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| | | |
|---|--|---|
| Form 990  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 | OMB No 1545-0047 2010 Open to Public Inspection |
|---|--|---|

| | | |
|--|--|--|
| A For the 2010 calendar year, or tax year beginning 10-01-2010 and ending 09-30-2011 | | |
| B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending | C Name of organization Points of Light Foundation | D Employer identification number 65-0206641 |
| | Doing Business As Points of Light Institute | E Telephone number (404) 979-2900 |
| | Number and street (or P O box if mail is not delivered to street address) 600 Means Street NW | Room/suite |
| | G Gross receipts \$ 57,611,551 | |
| | City or town, state or country, and ZIP + 4 Atlanta, GA 30318 | |
| | F Name and address of principal officer Michelle Nunn 600 Means St NW Atlanta,GA 30318 | H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number ▶ |
| I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (Insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527 | | |
| J Website: ▶ www.pointsoflight.org | | |
| K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶ | | L Year of formation 1990 |
| | | M State of legal domicile GA |

| Part I | | Summary | |
|--|---|------------|---------------------------|
| Activities & Governance | 1 Briefly describe the organization's mission or most significant activities THE PRIMARY PURPOSE OF THE POINTS OF LIGHT INSTITUTE IS TO INSPIRE, EQUIP, AND MOBILIZE PEOPLE TO TAKE ACTION THAT CHANGES THE WORLD | | |
| | | | |
| | | | |
| | | | |
| | 2 Check this box <input checked="" type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets | | |
| | 3 Number of voting members of the governing body (Part VI, line 1a) | 3 | 26 |
| | 4 Number of independent voting members of the governing body (Part VI, line 1b) | 4 | 26 |
| | 5 Total number of individuals employed in calendar year 2010 (Part V, line 2a) | 5 | 162 |
| 6 Total number of volunteers (estimate if necessary) | 6 | 200 | |
| 7a Total unrelated business revenue from Part VIII, column (C), line 12 | 7a | 0 | |
| b Net unrelated business taxable income from Form 990-T, line 34 | 7b | | |
| Revenue | 8 Contributions and grants (Part VIII, line 1h) | Prior Year | Current Year |
| | 9 Program service revenue (Part VIII, line 2g) | 33,880,700 | 46,985,407 |
| | 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) | 6,618,657 | 5,993,397 |
| | 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 16,211 | 2,964,307 |
| | 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 0 | -217,101 |
| | | 40,515,568 | 55,726,010 |
| Expenses | 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) | 17,475,353 | 17,763,618 |
| | 14 Benefits paid to or for members (Part IX, column (A), line 4) | 0 | 0 |
| | 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) | 9,394,498 | 11,697,674 |
| | 16a Professional fundraising fees (Part IX, column (A), line 11e) | 65,252 | 356,760 |
| | b Total fundraising expenses (Part IX, column (D), line 25) <u>▶2,890,079</u> | | |
| | 17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f) | 12,069,062 | 16,248,371 |
| | 18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) | 39,004,165 | 46,066,423 |
| | 19 Revenue less expenses Subtract line 18 from line 12 | 1,511,403 | 9,659,587 |
| | Net Assets or Fund Balances | | Beginning of Current Year |
| 20 Total assets (Part X, line 16) | | 14,106,291 | 25,013,714 |
| 21 Total liabilities (Part X, line 26) | | 7,732,035 | 6,663,473 |
| 22 Net assets or fund balances Subtract line 21 from line 20 | | 6,374,256 | 18,350,241 |

| | | | | | |
|---|--|--|------|---|---------------------------|
| Part II Signature Block | | | | | |
| Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. | | | | | |
| Sign Here | ***** Signature of officer | | | 2012-08-14 Date | |
| | Kristine Tecce Chief Financial Officer Type or print name and title | | | | |
| Paid Preparer Use Only | Print/Type preparer's name Jennifer FitzGerald | Preparer's signature Jennifer FitzGerald | Date | Check if self-employed <input type="checkbox"/> | PTIN |
| | Firm's name ▶ GRANT THORNTON LLP | | | | Firm's EIN ▶ |
| | Firm's address ▶ 1100 PEACHTREE STREET SUITE 1200 ATLANTA, GA 30309 | | | | Phone no ▶ (404) 330-2000 |
| May the IRS discuss this return with the preparer shown above? (see instructions) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | | | | |

Part III

Statement of Program Service Accomplishments

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

1

Briefly describe the organization’s mission

POINTS OF LIGHT INSPIRES, EQUIPS AND MOBILIZES PEOPLE TO TAKE ACTION THAT CHANGES THE WORLD THE INSTITUTE HAS A GLOBAL FOCUS TO REDEFINE VOLUNTEERISM AND CIVIC ENGAGEMENT FOR THE 21ST CENTURY, PUTTING PEOPLE AT THE CENTER OF COMMUNITY PROBLEM SOLVING WE ARE ORGANIZED TO INNOVATE, INCUBATE AND ACTIVATE NEW IDEAS THAT HELP PEOPLE ACT UPON THEIR POWER TO MAKE A DIFFERENCE POINTS OF LIGHT INSTITUTE OPERATES DYNAMIC BUSINESS UNITS THAT SHARE OUR MISSION HANDSON NETWORK (THE LARGEST VOLUNTEER NETWORK IN THE U S), MISSIONFISH AND THE CIVIC INCUBATOR, WHICH INCLUDES GENERATIONON (A YOUTH VOLUNTEER DIVISION), AMERICORPS ALUMS, AND GLOBAL AND CORPORATE VOLUNTEERISM

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

If “Yes,” describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

If “Yes,” describe these changes on Schedule O

4

Describe the exempt purpose achievements for each of the organization’s three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 10,409,435 including grants of \$ 378,961) (Revenue \$ 905,043)

Points of Light inspires, equips and mobilizes people to take action that changes the world It is organized into divisions that share its mission HandsOn Network, 250 volunteer action centers that help people find and engage in volunteer opportunities in their communities, MissionFish, focused on enabling people to use their purchasing power to support nonprofit organizations, Civic Incubator, which creates innovative, scalable models for civic and volunteer action, and Children for Children Foundation, a youth service movement igniting the power of all kids to make their mark on the world

4b

(Code) (Expenses \$ 10,161,558 including grants of \$ 4,083,775) (Revenue \$ 1,375,711)

HandsOn Network, an enterprise of Points of Light, is a network of 250 volunteer action centers that extend to 16 countries These centers help people find and engage in volunteer opportunities in their local communities, and focus on innovative approaches to leveraging individual and corporate time and talent HandsOn Network partners with more than 70,000 corporate, faith and nonprofit organizations to manage volunteer resources and develop the leadership capacity of volunteers Annually, the network delivers 260,000 service projects representing approximately 32 million hours of volunteer service (unaudited) valued at \$701 million (unaudited)

4c

(Code) (Expenses \$ 15,159,372 including grants of \$ 12,907,277) (Revenue \$ 3,712,643)

MISSIONFISH MissionFish is a social enterprise of Points of Light Institute that provides people a vehicle to use their purchasing power to support causes that matter to them In partnership with eBay, MissionFish provides a suite of giving tools that enable members of the eBay community to designate donations to their charity of choice when buying or selling On April 30, 2011, the MissionFish operations was sold to a third-party, who intends to continue its exempt purpose

4d

Other program services (Describe in Schedule O) See also Additional Data for Description






















(Expenses \$ 4,221,835 including grants of \$ 393,605) (Revenue \$)

4e

Total program service expenses \$ 39,952,200

Part IV

Checklist of Required Schedules

| | | Yes | No |
|-----|---|-----|-----|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i>  | 1 | Yes |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?  | 2 | Yes |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i> | 3 | No |
| 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? <i>If "Yes," complete Schedule C, Part II.</i> | 4 | No |
| 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? <i>If "Yes," complete Schedule C, Part III.</i> | 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? <i>If "Yes," complete Schedule D, Part I.</i>  | 6 | Yes |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>  | 7 | No |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i>  | 8 | No |
| 9 | Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV.</i>  | 9 | No |
| 10 | Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i>  | 10 | Yes |
| 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 | | |
| a | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>  | 11a | Yes |
| b | Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i>  | 11b | No |
| c | Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i>  | 11c | No |
| 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? <i>If "Yes," complete Schedule D, Part IX.</i>  | 11d | No |
| e | Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>  | 11e | No |
| 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)? <i>If "Yes," complete Schedule D, Part X.</i>  | 11f | Yes |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i>  | 12a | No |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.</i>  | 12b | Yes |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i> | 13 | No |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | Yes |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV.</i>  | 14b | Yes |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? <i>If "Yes," complete Schedule F, Parts II and IV.</i>  | 15 | Yes |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? <i>If "Yes," complete Schedule F, Parts III and IV.</i>  | 16 | No |
| 17 | Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I (see instructions).</i>  | 17 | Yes |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i>  | 18 | Yes |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>  | 19 | No |
| 20a | Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H.</i> | 20a | No |
| b | If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions) | 20b | |

Part IV

Checklist of Required Schedules (continued)

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

| | | | |
|---|--|------------|-----------|
| Part V Statements Regarding Other IRS Filings and Tax Compliance | | | |
| Check if Schedule O contains a response to any question in this Part V <input type="checkbox"/> | | | |
| | | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. | 1a | 152 |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. | 1b | 0 |
| c | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 1c | Yes |
| 2a | Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return. | 2a | 162 |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions). | 2b | Yes |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | No |
| 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 | Yes |
| b | If "Yes," enter the name of the foreign country: ▶ UK 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 | No |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | No |
| c | 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 any contributions that were not tax deductible? | 6a | No |
| 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). | | |
| a | 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 | Yes |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | Yes |
| c | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | 7c | No |
| d | If "Yes," indicate the number of Forms 8282 filed during the year. | 7d | |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | No |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | No |
| 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 | |
| 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. | 10a | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. | 10b | |
| 11 | Section 501(c)(12) organizations. Enter: | | |
| a | Gross income from members or shareholders. | 11a | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them). | 11b | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year. | 12b | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | |
| a | Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. | 13a | |
| 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. | 13b | |
| c | Enter the amount of reserves on hand. | 13c | |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | No |
| b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. | 14b | |

Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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 | 1a26 | | |
| b | Enter the number of voting members included in line 1a, above, who are independent | 1b26 | | |
| 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 | | No |
| 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 | | No |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | No |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? . . | 5 | | No |
| 6 | Does the organization have members or stockholders? | 6 | | No |
| 7a | Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? | 7a | | No |
| b | Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . | 7b | | No |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following | | | |
| a | The governing body? | 8a | Yes | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | Yes | |
| 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 | | No |

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 | Yes | |
| b | If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? | 10b | Yes | |
| 11a | Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? | 11a | Yes | |
| b | Describe in Schedule O the process, if any, used by the organization to review this Form 990 | | | |
| 12a | Does the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | Yes | |
| b | Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | Yes | |
| c | Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done | 12c | Yes | |
| 13 | Does the organization have a written whistleblower policy? | 13 | Yes | |
| 14 | Does the organization have a written document retention and destruction policy? | 14 | Yes | |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | |
| a | The organization's CEO, Executive Director, or top management official | 15a | Yes | |
| b | Other officers or key employees of the organization | 15b | Yes | |
| | If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions) | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? | 16a | | No |
| 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 | | |

Section C. Disclosure

| | | |
|----|--|--|
| 17 | List the States with which a copy of this Form 990 is required to be filed | AZ , AR , CA , CT , DC , FL , GA , HI , IL , KS , KY , ME , MD , MI , MN , MS , MO , NH , NJ , NM , NY , NC , ND , OH , OK , OR , PA , RI , SC , TN , UT , VA , WA , WV , WI |
| 18 | Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. <input type="checkbox"/> Own website <input checked="" type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request | |
| 19 | Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table. | |
| 20 | State the name, physical address, and telephone number of the person who possesses the books and records of the organization | KRISTINA TECCE 600 MEANS ST STE 210 ATLANTA, GA 30318 (404) 979-2910 |

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees 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 organization nor any related organization compensated any current officer, director, or trustee

[illegible]

Part VII

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization: 24

| | |
|----------|---|
| 3 | Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> |
| 4 | For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> |
| 5 | Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> |

Section B. Independent Contractors

| 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization | | |
|--|--------------------------------|---------------------|
| (A) Name and business address | (B) Description of services | (C) Compensation |
| The Stevens Company Co 5900 Wilshire Blvd Suite 2300 LOS ANGELES, CA 90036 | TV Production | 3,606,038 |
| The August Jackson Co 7475 Wisconsin Ave Suite 640 BETHESDA, MD 20814 | Project Management | 1,523,784 |
| CIGNA 900 Cottage Grove Road BLOOMFIELD, CT 06602 | Medical Insurance | 1,161,984 |
| Waterview Office 4445 Willard Ave Suite 400 CHEVY CHASE, MD 20815 | DC Office Lease | 795,164 |
| MN Technology PO Box 481 OAKTON, VA 22124 | Technology | 711,221 |
| 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶27 | | |

Part VIII

Statement of Revenue

| | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 | |
|---|---|--|--|---|---|--|----------|
| Contributions, gifts, grants and other similar amounts | 1a | Federated campaigns | 1a | | | | |
| | b | Membership dues | 1b | | | | |
| | c | Fundraising events | 1c | 923,560 | | | |
| | d | Related organizations | 1d | | | | |
| | e | Government grants (contributions) | 1e | 3,541,103 | | | |
| | f | All other contributions, gifts, grants, and similar amounts not included above | 1f | 42,520,744 | | | |
| | g | Noncash contributions included in lines 1a-1f \$ | | | | | |
| | h | Total. Add lines 1a-1f | | 46,985,407 | | | |
| | Program Service Revenue | 2a | TRAINING AND CONSULTING | Business Code 900099 | 274,608 | 274,608 | |
| b | | CONFERENCE FEES | 900099 | 1,101,103 | 1,101,103 | | |
| c | | MISSIONFISH FEES - TSA | 900099 | 255,944 | 255,944 | | |
| d | | CERTIFICATE FEES | 900099 | 649,099 | 649,099 | | |
| e | | MISSIONFISH | 900099 | 3,712,643 | 3,712,643 | | |
| f | | All other program service revenue | | | | | |
| g | | Total. Add lines 2a-2f | | 5,993,397 | | | |
| Other Revenue | | 3 | Investment income (including dividends, interest and other similar amounts) | | 38,201 | | 38,201 |
| | | 4 | Income from investment of tax-exempt bond proceeds . . . | | 0 | | |
| | 5 | Royalties | | 0 | | | |
| | 6a | Gross Rents | (i) Real | (ii) Personal | | | |
| | | b | Less rental expenses | | | | |
| | | c | Rental income or (loss) | | | | |
| | | d | Net rental income or (loss) | | | | |
| | 7a | Gross amount from sales of assets other than inventory | (i) Securities | (ii) Other | | | |
| | | b | Less cost or other basis and sales expenses | | | | |
| | | c | Gain or (loss) | | | | |
| | | d | Net gain or (loss) | | | | |
| | 8a | Gross income from fundraising events (not including \$ 923,560 of contributions reported on line 1c) See Part IV, line 18 | a | | | | |
| | | b | Less direct expenses | b | | | |
| | | c | Net income or (loss) from fundraising events . . . | | -217,101 | | -217,101 |
| | 9a | Gross income from gaming activities See Part IV, line 19 . . . | a | | | | |
| | | b | Less direct expenses | b | | | |
| c | | Net income or (loss) from gaming activities . . . | | 0 | | | |
| 10a | Gross sales of inventory, less returns and allowances | a | | | | | |
| | b | Less cost of goods sold | b | | | | |
| | c | Net income or (loss) from sales of inventory . . . | | 0 | | | |
| Miscellaneous Revenue | 11a | | Business Code | | | | |
| | b | | | | | | |
| | c | | | | | | |
| | d | All other revenue | | | | | |
| | e | Total. Add lines 11a-11d | | 0 | | | |
| | 12 | Total revenue. See Instructions | | 55,726,010 | 5,993,397 | 2,747,206 | |

Part IX

Statement of Functional Expenses

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

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

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. | | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|--|---|-----------------------|---------------------------------|--|-----------------------------|
| 1 | Grants and other assistance to governments and organizations in the U S See Part IV, line 21 | 14,429,721 | 14,429,721 | | |
| 2 | Grants and other assistance to individuals in the U S See Part IV, line 22 | 0 | | | |
| 3 | Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16 | 3,333,897 | 3,333,897 | | |
| 4 | Benefits paid to or for members | 0 | | | |
| 5 | Compensation of current officers, directors, trustees, and key employees | 879,334 | 237,166 | 642,168 | |
| 6 | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | 75,692 | 75,692 | | |
| 7 | Other salaries and wages | 8,723,168 | 6,889,349 | 715,578 | 1,118,241 |
| 8 | Pension plan contributions (include section 401(k) and section 403(b) employer contributions) | 218,840 | 156,677 | 34,088 | 28,075 |
| 9 | Other employee benefits | 1,045,868 | 748,784 | 162,911 | 134,173 |
| 10 | Payroll taxes | 754,772 | 540,375 | 117,568 | 96,829 |
| a | Fees for services (non-employees) | | | | |
| | Management | 11,070,571 | 9,534,236 | 805,127 | 731,208 |
| b | Legal | 0 | | | |
| c | Accounting | 109,317 | 88,452 | 8,298 | 12,567 |
| d | Lobbying | 0 | | | |
| e | Professional fundraising services See Part IV, line 17 | 356,760 | | | 356,760 |
| f | Investment management fees | 0 | | | |
| g | Other | 0 | | | |
| 12 | Advertising and promotion | 0 | | | |
| 13 | Office expenses | 1,928,139 | 1,601,082 | 220,569 | 106,488 |
| 14 | Information technology | 0 | | | |
| 15 | Royalties | 0 | | | |
| 16 | Occupancy | 846,924 | 631,650 | 147,705 | 67,569 |
| 17 | Travel | 1,416,345 | 1,122,991 | 94,908 | 198,446 |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | 0 | | | |
| 19 | Conferences, conventions, and meetings | 75,223 | 59,457 | 5,101 | 10,665 |
| 20 | Interest | 16,772 | 16,772 | | |
| 21 | Payments to affiliates | 0 | | | |
| 22 | Depreciation, depletion, and amortization | 275,749 | 237,258 | 24,583 | 13,908 |
| 23 | Insurance | 52,518 | 43,061 | 6,378 | 3,079 |
| 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 O) | | | | |
| a | MISC EXPENSES | 456,813 | 205,580 | 239,162 | 12,071 |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| f | All other expenses | | | | |
| 25 | Total functional expenses. Add lines 1 through 24f | 46,066,423 | 39,952,200 | 3,224,144 | 2,890,079 |
| 26 | Joint costs. Check here <input type="checkbox"/> 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 | | | | |

Part X

Balance Sheet

| | | | | | (A) | | (B) |
|-----------------------------|------------|--|------------|-----------|-------------------|------------|-------------|
| | | | | | Beginning of year | | End of year |
| Assets | 1 | Cash—non-interest-bearing | | | 4,486,097 | 1 | 2,712,830 |
| | 2 | Savings and temporary cash investments | | | | 2 | |
| | 3 | Pledges and grants receivable, net | | | 3,303,804 | 3 | 3,598,082 |
| | 4 | Accounts receivable, net | | | 1,358,849 | 4 | 830,622 |
| | 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 employees' beneficiary organizations (see instructions). Schedule L | | | | 6 | |
| | 7 | Notes and loans receivable, net | | | | 7 | |
| | 8 | Inventories for sale or use | | | | 8 | |
| | 9 | Prepaid expenses and deferred charges | | | 166,424 | 9 | 84,135 |
| | 10a | Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 10a | 1,848,776 | | | |
| | b | Less: accumulated depreciation | 10b | 1,046,474 | 688,986 | 10c | 802,302 |
| | 11 | Investments—publicly traded securities | | | 4,102,131 | 11 | 16,985,743 |
| | 12 | Investments—other securities. See Part IV, line 11 | | | | 12 | |
| | 13 | Investments—program-related. See Part IV, line 11 | | | | 13 | |
| | 14 | Intangible assets | | | | 14 | |
| | 15 | Other assets. See Part IV, line 11 | | | | 15 | |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 34) | | | 14,106,291 | 16 | 25,013,714 |
| Liabilities | 17 | Accounts payable and accrued expenses | | | 4,562,064 | 17 | 4,360,235 |
| | 18 | Grants payable | | | | 18 | |
| | 19 | Deferred revenue | | | 2,354,345 | 19 | 2,303,238 |
| | 20 | Tax-exempt bond liabilities | | | | 20 | |
| | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D | | | | 21 | |
| | 22 | Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L | | | | 22 | |
| | 23 | Secured mortgages and notes payable to unrelated third parties | | | 815,626 | 23 | 0 |
| | 24 | Unsecured notes and loans payable to unrelated third parties | | | | 24 | |
| | 25 | Other liabilities. Complete Part X of Schedule D | | | | 25 | |
| | 26 | Total liabilities. Add lines 17 through 25 | | | 7,732,035 | 26 | 6,663,473 |
| Net Assets or Fund Balances | | Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. | | | | | |
| | 27 | Unrestricted net assets | | | -2,361,323 | 27 | 9,989,267 |
| | 28 | Temporarily restricted net assets | | | 4,343,244 | 28 | 3,218,639 |
| | 29 | Permanently restricted net assets | | | 4,392,335 | 29 | 5,142,335 |
| | | Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34. | | | | | |
| | 30 | Capital stock or trust principal, or current funds | | | | 30 | |
| | 31 | Paid-in or capital surplus, or land, building or equipment fund | | | | 31 | |
| | 32 | Retained earnings, endowment, accumulated income, or other funds | | | | 32 | |
| | 33 | Total net assets or fund balances | | | 6,374,256 | 33 | 18,350,241 |
| | 34 | Total liabilities and net assets/fund balances | | | 14,106,291 | 34 | 25,013,714 |

Part 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 | 55,726,010 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 46,066,423 |
| 3 | Revenue less expenses Subtract line 2 from line 1 | 3 | 9,659,587 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 6,374,256 |
| 5 | Other changes in net assets or fund balances (explain in Schedule O) | 5 | 2,316,398 |
| 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 | 18,350,241 |

Part XII Financial Statements and Reporting

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

| | | Yes | No |
|----|--|-----|----|
| 1 | Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | No |
| b | Were the organization's financial statements audited by an independent accountant? | Yes | |
| c | If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O | Yes | |
| d | If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis | | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? | Yes | |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits | Yes | |

SCHEDULE A
(Form 990 or 990EZ)

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

2010

Open to Public Inspection

Name of the organization
Points of Light Foundation

Employer identification number
65-0206641

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

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

1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)

8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10

☐

An organization organized and operated exclusively to test for public safety Se**section 509(a)(4).**

11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

| | Yes | No |
|----------|-----|----|
| 11g(i) | | |
| 11g(ii) | | |
| 11g(iii) | | |

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

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.)

| 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 membership fees received (Do not include any "unusual grants.") | 19,022,882 | 23,288,662 | 25,094,789 | 33,780,698 | 46,985,407 | 148,172,438 |
| 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 4 Total. Add lines 1 through 3 | 19,022,882 | 23,288,662 | 25,094,789 | 33,780,698 | 46,985,407 | 148,172,438 |
| 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) | | | | | | 2,420,508 |
| 6 Public Support. Subtract line 5 from line 4 | | | | | | 145,751,930 |

| Section B. Total Support | | | | | | |
|---|------------|------------|------------|------------|------------|-------------|
| Calendar year (or fiscal year beginning in) ▶ | (a) 2006 | (b) 2007 | (c) 2008 | (d) 2009 | (e) 2010 | (f) Total |
| 7 Amounts from line 4 | 19,022,882 | 23,288,662 | 25,094,789 | 33,780,698 | 46,985,407 | 148,172,438 |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 352,900 | 226,853 | 45,317 | 16,211 | 38,201 | 679,482 |
| 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) | | | | | 75,533 | 75,533 |
| 11 Total support (Add lines 7 through 10) | | | | | | 148,927,453 |
| 12 Gross receipts from related activities, etc (See instructions) | | | | | 12 | 31,649,781 |
| 13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶ | | | | | | |

| Section C. Computation of Public Support Percentage | | |
|--|----|----------|
| 14 Public Support Percentage for 2010 (line 6 column (f) divided by line 11 column (f)) | 14 | 97 868 % |
| 15 Public Support Percentage for 2009 Schedule A, Part II, line 14 | 15 | 98 737 % |
| 16a 33 1/3% support test—2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ | | |
| b 33 1/3% support test—2009. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ | | |
| 17a 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶ | | |
| b 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶ | | |
| 18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions ▶ | | |

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

| Section B. Total Support | | | | | | |
|--|----------|----------|----------|----------|----------|-----------|
| Calendar year (or fiscal year beginning in)  | (a) 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 or loss from the sale of capital assets (Explain in Part IV) | | | | | | |
| 13 Total support (Add lines 9, 10c, 11 and 12) | | | | | | |
| 14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  | | | | | | |

| Section C. Computation of Public Support Percentage | | |
|---|----|--|
| 15 Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f)) | 15 | |
| 16 Public support percentage from 2009 Schedule A, Part III, line 15 | 16 | |

| Section D. Computation of Investment Income Percentage | | |
|--|----|--|
| 17 Investment income percentage for 2010 (line 10c column (f) divided by line 13 column (f)) | 17 | |
| 18 Investment income percentage from 2009 Schedule A, Part III, line 17 | 18 | |
| 19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization  | | |
| b 33 1/3% support tests—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization  | | |
| 20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions  | | |

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Additional Data

Software ID:

Software Version:

EIN: 65-0206641

Name: Points of Light Foundation

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

| (A) Name and Title | (B) Average hours per week | (C) Position (check all that apply) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|--------------------------------------|-------------------------------|--|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| AJ Johnson Trustee | 5 0 | X | | | | | | 0 | 0 | 0 |
| Artur Davis Trustee | 5 0 | X | | | | | | 0 | 0 | 0 |
| David Eisner Trustee | 5 0 | X | | | | | | 0 | 0 | 0 |
| Gregg Petersmeyer Trustee | 5 0 | X | | | | | | 0 | 0 | 0 |
| James Collins Trustee | 5 0 | X | | | | | | 0 | 0 | 0 |
| Jean Becker Trustee | 5 0 | X | | | | | | 0 | 0 | 0 |
| Jeffrey K Haidet Trustee | 5 0 | X | | | | | | 0 | 0 | 0 |
| Jeff Hoffman Trustee | 5 0 | X | | | | | | 0 | 0 | 0 |
| Katherine Lauderdale Trustee | 5 0 | X | | | | | | 0 | 0 | 0 |
| Ken Sternad Trustee | 5 0 | X | | | | | | 0 | 0 | 0 |
| Kevin Arquit Trustee | 5 0 | X | | | | | | 0 | 0 | 0 |
| J BRADY LUM TRUSTEE | 5 0 | X | | | | | | 0 | 0 | 0 |
| DIANE MELLEY TRUSTEE | 5 0 | X | | | | | | 0 | 0 | 0 |
| BERNARD J MILANO TRUSTEE | 5 0 | X | | | | | | 0 | 0 | 0 |
| Kyle Caldwell Trustee | 5 0 | X | | | | | | 0 | 0 | 0 |
| DR JUDITH AM SMITH TRUSTEE | 5 0 | X | | | | | | 0 | 0 | 0 |
| SILDA A WALL TRUSTEE | 5 0 | X | | | | | | 0 | 0 | 0 |
| Marcia Ballard Trustee | 5 0 | X | | | | | | 0 | 0 | 0 |
| MARILEE CHINNICI-ZUERCHER TRUSTEE | 5 0 | X | | | | | | 0 | 0 | 0 |
| Marian Heard Trustee | 5 0 | X | | | | | | 0 | 0 | 0 |
| Michael Kay Trustee | 5 0 | X | | | | | | 0 | 0 | 0 |
| Michelle Kydd Lee Trustee | 5 0 | X | | | | | | 0 | 0 | 0 |
| Neil Bush Trustee | 5 0 | X | | | | | | 0 | 0 | 0 |
| Patrice Keegan Trustee | 5 0 | X | | | | | | 0 | 0 | 0 |
| Steve Cranford Trustee | 5 0 | X | | | | | | 0 | 0 | 0 |

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

| (A) Name and Title | (B) Average hours per week | (C) Position (check all that apply) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|-------------------------------|--|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| Raymond G Chambers Trustee | 5 0 | X | | | | | | 0 | 0 | 0 |
| Tracy Hoover COS | 55 0 | | | X | | | | 162,303 | 0 | 12,877 |
| Michelle Nunn CEO | 55 0 | | | X | | | | 298,033 | 0 | 24,023 |
| Meridith Rentz COS | 55 0 | | | X | | | | 218,815 | 0 | 17,009 |
| Kristina Tecce CFO | 55 0 | | | X | | | | 172,554 | 0 | 7,996 |
| Richard DuBose CDO | 55 0 | | | | X | | | 165,554 | 0 | 9,710 |
| Amy Smith President, Hands On Network | 55 0 | | | | | X | | 172,554 | 0 | 15,264 |
| Ayesha Khanna President, Civic Incubator | 55 0 | | | | | X | | 160,519 | 0 | 8,879 |
| Paige Moody Sr VP, Hands On Network | 55 0 | | | | | X | | 151,259 | 0 | 7,124 |
| Melissa Golden Chief Ext Affairs Officer | 55 0 | | | | | X | | 145,962 | 0 | 18,428 |
| David Ray Chief Strategy Officer | 55 0 | | | | | X | | 145,592 | 0 | 12,989 |

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

| | | | | |
|----------------------------|----------------|-----------|------------------------|-----------------------|
| 4d. Other program services | | | | |
| (Code |) (Expenses \$ | 4,221,835 | including grants of \$ | 393,605) (Revenue \$ |
| CIVIC INCUBATOR | | | | |

SCHEDULE D

(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
Points of Light Foundation

Employer identification number

65-0206641

Part I

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

| | (a) Donor advised funds | (b) Funds and other accounts |
|--|---|------------------------------|
| 1 Total number at end of year | 0 | |
| 2 Aggregate contributions to (during year) | 16,125,952 | |
| 3 Aggregate grants from (during year) | 12,907,277 | |
| 4 Aggregate value at end of year | 0 | |
| 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |

Part II

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

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

☐ Preservation of land for public use (e g , recreation or pleasure)

☐ Preservation of an historically importantly land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

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

a Total number of conservation easements

b Total acreage restricted by conservation easements

c Number of conservation easements on a certified historic structure included in (a)

d Number of conservation easements included in (c) acquired after 8/17/06

| | Held at the End of the Year |
|----|-----------------------------|
| 2a | |
| 2b | |
| 2c | |
| 2d | |

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

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

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

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

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

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

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

Part III

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

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

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

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

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

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

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

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

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

Cat No 52283D

Schedule D (Form 990) 2010

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

- 3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other
- 4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV
- 5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

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

- 1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No
- b

If "Yes," explain the arrangement in Part XIV and complete the following table

| | Amount |
|----------------------------------|--------|
| 1c Beginning balance | |
| 1d Additions during the year | |
| 1e Distributions during the year | |
| 1f Ending balance | |
- 2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No
- b

If "Yes," explain the arrangement in Part XIV

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

| | (a)Current Year | (b)Prior Year | (c)Two Years Back | (d)Three Years Back | (e)Four Years Back |
|--|-----------------|---------------|-------------------|---------------------|--------------------|
| 1a Beginning of year balance | 4,001,407 | 4,016,082 | 3,981,055 | | |
| b Contributions | 750,000 | 10,000 | 68,814 | | |
| c Investment earnings or losses | 12,415 | -24,675 | -33,787 | | |
| d Grants or scholarships | | | | | |
| e Other expenditures for facilities and programs | | | | | |
| f Administrative expenses | | | | | |
| g End of year balance | 4,763,822 | 4,001,407 | 4,016,082 | | |

- 2

Provide the estimated percentage of the year end balance held as
- a

Board designated or quasi-endowment ▶
- b

Permanent endowment ▶ 100 000 %
- c

Term endowment ▶
- 3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

| | Yes | No |
|---|--------|----|
| (i) unrelated organizations | 3a(i) | No |
| (ii) related organizations | 3a(ii) | No |
| b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4

Describe in Part XIV the intended uses of the organization's endowment funds

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

| Description of investment | (a) Cost or other basis (investment) | (b)Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|---|--------------------------------------|--------------------------------|------------------------------|----------------|
| 1a Land | | | | |
| b Buildings | | | | |
| c Leasehold improvements | 0 | 863,632 | 808,479 | 55,153 |
| d Equipment | 0 | 985,144 | 237,995 | 747,149 |
| e Other | | | | |
| Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c.) ▶ | | | | 802,302 |

| Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements | | |
|--|---|-------------|
| 1 | Total revenue (Form 990, Part VIII, column (A), line 12) | 155,726,010 |
| 2 | Total expenses (Form 990, Part IX, column (A), line 25) | 246,066,423 |
| 3 | Excess or (deficit) for the year Subtract line 2 from line 1 | 39,659,587 |
| 4 | Net unrealized gains (losses) on investments | 4-27,065 |
| 5 | Donated services and use of facilities | 5 |
| 6 | Investment expenses | 6 |
| 7 | Prior period adjustments | 7 |
| 8 | Other (Describe in Part XIV) | 8 |
| 9 | Total adjustments (net) Add lines 4 - 8 | 9-27,065 |
| 10 | Excess or (deficit) for the year per financial statements Combine lines 3 and 9 | 109,632,522 |

| Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return | | |
|---|--|--------------|
| 1 | Total revenue, gains, and other support per audited financial statements | 141,278,600 |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12 | |
| a | Net unrealized gains on investments | 2a-27,065 |
| b | Donated services and use of facilities | 2b1,412,972 |
| c | Recoveries of prior year grants | 2c |
| d | Other (Describe in Part XIV) | 2d |
| e | Add lines 2a through 2d | 2e1,385,907 |
| 3 | Subtract line 2e from line 1 | 339,892,693 |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1 | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a |
| b | Other (Describe in Part XIV) | 4b15,833,317 |
| c | Add lines 4a and 4b | 4c15,833,317 |
| 5 | Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12) | 555,726,010 |

| Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return | | |
|--|---|--------------|
| 1 | Total expenses and losses per audited financial statements | 132,612,657 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25 | |
| a | Donated services and use of facilities | 2a1,412,972 |
| b | Prior year adjustments | 2b |
| c | Other losses | 2c |
| d | Other (Describe in Part XIV) | 2d |
| e | Add lines 2a through 2d | 2e1,412,972 |
| 3 | Subtract line 2e from line 1 | 331,199,685 |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a |
| b | Other (Describe in Part XIV) | 4b14,866,738 |
| c | Add lines 4a and 4b | 4c14,866,738 |
| 5 | Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18) | 546,066,423 |

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

| Identifier | Return Reference | Explanation |
|---|--------------------------------|--|
| Endowment Funds | Part V, Line 4 Endowment funds | The organization's endowment funds are used for general support of the organization. |
| Land, Buildings and Equipment | Schedule D, Part VI, Line 1d | The cost, depreciation, and book value for equipment also include furniture and fixtures. |
| Footnote for Uncertain Tax Positions | Schedule D, Part X | The Foundation evaluates its uncertain tax positions using the provisions of FASB ASC Topic 740 Income Taxes. The Foundation follows the criterion that an individual tax position has to meet some or all of the benefits of that position to be recognized in the Foundation's financial statements. Tax years open to examination by tax authorities under the statute of limitations include fiscal 2007 through 2011. The Foundation has a policy to record interest and penalties (if any) related to income tax matters in income tax expense. The Foundation has applied the more likely than not criterion to all the tax positions for which the statute of limitations remain open and has determined that the tax positions satisfy such criterion and that no provision for income taxes is required at September 30, 2011, and 2010. |
| Reconciliation of Revenue per Audited Financial Statements | Schedule D, Part XII, Line 4b | MissionFish revenue (reclassified as discontinued operations net of expenses) - \$16,125,952, Fundraising event expenses included in revenue on 990 - (\$292,634), Rounding - (\$1) |
| Reconciliation of Expenses per Audited Financial Statements | Schedule D, Part XIII, Line 4b | MissionFish expenses (reclassified as discontinued operations net against revenue) - \$15,159,372, Fundraising event expenses included in revenue on 990 - (\$292,634) |

Part II **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 recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 ☐ ☐
Use Part V if additional space is needed.

[illegible]

| | | |
|----------|--|----|
| 2 | Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ | 71 |
| 3 | Enter total number of other organizations or entities ▶ | |

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.
Use Part V if additional space is needed.

[illegible]

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)*

☐

Yes

☒

No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If " Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*

☐

Yes

☒

No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)*

☐

Yes

☒

No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)*

☐

Yes

☒

No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)*

☐

Yes

☒

No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).*

☐

Yes

☒

No

Part V **Supplemental Information**

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

| Identifier | Return Reference | Explanation |
|---------------------------|-------------------------|---|
| Activities Outside the US | Part IV, Part I, Line 2 | The organization's procedures for monitoring the use of grant funds outside the U S is set forth to ensure that all grantees are eligible for funds regardless of amount awarded We have a compliance document that is used to monitor all grantees over \$1,000 Monitoring is completed through desk reviews or on-site visits |

Additional Data

Software ID:
Software Version:
EIN: 65-0206641
Name: Points of Light Foundation

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | VOLUNTEER SUPPORT | 79,622 | | | | FMV |
| | | East Asia/Pacific | VOLUNTEER SUPPORT | 7,250 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|-------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | East Asia/Pacific | VOLUNTEER SUPPORT | 21,900 | | | | FMV |
| | | East Asia/Pacific | VOLUNTEER SUPPORT | 269,450 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | North America | VOLUNTEER SUPPORT | 22,885 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 26,753 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 34,864 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 5,267 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 199,530 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 36,046 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 35,464 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 21,215 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 28,051 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 7,324 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 131,784 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 104,920 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 11,909 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 23,264 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 19,680 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 10,986 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 28,823 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 13,839 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 87,605 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 6,283 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 24,966 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 107,541 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 75,707 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 11,622 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 32,434 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 23,504 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 10,721 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 37,768 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 7,172 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 64,115 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 10,959 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 254,146 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 7,409 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 47,587 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 5,958 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 7,722 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 24,068 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 16,475 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 9,549 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 15,772 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 117,060 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 5,198 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 5,207 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 7,570 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 52,103 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 9,486 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 11,000 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 66,856 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 60,894 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 8,962 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 8,815 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 39,740 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 6,231 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 109,285 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 9,656 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 44,584 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 11,426 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 76,132 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 15,465 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 140,297 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 10,256 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 37,987 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 23,399 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 14,299 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 25,771 | | | | FMV |
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 11,681 | | | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

| (a) Name of organization | (b) IRS code section and EIN(if applicable) | (c) Region | (d) Purpose of grant | (e) 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) |
|--------------------------|---|--------------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| | | Europe/Iceland/Greenland | DONOR ADVISED FUND | 13,305 | | | | FMV |

| |
|---------------------------------------|
| Employer identification number |
| 65-0206641 |

| | | | |
|---|---|----------|---|
| 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. | | | |
| a | <input checked="" type="checkbox"/> Mail solicitations | e | <input checked="" type="checkbox"/> Solicitation of non-government grants |
| b | <input checked="" type="checkbox"/> Internet and e-mail solicitations | f | <input checked="" type="checkbox"/> Solicitation of government grants |
| c | <input checked="" type="checkbox"/> Phone solicitations | g | <input checked="" type="checkbox"/> Special fundraising events |
| d | <input checked="" type="checkbox"/> In-person solicitations | | |
| 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table. | | | |

| | |
|--|---|
| 3 | List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing |
| AL, AZ, AR, CA, CT, DC, FL, GA, HI, IL, KS, KY, LA, ME, MD, MI, MN, MS, MO, NH, NJ, NM, NY, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI | |

Part II Fundraising Events.

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

| | | (a) Event #1 | (b) Event #2 | (c) Other Events | (d) Total Events |
|-----------------|----|--|-------------------------|----------------------------|-------------------------------|
| | | <u>CFC Benefit</u> (event type) | <u></u> (event type) | <u>0</u> (total number) | (Add col (a) through col (c)) |
| Revenue | 1 | Gross receipts | 999,093 | | 999,093 |
| | 2 | Less Charitable contributions | 923,560 | | 923,560 |
| | 3 | Gross income (line 1 minus line 2) | 75,533 | | 75,533 |
| Direct Expenses | 4 | Cash prizes | | | |
| | 5 | Non-cash prizes | | | |
| | 6 | Rent/facility costs | 31,500 | | 31,500 |
| | 7 | Food and beverages | 94,158 | | 94,158 |
| | 8 | Entertainment | 76,910 | | 76,910 |
| | 9 | Other direct expenses | 90,066 | | 90,066 |
| | 10 | Direct expense summary Add lines 4 through 9 in column (d) ▶ | | | |
| | 11 | Net income summary Combine lines 3 and 10 in column (d). ▶ | | | |
| | | | | | -217,101 |

Part III Gaming.

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

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

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," Explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," Explain _____

11

Does the organization operate gaming activities with nonmembers?

☐ Yes ☐ No

12

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

☐ Yes ☐ No

13

Indicate the percentage of gaming activity operated in

| | | |
|---|-----------------------------|-----|
| a | The organization's facility | 13a |
| b | An outside facility | 13b |

14

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

Name ▶ _____

Address ▶ _____

15a

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

☐ Yes ☐ No

b

If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c

If "Yes," enter name and address

Name ▶ _____

Address ▶ _____

16 Gaming manager information

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

☐ Director/officer ☐ Employee ☐ Independent contractor

17

Mandatory distributions

a

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

☐ Yes ☐ No

b

Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

| Identifier | ReturnReference | Explanation |
|------------------------------------|------------------------------|--|
| Schedule G - Fundraising Activites | Schedule G, Part 1, Line 2 b | The fundraising consultants are engaged to advise and solicit funds on the organization's behalf |

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization
Points of Light Foundation

Employer identification number
65-0206641

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds 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 recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed. ▶ ☐

| 1 (a) Name and address of organization or government | (b) EIN | (c) IRC Code 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 |
|--|---------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| See Additional Data Table | | | | | | | |
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| | | | | | | | |

2

Enter total number of section 501(c)(3) and government organizations

▶ 258

3

Enter total number of other organizations

▶

Part III

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

| (a)Type of grant or assistance | (b)Number of recipients | (c)Amount of cash grant | (d)Amount of non-cash assistance | (e)Method of valuation (book, FMV, appraisal, other) | (f)Description of non-cash assistance |
|--------------------------------|-------------------------|-------------------------|----------------------------------|--|---------------------------------------|
| | | | | | |
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Part IV

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

| Identifier | Return Reference | Explanation |
|-----------------------|------------------|--|
| Grants and Assistance | Part I, Line 2 | The organization's procedures for monitoring the use of grant funds in the U S is set forth to ensure that all grantees are eligible for funds regardless of amount awarded We have a compliance document that is used to monitor all grantees over \$1,000 Monitoring is completed through desk reviews or on-site visits |

Software ID:

Software Version:

EIN: 65-0206641

Name: Points of Light Foundation

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) 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 |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| 2nd Harvest Food Bnk Santa Clara San Mateo Cntie750 Curtner Avenue San Jose,CA 95125 | 94-2614101 | 501(c)(3) | 9,244 | | | | VOLUNTEER SUPPORT |
| A Commitment To Our Roots 11301 Olympic Blvd 587 Los Angeles,CA 90064 | 31-1742604 | 501(c)(3) | 6,031 | | | | VOLUNTEER SUPPORT |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| A Dog's Life Rescue357 S Fairfax Ave 282 Los Angeles, CA 90036 | 56-2507467 | 501(c)(3) | 5,680 | | | | VOLUNTEER SUPPORT |
| A Home In Haiti548 Centennial Lane Atlanta, GA 30313 | 31-1839284 | 501(c)(3) | 12,956 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| A Place To BarkPO BOX 649 Portland,TN 37148 | 20-4621674 | 501(c)(3) | 10,589 | | | | VOLUNTEER SUPPORT |
| Adopt-A-Classroom4141 NE 2nd Avenue Miami,FL 33137 | 65-0828272 | 501(c)(3) | 236,809 | | | | VOLUNTEER SUPPORT |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| AIDS Athens Inc112 Park Avenue Athens,GA 30601 | 58-1761043 | 501(c)(3) | 6,077 | | | | VOLUNTEER SUPPORT |
| Albuquerque Public Schools Foundation6400 Uptown Blvd NE Suite 610E Albuquerque,NM 87110 | 85-0434438 | 501(c)(3) | 9,750 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Alliance for Climate Education360 22nd Street Suite 730 Oakland,CA 94612 | 26-3106566 | 501(c)(3) | 7,483 | | | | VOLUNTEER SUPPORT |
| American Autoimmune Related Diseases Assn 22100 Gratiot Ave Eastpointe,MI 48021 | 38-3027574 | 501(c)(3) | 11,883 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| American Breast Cancer Foundation1220B East Joppa Road Baltimore,MD 21286 | 52-2031814 | 501(c)(3) | 16,841 | | | | VOLUNTEER SUPPORT |
| American Cancer Society250 Williams St Atlanta,GA 30303 | 13-1788491 | 501(c)(3) | 121,204 | | | | VOLUNTEER SUPPORT |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| American Diabetes Assn 1701 North Beauregard St Alexandria, VA 22311 | 13-1623888 | 501(c)(3) | 5,988 | | | | VOLUNTEER SUPPORT |
| American Forest Fnd 1111 Nineteenth St Washington, DC 20036 | 52-1235124 | 501(c)(3) | 8,433 | | | | VOLUNTEER SUPPORT |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| American Heart Association National Center7272 Greenville Ave Dallas,TX 752314596 | 13-5613797 | 501(c)(3) | 56,977 | | | | VOLUNTEER SUPPORT |
| American Red Cross431 18th st NW Washington,DC 20006 | 53-0196605 | 501(c)(3) | 1,331,430 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| American Red Cross - Grand Canyon Chapter6135 N Black Canyon Hwy Phoenix,AZ 85015 | 86-0098906 | 501(c)(3) | 9,398 | | | | VOLUNTEER SUPPORT |
| American Red Cross Heartland Chapter2912 S 80th Ave Omaha,MO 68124 | 47-0376593 | 501(c)(3) | 11,758 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| American Red Cross of Massachusetts Bay139 Main Street Cambridge, MA 02142 | 04-2777819 | 501(c)(3) | 28,002 | | | | VOLUNTEER SUPPORT |
| American Widow Project 1054 Sycamore St San Marcos,TX 78666 | 26-0901008 | 501(c)(3) | 30,000 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| AmeriCares Foundation Inc 88 Hamilton Avenue Stamford,CT 06902 | 06-1008595 | 501(c)(3) | 65,732 | | | | VOLUNTEER SUPPORT |
| ANGEL ACRES HORSE HAVEN RESCUE INCPO BOX 62 GLENNVILLE,PA 17329 | 13-4271553 | 501(c)(3) | 31,150 | | | | VOLUNTEER SUPPORT |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| ASPCA American Soc the Prevof Cruelty to Animal424 East 92nd Street New York, NY 10128 | 13-1623829 | 501(c)(3) | 54,491 | | | | VOLUNTEER SUPPORT |
| Autism Speaks1 E 33rd Street New York, NY 10016 | 20-2329938 | 501(c)(3) | 40,265 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Avon Foundation1345 Ave of the Americas New York, NY 10105 | 13-6128447 | 501(c)(3) | 106,075 | | | | VOLUNTEER SUPPORT |
| Barakat Inc552 Massachusetts Ave Cambridge, MA 02139 | 04-3493675 | 501(c)(3) | 6,691 | | | | VOLUNTEER SUPPORT |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Be A Star Foundation Inc 1201 US Hwy One Suite 350 North Palm Beach, FL 33408 | 20-2965003 | 501(c)(3) | 6,205 | | | | VOLUNTEER SUPPORT |
| Best Friends Animal Society AVAILABLE UPON REQUEST Kanab,UT 84741 | 23-7147797 | 501(c)(3) | 16,545 | | | | VOLUNTEER SUPPORT |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Big Brothers Big Sisters of America230 N 13th St Philadelphia,PA 19107 | 23-1365190 | 501(c)(3) | 20,687 | | | | VOLUNTEER SUPPORT |
| Blind Cat Rescue Sanctuary Inc3101 E Great Marsh Church Rd St Pauls,NC 28384 | 20-3410498 | 501(c)(3) | 46,294 | | | | VOLUNTEER SUPPORT |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Books for America1417 22nd Street NW Washington,DC 20037 | 03-0463305 | 501(c)(3) | 7,861 | | | | VOLUNTEER SUPPORT |
| Boston Cares190 High Street 4th floor Boston,MA 02110 | 04-3173682 | 501(c)(3) | 164,689 | | | | VOLUNTEER SUPPORT |

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Brain Tumor Foundation (National)6065 Roswell Road NE Suite 505 Atlanta,GA 30328 | 58-1524616 | 501(c)(3) | 9,983 | | | | VOLUNTEER SUPPORT |
| Bright Pink414 N Orleans Ste 320 Chicago,IL 60654 | 51-0619889 | 501(c)(3) | 37,420 | | | | VOLUNTEER SUPPORT |

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| buildOnPO Box 16741 Stamford,CT 06905 | 22-3128648 | 501(c)(3) | 9,664 | | | | VOLUNTEER SUPPORT |
| Business Volunteers Unlimited MD175 W Ostend Street Suite 100 Baltimore,MD 21230 | 52-1810831 | 501(c)(3) | 9,500 | | | | VOLUNTEER SUPPORT |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Cape Fear Volunteer Center 1213 Culbreth Drive Suite 233 Wilmington, NC 28405 | 65-1251970 | 501(c)(3) | 6,000 | | | | VOLUNTEER SUPPORT |
| CARE USA - Tsunami Relief 151 Ellis Street Atlanta, GA 30303 | 13-1685039 | 501(c)(3) | 78,368 | | | | VOLUNTEER SUPPORT |

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Catholic Relief Services228 W Lexington St Baltimore, MD 21201 | 13-5563422 | 501(c)(3) | 5,814 | | | | VOLUNTEER SUPPORT |
| Cathy's KidsAVAILABLE UPON REQUEST Woodland Hls, CA 91364 | 20-1037784 | 501(c)(3) | 11,158 | | | | VOLUNTEER SUPPORT |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Cats About Town Society 3641 Truxel Road Sacramento,CA 95834 | 68-0407757 | 501(c)(3) | 6,564 | | | | VOLUNTEER SUPPORT |
| Cedars-Sinai Health System 8700 Beverly Blvd Los Angeles,CA 90048 | 95-1644600 | 501(c)(3) | 7,824 | | | | VOLUNTEER SUPPORT |

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Center for Volunteer and Nonprofit Leadership of M 555 Northgate Dr San Rafael, CA 949033620 | 68-0101012 | 501(c)(3) | 6,352 | | | | VOLUNTEER SUPPORT |
| CFDA Foundation Inc1412 Broadway Ste 2006 New York, NY 10018 | 23-7371666 | 501(c)(3) | 21,247 | | | | VOLUNTEER SUPPORT |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Chicago Cares2 North Riverside Plaza Suite 2200 Chicago,IL 60606 | 36-3777709 | 501(c)(3) | 101,050 | | | | VOLUNTEER SUPPORT |
| Chicago Public Schools Service Learning Initiative 125 S Clark Street Chicago,IL 60603 | | 501(c)(3) | 7,500 | | | | VOLUNTEER SUPPORT |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Child Find of AmericaPO Box 277 New Paltz, NY 12561 | 22-2323336 | 501(c)(3) | 19,001 | | | | VOLUNTEER SUPPORT |
| Children International2000 E Red Bridge Rd Kansas City, MO 64131 | 44-6005794 | 501(c)(3) | 5,125 | | | | VOLUNTEER SUPPORT |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Children of Fallen Soldiers Relief FundPO Box 3968 Gaithersburg, MD 20885 | 20-4526203 | 501(c)(3) | 21,431 | | | | VOLUNTEER SUPPORT |
| Children of the Night14530 Sylvan Street Van Nuys, CA 91411 | 95-3130408 | 501(c)(3) | 5,460 | | | | VOLUNTEER SUPPORT |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Children's Miracle Network 205 W 700 S Salt Lake City, UT 84101 | 87-0387205 | 501(c)(3) | 151,861 | | | | VOLUNTEER SUPPORT |
| Child's Play123 NW 36th Street Seattle, WA 98107 | 20-3584556 | 501(c)(3) | 73,000 | | | | VOLUNTEER SUPPORT |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| City of Hope1055 Wilshire Blvd Los Angeles, CA 90017 | 95-3435919 | 501(c)(3) | 43,197 | | | | VOLUNTEER SUPPORT |
| Cleveland County Humane Society1609 E Marion St Shelby, NC 28151 | 56-1388435 | 501(c)(3) | 8,330 | | | | VOLUNTEER SUPPORT |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Clinton Bush Haiti Fund AVAILABLE UPON REQUEST Boston, MA 022418009 | 27-2122785 | 501(c)(3) | 12,828 | | | | VOLUNTEER SUPPORT |
| Community Service Society of NY105 E 22nd St No 301 New York, NY 100105413 | 13-5562202 | 501(c)(3) | 9,036 | | | | VOLUNTEER SUPPORT |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Compassion International Compassion International Colorado Springs, CO 80921 | 36-2423707 | 501(c)(3) | 5,543 | | | | VOLUNTEER SUPPORT |
| Cystic Fibrosis Foundation 6931 Arlington Road 2nd floor Bethesda, MD 20814 | 13-1930701 | 501(c)(3) | 14,844 | | | | VOLUNTEER SUPPORT |

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Deafness Research Foundation (DRF)363 Seventh Avenue 10th Floor New York, NY 10001 | 13-1882107 | 501(c)(3) | 10,567 | | | | VOLUNTEER SUPPORT |
| Direct Relief International27 S La Patera Ln Santa Barbara, CA 93117 | 95-1831116 | 501(c)(3) | 9,426 | | | | VOLUNTEER SUPPORT |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Do Something24-32 Union Square East New York, NY 10003 | 13-3720473 | 501(c)(3) | 33,249 | | | | VOLUNTEER SUPPORT |
| Doctors Without Borders USA (Medecins Sans Frontiers)333 Seventh Avenue New York, NY 100015004 | 13-3433452 | 501(c)(3) | 62,445 | | | | VOLUNTEER SUPPORT |

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Dogs Deserve Better1915 Moonlight Rd Smithfield, VA 23430 | 03-0480223 | 501(c)(3) | 23,049 | | | | VOLUNTEER SUPPORT |
| DonorsChoose Inc DonorsChoose Inc New York, NY 10001 | 13-4129457 | 501(c)(3) | 11,804 | | | | VOLUNTEER SUPPORT |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Doodle Rescue Collective Inc2 Prospect Ave Montclair, NJ 07042 | 27-1449091 | 501(c)(3) | 5,500 | | | | VOLUNTEER SUPPORT |
| Dream Fnd1528 Chapala Street Suite 304 Santa Barbara, CA 93101 | 77-0405779 | 501(c)(3) | 8,677 | | | | VOLUNTEER SUPPORT |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Dress for Success Worldwide 32 East 31st Street New York, NY 10016 | 13-4040377 | 501(c)(3) | 31,152 | | | | VOLUNTEER SUPPORT |
| Duluth ISDMN Alliance with Youth 215 N First Ave E Duluth, MN 55802 | 41-6003776 | 501(c)(3) | 20,407 | | | | VOLUNTEER SUPPORT |

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Education Through Music 122 E 42nd St Suite 1501 New York, NY 10168 | 13-3613210 | 501(c)(3) | 6,066 | | | | VOLUNTEER SUPPORT |
| Equality NowPO Box 20646 New York, NY 10023 | 13-3660566 | 501(c)(3) | 5,006 | | | | VOLUNTEER SUPPORT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) 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 |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| FARM AID501 Cambridge St Cambridge,MA 02141 | 36-3383233 | 501(c)(3) | 39,942 | | | | VOLUNTEER SUPPORT |
| Federal Reserve Bank of MinneapolisPO Box 89 Minneapolis,MN 554800089 | | 501(c)(3) | 6,000 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Feed The Children333 N Meridian Oklahoma City, OK 73107 | 73-6108657 | 501(c)(3) | 18,178 | | | | VOLUNTEER SUPPORT |
| Fisher House Fnd111 Rockville Pike Suite 420 Rockville,MD 20850 | 11-3158401 | 501(c)(3) | 6,944 | | | | VOLUNTEER SUPPORT |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Focus on the Family8605 Explorer Dr Colorado Springs, CO 80920 | 95-3188150 | 501(c)(3) | 6,316 | | | | VOLUNTEER SUPPORT |
| Food For The Poor6401 Lyons Road Coconut Creek,FL 33073 | 59-2174510 | 501(c)(3) | 28,844 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Give2Asia465 California St San Francisco, CA 94104 | 94-3373670 | 501(c)(3) | 20,271 | | | | VOLUNTEER SUPPORT |
| Glide330 Ellis Street San Francisco, CA 94102 | 36-2167731 | 501(c)(3) | 52,428 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Global Green USA2218 Main Street Santa Monica, CA 90405 | 77-0387124 | 501(c)(3) | 8,633 | | | | VOLUNTEER SUPPORT |
| GlobalGiving Fund for Horn of Africa Drought Fami1023 15th St NW Washington, DC 20005 | 30-0108263 | 501(c)(3) | 7,580 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Goodwill Industries International Inc15810 Indianola Drive Rockville,MD 20855 | 53-0196517 | 501(c)(3) | 31,417 | | | | VOLUNTEER SUPPORT |
| Gospel for Asia1800 Golden Trail Ct Carrollton,TX 75010 | 73-1099096 | 501(c)(3) | 5,445 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Grace Christian Center Inc 3301 N 72 Ave Hollywood,FL 33024 | 59-2412635 | 501(c)(3) | 6,693 | | | | VOLUNTEER SUPPORT |
| Greater DC Cares1156 15th St NW Suite 840 Washington,DC 20005 | 52-1625585 | 501(c)(3) | 184,858 | | | | VOLUNTEER SUPPORT |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Greater Philadelphia Cares 100 South Broad Street Suite 2200 Philadelphia, PA 19110 | 23-2858593 | 501(c)(3) | 24,790 | | | | VOLUNTEER SUPPORT |
| Greyhound Friends Inc 167 Saddle Hill Road Hopkinton, MA 01748 | 22-2624136 | 501(c)(3) | 10,817 | | | | VOLUNTEER SUPPORT |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Gridiron Greats Assistance Fund2830 Ramada Way Green Bay, WI 54304 | 20-8267965 | 501(c)(3) | 44,564 | | | | VOLUNTEER SUPPORT |
| Habitat for Humanity International121 Habitat St Americus, GA 317093543 | 91-1914868 | 501(c)(3) | 72,352 | | | | VOLUNTEER SUPPORT |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Hands on Atlanta600 Means Street Suite 110 Atlanta,GA 30318 | 58-1861026 | 501(c)(3) | 170,963 | | | | VOLUNTEER SUPPORT |
| Hands on Bay Area135 Bluxome St 2nd floor San Francisco,CA 94107 | 77-0195144 | 501(c)(3) | 188,232 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Hands On Birmingham601 North 19th Street Suite 205 Birmingham, AL 35203 | 63-1207098 | 501(c)(3) | 11,750 | | | | VOLUNTEER SUPPORT |
| Hands On Central California732 North Van Ness Ave Fresno, CA 93728 | 94-2314572 | 501(c)(3) | 15,000 | | | | VOLUNTEER SUPPORT |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Hands on Central Texas United Way Capital Area 2000 E MLK Jr Austin, TX 78702 | 74-1193439 | 501(c)(3) | 31,614 | | | | VOLUNTEER SUPPORT |
| Hands On Charlotte1616 Central Ave Suite 200 Charlotte, NC 28205 | 58-1965120 | 501(c)(3) | 125,347 | | | | VOLUNTEER SUPPORT |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Hands on Greater Phoenix 5151 N 19th Avenue Suite 200 Phoenix, AZ 85015 | 86-0735514 | 501(c)(3) | 16,000 | | | | VOLUNTEER SUPPORT |
| Hands On Greater Portland PO Box 4889 Portland, OR 972084889 | 93-1218427 | 501(c)(3) | 57,469 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Hands on Greater Richmond 7501 Boulders View DrSte 110 Richmond, VA 23225 | 20-8227522 | 501(c)(3) | 53,401 | | | | VOLUNTEER SUPPORT |
| Hands On Gulf Coast11975 Seaway Road Suite 240 Gulfport, MS 39503 | 26-1732124 | 501(c)(3) | 10,000 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Hands on Hartford330 Main Street 3rd floor Hartford, CT 06106 | 06-0861268 | 501(c)(3) | 7,430 | | | | VOLUNTEER SUPPORT |
| Hands on Miami425 NW 26th Street Miami, FL 33127 | 65-0449338 | 501(c)(3) | 40,603 | | | | VOLUNTEER SUPPORT |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Hands On Miami at United Way3250 SW 3rd Avenue Miami, FL 331292712 | 65-0449338 | 501(c)(3) | 10,750 | | | | VOLUNTEER SUPPORT |
| Hands On Mid-Willamette Valley455 Biller Ave NE Salem, OR 97301 | 93-0395586 | 501(c)(3) | 32,400 | | | | VOLUNTEER SUPPORT |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Hands On Mississippi11975 Seaway Road Suite 240 Gulfport, MS 39503 | 26-1732124 | 501(c)(3) | 7,500 | | | | VOLUNTEER SUPPORT |
| Hands on New Orleans1050 S Jeff Davis Pkwy New Orleans, LA 70125 | 26-2281213 | 501(c)(3) | 24,555 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| Hands On Northeast OhioPO Box 91183 Cleveland, OH 441019713 | 14-1993984 | 501(c)(3) | 76,934 | | | | VOLUNTEER SUPPORT |
| Hands On South AlabamaVolunteer Mobile 1050 Government St Suite 201 Mobile, AL 36604 | 23-7432787 | 501(c)(3) | 43,576 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Hands On Tampa Bay5201 W Kennedy Blvd Suite 600 Tampa Bay, FL 33609 | 59-3725701 | 501(c)(3) | 56,000 | | | | VOLUNTEER SUPPORT |
| Hands on Tokyo600 Means Street NW Atlanta, GA 30318 | 65-0206641 | 501(c)(3) | 330,885 | | | | VOLUNTEER SUPPORT |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Hands on Twin Cities2021 E Hennepin Ave Suite 420 Minneapolis,MN 55413 | 41-0694710 | 501(c)(3) | 253,379 | | | | VOLUNTEER SUPPORT |
| HandsOn Central Ohio195 N Grant Ave Columbus,OH 432152607 | 31-1084722 | 501(c)(3) | 74,985 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| HandsOn Jacksonville6817 Southpoint Pkwy Suite 1902 Jacksonville,FL 32216 | 59-1466484 | 501(c)(3) | 54,196 | | | | VOLUNTEER SUPPORT |
| HandsOn Manatee4501 Manatee Ave W 202 Bradenton,FL 34209 | 59-2617191 | 501(c)(3) | 23,226 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Happy PAWS Haven Inc59 Granada Road Arab,AL 35016 | 72-1519078 | 501(c)(3) | 8,555 | | | | VOLUNTEER SUPPORT |
| Heifer International1 World Avenue Little Rock,AR 72202 | 35-1019477 | 501(c)(3) | 8,594 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Homes for Our Troops6 Main Street Taunton, MA 02780 | 54-2143612 | 501(c)(3) | 5,969 | | | | VOLUNTEER SUPPORT |
| Hope for Vision1720 Harrison St Suite 7A Hollywood,FL 33020 | 20-2818701 | 501(c)(3) | 6,183 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Hugh Obrian Youth LeadershipPO Box 132977 Dallas,TX 75313 | 95-6082886 | 501(c)(3) | 6,500 | | | | VOLUNTEER SUPPORT |
| Human Development Foundation Of North America (HDF1350 Remington Rd Suite W Schaumburg,IL 60173 | 36-4184940 | 501(c)(3) | 11,619 | | | | VOLUNTEER SUPPORT |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Huntsman Cancer Institute 1950 Circle of Hope Salt Lake Cty, UT 84108 | 87-0541293 | 501(c)(3) | 5,511 | | | | VOLUNTEER SUPPORT |
| Indiana Association of School Principals 11025 E 25th Street Indianapolis, IN 46229 | 35-1188078 | 501(c)(3) | 48,000 | | | | VOLUNTEER SUPPORT |

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Injured Marine Semper Fi Fund825 College Blvd Suite 102 PMB 6 Oceanside,CA 92057 | 26-0086305 | 501(c)(3) | 5,022 | | | | VOLUNTEER SUPPORT |
| Innovations for Poverty Action101 Whitney Ave New Haven,CT 06510 | 06-1660068 | 501(c)(3) | 38,237 | | | | VOLUNTEER SUPPORT |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| InterFaith Works839 St Charles Ave Suite 100 New Orleans,LA 70130 | 20-8816026 | 501(c)(3) | 10,000 | | | | VOLUNTEER SUPPORT |
| International Medical Corps1919 Santa Monica Blvd Santa Monica,CA 904041957 | 95-3949646 | 501(c)(3) | 13,720 | | | | VOLUNTEER SUPPORT |

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Islamic Relief6131 Orangethorpe Ave Buena Park, CA 90620 | 95-4453134 | 501(c)(3) | 13,102 | | | | VOLUNTEER SUPPORT |
| jk livin foundation1201 W 5th St LOS ANGELES, CA 90017 | 20-3921057 | 501(c)(3) | 13,251 | | | | VOLUNTEER SUPPORT |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Japan Earthquake and Tsunami Relief Fund - a GlobalGiving Fund 1023 15th St NW Washington, DC 20005 | 30-0108263 | 501(c)(3) | 919,295 | | | | VOLUNTEER SUPPORT |
| Jersey Cares 494 Broad St Suite 104 Newark, NJ 07102 | 22-3294530 | 501(c)(3) | 101,138 | | | | VOLUNTEER SUPPORT |

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Joyce Meyer Ministries Inc PO Box 655 Fenton, MO 63026 | 43-1382734 | 501(c)(3) | 5,468 | | | | VOLUNTEER SUPPORT |
| Kids for Peace Inc3303 James Drive Carlsbad, CA 92008 | 26-1564351 | 501(c)(3) | 10,000 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| LA Works570 West Ave 26 Suite 400 Los Angeles, CA 90065 | 95-4329727 | 501(c)(3) | 76,500 | | | | VOLUNTEER SUPPORT |
| Leukemia & Lymphoma Society1311 Mamaroneck Ave White Plains, NY 10605 | 13-5644916 | 501(c)(3) | 36,208 | | | | VOLUNTEER SUPPORT |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| LIVESTRONG2201 E Sixth Street Austin, TX 78702 | 74-2806618 | 501(c)(3) | 6,578 | | | | VOLUNTEER SUPPORT |
| Liya Kebede Foundation1337 3rd Street Santa Monica,CA 90401 | 20-2843928 | 501(c)(3) | 6,643 | | | | VOLUNTEER SUPPORT |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Love-A-Stray Animal RescueLove-A-Stray Animal Rescue Avon, OH 44011 | 34-1867965 | 501(c)(3) | 6,294 | | | | VOLUNTEER SUPPORT |
| Magic House St Louis Children's Museum516 S Kirkwood Road St Louis, MO 63122 | 51-0138441 | 501(c)(3) | 6,316 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Make A Difference (Hands On Greater Phoenix)5151 N 19th Ave Suite 200 Phoenix, AZ 85015 | 86-0735514 | 501(c)(3) | 69,750 | | | | VOLUNTEER SUPPORT |
| Make-A-Wish Foundation 4742 N 24th St Suite 400 Phoenix, AZ 85016 | 86-0481941 | 501(c)(3) | 19,718 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Malaria No More432 Park Avenue South New York, NY 10016 | 20-5664575 | 501(c)(3) | 18,490 | | | | VOLUNTEER SUPPORT |
| Marine Toys for Tots Fnd 18251 Quantico Gateway Dr Triangle, VA 22172 | 20-3021444 | 501(c)(3) | 96,015 | | | | VOLUNTEER SUPPORT |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Massachusetts Service Alliance100 N Washington St 3rd floor Boston,MA 02114 | 04-3088234 | 501(c)(3) | 23,032 | | | | VOLUNTEER SUPPORT |
| Metro United Way's Volunteer Connection334 E Broadway Louisville,KY 402021739 | 61-0444680 | 501(c)(3) | 5,250 | | | | VOLUNTEER SUPPORT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) 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 |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| METRO VOLUNTEERS1355 S Colorado Blvd Suite C-601 DENVER,CO 80222 | 84-0782124 | 501(c)(3) | 26,659 | | | | VOLUNTEER SUPPORT |
| MLK 365Greater Philadelphia MLK Day of Svc - Urba615 St Georges Road Philadelphia,PA 19119 | 23-7046393 | 501(c)(3) | 25,000 | | | | VOLUNTEER SUPPORT |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| MusiCares Foundation3030 Olympic Blvd Santa Monica,CA 90404 | 95-4470909 | 501(c)(3) | 12,985 | | | | VOLUNTEER SUPPORT |
| National Federation of the Blind1800 Johnson Street Baltimore,MD 21230 | 02-0259978 | 501(c)(3) | 29,792 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| New York Cares214 W 29th St 5th Floor New York, NY 10001 | 13-3444193 | 501(c)(3) | 451,329 | | | | VOLUNTEER SUPPORT |
| New York Center for Autism (NYCA)477 Madison Avenue New York, NY 10022 | 57-1136147 | 501(c)(3) | 17,774 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Nonprofit Center2819 W Highland Blvd Milwaukee, WI 53218 | 39-1258203 | 501(c)(3) | 56,914 | | | | VOLUNTEER SUPPORT |
| Operation Blessing International977 Centerville Turnpike Virginia Beach, VA 23463 | 54-1382657 | 501(c)(3) | 11,129 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Operation Smile6435 Tidewater Drive Norfolk, VA 23509 | 54-1460147 | 501(c)(3) | 10,288 | | | | VOLUNTEER SUPPORT |
| Oxfam America226 Causeway Street Floor 5 Boston, MA 021142206 | 23-7069110 | 501(c)(3) | 19,582 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Partners In Health888 Commonwealth Ave 3rd F Boston, MA 02215 | 04-3567502 | 501(c)(3) | 15,938 | | | | VOLUNTEER SUPPORT |
| Pass It Along60 Blue Heron Rd Suite 100 Sparta, NJ 07871 | 80-0018706 | 501(c)(3) | 57,126 | | | | VOLUNTEER SUPPORT |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Pittsburgh Cares535 SmithField St 702 Oliver Bldg Pittsburgh, PA 15222 | 25-1702048 | 501(c)(3) | 25,500 | | | | VOLUNTEER SUPPORT |
| Planned Parenthood Los Angeles400 W 30th Street Los Angeles, CA 90007 | 95-2408623 | 501(c)(3) | 7,816 | | | | VOLUNTEER SUPPORT |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Polk County Board of County CommissionersDrawer BC01 PO Box 9005 Bartow,FL 33831 | 59-6000809 | 501(c)(3) | 18,567 | | | | VOLUNTEER SUPPORT |
| Pratham USA9703 Richmond Ave Suite 102 Houston,TX 77042 | 76-0620808 | 501(c)(3) | 39,549 | | | | VOLUNTEER SUPPORT |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Primary Children's Medical Center100 North Mario Capecchi Drive Salt Lake City, UT 84113 | 87-0453633 | 501(c)(3) | 9,184 | | | | VOLUNTEER SUPPORT |
| RAINN (Rape Abuse and Incest National Network) 2000 L Street NW Washington, DC 20036 | 52-1886511 | 501(c)(3) | 18,278 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Right To PlayChelsea Piers New York, NY 10011 | 13-4045245 | 501(c)(3) | 32,387 | | | | VOLUNTEER SUPPORT |
| Salt Lake Education Foundation440 E 100 S Salt Lake City, UT 841111802 | 74-2563849 | 501(c)(3) | 15,500 | | | | VOLUNTEER SUPPORT |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Samaritan's PursePO Box 3000 Boone,NC 28607 | 58-1437002 | 501(c)(3) | 18,572 | | | | VOLUNTEER SUPPORT |
| Santa Verena Charity IncPO Box 51206 Irvine,CA 92619 | 95-4719735 | 501(c)(3) | 11,276 | | | | VOLUNTEER SUPPORT |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Save the Children54 Wilton Road Westport,CT 06880 | 06-0726487 | 501(c)(3) | 50,823 | | | | VOLUNTEER SUPPORT |
| Save the Children 2004 Tsunami Relief Fund54 Wilton Road Westport,CT 06880 | 06-0726487 | 501(c)(3) | 195,283 | | | | VOLUNTEER SUPPORT |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Sea Shepherd Conservation Society750 Curtner Avenue San Jose, CA 95125 | 94-2614101 | 501(c)(3) | 11,458 | | | | VOLUNTEER SUPPORT |
| Seattle Works1625 19th Ave Seattle, WA 98122 | 91-4496844 | 501(c)(3) | 116,654 | | | | VOLUNTEER SUPPORT |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Serve Rhode Island655 Broad St Suite 202 Providence,RI 02909 | 05-0479705 | 501(c)(3) | 53,075 | | | | VOLUNTEER SUPPORT |
| Share Our Strength1730 M St NW Washington,DC 20036 | 52-1367538 | 501(c)(3) | 119,978 | | | | VOLUNTEER SUPPORT |

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

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Shawn Carter Scholarship FundPO Box 31-0066 Miami,FL 332310066 | 11-3662240 | 501(c)(3) | 12,418 | | | | VOLUNTEER SUPPORT |
| ShelterBox USA8374 Market Street Lakewood Ranch,FL 34202 | 20-0471604 | 501(c)(3) | 11,685 | | | | VOLUNTEER SUPPORT |

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Shining Hope for Communities14 Red Glen Rd Middletown, CT 06457 | 27-1493201 | 501(c)(3) | 5,452 | | | | VOLUNTEER SUPPORT |
| SHOPA Kids in Need Foundation3077 Kettering Boulevard Dayton, OH 45439 | 31-1437587 | 501(c)(3) | 18,911 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Shriners Hospitals for Children2900 Rocky Point Dr Tampa, FL 33607 | 36-2193608 | 501(c)(3) | 5,216 | | | | VOLUNTEER SUPPORT |
| St Jude Children's Research Hospital501 St Jude Place Memphis, TN 38105 | 62-0646012 | 501(c)(3) | 214,798 | | | | VOLUNTEER SUPPORT |

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Starlight Starbright Children's Foundation2049 Century Park E Suite 4320 Los Angeles, CA 90067 | 95-3802159 | 501(c)(3) | 46,717 | | | | VOLUNTEER SUPPORT |
| Stew Leonard III Children's Charities100 Westport Avenue Norwalk, CT 06851 | 22-3264276 | 501(c)(3) | 6,146 | | | | VOLUNTEER SUPPORT |

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Susan G Komen 3-Day for the Cure5005 LBJ Freeway Dallas,TX 75244 | 75-1835298 | 501(c)(3) | 48,822 | | | | VOLUNTEER SUPPORT |
| Susan G Komen Breast Cancer Fnd5005 LBJ Freeway Dallas,TX 75244 | 75-1835298 | 501(c)(3) | 176,356 | | | | VOLUNTEER SUPPORT |

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Susan G Komen Breast Cancer Fnd - Denver Affiliat 1835 Franklin Street Denver,CO 80218 | 84-1199858 | 501(c)(3) | 8,913 | | | | VOLUNTEER SUPPORT |
| Talbert Family Foundation Talbert Family Foundation Writsville Bch,NC 28480 | 58-1807228 | 501(c)(3) | 5,514 | | | | VOLUNTEER SUPPORT |

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| teamgive90 West 500 South STE C Bountiful,UT 84010 | 26-4374601 | 501(c)(3) | 5,399 | | | | VOLUNTEER SUPPORT |
| The ALS Association - Jim 120-101 Penmarc Drive Raleigh,NC 27603 | 56-1609591 | 501(c)(3) | 6,235 | | | | VOLUNTEER SUPPORT |

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| The Breast Cancer Research Foundation60 E 56th St 8th floor New York, NY 10022 | 13-3727250 | 501(c)(3) | 10,406 | | | | VOLUNTEER SUPPORT |
| The Bridge School545 Eucalyptus Ave Hillsborough, CA 94010 | 95-4068784 | 501(c)(3) | 59,598 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| The BubelAiken Foundation PO Box 110104 Research Triangle Park, NC 27709 | 20-0146446 | 501(c)(3) | 23,780 | | | | VOLUNTEER SUPPORT |
| The Community Foundation of Middle Tennessee3833 Cleghorn Ave 400 Nashville, TN 37215 | 62-1471789 | 501(c)(3) | 100,511 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| The Demi and Ashton Foundation1337 Third Street Santa Monica,CA 90401 | 27-0943677 | 501(c)(3) | 59,324 | | | | VOLUNTEER SUPPORT |
| The Edens Rose Foundation568 Delaware Ave Albany,NY 12209 | 26-3807697 | 501(c)(3) | 15,115 | | | | VOLUNTEER SUPPORT |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| THE FORGOTTEN DOG FOUNDATION1112 Montana Ave 166 Santa Monica,CA 90403 | 27-0916948 | 501(c)(3) | 25,260 | | | | VOLUNTEER SUPPORT |
| The Foundation Fighting Blindness7168 Columbia Gateway Dr Suite 100 Columbia,MD 21046 | 23-7135845 | 501(c)(3) | 13,869 | | | | VOLUNTEER SUPPORT |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| The Gentle Barn Foundation 15825 Sierra Hwy Santa Clarita, CA 91390 | 95-4776451 | 501(c)(3) | 31,467 | | | | VOLUNTEER SUPPORT |
| The GRAMMY Foundation 3030 Olympic Blvd Santa Monica, CA 90404 | 95-3199223 | 501(c)(3) | 16,956 | | | | VOLUNTEER SUPPORT |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| The Humane Society of the United States2100 L St NW Washington,DC 20037 | 53-0225390 | 501(c)(3) | 120,131 | | | | VOLUNTEER SUPPORT |
| The Leukemia and Lymphoma Society Inc - The Gatew77 West Port Plaza St Louis,MO 631463111 | 13-5644916 | 501(c)(3) | 18,267 | | | | VOLUNTEER SUPPORT |

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| The Michael J Fox Foundation for Parkinson's Rese PO Box 4777 New York, NY 101634777 | 13-4141945 | 501(c)(3) | 6,552 | | | | VOLUNTEER SUPPORT |
| The Michael Phelps Foundation 2 Market Street Portland, ME 04103 | 61-1571538 | 501(c)(3) | 6,373 | | | | VOLUNTEER SUPPORT |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| The Nature Conservancy 4245 N Fairfax Dr Suite 100 Arlington, VA 222031606 | 53-0242652 | 501(c)(3) | 6,174 | | | | VOLUNTEER SUPPORT |
| The Philadelphia Foundation 1234 Market Street Philadelphia, PA 19107 | 23-1581832 | 501(c)(3) | 28,553 | | | | VOLUNTEER SUPPORT |

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| The Poverello Center2292 Wilton Drive Wilton Manors, FL 33305 | 65-0056218 | 501(c)(3) | 14,406 | | | | VOLUNTEER SUPPORT |
| The Salvation Army Alabama Louisiana Mississippi1450 Riverside Drive Clinton, MS 39202 | 58-0660607 | 501(c)(3) | 15,928 | | | | VOLUNTEER SUPPORT |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| The Salvation Army National Headquarters615 Slaters Lane Alexandria, VA 22313 | 13-2923701 | 501(c)(3) | 211,074 | | | | VOLUNTEER SUPPORT |
| The Smile Train41 Madison Ave 28th Floor New York, NY 10010 | 13-3661416 | 501(c)(3) | 12,792 | | | | VOLUNTEER SUPPORT |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| The Stiller Foundation1337 3rd Street Santa Monica,CA 90401 | 80-0535887 | 501(c)(3) | 36,180 | | | | VOLUNTEER SUPPORT |
| The Tap Project by UNICEF - Clean Drinking Water f125 Maiden Lane New York,NY 10038 | 13-1760110 | 501(c)(3) | 50,352 | | | | VOLUNTEER SUPPORT |

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| The V Foundation for Cancer Research106 Towerview Court Cary,NC 27513 | 13-3705951 | 501(c)(3) | 37,176 | | | | VOLUNTEER SUPPORT |
| The Vol Ctr Of Greensboro Inc1500 YANCEYVILLE ST Greensboro,NC 27405 | 56-1134052 | 501(c)(3) | 8,317 | | | | VOLUNTEER SUPPORT |

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

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|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| The Whaleman Foundation PO Box 1670 Lahaina, HI 96767 | 99-0331050 | 501(c)(3) | 10,463 | | | | VOLUNTEER SUPPORT |
| Triple Negative Breast Cancer FoundationPO Box 204 Norwood, NJ 07648 | 20-5880756 | 501(c)(3) | 11,510 | | | | VOLUNTEER SUPPORT |

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|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| United States Assn for UNHCR1775 K Street NW Washington, DC 20006 | 52-1662800 | 501(c)(3) | 11,524 | | | | VOLUNTEER SUPPORT |
| United States Fund for UNICEF333 East 38th Street New York, NY 10016 | 13-1760110 | 501(c)(3) | 93,599 | | | | VOLUNTEER SUPPORT |

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| (a) Name and address of organization or government | (b) EIN | (c) IRC Code 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 |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| United States War Dogs Association Inc1313 Mt Holly Rd Burlington, NJ 08016 | 01-0597921 | 501(c)(3) | 28,352 | | | | VOLUNTEER SUPPORT |
| United Way for Southeastern Michigan660 Woodward Ave Suite 300 Detroit, MI 48226 | 20-3099071 | 501(c)(3) | 65,500 | | | | VOLUNTEER SUPPORT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) 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 |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| United Way of Greater St Louis910 N 11th Street St Louis, MO 63101 | 43-0714167 | 501(c)(3) | 6,750 | | | | VOLUNTEER SUPPORT |
| United Way of Larimer County Volunteer Center424 Pine St Ste 102 Fort Collins,CO 80524 | 84-6031503 | 501(c)(3) | 32,634 | | | | VOLUNTEER SUPPORT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) 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 |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| United Way of Olmsted County Volunteer Center903 W Center St Ste 100 Rochester, MN 559026278 | 41-0695594 | 501(c)(3) | 14,379 | | | | VOLUNTEER SUPPORT |
| United Way of South MississippiP O Box 2128 Gulfport, MS 39505 | 64-0826356 | 501(c)(3) | 5,350 | | | | VOLUNTEER SUPPORT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) 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 |
|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| United Way of Southwest Missouri Southeast Kansas 3510 E 3rd Street Joplin,MO 64801 | 44-0556865 | 501(c)(3) | 12,865 | | | | VOLUNTEER SUPPORT |
| United Way of the Bluegrass 2480 Fortune Drive 250 Lexington,KY 40509 | 61-0444679 | 501(c)(3) | 6,250 | | | | VOLUNTEER SUPPORT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) 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 |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| United Way of the Midlands 1805 Harney Street Omaha, MO 68102 | 47-0376605 | 501(c)(3) | 8,665 | | | | VOLUNTEER SUPPORT |
| University of Mary Washington Play Lab and Autism 1301 College Ave Fredericksburg, VA 22401 | 54-6001757 | 501(c)(3) | 6,660 | | | | VOLUNTEER SUPPORT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) 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 |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| USO World Headquarters (United Service Organizatio 2111 Wilson Blvd Arlington, VA 22201 | 13-1610451 | 501(c)(3) | 20,591 | | | | VOLUNTEER SUPPORT |
| Utah Food Bank Services 3150 S 900 W Salt Lake City, UT 84119 | 87-0212453 | 501(c)(3) | 10,975 | | | | VOLUNTEER SUPPORT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) 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 |
|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| UTD WAY OF GREATER CINCINNATI VOL CONN 2400 Reading Road Cincinnati, OH 45202 | 06-0978426 | 501(c)(3) | 40,140 | | | | VOLUNTEER SUPPORT |
| Victory Junction Gang Camp 4500 Adams Way Randleman, NC 27317 | 56-2215292 | 501(c)(3) | 6,604 | | | | VOLUNTEER SUPPORT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) 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 |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Voice of Gospel Ministries International2826 Ward Drive Humboldt, TN 38343 | 22-3444321 | 501(c)(3) | 11,392 | | | | VOLUNTEER SUPPORT |
| Vol Ctr of Utd Way of Lake County330 S Greenleaf St Gurnee, IL 600313389 | 36-2167949 | 501(c)(3) | 23,871 | | | | VOLUNTEER SUPPORT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) 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 |
|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| VOL CTR OF SOUTHERN ARIZONA924 N Alvernon Way Tucson,AZ 857111018 | 86-0219048 | 501(c)(3) | 26,000 | | | | VOLUNTEER SUPPORT |
| Vol Ctr of Greensboro & Randolph Cty1500 Yanceyville St Greensboro,NC 274056932 | 56-1134052 | 501(c)(3) | 26,250 | | | | VOLUNTEER SUPPORT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) 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 |
|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| VOL CTR OF LOS ANGELES 8134 VAN NUYS BLVD STE 200 PANORAMA CITY, CA 914024818 | 95-1641960 | 501(c)(3) | 110,825 | | | | VOLUNTEER SUPPORT |
| Volunteer & Information Center2101 Eastern Blvd Suite 322 Montgomery, AL 36117 | 63-0663412 | 501(c)(3) | 16,796 | | | | VOLUNTEER SUPPORT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) 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 |
|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Volunteer Broward6600 W Commercial Blvd Lauderhill, FL 33319 | 59-1506570 | 501(c)(3) | 67,177 | | | | VOLUNTEER SUPPORT |
| Volunteer Center of North Texas2800 Live Oak Street Dallas, TX 752045750 | 75-1364145 | 501(c)(3) | 41,625 | | | | VOLUNTEER SUPPORT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) 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 |
|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Volunteer Center of Northwest Suburban Chicago 2121 S Goebbert Rd Arlington Heights,IL 600054205 | 36-2692866 | 501(c)(3) | 16,050 | | | | VOLUNTEER SUPPORT |
| Volunteer Center of Story County130 South Sheldon Ave Suite 201 Ames,IA 50014 | 36-2692866 | 501(c)(3) | 17,945 | | | | VOLUNTEER SUPPORT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) 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 |
|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| VOLUNTEER CENTER OF THE LEHIGH VALLEY2121 CITY LINE RD Bethlehem,PA 180172150 | 23-2862188 | 501(c)(3) | 6,050 | | | | VOLUNTEER SUPPORT |
| Volunteer Center Orange County1901 E 4th St Ste 100 Santa Ana,CA 927053918 | 95-2021700 | 501(c)(3) | 11,250 | | | | VOLUNTEER SUPPORT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) 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 |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Volunteer Centers of Santa Cruz County1740 17th Ave Santa Cruz, CA 95062 | 94-1702678 | 501(c)(3) | 8,500 | | | | VOLUNTEER SUPPORT |
| VOLUNTEER FAIRFAX 10530 Page Ave Fairfax, VA 22030 | 23-7370759 | 501(c)(3) | 14,375 | | | | VOLUNTEER SUPPORT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) 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 |
|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| VOLUNTEER HOUSTON 3015 Richmond Ave Suite 100 Houston,TX 77098 | 23-7382611 | 501(c)(3) | 28,125 | | | | VOLUNTEER SUPPORT |
| Volunteer Macon Inc195 Holt Avenue Macon,GA 312011224 | 58-1169547 | 501(c)(3) | 27,058 | | | | VOLUNTEER SUPPORT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) 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 |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Volunteer Mid-South3181 Poplar Ave Suite 325 Memphis, TN 38111 | 62-0983110 | 501(c)(3) | 62,500 | | | | VOLUNTEER SUPPORT |
| Volunteer San Diego4545 Murphy Canyon Road Suite 225 San Diego, CA 92123 | 33-0913495 | 501(c)(3) | 25,625 | | | | VOLUNTEER SUPPORT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) 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 |
|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| William J Clinton Foundation 610 Pres Clinton Ave Little Rock, AR 72201 | 31-1580204 | 501(c)(3) | 19,885 | | | | VOLUNTEER SUPPORT |
| Women for Women International 4455 Connecticut Ave Washington, DC 20008 | 52-1838756 | 501(c)(3) | 18,313 | | | | VOLUNTEER SUPPORT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) 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 |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| World Food Program USA 1819 L Street NW Washington, DC 20036 | 13-3843435 | 501(c)(3) | 266,323 | | | | VOLUNTEER SUPPORT |
| World Trade Center Survivors' Network22 Cortlandt Street New York, NY 10007 | 51-0530588 | 501(c)(3) | 11,696 | | | | VOLUNTEER SUPPORT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) 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 |
|---|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| World Vision34834 Weyerhaeuser Wy S Federal Way, WA 980739716 | 19-1922279 | 501(c)(3) | 193,632 | | | | VOLUNTEER SUPPORT |
| World Wildlife Fund1250 24th Street Washington, DC 200907180 | 52-1693387 | 501(c)(3) | 16,122 | | | | VOLUNTEER SUPPORT |

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

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) 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 |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| Wounded Warrior Project 4899 Belfort Rd Ste 300 Jacksonville,FL 32256 | 20-2370934 | 501(c)(3) | 79,349 | | | | VOLUNTEER SUPPORT |
| Yellow Ribbon Fund4905 Del Ray Avenue Bethesda,MD 20814 | 36-4567583 | 501(c)(3) | 26,302 | | | | VOLUNTEER SUPPORT |

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2010

Open to Public Inspection

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

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

▶ Attach to Form 990. ▶ See separate instructions.

| | |
|--|--|
| Name of the organization Points of Light Foundation | Employer identification number 65-0206641 |
|--|--|

Part I

Questions Regarding Compensation

| | | |
|--|-----|----|
| | Yes | No |
| 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items | | |
| <input type="checkbox"/> First-class or charter travel | | |
| <input type="checkbox"/> Travel for companions | | |
| <input type="checkbox"/> Tax idemnification and gross-up payments | | |
| <input type="checkbox"/> Discretionary spending account | | |
| <input type="checkbox"/> Housing allowance or residence for personal use | | |
| <input type="checkbox"/> Payments for business use of personal residence | | |
| <input type="checkbox"/> Health or social club dues or initiation fees | | |
| <input type="checkbox"/> Personal services (e g , maid, chauffeur, chef) | | |
| b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain | 1b | |
| 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? | 2 | |
| 3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply | | |
| <input checked="" type="checkbox"/> Compensation committee | | |
| <input checked="" type="checkbox"/> Independent compensation consultant | | |
| <input checked="" type="checkbox"/> Form 990 of other organizations | | |
| <input type="checkbox"/> Written employment contract | | |
| <input checked="" type="checkbox"/> Compensation survey or study | | |
| <input checked="" type="checkbox"/> Approval by the board or compensation committee | | |
| 4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization | | |
| a Receive a severance payment or change-of-control payment from the organization or a related organization? | 4a | No |
| b Participate in, or receive payment from, a supplemental nonqualified retirement plan? | 4b | No |
| c Participate in, or receive payment from, an equity-based compensation arrangement? | 4c | No |
| If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III | | |
| Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9. | | |
| 5 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of | | |
| a The organization? | 5a | No |
| b Any related organization? | 5b | No |
| If "Yes," to line 5a or 5b, describe in Part III | | |
| 6 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of | | |
| a The organization? | 6a | No |
| b Any related organization? | 6b | No |
| If "Yes," to line 6a or 6b, describe in Part III | | |
| 7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III | 7 | No |
| 8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III | 8 | No |
| 9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)? | 9 | |

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

| (A) Name | | (B) Breakdown of W-2 and/or 1099-MISC compensation | | | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation reported in prior Form 990 or Form 990-EZ |
|--------------------|-------------|--|-------------------------------------|-------------------------------------|--|-------------------------|---------------------------------|--|
| | | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | | | | |
| (1) Tracy Hoover | (i) (ii) | 154,803 0 | 7,500 0 | 0 0 | 9,491 0 | 3,386 0 | 175,180 0 | 0 0 |
| (2) Michelle Nunn | (i) (ii) | 285,533 0 | 12,500 0 | 0 0 | 13,413 0 | 10,610 0 | 322,056 0 | 0 0 |
| (3) Meridith Rentz | (i) (ii) | 208,815 0 | 10,000 0 | 0 0 | 5,058 0 | 11,951 0 | 235,824 0 | 0 0 |
| (4) Kristina Tecce | (i) (ii) | 164,554 0 | 8,000 0 | 0 0 | 6,313 0 | 1,683 0 | 180,550 0 | 0 0 |
| (5) Amy Smith | (i) (ii) | 164,554 0 | 8,000 0 | 0 0 | 9,836 0 | 5,428 0 | 187,818 0 | 0 0 |
| (6) Richard DuBose | (i) (ii) | 164,554 0 | 1,000 0 | 0 0 | 4,100 0 | 5,610 0 | 175,264 0 | 0 0 |
| (7) Ayesha Khanna | (i) (ii) | 154,269 0 | 6,250 0 | 0 0 | 8,879 0 | 0 0 | 169,398 0 | 0 0 |
| (8) Paige Moody | (i) (ii) | 139,499 0 | 11,760 0 | 0 0 | 6,667 0 | 457 0 | 158,383 0 | 0 0 |
| (9) Melissa Golden | (i) (ii) | 145,962 0 | 0 0 | 0 0 | 6,838 0 | 11,590 0 | 164,390 0 | 0 0 |
| (10) David Ray | (i) (ii) | 138,842 0 | 6,750 0 | 0 0 | 5,449 0 | 7,540 0 | 158,581 0 | 0 0 |
| (11) | | | | | | | | |
| (12) | | | | | | | | |
| (13) | | | | | | | | |
| (14) | | | | | | | | |
| (15) | | | | | | | | |
| (16) | | | | | | | | |

Part III **Supplemental Information**

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

| Identifier | Return Reference | Explanation |
|------------|------------------|-------------|
|------------|------------------|-------------|

Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ **Complete if the organization answered**
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V lines 38a or 40b.
▶ **Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.**

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization
Points of Light Foundation

Employer identification number

65-0206641

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

| 1 | (a) Name of disqualified person | (b) Description of transaction | (c) Corrected? | |
|---|---------------------------------|--------------------------------|-------------------|----|
| | | | Yes | No |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

- 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____
- 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

| (a) Name of interested person and purpose | (b) Loan to or from the organization? | | (c)Original principal amount | (d)Balance due | (e) In default? | | (f) Approved by board or committee? | | (g)Written agreement? | |
|---|---------------------------------------|------|------------------------------|----------------|-----------------|----|-------------------------------------|----|-----------------------|----|
| | To | From | | | Yes | No | Yes | No | Yes | No |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| Total ▶ \$ _____ | | | | | | | | | | |

Part III Grants or Assistance Benefitting Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

| (a) Name of interested person | (b)Relationship between interested person and the organization | (c)Amount of grant or type of assistance |
|-------------------------------|--|--|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Part IV

Business Transactions Involving Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

| (a) Name of interested person | (b) Relationship between interested person and the organization | (c) Amount of transaction | (d) Description of transaction | (e) Sharing of organization's revenues? | |
|-------------------------------|---|---------------------------|--------------------------------|---|----|
| | | | | Yes | No |
| (1) ALISON DOERFLIER | DAUGHTER | 75,692 | BOARD MEMBER DAUGHTER EMPLOYED | | No |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Part V

Supplemental Information
Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

| Identifier | Return Reference | Explanation |
|-----------------|------------------|---|
| Alison Doerfler | Part IV | Alison Doerfler is the daughter of Michael Kay, a board member of the organization. Her relationship with the board member has no bearing on her employment and her compensation is determined on an arms length basis. |

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 to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2010

Open to Public
Inspection

| | |
|--|--|
| Name of the organization Points of Light Foundation | Employer identification number 65-0206641 |
|--|--|

| Identifier | Return Reference | Explanation |
|---------------------------------------|------------------|--|
| Significant Change in Program Service | Part III, Line 3 | On April 30, 2011, the foundation completed the sale of its Missionfish operations |

| Identifier | Return Reference | Explanation |
|---------------------|--|--|
| The Civic Incubator | Form 990, Part III, Line 4d Other Program Services | The Civic Incubator creates innovation in civic activation by bringing together and supporting emerging service solutions and new ideas through social enterprise, mergers and joint ventures. Currently, the Foundation incubates AmeriCorps Alums, GenerationOn, global volunteerism (International HandsOn Affiliates) and Corporate Strategy and Volunteerism (Corporate Service Council). |

| Identifier | Return Reference | Explanation |
|--------------------|---------------------------------------|---|
| Review of Form 990 | Form 990, Part VI, Section A, Line 10 | The Form 990 is prepared by a major accounting firm in conjunction with management. The organization presents the Form 990 at Finance Committee meetings. All board members are invited, and the Form 990 and related materials are sent to the entire board prior to filing. |

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

| Identifier | Return Reference | Explanation |
|--|--|---|
| Compensation review & approval process | Form 990, Part VI, Section B, Line 15a/15b | The Executive Committee acts as the Compensation Committee, whose responsibilities include reviewing and approving salaries for officers and/or key employees. The committee's review process includes a comparison of salaries to those of other similar non-profit organizations. |

| Identifier | Return Reference | Explanation |
|-------------------------------------|---------------------------------------|--|
| Administrative documents publicized | Form 990, Part VI, Section C, Line 19 | The Foundation makes governing documents, conflict of interest policies, and financial statements available to the public. This information is available upon request. |

| Identifier | Return Reference | Explanation |
|-----------------------------|---------------------------|--|
| Other Changes in Net Assets | Form 990, Part XI, Line 5 | <p>Other Unrealized gains (losses) on investments (27,065) CFC beginning of year net assets** 2,343,462 -----</p> <p>Total Other Changes in Net Assets 2,316,397 **On April 23, 2009 the Foundation entered into a legal combination with Children for Children Foundation (CFC), a New York-based 501(c)(3) (EIN 13-3880287) that focuses on youth and education For fiscal year ending September 30, 2010, the Foundation and CFC each filed a separate 2009 Form 990 with the IRS Subsequently, the CFC programs were renamed generationOn, and operate as a unit of the Foundation starting October 1, 2010 Since CFC has merged into the Foundation, only one 2010 Form 990 is being filed with the IRS Thus, there is a difference for CFC's net assets at September 30, 2010, that is now included into the Foundation's net assets due to the merger and filing of one Form 990 As of September 30, 2011, the merger has not legally been completed Approval is still pending from the state of New York</p> |

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
Points of Light Foundation

Employer identification number
65-0206641

Part I

Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

| (a) Name, address, and EIN of disregarded entity | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Total income | (e) End-of-year assets | (f) Direct controlling entity |
|---|-------------------------|--|---------------------|---------------------------|----------------------------------|
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Part II

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Exempt Code section | (e) Public charity status (if section 501(c)(3)) | (f) Direct controlling entity | (g) Section 512(b)(13) controlled organization | |
|--|-------------------------|--|----------------------------|---|----------------------------------|---|----|
| | | | | | | Yes | No |
| (1) CHILDREN FOR CHILDREN FOUNDATION 6 EAST 43RD ST 25TH FL NEW YORK, NY 10017 13-3880287 | YOUTH SERVICE | NY | 501(c)3 | 7 | NA | | |
| (2) Points of Light Foundation UK 600 Means Street NW Suite 210 Atlanta, GA 30318 | charity srvc | | | | N/A | | |
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Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Direct controlling entity | (e) Predominant income (related, unrelated, excluded from tax under sections 512- 514) | (f) Share of total income | (g) Share of end-of-year assets | (h) Disproporionate allocations? | | (i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) | (j) General or managing partner? | | (k) Percentage ownership |
|--|-------------------------|--|-------------------------------------|---|------------------------------|---------------------------------------|--|----|---|---|----|--------------------------------|
| | | | | | | | Yes | No | | Yes | No | |
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Part IV

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Direct controlling entity | (e) Type of entity (C corp, S corp, or trust) | (f) Share of total income | (g) Share of end-of-year assets | (h) Percentage ownership |
|---|-------------------------|---|-------------------------------------|--|------------------------------|--|--------------------------------|
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Part V

Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III or IV

1

During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a

Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b

Gift, grant, or capital contribution to other organization(s)

c

Gift, grant, or capital contribution from other organization(s)

d

Loans or loan guarantees to or for other organization(s)

e

Loans or loan guarantees by other organization(s)

f

Sale of assets to other organization(s)

g

Purchase of assets from other organization(s)

h

Exchange of assets

i

Lease of facilities, equipment, or other assets to other organization(s)

j

Lease of facilities, equipment, or other assets from other organization(s)

k

Performance of services or membership or fundraising solicitations for other organization(s)

l

Performance of services or membership or fundraising solicitations by other organization(s)

m

Sharing of facilities, equipment, mailing lists, or other assets

n

Sharing of paid employees

o

Reimbursement paid to other organization for expenses

p

Reimbursement paid by other organization for expenses

q

Other transfer of cash or property to other organization(s)

r

Other transfer of cash or property from other organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

| 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds | | | |
|---|------------------------------|------------------------|--|
| (a) Name of other organization | (b) Transaction type(a-r) | (c) Amount involved | (d) Method of determining amount involved |
| (1) | | | |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

Part VII

Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

| Identifier | Return Reference | Explanation |
|------------|------------------|-------------|
|------------|------------------|-------------|