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Return of Organization Exempt From Income Tax

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

Department of the Treasury Internal Revenue Service ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Open to Public Inspection

A F	or the	2010 calendar year, or tax year beginning JUL 1, 2010 and ending	JUN 30,	2011		
B c	heck if pplicable	C Name of organization	D Employe	r identification	on number	
	Addres change	PALO ALTO PARTNERS IN EDUCATION				
	Name change			77-018	6364	
	Initial	Number and street (or P.O. box if mail is not delivered to street address) Room/st	ute E Telephon			
	Termin-	650-32	9-3990			
	Amend	P.O. BOX 1557 City or town, state or country, and ZIP + 4	G Gross receip		3,843,	729.
	Application	PALO ALTO, CA 94302	H(a) Is this a	a group return		
	pendin	F Name and address of principal officer.KATHY SCHROEDER	for affili		Yes [X No
		SAME AS C ABOVE	H(b) Are all a	ffiliates include	d? Yes [☐ No
<u> 1 T</u>	ах-ехе	mpt status: X 501(c)(3) 501(c) ()	527 If "No,"	attach a list.	(see instruction	ons)
		e:▶ WWW.PAPIE.ORG	H(c) Group	exemption nu	ımber 🕨	
		organization: X Corporation	ear of formation; 2	2005 M Sta	ate of legal_domi	icile: CA
	1 [Briefly describe the organization's mission or most significant activities: RAISES F	UNDS FOR	ALL ST	UDENTS	IN
WIAN Activities & Governance		THE PALO ALTO UNIFIED SCHOOL DISTRICT.				
Ē		Check this box If the organization discontinued its operations or disposed of m	ore than 25% of	its net assets	S.	
ove	Į.	Number of voting members of the governing body (Part VI, line 1a)		3		25
ۅۣڰۣ	l	Number of independent voting members of the governing body (Part VI, line 1b)		4		25
S		Total number of individuals employed in calendar year 2010 (Part V, line 2a)		5		4
εĘ	l	Total number of volunteers (estimate if necessary)		6		200
- 5		Total unrelated business revenue from Part VIII, column (C), line 12		7a		0.
کے	b l	Net unrelated business taxable income from Form 990-T, line 34		7b		0.
WIF			Prior Yea	ar	Current Ye	ar
	8 (Contributions and grants (Part VIII, line 1h)	3,273	,123.	3,839,	389.
ΜŽ	9 1	Program service revenue (Part VIII, line 2g)		0.		0.
	10 1	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		,607.	2,	438.
Revenue	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-7	,175.		0.
<u>)</u>	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,279	,555.	3,841,	827.
e e	13 (Grants and similar amounts paid (Part IX, column (A), lines 1-3)	3,017	799.	3,527,	<u>423.</u>
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.		0.
ŝ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	147	,613.	144,	382.
Expenses	16a l	Professional fundraising fees (Part IX, column (A), line 11e)		0.		<u> </u>
ă X	p.	Total fundraising expenses (Part IX, column (D), line 25) 145,530.				
ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		,377.		<u>978.</u>
	18	Total expenses. Add lines 3. 7 (must equal Part IX, column (A), line 25)		,789.	3,802,	
	19	Revenue less expenses. Subtrac time=18-16mLlide .12 I	19	,766.	39,	044.
Sec			Beginning of Cur		End of Yea	
set	20			,974.		<u> 123.</u>
Net Assets or Fund Balances	21	Total habilities (Fair X, Inte 20)		<u>,773.</u>		<u>878.</u>
		Net assets or fund balances. Subtract line 21 from line 20	512	,201.	<u>551,</u>	245.
_	art II	Signature Block				
		lties of perjury, I declare that I have examined this return, including accompanying schedules and sta			owledge and be	llef, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which prep		<u> </u>		
		Supply of officery Allenoran	<u> X</u>		<u>. </u>	
Sig		Signature of officer	Date	•		
Her	e	KATHY SCHROEDER, EXECUTIVE DIRECTOR Type or print name and title				
			Date	Check	PTIN	
. .	.	Print/Type preparer's name Preparer's signature	2/8/12	if	FIIN	
Paid		NASI RAISSIAN	- - - - - - - - - - 	self-employed	L	
	parer	Firm's name ROBERT LEE & ASSOCIATES, LLP	Firm	's EIN 🛌		-
USE	Only	Firm's address 226 AIRPORT PARKWAY, SUITE 350		400	0	770
	. 41: - 1-	SAN JOSE, CA 95110	[Pho	ne no. 408	8.855.67	
		RS discuss this return with the preparer shown above? (see instructions)			X Yes	No (2010)
0320	01 02-2	2-11 LHA For Paperwork Reduction Act Notice, see the separate instructions.			Form 99	(2 010)

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

		77-0186364	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		X
1	Briefly describe the organization's mission.		
	PIE IS COMMITTED TO EDUCATIONAL EXCELLENCE FOR EVERY STU		
	PALO ALTO UNIFIED SCHOOL DISTRICT (PAUSD). WE WORK IN PA		<u>ITH</u>
	PARENTS, PAUSD, AND THE COMMUNITY TO RAISE FUNDS FOR AN		
	BEYOND WHAT IS POSSIBLE WITH PUBLIC DOLLARS, STRENGTHENI	NG OUR	
2	Did the organization undertake any significant program services during the year which were not listed on		.
	the prior Form 990 or 990-EZ?	∟!Yes	X No
	If "Yes," describe these new services on Schedule O	□ v	X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	∟ Yeş	LA No
	If "Yes," describe these changes on Schedule O		
4	Describe the exempt purpose achievements for each of the organization's three largest program services by exp		
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of g allocations to others, the total expenses, and revenue, if any, for each program service reported.	rants and	
4a	(Code:) (Expenses \$ 3,571,143. including grants of \$ 3,527,423.) (Rev	VODUO \$ 3 8/13	729 \
- Ta	PALO ALTO PARTNERS IN EDUCATION (PIE) REMAINS THE ONLY N		<u> 145•</u>)
	ORGANIZATION DEVOTED EXCLUSIVELY TO RAISING MONEY FOR AL	·	
	UNIFIED SCHOOL DISTRICT (PAUSD) SCHOOLS, AND THE ONLY ON		
	CONTRIBUTIONS CAN PAY FOR ADDITIONAL AND MUCH NEEDED PAU		AND
	STAFF. DUE IN LARGE PART TO DEDICATED VOLUNTEERS, PIE'S		
	EXPENSES CONTINUE TO BE EXTREMELY LOW, ALLOWING OVER 92%		NS
	TO GO DIRECTLY TO THE SCHOOLS.		
	IN ELEMENTARY SCHOOLS, PIE FUNDS:		
	- CLASSROOM SUPPORT: AIDES, ASSISTANTS, READING AND MATH	SPECIALIST	S,
	AND TEACHER COACHES WHO SUPPORT AND ENRICH ALL STUDENTS	LEARNING.	
	- SCIENCE ENRICHMENT: PROGRAMS AND SPECIALISTS WHO HELP	SCIENCE COM	E
4b	(Code ⁻) (Expenses \$ including grants of \$) (Re	venue \$)
	· · · · · · · · · · · · · · · · · · ·		 ,
	- 		
	- A		
4c	(Code:) (Expenses \$ including grants of \$) (Re	venue \$	<u> </u>
70	/(Code: /(Expenses # moduling grants or # /(ne	Ψοιίαο ψ	
			·
4d	Other program services. (Describe in Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 3,571,143.		

			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?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		X_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in 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?			l
	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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	44-	х	
L	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	11a		
D	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			l
	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		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			1
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			İ
	Schedule D, Parts XI, XII, and XIII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			,,
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, 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
14a h	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		X
b	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	1		
	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	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			•
00-	complete Schedule G, Part III Did the organization operate one or more hospitals? If "Yes," complete Schedule H	19		X
	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that	20a		┼^
D	operate one or more hospitals must attach audited financial statements (see instructions)	20b		
	operate one of more negotials must attach addition interior statements (see instructions)	<u> </u>	000	(0040)

Form 990 (2010) PALO ALTO PARTNERS IN EDUCATION
Part IV Checklist of Required Schedules (continued)

			Yes	No	
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the				
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X		
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,				
	column (A), line 2? 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		<u>X</u> _	
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			. ,	
L.	Schedule K. If "No", go to line 25.	24a		X	
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24b			
·	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	i	Х	
b	is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and				
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete				
	Schedule L, Part I	25b		X	
26	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			x	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	27		^	
20	instructions for applicable filing thresholds, conditions, and exceptions):				
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		x	
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X	
	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		l		
	contributions? If "Yes," complete Schedule M	30		X	
31	Did the organization liquidate, terminate, or dissolve and cease operations?		ļ		
	If "Yes," complete Schedule N, Part I	31		X	
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	20		х	
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32			
	sections 301.7701-2 and 301.7701-37 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		X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X	
а					
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2				
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	\vdash	X	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v	
38	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	_37	+	X	
90	Note. All Form 990 filers are required to complete Schedule O	38	X		
				(2010))

Form 990 (2010) PALO ALTO PARTNERS IN EDUCATION
Part V Statements Regarding Other IRS Filings and Tax Compliance

	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			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			ı
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			Ì
	(gambling) winnings to prize winners?	1c	X	
2 a	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 4			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	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			v
	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:			
E.	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		x
5a b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			\vdash
	any contributions that were not tax deductible?	6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c	_	X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
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? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	7h		
8	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.	٦		
а	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12		ļ	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities]		1
11	Section 501(c)(12) organizations. Enter.			
а	Gross income from members or shareholders	1	ļ	
þ	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)	-		
	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	1		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40.	 	+
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	 	
L	Note. See the instructions for additional information the organization must report on Schedule O.			
D	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			
_	Enter the amount of reserves on hand	1		
_	Did the organization receive any payments for indoor tanning services during the tax year?	14a	 	Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	<u> </u>	† -
			aan	(2010)

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	-		X
sec.	tion A. Governing Body and Management	1	, 1	
			Yes	No_
	Enter the number of voting members of the governing body at the end of the tax year 1a 25		Ì	
b	Enter the number of voting members included in line 1a, above, who are independent 25	ļ		
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		<u>X</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	_3_		<u>X</u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		<u>X</u>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		<u>X</u>
6	Does the organization have members or stockholders?	_6		_X_
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		<u>X</u>
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		<u>X</u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b_	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u>X</u>
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		_	
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		<u>X</u>
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		
	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	X_	<u> </u>
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	<u> </u>
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this is done	12c	X	<u> </u>
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	ļ
15	Did the process for determining compensation of the following persons include a review and approval by independent		ŀ	ŀ
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			1
а	The organization's CEO, Executive Director, or top management official	15a	X	├
b	Other officers or key employees of the organization	15b	X	-
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)	ĺ		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			1,,
	taxable entity during the year?	16a	-	X
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?	16b	l .	
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►CA			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	tor		
	public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website X Upon request		_	
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	nd fina	ancial	
	statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person of	tion.	>	
	THE ORGANIZATION - 650-329-3990			
	25 CHURCHILL AVENUE, PALO ALTO, CA 94306		000	

F۲	rm	990	1201	O)

PALO ALTO PARTNERS IN EDUCATION

77-0186364

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

Check if Schedule	O contains a res	ponse to any o	question in thi	s 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.

(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average hours per	(0		Pos all 1			LΑ	Reportable	Reportable	Estimated amount of
	week (describe hours for related organizations in Schedule O)	rustee or director	Institutional trustee	Officer		Highest compensated Complexes		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
ELAINE HAHN										
PRESIDENT	20.00	X		X				0.	0.	0.
ERWIN HOSONO										
TREASURER	10.00	X		Х				0.	0.	0.
DIANA WALSH										
VP OF SCHOOLS DEVELOPMENT	10.00	X		X				0.	0.	0.
MANDY LOWELL										
VP COMMUNITY DEVELOPMENT	10.00	X		X				0.	0.	0.
JUDY LOGAN										
VP MARKETING & COMMUNICATION	10.00	X		X				0.	0.	0.
KAREN FRENCH NEUMAN										
VP OF FINANCE & ADMINISTRATION	5.00	X		X				0.	0.	0.
LINDA VERHULP										
VP OF GOVERNANCE	5.00	X		X				0.	0.	0.
TERRY GODFREY		į								
EXECUTIVE VICE PRESIDENT	5.00	X		X			L.,	0.	0.	0.
SRIRAM SANKAR		İ								
SECRETARY	5.00	X		X				0.	0.	0.
DIANE DOWNEND		l								
ASSISTANT TREASURER AND DIRECTOR - F	5.00	X		X				0.	0.	0
LINDA FURRIER										
DIRECTOR OF DEVELOPMENT - SCHOOLS	5.00	X						0.	0.	0 .
ERIC VERWILLOW										
DIRECTOR OF MARKETING	5.00	X						0.	0.	0.
BELLE GRIFFITHS										
DIRECTOR OF DEVELOPMENT - COMMUNITY	5.00	X						0.	0.	0,
ELIZABETH OLSON										
DIRECTOR OF DEVELOPMENT - SCHOOLS	5.00	X		$ldsymbol{ld}}}}}}$	<u> </u>	<u> </u>		0.	0.	0.
MEGAN O'REILLY LEWIS	•									
DIRECTOR OF MARKETING & COMMUNICATIO	5.00	X	_	<u></u>	L	L		0.	0.	0.
ROBIN REYNOLDS										
DIRECTOR OF DEVELOPMENT - SCHOOLS	5.00	X		ļ	ļ			0.	0.	0.
SARAH SANDS										
DIRECTOR OF DEVELOPMENT - SCHOOLS	5.00	X						0.	0.	0.

Part VII Section A. Officers, Directors, Tru		nplo	yee	_		High	est	Compensated Employ					
(A)	(B) (C) Average Position							(D)	(E)			(F)	
Name and title	Average hours per	(6				n : app	dvA	Reportable	Reportable compensation			imated ount c	
	week (describe hours for related organizations in Schedule	ustee or director	nstitutional trustee	Officer		Highest compensated Employee		compensation from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	,	comp fro orga and	other ensate m the nization relate nization	ion on ed
	O)	₫	Ë	5	, S.	<u> </u> = 5	윤						
KATHRINE K SCHROEDER	40.00			x		1		66,667.					0.
EXECUTIVE DIRECTOR	40.00			^		-	├	00,007.		' 	_		<u> </u>
RUTH-ANNE SIEGEL DIRECTOR - DEVELOPMENT - SCHOOLS	5.00	x						0.	(١.			0.
JANE L. SMITH	3.00	^	<u> </u>		-	<u> </u>	 -	•					<u> </u>
DIRECTOR - MARKETING & COMMUNICATION	5.00	\mathbf{x}			l			0.	().			0.
MEREDITH ACKLEY													
DIRECTOR - DEVELOPMENT - SCHOOLS	5.00	X						0.	(١. (0.
MELISSA ANDERSON													
DIRECTOR - DEVELOPMENT - SCHOOLS	5.00	X						0.	().			0.
ALLI DEETER							1						
DIRECTOR - DEVELOPMENT - SCHOOLS	5.00	X		<u> </u>	_			0.	().			0.
BECKY EPSTEIN		1								- 1			
DIRECTOR OF GOVERNANCE	5.00	X				-		0.	() .			0.
ANDREA COOK FLEMING				ĺ									_
DIRECTOR - MARKETING & CUMMUNICATION	5.00	X	<u> </u>	_	<u> </u>	-	↓	0.	().			0.
MICAELA PRESTI		١							_				^
DIRECTOR - DEVELOPMENT - COMMUNITY	5.00	X	L.	L		_		0.).).		.	0.
1b Sub-total								66,667.		5.			0.
c Total from continuation sheets to Part V d Total (add lines 1b and 1c)	II, Section A							66,667.		5.			0.
Total (add lines to and ic) Total number of individuals (including but n	not limited to th	1086	lieta	ad a	hov	(A) W	ho r	· 		<i>y</i> •			<u> </u>
compensation from the organization	ioi iiiiiitea to ti	1030	iist	. .	ibov	O) 11	1101	cocived more triair wroc	,,ooo iii toportabio				0
gomponoation from the organization									-			Yes	No
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s			e, ke	y er	nplo	yee	, or l	highest compensated ei	mployee on		3		x
4 For any individual listed on line 1a, is the si	um of reportab	le c	omp	ens	atio	n an	d ot	her compensation from	the organization		1		
and related organizations greater than \$15	0,000? If "Yes,	, " cc	mpi	ete	Sch	edu	le J	for such individual		1	4		X
5 Did any person listed on line 1a receive or							rela	ted organization or indiv	idual for services		l		
rendered to the organization? If "Yes," com	nplete Schedui	le J	for s	uch	per	son					5	!	X
Section B. Independent Contractors									\$100,000 of comp				
 Complete this table for your five highest co the organization. NONE 	mpensated in	aep	enae	erit (cont	ıracı	ors	that received more than	\$100,000 of comp	ensa	ation ii	OIII	
(A)								(B)			(C	2)	
Name and business	address							Description of s	services	С	omper	nsatio	n
	-												
	 -												
	, ,												
2 Total number of independent contractors (including but r	not I	ımıta	hd tr	n the	ا مور	iste	d above) who received r	more than			<u> </u>	
\$100,000 in compensation from the organi		.011		,u ((0	.5.6	a abovo, 11110 16061460 1					

				***	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
S Si	1 a	Federated campaigns	1a				· · ·	
	b		1b					
g E	c		1c	5,700.				
Contributions, gifts, grants and other similar amounts	d	. =	1d	37.000				
	e	0						
Sir	f	All other contributions, gifts, gran	· —					
	•	similar amounts not included abor		833,689.				
들	-	Noncash contributions included in lines		033,003.				
हिंह	_	Total, Add lines 1a-1f	11a-11 5		3,839,389.	i i		
-		Total, Add lines 14 11		Business Code				
a	2 a			Dusinoss Code				
ξ	2 a b							
ક્રશ્ર	C							
ΕŞ	d							
Program Service Revenue	-					-		
품	•	All other program service reve	anua					
	'	Total. Add lines 2a-2f	indo	•				
	3	Investment income (including	dividends intere				·	
	Ü	other similar amounts)	amaonao, intoro	>	2,438.			2,438.
	4	Income from investment of ta	x-exempt bond p					
	5	Royalties	x oxompt bond p		 ,			
	J	Hoyamoo	(i) Real	(II) Personal				
	6 a	Gross Rents		(1) 1 0100114	1			
	ь				1]		
		: Rental income or (loss)			-			
		Net rental income or (loss)		•	1			
		Gross amount from sales of	(i) Securities	(II) Other				
	, ,	assets other than inventory		(1) 01.10.	1			
	ь	Less: cost or other basis			1			
	_	and sales expenses						
	c	Gain or (loss)			1			
l		Net gain or (loss)		•	1			
ē		Gross income from fundraisin	g events (not					
			700 of					
Other Reven		contributions reported on line						
۳		Part IV, line 18	а	1,902.				
퇄	t	Less: direct expenses	b	1,902.			1	
0		Net income or (loss) from fund	draising events		0.			
	9 a	Gross income from gaming a	ctivities. See			i e		
		Part IV, line 19	а					
	t	Less. direct expenses	b					
	•	Net income or (loss) from gan	ning activities					
	10 a	a Gross sales of inventory, less	returns					
		and allowances	. а					
	t	Less: cost of goods sold	b					
		Net income or (loss) from sale	es of inventory					
		Miscellaneous Revenu		Business Code				
	11 a							
	k)						
	(
	•	All other revenue	_					
	•	Total. Add lines 11a-11d		>				
	12	Total revenue. See instructions.		<u> </u>	3,841,827.	0.	0.	
03200)9 -10							Form 990 (2010)

Part IX Statement of Functional Expenses

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

	Section 501(c)(3 All other organizations must comp	3) and 501(c)(4) organizat olete column (A) but are i			
	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	3,527,423.	3,527,423.		
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.			i	
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	105,000.	26,250.	26,250.	<u>52,500.</u>
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	29,367.	7,342.	7,342.	<u>14,683.</u>
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	10,015.	2,504.	2,504.	<u>5,007.</u>
11	Fees for services (non-employees):				
а	Management				
b	Legal				
C	Accounting	14,000.		14,000.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	45,141.	.,.,		45,141.
12	Advertising and promotion	12,344.			12,344.
13	Office expenses	50,148.		34,665.	<u> 15,483.</u>
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest .				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	744.	186.	186.	372.
23	Insurance	7,438.	7,438.		
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	TRAINING AND DEVELOPMEN	1,163.		1,163.	
b					
С			•		
d					
е					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	3,802,783.	3,571,143.	86,110.	145,530.
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				
	- Constitution	<u> </u>		<u> </u>	Form 990 (2010)

Pa	tΧ	Balance Sheet			
	•		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	273,168.	1	609,570.
	2	Savings and temporary cash investments	266,013.	2	
	3	Pledges and grants receivable, net		3	
	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			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
w		employees' beneficiary organizations (see instructions)	<u> </u>	6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	9,891.	9	11,395.
	10a	Land, buildings, and equipment. cost or other		İ	
		basis Complete Part VI of Schedule D 10a 23, 105.	4 000	1	4 4 5 6
		Less: accumulated depreciation 10b 21,947.	1,902.		1,158.
	11	Investments - publicly traded securities	 .	11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	550,974.	15	622,123.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	5,724.	16 17	6,344.
	17 18	Accounts payable and accrued expenses	33,049.	18	64,534.
	19	Grants payable Deferred revenue	33,043.	19	04,334.
	20	Tax-exempt bond liabilities		20	
10	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,		-	
Ϊ́g		highest compensated employees, and disqualified persons. Complete Part II			
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	0.
	26	Total liabilities. Add lines 17 through 25	38,773.	26	70,878.
	_	Organizations that follow SFAS 117, check here			
S		lines 27 through 29, and lines 33 and 34.			
Š	27	Unrestricted net assets .	512,201.	27	<u>551,245.</u>
3ali	28	Temporarily restricted net assets		28	
臣	29	Permanently restricted net assets		29	
Ξ		Organizations that do not follow SFAS 117, check here			
ğ		complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31	-
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	F. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6.	32	FE4 04-
~	33	Total net assets or fund balances	512,201.		551,245.
	34	Total liabilities and net assets/fund balances	550,974.	34	622,123.

622,123. Form **990** (2010)

-orm	1990 (2010) PALO ALTO PARTNERS IN EDUCATION	77-018	36364	Pag	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	3,841		
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,802	<u>2,7</u>	<u>83.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3	39	9,0	<u>44.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	512	2,2	01.
5	Other changes in net assets or fund balances (explain in Schedule O)	5			0.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	551	L,2	<u>45.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				<u>X</u>
				Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other				1
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			1
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			1
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a			
	separate basis, consolidated basis, or both:				
	X 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 Audit			
	Act and OMB Circular A 133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2010)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

2010

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.

Open to Public Inspection

Name of the organization

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

Employer identification number

		PALO AL	TO PARTNERS	IN ED	UCATI	ON			77	7-0186364
Part I	Reason	for Public Char	ity Status (All organiz	ations mus	st complet	e this part) See inst	ructions.		
he orgar	nzation is not a	private foundation	because it is: (For lines 1	through 1	1, check o	only one b	ox)			
1 🔲	A church, cor	nvention of churches	s, or association of churc	ches descr	nbed in se	ction 170(b)(1)(A)(i).			
2 🔲	A school des	cribed in section 17	0(b)(1)(A)(ii). (Attach Sc	hedule E.)						
з 🔲	A hospital or	a cooperative hospi	tal service organization o	described ı	n section	170(b)(1)(A)(iii).			
4 🔲	A medical res	search organization o	operated in conjunction	with a hos	oıtal descr	ıbed in se	ction 170	(b)(1)(A)(iii	i). Enter tl	he hospital's name,
	city, and stat	e:								
5 🔲	An organizati	on operated for the	benefit of a college or ur	niversity ov	vned or op	erated by	a governn	nental unit	describe	ed in
	section 170	(b)(1)(A)(iv). (Comple	ete Part II.)							
6 🔲	A federal, sta	te, or local governme	ent or governmental unit	t described	l in section	n 170(b)(1)(A)(v).			
7 X	An organizati	on that normally rec	eives a substantial part (of its supp	ort from a	governme	ntal unit o	r from the	general p	oublic described in
	section 170(b)(1)(A)(vi). (Comple	te Part II)							
в 🗀	A community	trust described in s	ection 170(b)(1)(A)(vi).	(Complete	Part II.)					
9 🗀	An organizati	on that normally rec	eives: (1) more than 33 1	1/3% of its	support fr	om contril	outions, m	embershij	o fees, an	nd gross receipts from
	activities rela	ted to its exempt fur	nctions - subject to certa	un exceptio	ons, and (2	2) no more	than 33 1	/3% of its	support 1	from gross investment
	income and u	inrelated business to	axable income (less sect	tion 511 ta	x) from bus	sinesses a	cquired b	y the orga	nization a	after June 30, 1975
	See section	509(a)(2). (Complete	Part III.)							
10 🖳	•	•	perated exclusively to te	•	-			-		
11 📖	An organizatı	on organized and or	perated exclusively for th	ne benefit d	of, to perfo	rm the fur	octions of,	or to carry	y out the	purposes of one or
			ations described in section). See sec	tion 509(a	a)(3). Che	eck the box that
			organization and compl							1
	a Type I		-		e III - Func	-	-		d	Type III - Other
e			t the organization is not							
_		-	han one or more publicly		_				9(a)(1) or s	section 509(a)(2).
f	•		ten determination from t	the IHS tha	it it is a Ty	pe I, Type	II, or Type) III		
		rganization, check th		5 1	4 9 . 19	•	- 6 Al 6 - H		0	
g	_		organization accepted ar			•				
	• •	-	irectly controls, either al	one or tog	etner with	persons o	iescribea i	in (II) and (III) below,	
	•	• •	upported organization?							11g(i)
		•	n described in (i) above?		.2					11g(ii)
			person described in (i) on the about the supported or the supported or the supported or the supported or the supported or the supported or the supported or the supported or the supported or the supported or the support of the suppo							11g(iii)
h	Provide trie i	ollowing information	about the supported of	yanızationi	(5).					
(1) None		(1) FIN	(iii) Type of	(iv) Is the c	rganization	(v) Did voi	notify the	(vi) Is	the	(viii) Amount of
	e of supported janization	(ii) EIN	organization		sted in your			Lorganizatio	on in col.	(vii) Amount of support
Org	janization		(described on lines 1-9 above or IRC section		document?			(i) organız U.S	.?	опроге
			(see instructions))	Yes	No	Yes	No	Yes	No	
				_			_	<u></u>		
									-	
								<u> </u>		
				<u> </u>						
_										
[ctal		Ī	i	1	i .	1	1	1	i 1	

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

Schedule A (Form 990 or 990-EZ) 2010

Sch	edule A (Form 990 or 990-EZ) 2010 P.	ልፒ.ጣ ልፒ.ሞር	DARTMERC	דאו החווכאיי	TON	77_019	6364 Page 2	
Pε	art II Support Schedule for	Organizations	Described in	Sections 1700	b)(1)(A)(iv) and	1 170(b)(1)(A)(vi)	
	(Complete only if you checked	d the box on line 5	, 7, or 8 of Part I o	r if the organization	n failed to qualify u	inder Part III. If the	e organization	
	fails to qualify under the tests							
Se	ction A. Public Support							
ale	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total	
	Gifts, grants, contributions, and	(4) = 333	(5) = 5	(0) 2000	(4) 2000	(0) 2010	(I) TOTAL	
	membership fees received. (Do not							
	include any "unusual grants.")	2457819.	2461226.	2804199	3256111	3839389.	14818744.	
2	Tax revenues levied for the organ-			20012551	3230111.	3037307.	14010/44.	
_	ızatıon's benefit and either paid to							
	or expended on its behalf							
3	The value of services or facilities	_						
	furnished by a governmental unit to							
	the organization without charge	1						
4	Total. Add lines 1 through 3	2457819.	2461226.	2804199.	3256111.	3839389.	14818744.	
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)							
	Public support. Subtract line 5 from line 4						14818744.	
Se (ction B. Total Support			_				
ale	ndar year (or fiscal year beginning in) 🖊	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total	
7	Amounts from line 4	2457819.	2461226.	2804199.	3256111.	3839389.	14818744.	
8	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar sources	52,247.	60,111.	31,028.	13,607.	<u>2,438.</u>	159,431.	
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.)	583.	10.				593.	
	Total support. Add lines 7 through 10						14978768.	
	Gross receipts from related activities,	·	-		Į	12		
13	First five years. If the Form 990 is for		first, second, thire	d, fourth, or fifth ta	ix year as a section	n 501(c)(3)		
20	organization, check this box and stop		roontogo					
	ction C. Computation of Publ				ī			
	Public support percentage for 2010 (I			olumn (f))	}	14	<u>98.93 %</u>	
	Public support percentage from 2009					15	<u>98.72 %</u>	
ıбa	33 1/3% support test - 2010.If the o				4 is 33 1/3% or me	ore, check this bo		
	stop here. The organization qualifies		O .				▶ X	
b	33 1/3% support test - 2009.If the o				line 15 is 33 1/3%	or more, check th	nis box	
1 7 -	and stop here. The organization qual	•	• •	•	40.40			
ı / a	10% -facts-and-circumstances test							
	and if the organization meets the "fac					τ IV now the orga	nization	
	meets the "facts-and-circumstances"	test. The organization	uon qualifles as a l	DUDIICIV SUDDORLĖC	i organization			

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

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

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		1-7			1 1	
membership fees received. (Do not	ĺ					
include any "unusual grants.")						
2 Gross receipts from admissions,				-		
merchandise sold or services per-						
formed, or facilities furnished in						
any activity that is related to the						
organization's tax-exempt purpose						
3 Gross receipts from activities that					i	
are not an unrelated trade or bus-						
iness under section 513					-	
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received		1				
from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year c Add lines 7a and 7b					-	
- · · · · · · · · · · · · · · · · · · ·						
8 Public support (Subtract line 7c from tine 6) Section B. Total Support					1	
Calendar year (or fiscal year beginning in) 🖊	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest,						
dividends, payments received on securities loans, rents, royalties						
and income from similar sources			\			
b Unrelated business taxable income					·	
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						•
11 Net income from unrelated business			-	-		
activities not included in line 10b,						
whether or not the business is						
regularly carried on 12 Other income. Do not include gain		-	1			
or loss from the sale of capital					1	
J. 1000 IIIO Odio Oi Oupitui				 		
assets (Explain in Part IV.)		1			1	<u> </u>
assets (Explain in Part IV.) 13 Total support (Add lines 9, 10c, 11, and 12)			1.0.1.	-	504()(0)	
assets (Explain in Part IV.) 13 Total support (Add lines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is for	the organization'	s first, second, thi	rd, fourth, or fifth 1	tax year as a sect	on 501(c)(3) organiz	ation,
assets (Explain in Part IV.) 13 Total support (Add lines 9, 10c, 11, and 12.) 14 First five years. If the Form 990 is for check this box and stop here			rd, fourth, or fifth t	tax year as a sect	ion 501(c)(3) organiz	ration,
assets (Explain in Part IV.) 13 Total support (Add lines 9, 10c, 11, and 12.) 14 First five years. If the Form 990 is for check this box and stop here Section C. Computation of Publi	c Support Pe	ercentage		tax year as a sect	on 501(c)(3) organiz	zation,
assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12.) 14 First five years. If the Form 990 is for check this box and stop here Section C. Computation of Publi 15 Public support percentage for 2010 (li	ic Support Pe	ercentage divided by line 13,		tax year as a sect	on 501(c)(3) organiz	zation,
assets (Explain in Part IV.) 13 Total support (Add lines 9, 10c, 11, and 12.) 14 First five years. If the Form 990 is for check this box and stop here Section C. Computation of Public 15 Public support percentage for 2010 (li 16 Public support percentage from 2009	ic Support Pe ine 8, column (f) c Schedule A, Pari	ercentage divided by line 13, t III, line 15	column (f))	tax year as a sect		zation,
assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12.) 14 First five years. If the Form 990 is for check this box and stop here Section C. Computation of Public Public support percentage for 2010 (life Public support percentage from 2009)	ic Support Pe ine 8, column (f) c Schedule A, Pari	ercentage divided by line 13, t III, line 15	column (f))	tax year as a sect	15	eation,
assets (Explain in Part IV.) 13 Total support (Add lines 9, 10c, 11, and 12.) 14 First five years. If the Form 990 is for check this box and stop here Section C. Computation of Public 15 Public support percentage for 2010 (III Public support percentage from 2009) Section D. Computation of Investigation 15 Public support percentage from 2009	ic Support Pe ine 8, column (f) o Schedule A, Part stment Incom	ercentage divided by line 13, t III, line 15 ne Percentage	column (f))	tax year as a sect	15	zation,
assets (Explain in Part IV.) 13 Total support (Add lines 9, 10c, 11, and 12.) 14 First five years. If the Form 990 is for check this box and stop here Section C. Computation of Public Public support percentage for 2010 (III.) 16 Public support percentage from 2009 Section D. Computation of Investment income percentage for 20	ic Support Pe ine 8, column (f) o Schedule A, Part stment Incom 10 (line 10c, colu	ercentage divided by line 13, t III, line 15 ne Percentage mn (f) divided by li	column (f))	tax year as a sect	15 16	zation,
assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12.) 14 First five years. If the Form 990 is for check this box and stop here Section C. Computation of Publi 15 Public support percentage for 2010 (li 16 Public support percentage from 2009 Section D. Computation of Inves 17 Investment income percentage from 2 Investment income percentage from 2	c Support Perine 8, column (f) of Schedule A, Partistment Incom 10 (line 10c, colu	ercentage divided by line 13, t III, line 15 ne Percentage mn (f) divided by li , Part III, line 17	column (f)) e ne 13, column (f))		15 16 17 18	>
assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12.) 14 First five years. If the Form 990 is for check this box and stop here Section C. Computation of Public Public support percentage for 2010 (line 16 Public support percentage from 2009) Section D. Computation of Investment income percentage from 2 linvestment	ic Support Perine 8, column (f) of Schedule A, Paristment Incom 10 (line 10c, column 2009 Schedule A, organization did	ercentage divided by line 13, till, line 15 ne Percentage mn (f) divided by li , Part III, line 17 not check the box	column (f)) ne 13, column (f)) on line 14, and lin	e 15 is more than	15 16 17 18 33 1/3%, and line	>
assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for check this box and stop here Section C. Computation of Publi Public support percentage for 2010 (li Public support percentage from 2009 Section D. Computation of Investing Investment income percentage from 2 Investment income percentage from 2 Investment income percentage from 2 Investment income percentage from 2 Investment income percentage from 2 Investment income percentage from 2 Investment income percentage from 2 Investment income percentage from 2 Investment income percentage from 2 Investment income percentage from 2 Investment income percentage from 2 Investment income percentage from 2 Investment income percentage from 2	ic Support Perine 8, column (f) of Schedule A, Paristment Incommo 10 (line 10c, column 2009 Schedule A, organization did ind stop here. The	ercentage divided by line 13, t III, line 15 ne Percentage mn (f) divided by li , Part III, line 17 not check the box e organization qua	column (f)) ne 13, column (f)) on line 14, and lin	ne 15 is more than supported organ	15 16 17 18 33 1/3%, and line	17 is not
assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12.) 14 First five years. If the Form 990 is for check this box and stop here Section C. Computation of Public Public support percentage for 2010 (line 16 Public support percentage from 2009) Section D. Computation of Investment income percentage from 2 linvestment	ine 8, column (f) of Schedule A, Partistment Incom 10 (line 10c, colu 2009 Schedule A, organization did and stop here. The organization did	ercentage divided by line 13, t III, line 15 ne Percentage mn (f) divided by li , Part III, line 17 not check the box e organization qua not check a box o	column (f)) ne 13, column (f)) on line 14, and lin lifies as a publicly n line 14 or line 19	e 15 is more than supported organ a, and line 16 is n	15 16 17 18 133 1/3%, and line rization nore than 33 1/3%,	17 is not

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions.

2010Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990. See separate hist uctions

Employer identification number

Par	TALO ALTO PARTNERS t I Organizations Maintaining Donor Advise		Accounts Complete if the
Pai			Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6. (a) Donor advised funds	(h) Funda and other accounts
		(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	-	
	are the organization's property, subject to the organization's	_	└── Yes
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose con	
	impermissible private benefit?		Yes No
Pai			IV, line 7.
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (e.g., recreation or e		
	Protection of natural habitat	Preservation of a certified	I historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied 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 str	• •	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		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the org	ganization during the tax
	year ▶		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe		
	violations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the requirements of section 170(h)(4	
_	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservat	•	
	include, if applicable, the text of the footnote to the organiza	ation's financial statements that describes the	organization's accounting for
Da	conservation easements. † III Organizations Maintaining Collections of	of Art Historical Treasures or Othe	or Similar Assats
Га	Complete if the organization answered "Yes" to Form	•	on Onthial Assets.
		· · · · · · · · · · · · · · · · · · ·	t and balance about works of ort
та	If the organization elected, as permitted under SFAS 116 (A		
	historical treasures, or other similar assets held for public ex		of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that described an approximation plants of the company of t		d balanca abast wades of art bastorial
b	If the organization elected, as permitted under SFAS 116 (A		
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of public	service, provide the following amounts
	relating to these items:		▶ ¢
	(i) Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
_	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tre		uri, provide
	the following amounts required to be reported under SFAS	i to (ASC 936) relating to these items:	► ¢
a	Revenues included in Form 990, Part VIII, line 1		\$
b	Assets included in Form 990, Part X		> \$

			S IN EDUCA						Page 2
Par	t III Organizations Maintaining Co	ollections of Ar	t, Historical Tre	easures, or	Other	Simila	ır Asset	s (contin	ued)
3	Using the organization's acquisition, accession	on, and other record	s, check any of the	following that	are a sig	nificant u	ise of its o	collection	ıtems
	(check all that apply):								
а	Public exhibition	d	Loan or excl	nange progran	ns				
b	Scholarly research	е	Other						
С	Preservation for future generations								
4	Provide a description of the organization's co	llections and explair	n how they further th	ne organization	n's exem	pt purpo	se in Part	XIV.	
5	During the year, did the organization solicit or	receive donations of	of art, historical treas	sures, or other	sımılar a	assets		_	
	to be sold to raise funds rather than to be ma	intained as part of t	he organization's co	ilection?				Yes	No_
Par	t IV Escrow and Custodial Arrang	gements. Comple	ete if the organizatio	n answered "Y	es" to F	orm 990,	Part IV, I	ne 9, or	
	reported an amount on Form 990, Part	t X, line 21.							
1a	Is the organization an agent, trustee, custodia	an or other intermed	lary for contribution	s or other ass	ets not 11	ncluded	_	_	
	on Form 990, Part X?							Yes	L No
b	If "Yes," explain the arrangement in Part XIV a	and complete the fo	llowing table:						
								Amount	
С	Beginning balance					1c			
d	Additions during the year .					1d			
е	Distributions during the year .					1e			
f	Ending balance					1f			
2 a	Did the organization include an amount on Fo	orm 990, Part X, line	21?				<u> </u>	Yes	L No
	If "Yes," explain the arrangement in Part XIV.								
Par	t V Endowment Funds. Complete if	the organization an	swered "Yes" to For						
	-	(a) Current year	(b) Prior year	(c) Two years	back (d) Three y	ears back	(e) Four	years back
1a	Beginning of year balance		21,750.					-	
b	Contributions								
C	Net investment earnings, gains, and losses	_							
d	Grants or scholarships		21,750.						
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the year	r end balance held a	ıs:						
а	Board designated or quasi-endowment		_%						
b	Permanent endowment	%							
С		%							
3а	Are there endowment funds not in the posse	ssion of the organiz	ation that are held a	ind administer	ed for th	e organiz	ation	Г	
	by:								Yes No
	(i) unrelated organizations .							3a(i)	
	(ii) related organizations							3a(ii)	
b	If "Yes" to 3a(II), are the related organizations							3b	
4	Describe in Part XIV the intended uses of the								
Pai	t VI Land, Buildings, and Equipm						<u> </u>		
	Description of investment	(a) Cost or o		or other	· · ·	cumulate		(d) Book	value
		basis (investr	nent) basis	(other)	аер	reciation			
	Land								
	Buildings								
-	Leasehold improvements			2 105		21 0	47		1 1 5 0
d	Equipment	_		3,105.		21,9	4/•		1,158.
<u>e</u>	Other (Column (d) much a	aval Farm 000 Dad	Y column (P) line :	10(a))			_		1 1 5 0

Schedule D (Form 990) 2010

(8) (9) (10)

Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)

FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under

$\overline{}$	t XI Reconciliation of Change in Net Assets from Form 990 to				0186364 Page 4
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		3,841,827.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		3,802,783.
	* * * * * * * * * * * * * * * * * * * *	•			39,044.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		33,044.
4	Net unrealized gains (losses) on investments Donated services and use of facilities		5		
5 6	Investment expenses		6		
	·		7		
7 8	Prior period adjustments 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	۱۵	10		39,044.
	t XII Reconciliation of Revenue per Audited Financial Statemen			eturn	
1	Total revenue, gains, and other support per audited financial statements			1	3,843,729.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				3701071231
~ a	Net unrealized gains on investments	2a			
h	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV.)	2d	1,902.		
	Add lines 2a through 2d			2e	1,902.
3	Subtract line 2e from line 1			3	3,841,827.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				3/011/01/
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
h	Other (Describe in Part XIV.)	4b	-		
c	Add lines 4a and 4b	10		4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	3,841,827.
	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents With Expe	enses per		
1	Total expenses and losses per audited financial statements	•	•	1	3,804,685.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				<u> </u>
_ a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV.)	2d	1,902.		
e	Add lines 2a through 2d			2e	1,902.
3	Subtract line 2e from line 1			3	3,802,783.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIV.)	4b		1	
	Add lines 4a and 4b			4c	0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	3,802,783.
	t XIV Supplemental Information				
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III	, lines 1a and 4; Pa	art IV, lines 1	b and 2	2b; Part V, line 4; Part
X, lin	e 2; Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comp	lete this part to pro	ovide any ado	ditional	Information.
<u>PAI</u>	RT X, LINE 2: THE ORGANIZATION EVALUATES IT	S UNCERTA	IN TAX	PO	SITIONS
ANI	O WILL RECOGNIZE A LOSS CONTINGENCY WHEN IT	r is prob <i>i</i>	BLE TH	AT .	A LIABILITY
нъσ	BEEN INCURRED AS OF THE DATE OF THE FINAN	מרדמד. פיימים	PMFNMC	2 NT	ח שעם
11111	DEBN INCORRED AS OF THE DATE OF THE FINAL	CIAL SIA	. Linina 1	TIN.	D 11115
<u>AM</u> (OUNT OF THE LOSS CAN BE REASONABLY ESTIMATE	ED. THE A	MOUNT	REC	OGNIZED IS
SUI	BJECT TO ESTIMATE AND MANAGEMENT JUDGMENT V	VITH RESPE	ECT TO	THE	LIKELY
יַטס	COME OF EACH UNCERTAIN TAX POSITION. THE	AMOUNT TH	AT IS	ULT	IMATELY
<u>sus</u>	STAINED FOR AN INDIVIDUAL UNCERTAIN TAX POS	SITION OR	FOR AL	L U	NCERTAIN
ጥልን	O DOSTUTONS IN THE ACCEPTANT COILD DIFFED I	PDOM TUTE 7	MOINT	DEC	OCNT 7 PD

Schedule D (Form 990) 2010

Part XIV Supplemental Information (continued)	LON		-018636	4 Page 5
AS OF JUNE 30, 2011, MANAGEMENT DID NOT IDENTIFY POSITIONS.	ANY	UNCERTAIN	TAX	
PART XII, LINE 2D - OTHER ADJUSTMENTS:				
FUNDRAISING EXPENSE	<u> </u>			1,902.
PART XIII, LINE 2D - OTHER ADJUSTMENTS:				
FUNDRAISING EXPENSE				1,902.
				-
				
				

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

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

2010	Open to Public Inspection
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Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

Employer identification number 77 - 0186364	*0000TO		X Yes No		V, line 21, for any ed	(h) Purpose of grant or assistance	EDUCATIONAL SUPPORT			0	♣	
ш		the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	:		/es" to Form 990, Part IN additional space is need	(g) Description of non-cash assistance	ш					
		y for the grants or ass	:		anization answered "\ can be duplicated if a	(f) Method of valuation (book, FMV, appraisal, other)						
		e grantees' eligibilit		d States.	Somplete if the org han \$5,000. Part II	(e) Amount of non-cash assistance	o			:		
NO		s or assistance, the		t tunds in the Unite	ie United States. (nt received more tl	(d) Amount of cash grant	3,527,423,					
NOTH RUITON	4			toring the use of gran	d Organizations in th s box if no one recipie	(c) IRC section if applicable	170(C)1			ganizations		
DADWNED	nd Assistance	o substantiate the	stance?	cedures for moni	Governments and S5.000. Check this	(b) EIN	94-2168440			nd government or		
Name of the organization	Part General Information on Grants and Assistance	1 Does the organization maintain records to substantiate the amount of		깕	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 recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	1 (a) Name and address of organization or government	PALO ALTO UNIFIED SCHOOL DISTRICT 25 CHURCHILL AVE. PALO ALTO CA 94306			2 Enter total number of section 501(c)(3) and government organizations	3 Enter total number of other organizations	

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Page 2

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. Schedule I (Form 990) (2010)

Part III Grants and Other

(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	n required in Part I, I	ine 2, and any other	additional information.	
SCHEDULE I, PART I, LINE 2: THE ORGANI	GANIZATION	ON REVIEWS	DOCUMENTA	REVIEWS DOCUMENTATION PROVIDED	
BY THE DISTRICT, WHICH HAS SET ASIDE	Æ	SEPARATE AND	IDENTIFIABLE	E ACCOUNT	
NUMBER FOR ALL EXPENDITURES OF PIE	FUNDS,	AND HAS AN	AN ANNUAL MEETING WITH	STING WITH	
EACH PRINCIPAL IN THE DISTRICT TO FURTHER		SUBSTANTIA	SUBSTANTIATE THAT GRANT FUNDS	ANT FUNDS ARE	
USED FOR EDUCATIONAL PURPOSES AND	SPENT IN	IN ACCORDANCE WITH		ANNUALLY-SET	
FUNDING TARGETS FOR PAUSD'S ELEMENTARY,	1	MIDDLE, AND	AND HIGH SCHOOLS.	S. IN THE	
CASE OF GRANT FUNDS DISTRIBUTED TO	PAUSD TO	O FUND THE	ORGANIZATION'S	ION'S TEACHER	
GRANTS PROGRAM, PURCHASE ORDERS AND/OR	_[ER EXPENSE	OTHER EXPENSE REIMBURSEMENT	TENT	
DOCUMENTATION ARE REQUIRED TO SUBSTANT	TANTIATE	THAT FUNDS	S ARE USED	FOR	
032102 01-13-11					Schedule I (Form 990) (2010)

Schedule I	(Form 990)	2010	PALO	AL	ro partners	SINI	EDUC	ATION	77	/-018	36364 Page 2
rait IV	Supple	mental intorm	aนoп		n. v						
EDUCA'	TIONAL	PURPOSES	AND :	IN C	COMPLIANCE	WITH	THE	GUIDELINES	OF	THE	TEACHER
GRANTS	PROG	RAM.									
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SCHEDULE O (Form 990 or 990-EZ)

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032211 01-24-11 Supplemental Information to Form 990 or 990-EZ

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.

2010 Open to Public Inspection

Name of the organization

PALO ALTO PARTNERS IN EDUCATION

Employer identification number 77-0186364

PALO ALIO PARINERS IN EDUCATION //-0186304
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
STUDENTS K-12 EXPERIENCE BY SUPPORTING STAFF AND INNOVATIVE PROJECTS.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
ALIVE FOR STUDENTS THROUGH HANDS-ON UNITS.
- ARTS INSTRUCTION: TRAINED STAFF WHO TEACH SPECTRA ART AND COMPARABLE
CREATIVE ARTS.
IN MIDDLE SCHOOLS, PIE FUNDS:
- ACADEMIC ENRICHMENT: ADDITIONAL COURSES AND CLASSROOM SUPPORT IN
VIDEO PRODUCTION, CREATIVE WRITING, MUSIC AND BIOTECHNOLOGY.
- STUDENT SUPPORT: PROGRAMS WHICH ADDRESS 6TH AND 8TH GRADE
TRANSITIONS; ACADEMIC GUIDANCE AND SUPPORT; AND CHARACTER DEVELOPMENT.
- INSTRUCTIONAL TECHNOLOGY: MENTORS WHO ASSIST TEACHERS IN APPLYING
TECHNOLOGY TO CURRICULUM THAT ENHANCES STUDENT LEARNING.
IN HIGH SCHOOLS, PIE FUNDS:
- COLLEGE AND CAREER COUNSELING: STAFFING TO SUPPORT ADVISING AND
RESOURCE PROGRAMS WHICH HELP ALL STUDENTS PLAN WISELY FOR THE FUTURE.
- CAREER/TECHNOLOGY EDUCATION: ADDITIONAL COURSES IN ENGINEERING, MEDIA
TECHNOLOGY AND PERFORMING ARTS.
- INSTRUCTIONAL TECHNOLOGY: MENTORS WHO ASSIST TEACHERS IN APPLYING
TECHNOLOGY TO CURRICULUM THAT ENHANCES STUDENT LEARNING.
FORM 990, PART VI, SECTION B, LINE 11: THE DRAFT OF THE FORM 990 IS
SUBMITTED TO THE AUDIT COMMITTEE (A SUBCOMMITTEE OF THE BOARD OF LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2010)
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PALO ALTO PARTNERS IN EDUCATION

Employer identification number 77-0186364

DIRECTORS). THE AUDIT COMMITTEE IS AUTHORIZED TO APPROVE THE FORM 990 FOR
PUBLICATION. THIS PROCEDURE HAS BEEN APPROVED BY THE BOARD OF DIRECTORS.

A FINAL COPY OF THE FORM 990 IS PROVIDED TO EACH BOARD MEMBER VIA
ELECTRONIC TRANSMISSION FROM THE AUDIT COMMITTEE.

FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION REGULARLY AND

CONSISTENTLY MONITORS AND ENFORCES COMPLIANCE WITH THE CONFLICT OF INTEREST

POLICY. THE BOARD OF DIRECTORS, OFFICERS AND EMPLOYEES ARE EXPECTED TO USE

GOOD JUDGMENT, TO ADHERE TO HIGH ETHICAL STANDARDS, AND TO CONDUCT THEIR

AFFAIRS IN SUCH A MANNER AS TO AVOID ANY ACTUAL OR POTENTIAL CONFLICT

BETWEEN THE PERSONAL INTEREST OF A DIRECTOR OR EMPLOYEE AND THOSE OF THE

ORGANIZATION. BOTH THE FACT AND THE APPEARANCE OF A CONFLICT OF INTEREST

IS AVOIDED.

FORM 990, PART VI, SECTION B, LINE 15: THE BOARD OF DIRECTORS REVIEWS THE

COMPENSATION OF THE EXECUTIVE DIRECTOR (THE ORGANIZATION'S ONLY KEY

EMPLOYEE) BASED UPON THE FOLLOWING: COMPENSATION IS REASONABLE AND

APPROPRIATE IN TERMS OF THE ORGANIZATION'S REVENUES AND EXPENSES,

COMPARABILITY WITH OTHER NONPROFITS, THE CALIBER OF SERVICES PROVIDED TO

THE ORGANIZATION AND FOR FINANCIAL PLANNING.

THE ORGANIZATION DOES NOT COMPENSATE BOARD MEMBERS OR OFFICERS OF THE ORGANIZATION (OTHER THAN THE EXECUTIVE DIRECTOR).

FORM 990, PART VI, SECTION C, LINE 18: THE ORGANIZATION MAKES ITS FORM
1023 AND 990 AVAILABLE FOR PUBLIC INSPECTION UPON REQUEST.

Name of the experiential	Page 2
Name of the organization PALO ALTO PARTNERS IN EDUCATION	Employer identification number 77-0186364
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINA	NCIAL STATEMENTS
AVAILABLE TO THE PUBLIC UPON REQUEST.	
FORM 990, PART XII, 2C:	
FINANCIAL STATEMENT AND REPORTING:	
THE BOARD OF DIRECTORS APPOINTED THE AUDIT COMMITTEE TO C	OVERSEE THE
AUDIT OF THE FINANCIAL STATEMENTS AND SELECTION OF THE IN	IDEPENDENT
ACCOUNTANTS.	
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