION/RIGHTS	ECONOMIC STRENGTHENING AND EARLY CHILDHOOD DEVELOPMENT	EDUCATION AND EARLY CHILDHOOD DEVELOPMENT	ECONOMIC	LIVING ENVIRONMENTS	PSYCHOSOCIAL SUPPORT	ECONOMIC STRENGTHENING, OPERATIONAL SUPPORT,
FIRELIGHT FOUNDATION	(c) Region	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN
FIREL	(b) IRS code section and EIN (if applicable)									
Schedule F (Form 990)										

FIREL Grants and Other	FIRELIGHT FOUNDATION nd Other Assistance to Organizations	1 0	United States.	27 - 27 9 5 0 0 6 Schedule F (Form 990), Part (9) Amou	95006 90), Part II, line 1 (g) Amount of) (h) Description	Page 2
(b) IHS code section and EIN (if applicable)		(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	non-cash assistance	of non-cash assistance	valuation (book, FMV, appraisal, other)
SUB-SAHARAN AFRICA		PSYCHOSOCIAL SUPPORT	9,000.	WIRE TRANSFER	0		
SUB-SAHARAN AFRICA		OPERATIONAL SUPPORT	9,000.	9,000.WIRE TRANSFER	0.		
SUB-SAHARAN AFRICA		AGRICULTURE	9,000.	9,000 WIRE TRANSFER	0.		
SUB-SAHARAN AFRICA		ECONOMIC STRENGTHENING	13,000.	13,000.WIRE TRANSFER	0.		
SUB-SAHARAN AFRICA		EARLY CHILDHOOD DEVELOPMENT	9,000.	9,000.WIRE TRANSFER	0.		
SUB-SAHARAN AFRICA		ECONOMIC STRENGTHENING	9,000.	WIRE TRANSFER	0.		
SUB-SAHARAN AFRICA		OPERATIONAL SUPPORT	9,000.	WIRE TRANSFER	0.		
SUB-SAHARAN AFRICA		OPERATIONAL SUPPORT	.000,6	9,000.WIRE TRANSFER	0		
SUB-SAHARAN B AFRICA S	E S	ECONOMIC STRENGTHENING	9,000.	9,000.WIRE TRANSFER	.0		

27-2795006 Page 2	Continuation of Grants and Other Assistance to Organizations or Entities Office a States. (Scheduler (10) in 1971) (b) IRS code section (c) Region (c) Region (d) Purpose of grant (applicable) (c) Region (d) Purpose of grant (applicable) (d) Purpose of (e) Amount (f) Manner of non-cash of non-cash assistance assistance appraisal, other)	WIRE TRANSFER 0.	WIRE TRANSFER 0.	TRANSFER 0.	TRANSFER 0.	TRANSFER 0.	WIRE TRANSFER 0.		TRANSFER 0.					
of case of	ount (f) Mangrant (g) Mangrant	9,000.WIRE TH	9,000.WIRE TE	9,000.WIRE TRANSFER	9,000,WIRE TRANSFER	75,000.WIRE TRANSFER	9,000.WIRE TE	9 000 WIRE IF		9 000 WIRE IF	000.WIRE	9,000.WIRE TF	9,000.WIRE TF	9,000.WIRE TF
1 - 41 - 11 - 17 - 17 - 17 - 17 - 17 - 1	(e) Amount of cash grant		31	5		i <i>L</i>								
NOI	(d) Purpose of grant	OPERATIONAL SUPPORT	ECONOMIC STRENGTHENING	EDUCATION	INTERMEDIARY COMMUNITY GRANTWAKING	ECONOMIC STRENGTHENING	EDUCATION	OPERATIONAL SUPPORT		ORGANIZATIONAL CAPACITY BUILDING	ORGANIZATIONAL CAPACITY BUILDING	ORGANIZATIONAL CAPACITY BUILDING ORGANIZATIONAL	ORGANIZATIONAL CAPACITY BUILDING ORGANIZATIONAL CAPACITY BUILDING	ORGANIZATIONAL CAPACITY BUILDING ORGANIZATIONAL CAPACITY BUILDING AND
FIRELIGHT FOUNDATION	Assistance to Organiz (c) Region	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA		SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA SUB-SAHARAN	SUB-SAHARAN AFRICA SUB-SAHARAN
FIREL	(b) IRS code section and EIN (if applicable)													
Schedule F (Form 990)						_		-						

Page 2	•	n (i) Method of valuation (book, FMV, , appraisal, other)									
	1)	(h) Description of non-cash assistance									
27-2795006	990), Part II, line	(g) Amount of non-cash assistance	0	0	0.	0.	0.	0.	0.	0	
27-27	Schedule F (Form	(f) Manner of cash disbursement	WIRE TRANSFER	WIRE TRANSFER	15,000.WIRE TRANSFER	WIRE TRANSFER	9,000, WIRE TRANSFER	WIRE TRANSFER	WIRE TRANSFER	9,000.WIRE TRANSFER	
	e United States.	(e) Amount of cash grant	20 000	000,6	15,000.	000'6	000'6	4.000,8	15,000.	000'6	
ION	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)	(d) Purpose of grant	EDUCATION AND OPERATIONAL SUPPORT	OPERATIONAL SUPPORT	DRGANIZATIONAL CAPACITY BUILDING	CHILD PROTECTION/RIGHTS	CHILD PROTECTION/RIGHTS	STRATEGIC PLANNING & ANNUAL CONFERENCE	PSYCHOSOCIAL SUPPORT	EDUCATION	ORGANIZATIONAL
FIRELIGHT FOUNDATION	Assistance to Organiz	(c) Region	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	NORTH AMERICA	SUB-SAHARAN AFRICA	SUB-SAHARAN
FIREL	f Grants and Other	(b) IRS code section and EIN (if applicable)									
Schedule F (Form 990)	Part II Continuation of	1 (a) Name of organization				-	-	j			

Part II Continuation of 1 (a) Name of organization								
1 (a) Name of organization	Grants and Other	Assistance to Organiza	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)	United States.	(Schedule F (Form 9	90), Part II, line 1)		
	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN AFRICA	AGRICULTURE AND INTERMEDIARY COMMUNITY GRANTMAKING	130,000.	130,000 MIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	OPERATIONAL SUPPORT	15,000.	WIRE TRANSFER	.0		
		SUB-SAHARAN AFRICA	CHILD PROTECTION/RIGHTS	20,000.	WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	OPERATIONAL SUPPORT	.000,6	9,000 WIRE TRANSFER	.0		
		SUB-SAHARAN APRICA	OPERATIONAL SUPPORT	.000,6	9,000.WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	ORGANIZATIONAL CAPACITY BUILDING	000'6	9,000.WIRE TRANSFER	0.		,
		SUB-SAHARAN AFRICA	EARLY CHILDHOOD DEVELOPMENT AND EDUCATION	27,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	EDUCATION	13,000.	13,000,WIRE TRANSFER	0		
		SUB-SAHARAN AFRICA	EDUCATION	9,000.	9,000.WIRE TRANSFER			
032.182 12-21-10			43					

Page 2	(i) Method of valuation (book, FMV, appraisal, other)				;					
	(h) Description of non-cash assistance									
27-2795006 F (Form 990). Part II, line 1	(g) Amount of non-cash assistance	0.	0.	0.	·o	0.	0.	0.	0.	
27-27 Schedule F (Form 9	(f) Manner of cash disbursement	14,000, WIRE TRANSFER	VIRE TRANSFER	15,000,WIRE TRANSFER	WIRE TRANSFER	WIRE TRANSFER	WIRE TRANSFER	WIRE TRANSFER	9,000,WIRE TRANSFER	
United States.	(e) Amount of cash grant	14,000.	90,000 MIRE	15,000.	10,000	17,000.	,000,6	9,000,6	9,000,6	
(Form 990) FIRELIGHT FOUNDATION 27-2795006	(d) Purpose of grant	EDUCATION AND INTEGRATED COMMUNITY DEVELOPMENT	OPERATIONAL SUPPORT	CHILD PROTECTION/RIGHTS	ECONOMIC	PSYCHOSOCIAL SUPPORT AND ORGANIZATIONAL CAPACITY BUILDING	PSYCHOSOCIAL SUPPORT	OPERATIONAL SUPPORT	OPERATIONAL SUPPORT	
FIRELIGHT FOUNDATION	(c) Region	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	SUB-SAHARAN AFRICA	
FIREL Grants and Other	(b) IRS code section and EIN (if applicable)									
Schedule F (Form 990)	_ e					•				

27-2795006

Page 3

Schedule F (Form 990) 2010 FIRELIGHT FOUNDATION
Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed

(h) Method of valuation (book, FMV, appraisal, other)					
(g) Description of non-cash assistance					
(f) Amount of non-cash assistance					
(e) Manner of cash disbursement					
(d) Amount of cash grant					
(c) Number of recipients					
(b) Region					:
(a) Type of grant or assistance (b) Region					

Schedule F (Form 990) 2010

"Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions

Schedule F (Form 990) 2010

Yes X No

for Form 5713)

Page 5

Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method); Part II, line 1 (accounting method); Part III (accounting method), and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

SCHEDULE F, PART I, LINE 2: FIRELIGHT MONITORS THE USE OF GRANT FUNDS THROUGH TEMPLATE FINANCIAL REPORT FORMS; REQUIRES FINANCIAL REPORTS TO BE EXPENDED UP TO 95% OR GREATER IN BOTH LOCAL CURRENCY AND/OR USD; REQUIRES THREE ASSESSMENTS BY INDIVIDUALS TO BE MADE ON ORGANIZATIONS BEFORE AN INITIAL GRANT FUNDS ARE AWARDED; HAS COUNTRY LEVEL CONSULTANTS IN 3 OF THE 7 COUNTRIES TO WORK WITH FUNDED ORGANIZATIONS AND IS WORKING TO HAVE A CONSULTANT IN ALL COUNTRIES THAT FIRELIGHT FUNDS IN; HIRES PROGRAM STAFF THAT HAS LIVED IN THE COUNTRIES WE SUPPORT, THEREBY BRINGING REAL WORLD KNOWLEDGE TO OUR WORK; CONDUCTS SITE VISITS TO THE ORGANIZATION AT LEAST ONCE EVERY 5 YEARS, BUT EVERY 2-3 YEARS IF THE FUNDS ARE AVAILABLE. FIRELIGHT USES MULTIPLE STRATEGIES TO MONITOR USE OF FUNDS: GRANTEES PROVIDE ANNUAL REPORT, BOTH NARRATIVE AND FINANCIAL, AS WELL

- AS BENEFICIARY DATA, WHICH IS ANALYZED AGAINST WHAT THEY PROPOSED. STAFF ALSO ANALYZE BUDGETS AND FINANCIAL REPORTS FOR REASONABLE EXPENDITURE. ANY CHANGES OVER 10% OF BUDGET MUST BE APPROVED WITH A RATIONALE. BUDGET CHANGES BELOW 10% MUST BE EXPLAINED IN THE FINANCIAL REPORT.
- FIRELIGHT PROGRAM CONSULTANTS CONDUCT ONGOING VISITS FOR SUPPORT AND MONITORING OF GRANTEE ACTIVITIES. THESE INCLUDE BOTH PLANNED AND UNPLANNED MONITORING AND SUPPORT VISITS.
- FIRELIGHT STAFF CONDUCT SITE VISITS WHERE THEY CONDUCT IN-DEPTH REVIEW OF ORGANIZATION'S GOALS, PROGRAMS, ACCOMPLISHMENTS, AS WELL AS OPERATIONAL SYSTEMS, SUCH AS FINANCIAL MANAGEMENT SYSTEMS.

PART II, COLUMN (D):

REGION: SUB-SAHARAN AFRICA

(D) PURPOSE OF GRANT: ECONOMIC STRENGTHENING, OPERATIONAL SUPPORT, EARLY

CHILDHOOD DEVELOPMENT AND ORGANIZATIONAL CAPACITY BUILDING

Schedule F (Form 990) 2010

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

FIRELIGHT FOUNDATION

Part I General Information on Grants and Assistance

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

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number 27-2795006

	s to substantiate the sistance?	ie amount of the grants	or assistance, the	grantees' eligibilit	y for the grants or ass	istance, and the selec	tion X Yes No
Describe in Part IV the organization's procedures for monitoring the Use or grant tunds in the United States. Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990. Part IV, line 21, for any	rocedures for mon	itoring the use or grant	se of grant funds in the United States.	d States. complete if the ord	anization answered "Y	es" to Form 990. Part	IV. line 21. for any
recipient that received more than	1 \$5,000. Check th	is box if no one recipier	nt received more th	ian \$5,000. Part II	can be duplicated if a	additional space is nee	☐ ▲
1 (a) Name and address of organization (b) EIN (c) IRC section or or government or government assistance other)	(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
GRANTMAKERS WITHOUT BORDERS 1009 GENERAL KENNEDY AVE., #2 SAN FRANCISCO, CA 94129	20-8211195	501(¢)(3)	8,000.	0	0.N/A	N/A	PROVIDE OPERATION SUPPORT
l	and government o	rganizations			•		A
-1	us						• 0
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	e, see the Instruc	tions for Form 990.					Schedule I (Form 990) (2010)

FIRELIGHT FOUNDATION

Page 2

27-2795006

Schedule I (Form 990) (2010) FIRELIGHT FOUNDATION

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	de the information	required in Part I,	line 2, and any other	additional information.	
SCHEDULE I, PART I, LINE 2: FIRELI	GHT MONIT	ORS THE U	FIRELIGHT MONITORS THE USE OF GRANT	r FUNDS	
THROUGH TEMPLATE FINANCIAL REPORT FORMS; REQUIRES FINANCIAL REPORTS TO	FORMS; RE	QUIRES FI	NANCIAL RE	PORTS TO BE	
EXPENDED UP TO 95% OR GREATER IN BOTH LOCAL CURRENCY AND/OR USD.	OTH LOCAL	CURRENCY	AND/OR US	D.	

FIRELIGHT MONITORS US FUNDS BY:

AS BOTH NARRATIVE AND FINANCIAL, GRANTEES MUST PROVIDE AN ANNUAL REPORT,

WELL AS BENEFICIARY DATA, WHICH IS ANALYZED AGAINST WHAT THEY ARE PROPOSING

FOR THE GRANT. ANY CHANGES OVER 10% OF BUDGET MUST BE APPROVED.

US FUNDED ORGANIZATIONS PROVIDE SUPPORT AND SERVICES THAT - IN MANY CASES,

032102 01-13-11

Part IV Supplemental Information FIRELIGHT FOUNDATION FIRELIGHT FOUNDATION ACCESSES AND BENEFITS FROM IN ORDER	
IRELIGHT FOUNDATION ACCESSES AND BENEFITS FROM IN ORDER	
	TO ADVANCE THE
TAGLON OF MUE FOUNDAMION AND MUE GOALG FOR DULL ANDURODY	
ISSION OF THE FOUNDATION AND THE GOALS FOR PHILANTHROPY.	
	· · · · · · · · · · · · · · · · · · ·
	·····
	<u> </u>
·	
	Schedule I (Form 990) 20

SCHEDULE M (Form 990)

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990.

Inspection
Employer identification number

FIRELIGHT FOUNDATION

27-2795006

Par	ti Types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contri amounts report Form 990, Part VI	ted on	Method of noncash contri		_	5
1	Art - Works of art								
2	Art - Historical treasures								
3	Art - Fractional interests							•	
4	Books and publications	Х		42,	999.	COST			
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes			····				 -	
-	·								—
8	Intellectual property	х	2	175	000.	FMV			
9	Securities · Publicly traded			1/3,	000.	LIIV			
10	Securities - Closely held stock		<u> </u>						
11	Securities - Partnership, LLC, or								
	trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation contribution -						0		
	Historic structures								
14	Qualified conservation contribution - Other		<u> </u>						
15	Real estate - Residential								
16	Real estate - Commercial		İ						
17	Real estate - Other								
18	Collectibles								
19	Food inventory		·						
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens					-			
24	Archeological artifacts								
25	Other (FIXED ASSETS)	X	1	53.	574.	REMAINING	COST	BA	SIS
26	Other (11111111111111111111111111111111111								
	· · · · · · · · · · · · · · · · · · ·					<u> </u>			
27	Other ()					-			—
28	Other ()		_ 45 _ 4		<u> </u>	<u>L</u>			
29	Number of Forms 8283 received by the organization during the tax year for contributions								
	for which the organization completed Form 82	83, Part IV,	Donee Acknowled	gement	29				N
				–				Yes	No
30a	a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for								
	at least three years from the date of the initial	contribution	, and which is not	required to be use	d for exer	npt purposes for			77
	the entire holding period?						30a		X
b	b If "Yes," describe the arrangement in Part II								
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?								X
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash								
	contributions?								_X_
b	If "Yes," describe in Part II								
33	if the organization did not report an amount in column (c) for a type of property for which column (a) is checked,								1
	describe in Part II								
LHA									

032141 12-23-10

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2010
Open to Public Inspection

Name of the organization

FIRELIGHT FOUNDATION

Employer identification number 27-2795006

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: BUILDING SUPPORT SYSTEMS AND PROVIDING ACCESS TO RECREATION). FUNDS ALSO SUPPORT OPERATIONS OF GRASSROOTS ORGANIZATIONS INCLUDING SALARIES, COMMUNICATIONS AND TRANSPORT EXPENSES. RENT. -PROVIDED CAPACITY BUILDING SUPPORT THROUGH MENTORING TO COUNTRY PROGRAM CONSULTANTS, WEEKLY NEWSFLASH, CAPACITY BUILDING GRANTS AS WELL AS PEER LEARNING AND NETWORKING OPPORTUNITIES. -THROUGH OUR ORGANIZATIONAL LEARNING WORK, FIRELIGHT HAS ENHANCED ITS SYSTEMS AND CAPACITY FOR COLLECTING AND ANALYZING DATA TO BETTER CAPTURE OUTCOMES OF THE GRANTS AWARDED BY THE FOUNDATION AND TO BETTER DOCUMENT EFFECTIVE STRATEGIES. FORM 990, PART VI, SECTION A, LINE 2: KERRY OLSON, PRESIDENT, AND DAVE KATZ, VICE PRESIDENT AND SECRETARY, ARE MARRIED. SECTION B, LINE 11: THE 990 IS REVIEWED IN DETAIL BY FORM 990, PART VI. THE TREASURER AND THE EXECUTIVE DIRECTOR. IT IS THEN SHARED WITH THE ENTIRE BOARD OF DIRECTORS FOR THEIR REVIEW BEFORE FILING WITH THE INTERNAL REVENUE SERVICE. SECTION B, LINE 12C: THE BOARD MEMBERS SIGN A CONFLICT FORM 990, PART VI, OF INTEREST POLICY ON AN ANNUAL BASIS. ALL BOARD MEMBERS AND ADVISORY

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NEXT STEPS AND DOCUMENT HOW TO RECTIFY THE SITUATION.

Schedule O (Form 990 or 990-EZ) (2010)

THE BOARD MEMBERS WILL DISCUSS THE

COUNCIL MEMBERS ARE ASKED AT EACH MEETING TO DECLARE ANY CONFLICTS OF

IF ANY ARISE,

INTEREST THEY MAY HAVE,