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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)

OMB No 1545-0047

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

Open to Public Inspection

A F	or the	2011 calendar year, or tax year beginning a	nd ending	_	
В	heck if pplicable	C Name of organization		D Employer identific	ation number
Γ	Address change	Bay Area Council			
一	Name change	Doing Business As		23-7	325853
	Initial	Number and street (or P 0 box if mail is not delivered to street address)	Room/suite	 	
	Termin-	201 California Street	1450		981-6600
	Amende	Crty or town, state or country, and ZIP + 4	•	G Gross receipts \$	6,706,020.
	Applica-	San Francisco, CA 94111		H(a) Is this a group re	turn
	pending	F Name and address of principal officer: Jim Wunderman		for affiliates?	Yes X No
		same as C above		H(b) Are all affiliates incl	uded? Yes No
		npt status: 501(c)(3) X 501(c) (4) ◀ (insert no) 4947(a)	(1) or 52	If "No," attach a	list. (see instructions)
		.▶ www.bayareacouncil.org		H(c) Group exemption	
		rganization X Corporation Trust Association Other	L Yea	of formation 1945 M	State of legal domicile CA
P		Summary	h		
9		riefly describe the organization's mission or most significant activities: We			
ğ	_	ommitted to working with public and ci		· · · · · · · · · · · · · · · · · · ·	
Activities & Governance		heck this box I if the organization discontinued its operations or dis	sposed of moi	1 1	sets. 133
Ĝ	L	umber of voting members of the governing body (Part VI, line 1a)	L۱	3 4	133
જ		umber of independent voting members of the governing body (Part VI, line 1 otal number of individuals employed in calendar year 2011 (Part V, line 2a)	U)	5	36
ij		otal number of volunteers (estimate if necessary)		6	0
Ę.		otal number of volunteers (estimate in necessary),		7a	0.
Ā		et unrelated business taxable income from Form 990-T, line 34		7b	0.
				Prior Year	Current Year
•	8 0	ontributions and grants (Part VIII, line DECEIVED		5,082,399.	4,730,008.
Ž		rogram service revenue (Part VIII, Ippe 29)		790,522.	1,265,583.
Revenue	10 lr	vestment income (Part VIII, column (A), lines 3, 4, and 7d)		1,129.	189,204.
ш.	11 C	ther revenue (Part VIII, column (A), line\$15, bd, bc, 9c, 10c; and (1)e)		11,344.	15,550.
	12 T	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 1	2)	5,885,394.	6,200,345.
	1	rants and similar amounts paid (Part IX) column (A) (lines 1-3)	<u> </u>	0.	0.
	I .	enefits paid to or for members (Part IX, column (A), iline 4)	-	0.	0.
ses	1	alaries, other compensation, employee benefits (Part IX, column (A), lines 5-	10)	3,030,038.	3,699,746.
Expenses	1	rofessional fundraising fees (Part IX, column (A), line 11e) otal fundraising expenses (Part IX, column (D), line 25) 1,159	510	U .	V •
Ĕ	1		, 310.	2,664,109.	2,662,101.
	1	ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e) otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	-	5,694,147.	6,361,847.
	E .	evenue less expenses. Subtract line 18 from line 12		191,247.	<161,502.>
901 88	10 .	everise iess expenses. Outstract line to from line 12	В	eginning of Current Year	End of Year
Net Assets or Fund Balances	20 T	otal assets (Part X, line 16)		3,532,469.	3,625,942.
ASS	21 T	otal liabilities (Part X, line 26)		2,152,751.	2,086,134.
콜	22 N	et assets or fund balances. Subtract line 21 from line 20		1,379,718.	1,539,808.
P	art II	Signature Block			
		ies of perjury declare that I have examined this return, including accompanying sche			y knowledge and belief, it is
true	, correct,	and complete Declaration of preparer (other than officer) is based on all information of	of which prepare	er has any knowledge	
		Santal		1113	10
Sig		Signature of officer Thin (Hundowson, Broadidont (CHO)		Date	
He	re	Jim Wunderman, President/CEO Type or print name and title			······································
				Date Check	PTIN
Pai		Print/Type preparer's name Carmen D. Mosley		11/1/12	
		Firm's name Harrington Group, CPA\$ / LLP		Firm's EIN	95-4557617
		Firm's address 234 East Colorado Blvd, Suite	≥ M150	THIH S EIN	20 1011
-50		Pasadena, CA 91101		Phone no (626) 403-6801
Ma	v the IR	S discuss this return with the preparer shown above? (see instructions)		1	X Yes No

Total program service expenses

4,003,297.

	Required Schedules

	· · · · · · · · · · · · · · · · · · ·		<u> </u>	
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		Yes	No
•	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
•	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	N/	A
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		_X_
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u>X</u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		i	
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			.,
	Schedule D, Part III	8		<u>X</u>
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			v
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	40		x
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		
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.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
а	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		.,	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	10-		X
	Schedule D, Parts XI, XII, and XIII	12a	-	
D	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Х	
13	is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	1
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
_	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	<u> </u>	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	ļ	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			U
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	10	X	
40	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18	^	
19		19	1	x
20a	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	1	† <u></u>
	11 100 to mio boal dio trio organization attach a bool of the abolice microsic statements to this interior		990	(2011)

Form 990 (2011) Bay Area Council Part IV Checklist of Required Schedules (continued)

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

Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V				
	Check is Scriedule of Contains a response to any question in this Fait V			Yes	No
4	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	a 2		162	140
1a b		b 0			ĺ
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable				
·	(gambling) winnings to prize winners?	Artabio gaining	1c	Х	l
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1			
		2a 36			ĺ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns		2ь	X	
•	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b	•	
	At any time during the calendar year, did the organization have an interest in, or a signature or other aut	thority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account,		4a	X	L
b	If "Yes," enter the name of the foreign country: ► China				
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Acc	counts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	on?	5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	organization solicit		i	
	any contributions that were not tax deductible?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ns or gifts			
	were not tax deductible?		6b		ļ
7	Organizations that may receive deductible contributions under section 170(c).		_		v
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and service	es provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		\vdash
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	requirea	70		х
	to file Form 8282?	7d	7c		<u> </u>
	If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit con		7e		X
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract. Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract.		7f		X
1 ~	If the organization received a contribution of qualified intellectual property, did the organization file Form		7g	N/	
9	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h	N/	
н 8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did to	the supporting N/A			<u> </u>
•	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at an		8		
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the organization make any taxable distributions under section 4966?	N/A	9a		<u> </u>
b	Did the organization make a distribution to a donor, donor advisor, or related person?	N/A	9ь	ļ	
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	ОЬ	-		
11	Section 501(c)(12) organizations. Enter:	İ			
а		11a	4		
b	Gross income from other sources (Do not net amounts due or paid to other sources against				1
		11b	┨		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10		12a	-	-
b	1 100, office the amount of the orienter	12b	1		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	N/A	47-		+
а	Is the organization licensed to issue qualified health plans in more than one state?	IV/ A	13a	ļ	1
_	Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the	13ь			
_	- Classification to mornious to issue quantity from	13c	1		
	Did the organization receive any payments for indoor tanning services during the tax year?		14a	T	Х

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

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

It let re the number of voting members of the governing body at the end of the tax year If there are material differences in voting nghts among members of the governing body, or if the governing body delegated broad suthority to an executive committe or similar committee, applain in Schedule 0 b. Enter the number of voting members included in line 1a, above, who are independent 2. Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employees, or a management of provided 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? 4. Did the organization make any significant changes to its governing documents since the prior form 990 was filed? 5. Did the organization become aware during the year of a significant diversion of the organization's assets? 6. X. 7a. Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 8. Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 8. Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 9. Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization or more with authority to act on behalf of the governing body? 10a. Did the organization have a written conflict of interest policy? If "No.," go to line 13 10b. Were officers, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization have a written orificed and procedures governing the activities of such chapters, affiliates, and bis ranches to ensure their operations		Check of Schedule O contains a response to any question in this Part VI					X
1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of this governing body, or this governing body dependence to the provided of of the provide	Sec	tion A. Governing Body and Management		-			
there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee is similar committee, explain in Schedule 0 b. Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee. 3 Did the organization delegate control over management dutes customanly performed by or under the direct supervision of officers, directors, or trustees, or key employees, to a management company or other person? 4 Did the organization become aware during the year of a significant diversion of the organization become aware during the year of a significant diversion of the organization's assests? 5 Did the organization become aware during the year of a significant diversion of the organization's assests? 5 Did the organization have members, stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 5 Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 5 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization or have a written official by the organization's awaring the process, directors, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization have a written official by the organization's awaring the process, if any, used by the org						Yes	No
b Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, directors, or trustee, or key employees have a family relationship or a business relationship with any other officer, directors, or trustee, or key employees have a family relationship or a business relationship with any other of officers, directors, or trustee, or key employees have a family relationship or output the direct supervision of officers, directors, or trustees, or key employees have a family relationship or output the direct supervision of officers, directors, or trustees, or key employees of a significant diversion of the organization become aware during the year of a significant diversion of the organization have members as ottochloiders, or other persons who had the power to elect or appoint one or more members of the governing body? 8 Are any operanacide accisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 9 Did the organization entemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 9 Each committee with authority to act on behalf of the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's making address? If Vise, provide the names and addresses in Schedule O 9 Section B. Policies (This Section B requests information about pokess not required by the Internal Revenue Code). 10a Did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization of the governing body before filing the form? 11b A	1a	Enter the number of voting members of the governing body at the end of the tax year	1a	133			
b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2		If there are material differences in voting rights among members of the governing body, or if the governing					
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		body delegated broad authority to an executive committee or similar committee, explain in Schedule O					
orificer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customanly performed by or under the direct supervision of officers, directors, or trustees, or key employees, to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization have members or stockholders? 7a Did the organization have members or stockholders? 7b Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 5 Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7c Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8 The governing body? 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) 10a Did the organization have local chapters, branches, or affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Expective in Schedule O the process, if any, used by the organization's exempt purposes? 11a Has the organization have a written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Expective in Schedule O the process, if any, used by the organization is exempt purposes? 11b Position in Schedule O the process, and any, used by the organization is exempt purposes? 12c X 12d Did the organization hissue and with expective process of any used	b	Enter the number of voting members included in line 1a, above, who are independent	1b	133			
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	10	· ·	nflict	of interest policy on	d finer	ncial	
19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.	13		mmul	or interest policy, an	u midi	iciai	
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:	20	· · · · · · · · · · · · · · · · · · ·	nd rea	cords of the organiza	tion:	•	
Kenneth R. Regalia – (415)981–6600	20		10100	Joi Go Or the Organiza			
201 California Street, Suite 1450, San Francisco, CA 94111			CA	94111			

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. 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 (A) Name and Title	(B) Average hours per	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					one n an	(D) Reportable compensation	(E) Reportable compensation from related	(F) Estimated amount of other
	week (describe hours for related organizations in Schedule O)	stee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Mark Adkins	1 00	.,						0.	0.	0.
Board Member	1.00	Х		Н				0.		
(2) Vernon Altman	1 00	v						0.	0.	0.
Board Member	1.00	X		\vdash		\vdash	-	0.	0.	
(3) Gregg Alton, J.D.	1.00	X						0.	0.	0.
Board Member	1.00	^	┝	-		 		- 0.		
(4) Gilbert Amelio	1.00	X					l	0.	0.	0
Board Member (5) John Anderson	1.00		-	-				ļ		
(5) John Anderson Board Member	1.00	X				İ		0.	0.	0
(6) Chris Apostolopoulos	1.00	1	-			 	-			<u>_</u>
Board Member	1.00	X						0.	0.	0
(7) Laurence Baer			t			†				
Board Member	1.00	X		,	ľ		ļ	0.	0.	0
(8) Andrew Ball			\vdash							
Board Member	1.00	X						0.	0.	0
(9) W. Donald Bell	7.,									
Board Member	1.00	X						0.	0.	0
(10) Omar Benjamin										
Board Member	1.00	X				l		0.	0.	0
(11) Skip Berg							l			
Board Member	1.00	X						0.	0.	0
(12) Thomas Bishop			ĺ							_
Board Member	1.00	X	<u> </u>			<u> </u>		0.	0.	0
(13) Kofi Bonner										
Board Member	1.00	X	<u> </u>	<u> </u>	<u> </u>	1	<u> </u>	0.	0.	0
(14) Robert Brant										
Board Member	1.00	X	1	! _	<u> </u>	↓_	<u> </u>	0.	0.	0
(15) Martin Brotman, M.D.	1			1	1	1				
Board Member	1.00	X	\vdash	-	<u> </u>	┼	 	0.	0.	0
(16) William E. Brown	1 00	.,								_
Board Member	1.00	X	╁	\vdash	<u> </u>	╁┈	1	0.	0.	0
(17) Steven Buster	1 00	\ _v						0.	0.	0
Board Member	1.00	ΙΛ.	<u> </u>	1	<u> </u>	<u> </u>	1	1 0.	·1	Form 990 (2011

Part VII Section A. Officers, Directors, Tru	etees Key Er				nd 1			Compensated Employ	ees (continued)	-			ige U
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•	Average			۲۰ Pos)		Reportable	Reportable		Estin		d
Name and title	hours per		not c	heck	more	than		compensation	compensation		amou		
	week					or/trus		from	from related			ner	.,
	(describe	ğ						the	organizations	(compe		lion
	hours for	r director	ļ			8		organization	(W-2/1099-MISC)	1	from	the	,
	related	frustee or	l see			S S		(W·2/1099·MISC)			organ	ızatı	on
	organizations	Ē	ם		86	ğ.					and re	elate	∌d
	In Schedule	Individual	Institutional trustee	8	Кеу етріоуее	Highest compensated employee	Former				organi	zatio	ons
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(18) Mike Caprio	1	.,							,				^
Board Member	1.00	X	_	_	<u> </u>	<u> </u>	_	0.		<u> </u>			0.
(19) Keith Casto	1 00						•		,				^
Board Member	1.00	X			├	-	<u> </u>	0.		' • -			0.
(20) Richard Cerussi	1.00	Į,			1	1		0.					0.
Board Member	1.00	Х		\vdash	┢	\vdash	-	ļ		' • -			<u> </u>
(21) A.W. Clausen	1.00	X						0.	ر ا).			0.
Board Member (22) Paul Cook	1.00	<u> </u>	-	-	-		┪			+			
(22) Paul Cook Board Member	1.00	X						0.	().			0.
(23) Joseph Cook II	1.00		\vdash	╁╌	<u> </u>	1							
Board Member	1.00	x		1				0.).			0.
(24) Michael Covarrubias		-											
Board Member	1.00	X	ĺ		l			0.	().			0.
(25) Ronald Cowan													
Board Member	1:.00	X						0.	() -			0.
(26) Steven Currall													
Board Member	1.00	X					<u> </u>	0.).			0.
1b Sub-total								0.).			0.
c Total from continuation sheets to Part V	II, Section A							1,627,286.			329		
d Total (add lines 1b and 1c)						<u> </u>		1,627,286.	l).	329	, 2.	<u>ZI.</u>
2 Total number of individuals (including but r	not limited to th	nose	list	ed a	bov	e) w	ho r	received more than \$100	0,000 of reportable				1.0
compensation from the organization	_										1.	es	10 No
		_								ļ		es	140
3 Did the organization list any former officer			e, k	еу е	mpl	oyee	, or	nignest compensated e	employee on		3		X
line 1a? If "Yes," complete Schedule J for s					_4		د د د	ibar assessation from	the erocalzetion		<u>.</u>		
4 For any individual listed on line 1a, is the s and related organizations greater than \$15									me organization		4	х	
5 Did any person listed on line 1a receive or									idual for services	۳	··············	-	
rendered to the organization? If "Yes," con							, ola	too organization or more			5	1	Х
Section B. Independent Contractors					<u>,,-</u>	J-711							
Complete this table for your five highest co	ompensated in	dep	end	ent (conf	ract	ors	that received more than	\$100,000 of comp	ensat	ion fro	m	
the organization. Report compensation for													
(A)	11				•			(B)	ľ		(C)		
Name and business	s address							Description of	services	Co	mpens	atio	n

(A) Name and business address	(B) Description of services	(C) Compensation
McCune Audio/Video 101 Utah , S. San Francisco, CA 94080	Audio video lighting services	106,486.
Michelle Hackett Productions 426 Funston Ave., San Francisco, CA 94118	Event planning	104,448.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 2
See Part VII, Section A Continuation sheets

ra		1 Statement of Rever	iue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a b c	Federated campaigns Membership dues Fundraising events Related organizations	1a 1b 2 , 1c 1d	227,000. 908,576.				3.0,0,0,0
ontributions, nd Other Sim	e f g		ts, and ve 1f 1,	594,432.	4 770 000			
<u>ة ن</u>	<u>h</u>	Total. Add lines 1a-1f		1	4,730,008.			
g	2 a	Management Fees	- FOF	Business Code 561000	797,141.	797,141.		
Program Service Revenue	b	December Commission		900099	467,442.	467,442.		
Je 86	-	Publications	- 1 002	511190	1,000.	1,000.		
ΕŞ	ن	<u>rubircuerons</u>		311170	1,000	1,000		
6,2	d							
<u> </u>	е							
_	f	All other program service reve	enue		1 265 502			
	9			<u> </u>	1,265,583.			
	3	Investment income (including	dividends, inter	_	100 204			100 204
		other similar amounts)		.	189,204.			189,204.
	4	Income from investment of ta	x-exempt bond	proceeds -				
ı	5	Royalties					····	
			(i) Real	(ıi) Personal				
	6 a	Gross rents	`	· -				
	b	Less: rental expenses						
	С	Rental income or (loss)			1			
- 1	d	Net rental income or (loss)		>	1			
		Gross amount from sales of	(i) Securities	(ii) Other				
- 1		assets other than inventory	(/ 00000		1			
		Less: cost or other basis	_					
	U							
		and sales expenses		-	-			
		Gain or (loss)	L		1			1
		Net gain or (loss)						
Other Revenue	8 a	Gross income from fundraisin including \$ 908,5	76. of					
æ		contributions reported on line		505 675				
je	_	Part IV, line 18		505,675	4			
ਰ		Less: direct expenses		505,675.	,			
		Net income or (loss) from fund	-	P	0.			
	9 a	Gross income from gaming ac						
		Part IV, line 19	•	•	4			
		Less: direct expenses	ı		,			
- 1	С	: Net income or (loss) from gan	ning activities					
	10 a	a Gross sales of inventory, less returns						
		and allowances						
	b	Less: cost of goods sold	1	o				
	С	Net income or (loss) from sale	es of inventory	>				
1		Miscellaneous Revenu		Business Code				
	11 a	O-in Compile		900099	15,550.	1		15,550.
	b				<u> </u>			
					1	· ·		
	c ام	All other revenue			-			
	a				15,550.			<u></u>
	e 46	Total. Add lines 11a-11d			6 200 345	1,265,583.	0.	204,754.
	12	Total revenue. See instructions			W12001343.	1 × 1 × 0 × 1 × 0 × 0		1 んりすぎしりは

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)

	Check if Schedule O contains a respon not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
10, 0			expenses	general expenses	expenses
'	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in			www	
2	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
J	organizations, and individuals outside the	• •			
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
 5	Compensation of current officers, directors,			.,	. 11
•	trustees, and key employees	872,502.	567,126.	139,298.	166,078
6	Compensation not included above, to disqualified	0.270020	, 2200		
U	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	2,283,630.	1,570,099.	544,841.	168,690
, 8	Pension plan accruals and contributions (include				
3	' '	211,498.	155,989.	35,074.	20,435
9	section 401(k) and section 403(b) employer contributions) Other employee benefits	126,204.	107,829.	15,175.	3,200
0	Payroll taxes	205,912.	134,475.	48,586.	22,851
1	Fees for services (non-employees)				
	Management	483,192.	483,192.		
a b	Legal	16,728.	11,237.	5,446.	45
	Accounting	20,000.	13,435.	6,512.	53
ن	•	20,0001			
d	Lobbying Professional fundraising services See Part IV, line 17				
e f	Investment management fees			· · · · · · · ·	
	Other	112,453.	75,543.	36,613.	297
9 12	Advertising and promotion	11171000	,		
3	Office expenses	125,128.	53,435.	50,541.	21,152
4	Information technology	186,765.	127,180.	46,423.	13,162
	Royalties	200,,000			
15 16	•	335,129.	268,874.	29,246.	37,009
10 17	Occupancy Travel	153,517.	110,537.	34,825.	8,155
1 <i>7</i> 18	Payments of travel or entertainment expenses	100/01/0	220,00,0	0 170200	
10	for any federal, state, or local public officials				
۱۵	Conferences, conventions, and meetings	254,369.	160,096.	83,448.	10,825
1 9 20	Interest	201/000			
2U 21	Payments to affiliates		-		·
21 22	Depreciation, depletion, and amortization	35,581.	26,144.	5,206.	4,231
22 23	Insurance	12,536.	10,199.	880.	1,457
24	Other expenses Itemize expenses not covered				
~~	above (List miscellaneous expenses in line 24e if line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	Provision for bad debt	349,600.	10,000.	69,000.	270,600
a b	Trade expense	277,500.	10,000.	28,000.	239,500
C	Fundraising expenses	114,021.	28,916.	1,025.	84,080
d	Maralantia a gammi aniona	81,390.	0.	0.	81,390
	All other expenses	104,192.	78,991.	18,901.	6,300
е 25	Total functional expenses. Add lines 1 through 24e	6,361,847.	4,003,297.	1,199,040.	1,159,510
25 26	Joint costs. Complete this line only if the organization	2,302,02.	_,,		
_0	reported in column (B) joint costs from a combined	<u>,</u>			
	educational campaign and fundraising solicitation				
	Check here If following SOP 98-2 (ASC 958-720)	1			

Part	X	Balance Sheet					
	•				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1,455,772.	1	1,693,464.
	2	Savings and temporary cash investments			49,613.	2	49,759.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net	1,885,105.	4	1,576,151.		
	5	Receivables from current and former officers, di	rectors	, trustees, key			
		employees, and highest compensated employee	es. Cor	nplete Part II			
		of Schedule L				5	
	6	Receivables from other disqualified persons (as	define	d under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B),	and contributing			
		employers and sponsoring organizations of sect					
_		employees' beneficiary organizations (see instru	ctions)			6	
Assets	7	Notes and loans receivable, net				7	·
Ass	8	Inventories for sale or use				8	
`	9	Prepaid expenses and deferred charges			54,097.	9	50,942.
-	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	319,925. 246,684.			
ļ	b	Less: accumulated depreciation	62,882.	10c	73,241. 164,885.		
	11	Investments · publicly traded securities		11	164,885.		
	12	Investments - other securities. See Part IV, line		12			
	13	Investments - program-related. See Part IV, line		13			
1.	14	Intangible assets		14			
-	15	Other assets. See Part IV, line 11		25,000.	15	17,500.	
	16	Total assets. Add lines 1 through 15 (must equ	al line C	34)	3,532,469.	16	3,625,942.
	17	Accounts payable and accrued expenses	<u></u>	1,523,751.	17	1,462,582.	
	18	Grants payable		18			
	19	Deferred revenue	629,000.	19	623,552.		
:	20	Tax-exempt bond liabilities				20	
S :	21	Escrow or custodial account liability. Complete	Part IV	of Schedule D		21	
Liabilities	22	Payables to current and former officers, director	rs, trus	tees, key employees,			
iab		highest compensated employees, and disqualifi	ed per	sons. Complete Part II			
_		of Schedule L				22	
1:	23	Secured mortgages and notes payable to unrela	ated th	ird parties		23	
:	24	Unsecured notes and loans payable to unrelate	d third	parties		24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	s 17-24). Complete Part X of			
		Schedule D		-	0 150 751	25	2 006 124
	26	Total liabilities. Add lines 17 through 25		TT .	2,152,751.	26	2,086,134.
		Organizations that follow SFAS 117, check he	ere 🟲	★ and complete			
Ses		lines 27 through 29, and lines 33 and 34.			1 270 710		1 520 000
au	27	Unrestricted net assets		-	1,379,718.	27	1,539,808.
Ba	28	Temporarily restricted net assets	-		28		
פ	29	Permanently restricted net assets				29	
표		Organizations that do not follow SFAS 117, c	heck h	ere 🕨 🔛 and			
S O		complete lines 30 through 34.					
set	30	Capital stock or trust principal, or current funds		·		30	
As	31	Paid-in or capital surplus, or land, building, or ed				31	
	32	Retained earnings, endowment, accumulated in	icome,	or other tunas	1,379,718.	32	1,539,808.
	33	Total net assets or fund balances		}	3,532,469.		3,625,942.
	34	Total liabilities and net assets/fund balances			3,332,403.	J4	Form 990 (2011)

Form	990 (2011) Bay Area Council	23-732	5853	Pad	ge 12
Pa	rt XI Reconciliation of Net Assets			•	
	Check if Schedule O contains a response to any question in this Part XI				X
	٠ - بقو				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,200),3	45.
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,36	L,8	47.
3	Revenue less expenses. Subtract line 2 from line 1	3	<163		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,379	7,7	18.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	32	L,5	92.
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	1,539	8,6	08.
Рa	rt 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: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	edule O			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	igle Audit			
	Act and OMB Circular A-133?		3a		<u>X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b		

Form **990** (2011)

SCHEDULE D

(Form 990)

Part I

1

2 3

4

3

R

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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number Bay Area Council 23-7325853 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 Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds Yes are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a 2b **b** Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure 2d listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) _ Yes and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Part III | Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

- 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
 - (i) Revenues included in Form 990, Part VIII, line 1
 - (ii) Assets included in Form 990, Part X
- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
- a Revenues included in Form 990, Part VIII, line 1
- b Assets included in Form 990, Part X

	\$		
_	* —	 	
	\$		

		a Council						<u> 23-73.</u>	<u> 25853</u>	Page 2
Par	t 🔢 Organizations Maintaining C	ollections of A	rt, Histo	orical Tre	asures, o	r Othe	r Simila	ar Asset	ts (continu	ıed)
3	Using the organization's acquisition, accession	on, and other record	ls, check	any of the fo	ollowing that	are a si	gnificant	use of its	collection r	tems
	(check all that apply):									
а	Public exhibition	d	. [] L	oan or exch	ange progra	ms				
b	Scholarly research	е	· 🗀 o	ther						
C	Preservation for future generations									
4	Provide a description of the organization's co	ellections and explain	n how the	ey further the	e organizatio	n's exer	npt purpo	ose in Part	XIV.	
5	During the year, did the organization solicit or	r receive donations	of art, his	torical treasi	ures, or othe	er sımılar	assets		_	
	to be sold to raise funds rather than to be ma	aintained as part of t	he organ	ızatıon's col	lection?				Yes	No_
Par	Escrow and Custodial Arrang reported an amount on Form 990, Par		ete if the d	organization	answered *	Yes" to	Form 990), Part IV, I	ine 9, or	
1a	Is the organization an agent, trustee, custodi	an or other intermed	dary for c	ontributions	or other as	sets not	included			
	on Form 990, Part X?		·						Yes	☐ No
ь	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing ta	able:						
		* '', st	•						Amount	
С	Beginning balance						1c			
	Additions during the year						1d			
e	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?						Yes	No No
	If "Yes," explain the arrangement in Part XIV.									
Par	t V Endowment Funds. Complete it	f the organization ar	swered !	Yes" to For	m 990, Part	IV, line 1	0.			
		(a) Current year	(b) Pr	or year	(c) Two year	s back	(d) Three	years back	(e) Four y	ears back
1a	Beginning of year balance			_						
b	Contributions									
c	Net investment earnings, gains, and losses									····
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									4
g	End of year balance									
2	Provide the estimated percentage of the curr	rent year end baland	ce (line 1g	g, column (a))) held as:					
а	Board designated or quasi-endowment		%							
ь	Permanent endowment >	%								
С	Temporarily restricted endowment ▶	%								
	The percentages in lines 2a, 2b, and 2c should									
За	Are there endowment funds not in the posse	ession of the organiz	ation tha	t are held ar	nd administe	red for t	ne organi	zation	_	
	by:	r							<u> </u>	res No
	(i) unrelated organizations								3a(i)	\rightarrow
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	•							3b	
4	Describe in Part XIV the intended uses of the				···					
Pa	t VI Land, Buildings, and Equipm	nent. See Form 99	0, Part X,	line 10.						
	Description of property	(a) Cost or obasis (invest		(b) Cost basis (ocumulat oreciation	1	(d) Book	value
1a	Land									
b	Buildings									
С	Leasehold improvements			6	1,186.		47,3			,840.
d	Equipment			25	8,739.		199,3	138.	59	,401.
	Other		l							
Tota	I. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Par	t X, colu <u>m</u>	nn (B), line 1	0(c))				73	,241.

Bay Area Council

Schedule D (Form 990) 2011

23-7325853 Page 3

_	dule D (Form 990) 2011 Bay Area Council	A 1!A		F:	!-1 (7325853	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to	Audite	ea	Finar	ncial 3	State	ment	<u> </u>	
1	Total revenue (Form 990, Part VIII, column (A), line 12)				1				
2	Total expenses (Form 990, Part IX, column (A), line 25)				2	<u> </u>			
3	Excess or (deficit) for the year. Subtract line 2 from line 1				3	<u> </u>			
4	Net unrealized gains (losses) on investments				4	ļ			
5	Donated services and use of facilities				5		_		
6	Investment expenses				6				
7	Prior period adjustments				7		_		
8	Other (Describe in Part XIV.)				8				
9	Total adjustments (net). Add lines 4 through 8				9				
10 Dog	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and XII Reconciliation of Revenue per Audited Financial Statemer		lith	Pove	10	or P	aturn	•	
		112 44	141	Neve	ilue j	Jei N			
1	Total revenue, gains, and other support per audited financial statements						1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 . 1	ı						
а	Net unrealized gains on investments	2a	H						
b	Donated services and use of facilities	2b	<u> </u>						
C	Recoveries of prior year grants	2c	<u> </u>						
d	Other (Describe in Part XIV.)	2d							
е	Add lines 2a through 2d						2e		
3	Subtract line 2e from line 1						3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:								
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a							
b	Other (Describe in Part XIV.)	4b]		
С	Add lines 4a and 4b						4c		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)						5		
Pa	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents V	Nit	h Exp	ense	s per	Retu	rn	
1	Total expenses and losses per audited financial statements	-					1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:								
a	Donated services and use of facilities	2a							
b	Prior year adjustments	2b					1		
c	Other losses	2c					į		
d	Other (Describe in Part XIV.)	2d	1				1 1		
e	Add lines 2a through 2d						2e		
3	Subtract line 2e from line 1						3	_	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:						-		
•	Investment expenses not included on Form 990, Part VIII, line 7b	4a	l						
a	•				-		1 1		
	Other (Describe in Part XIV.)	4b	<u> </u>				ا 🗚 ا		
	Add lines 4a and 4b						4c		
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)						5		
	t XIV Supplemental Information					1. 4		01 - D - 4 1/ 1-	. 4. D 4
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III								e 4; Part
	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comp								
Pai	ct X, Line 2: Bay Area Council Inc. is exem	щрt	ТІ		Lax	1010)11 u	nder	
Tni	cornal Poyonyo Codo Section 501/c)//) and F	3 ል ር ፑ	, ,	ie o	VOMI	\+	.c a	501(0)	(3)
111	cernal Revenue Code Section 501(c)(4) and I	JACI			<u> </u>	<u>, c c</u>	<u></u>	301(0)	(3).
BAG	C LLC is subject to both Federal and State	tax	at	tion	. Fo	or t	he	2010	
fi	nancial year, BAC LLC had reported net inco	ome_	01	t ze	ro.	The	ere	was no	
Fee	deral or State tax liability due.					_			
Gei	nerally accepted accounting principles prov	vide		acco	unt	ina	and	disclo	sure
									
gu	idance about positions taken by an organiza	atio	n	in	its	tax		turns t	
							Scriet	PRIC P (FOITI	<i>390)</i> 2011

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

; ,,

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

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Open to Public Inspection Employer identification number

Name of the organization					Employer ident	ification number
Bay Area Counci	1				23-73258	53
		ctivities Ou	tside the United States. Compl	lete if the organ		
to Form 990, Par			<u> </u>			
1 For grantmakers. Does	the organization	maintain record	ds to substantiate the amount of its gr	ants and other	assistance,	
the grantees' eligibility fo	or the grants or a	assistance, and	the selection criteria used to award the	e grants or assi	stance?	Yes No
	ribe in Part V the	organization's	procedures for monitoring the use of it	s grants and ot	her assistance ou	tside the
United States.						
			an be duplicated if additional space is			
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	is a prog describe	vity listed in (d) gram service, e specific type ce(s) in region	(f) Total expenditures for and investments in region
			Program services to provide			
ahh-: ah:	١.		economic development in the			244 505
Shanghai, China	1	<u>+</u>	Bay Area Region and China	Service Pee	15	241,596.
		,				
			5			
3 a Sub-total	1	1				241,596.
b Total from continuation sheets to Part I	0	0				0.
c Totals (add lines 3a and 3b)	1	1				241 596

(i) Method of valuation (book, FMV, appraisal, other) Page 2 Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any (h) Description of non-cash assistance (g) Amount of non-cash assistance 23-7325853 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by cash disbursement (f) Manner of of cash grant (e) Amount recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter (d) Purpose of grant Bay Area Council Part II can be duplicated if additional space is needed. (c) Region Enter total number of other organizations or entitles (b) IRS code section and EIN (if applicable) Schedule F (Form 990) 2011 (a) Name of organization Part # Q

Schedule F (Form 990) 2011

Page 3

23-7325853

Bay Area Council

Schedule F (Form 990) 2011

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

Schedule F (Form 990) 2011 (h) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (c) Number of recipients cash grant (b) Region (a) Type of grant or assistance

. .1

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

Schedule F (Form 990) 2011

for Form 5713)

Complete this part to provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method), Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.
The Bay Area Council, Inc. (consolidated) includes a California
registered LLC (legal entity) which contains a registered China foreign
subsidiary, Wholly Owned Foreign Enterprise ("WOFE"). The China WOFE
receives service fees from the Chinese District Governments to assist
with promoting economic development in both China and the Bay Area
Region. The BAC WOFE office is staffed with Chinese Nationals employed
in accordance with Chinese laws to work with BAC staff employees to
build and grow the economic and cultural bridge.
;) ·

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

OMB No 1545-0047

2011

Open To Public Inspection

Name of the organization Bay Are	a Council					Employer ide 23-7325	ntification number 853
	Complete if the organization answer	ered "Y	'es" to	Form 990, Part IV, I	ine 1		
Indicate whether the organization rais	ed funds through any of the following Solicitates for oral agreement with any individual art VII) or entities (fundraisers) purs	tion of tion of fundra (includerofess	non-ga govern dising of ding of ional f	overnment grants nment grants events fficers, directors, trus undraising services?	stees	Yes	□ No
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have co or con contribu	ustody trol of	(iv) Gross receipts from activity	to (c	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
					•		
	,						
					-		
Total			>				
3 List all states in which the organizatio or licensing.	n is registered or licensed to solicit	contrib	outions	s or has been notified	d It Is	exempt from re	egistration
		<u> </u>					
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	r						
							
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Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events Dutlook Annual (add col. (a) through Dinner Conference col. (c)) (event type) (total number) (event type) 539,500. 620,345. 254,406. 1,414,251. 1 Gross receipts 422,769. 908,576. 337,140. 148,667. 2 Less: Charitable contributions 202,360. 197,576. 105,739. 505,675. 3 Gross income (line 1 minus line 2) Cash prizes Noncash prizes Direct Expenses 9,204. 9,204. Rent/facility costs 1,443. 92,517. 14,332. 108,292. Food and beverages Entertainment $\overline{191,713}$. 91,407 105,059. 388,179. Other direct expenses 505,675 10 Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary. Combine line 3, column (d), and line 10 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. (d) Total gaming (add (b) Pull tabs/instant Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col (a) through col (c)) Gross revenue 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses Yes % Yes Yes No No 6 Volunteer labor Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary. Combine line 1, column d, and line 7 9 Enter the state(s) in which the organization operates gaming activities: Yes No a is the organization licensed to operate gaming activities in each of these states? **b** If "No," explain: Yes 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? No b If "Yes," explain:

Sch	edule G (Form 990 or 990-EZ) 2011 Bay Area Council	<u>23-732</u>	<u> 585</u> .	3 Page 3
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	13	а	%
t	An outside facility	13	b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and record	s:		
	Name			
	Address ▶			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	☐ No
t	olf "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount of gaming revenue retained by the third party > \$	ınt		
c	of f "Yes," enter name and address of the third party:			
	Name			
	Address ▶			
16	Gaming manager information:			
	Name ►			
	Gaming manager compensation > \$			
	Description of services provided ▶			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
ŧ	a Is the organization required under state law to make charitable distributions from the gaming proceeds to		_	
	retain the state gaming license?	L	_ Yes	L No
t	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	n the		
Pε	organization's own exempt activities during the tax year ► \$ Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, colui	mns (III) and	l (v), an	d Part III,
	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional info	rmation (se	e instru	ctions).
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% × **Employer identification number** 23-7325853 Open to Public OMB No 1545-0047 Inspection (h) Purpose of grant or assistance Yes 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 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 non-cash assistance ' (g) Description of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ► Attach to Form 990. (d) Amount of cash grant (c) IRC section if applicable Part 1 General Information on Grants and Assistance Bay Area Council (b) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization or government Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE (Form 990) Partil

Schedule I (Form 990) (2011) Enter total number of section 501(c)(3) and government organizations listed in the line 1 table LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table

132101 01-27-12

Page 2 23-7325853

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients Bay Area Council (a) Type of grant or assistance Schedule I (Form 990) (2011) Part III

Part W Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. 501(c)4, does not contribute or award grants to The Bay Area Council,

however, does receive grants for specific program work. This

outside parties. The Bay Area Council Foundation, 501(c)3 organization,

information is disclosed in the Bay Area Council Foundation, 501(c)3,

990 tax return filing.

Schedule I (Form 990) (2011)

SCHEDULE J (Form 990)

Compensation Information

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

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

2011

Open to Public Inspection

Name of the organization

Department of the Treasury

► Attach to Form 990. ► See separate instructions.

Employer identification number

23-7325853 Bay Area Council Part 1 **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. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b 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 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director. Explain in Part III. Compensation committee X Written employment contract Independent compensation consultant Compensation survey or study X Approval by the board or compensation committee X Form 990 of other organizations 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? 4a b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b c Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. 5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: X a The organization? 5a X **b** Any related organization? 5b If "Yes" to line 5a or 5b, describe in Part III. 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? ва **b** Any related organization? X 6b If "Yes" to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments 7 X not described in lines 5 and 6? If "Yes," describe in Part III 7 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 Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8 X

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

Regulations section 53.4958-6(c)?

If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

Schedule J (Form 990) 2011

Page 2

Schedule J (Form 990) 2011 Bay Area Council

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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W-2	W-2 and/or 1099-MIS	and/or 1099-MISC compensation	(C)	(D)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	reported as deferred in prior Form 990
	Ü	453,489.	0	0	0	59,820.	513,309.	0
1 James Wunderman		0	0	0	0	0	0	0
	8	157,368.	0	0	0	42,434.	199,802.	0
2 Jim Tighe	: 🗉	0	0	0	0.	0		0
	8	166,032.	0	0	0.	41,344.	207,376.	0.
3 Sean Randolph	E	0	0	0	• 0			0.
	Ξ	157,680.	0	0	0	32,820.	190,500.	0
4 John Grubb	: E	0	0	0	0			0
	8	138,245.	0	0	0	26,493.	164,738.	0.
5 Del Christensen	(ii)	0	0.	0.	0	0	0	0
	(1)							
9	(ii)							
	Θ							
7	(E)							
	(I)							
8	(ii)							
	Θ							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
11	(1)							
	(i)							
12	(ii)							
	Θ							
13	(ii)							:
	(i)							
14	(3)							
	Ξ							
15	Ξ							
	8							
16	(ii)							
							Schedu	Schedule J (Form 990) 2011

Part # Supplemental Information Schedule J (Form 990) 2011

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

our highly compensated employees is paid 5: One of Line Part I,

commission on new memberships

a written policy regarding The Bay Area Council has expense report submission and reimbursement policy. None of the questions

identified in la above apply to the Bay Area Council. All expenses must be

supported by evidence of the type of expense, business purpose and

receipts.

The Bay Area Council compensation policies and procedures for determining

compensation are outlined in our Employee Policy Manual. Evaluations and

approvals are secured for all staff members including the CEO and other

officers. Approval is required.

Schedule J (Form 990) 2011

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service

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

Attach to Form 990 or 990-EZ.

2011 Open to Public Inspection

Name of the organization

Bay Area Council

Employer identification number 23-7325853

Form 990, Part I, Line 1, Description of Organization Mission:
Area the most innovative, globally competitive, and sustainable region
in the world.
Form 990, Part III, Line 1, Description of Organization Mission:
Informing and mobilizing business, civic, and political leaders on the
most critical issues and opportunties facing the region.
What We Do: Inform and mobilize business, civic, and political leaders
on the most critical issues and opportunities facing the region.
Developing solutions for an ambitious vision for the region's future
with participation of business, government, labor, science and
education.
Achieving results through advocacy and committed leadership to realize
this vision.
Form 990, Part III
Organization's mission continued
How We Do What We Do: To meet this commitment we: 1. Identify the most
critical challenges and opportunities confronting the region; 2.
Conduct respected research and analysis that sets the agenda for major
policy initiatives; 3. Promote understanding and collaboration among
leaders of affected stakeholders; 4. Drive implementation of strategic
policy solutions through political, business, and civic leadership
Why What We Do Matters: Our members gain:
Significant clout - through involvement of critical mass of top
business leaders.
1114 F. D B. L A. A. M

Name of the organization Bay Area Council	Employer identification number 23-7325853
Collective action - on issues that matter to their compan	у.
Direct access - to top federal, state, and regional polit	ical leaders
and stakeholder groups.	
Valuable connections - to the influential business and ci	vic leaders in
the region and the world.	
Credibility - through well researched, fact-based positio	ns and policy
recommendations.	
Regional policy expertise - through internal experts, ext	ernal
networks, and partner organizations.	
Execution ability - an organization with a proven ability	to get
results and achieve needed policy outcomes.	
Form 990, Part III, Line 4c, Program Service Accomplishme	nts:
double bottom line results. Funds include; Bay Area Equit	y Fund I; Bay
Area Equity Fund II; Bay Area Smart Growth Fund I; Bay Ar	ea Smart
Growth Fund II.	
Form 990, Part VI, Section A, line 6: Bay Area Council is	a business
membership organization with over 270 member companies wi	thin the Bay Area.
Form 990, Part VI, Section A, line 7a: The Bay Area Counc	il Executive
Committee may elect a member to the Committee.	
Form 990, Part VI, Section A, line 7b: The Executive Comm	
governing body as noted in the By-Laws. Minutes are rati	fied at the annual
board meeting of members.	

Donated services and use of facilities: 321,592. Net assets of BC LLC Total to Form 990, Part XI, Line 5 321,592.

SCHEDULE R

Department of the Treasury Internal Revenue Service (Form 990)

2011 Open to Public Inspection

OMB No 1545-0047

Employer identification number 23-7325853

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Bay Area Council Name of the organization

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

Part

(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	
Bay Area Council, LLC - 27-0819073 201 California Street, Suite 1450 San Francisco CA 94111	Pass thru organization for China WOFE	California			Bay Area Council 501(c)4	uncil	
				,			
part il Identification of Related Tax-Exempt Organizations (Complete organizations during the tax year.)	ations (Complete if the organization a	if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt	Part IV, line 34 beca	use it had one o	r more related tax-exer	прt	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code st	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 512(b)(13) controlled entity?	2(b)(13)
Area Counci California	Charitable Poundation	California	501(c)3 Li		Bay Area Council 501(c)4		×
San Francisco, en Juin							

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

Schedule R (Form 990) 2011

Page 2 23-7325853

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) Schedule R (Form 990) 2011 Bay Area Council Part III

(e)	(q)	(2)	Ō	9		£	(6)	ε	©		3
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)		Share of total income	Share of Dend-of-year at assets	Disproportion- ate allocations? Yes No	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		General or Percentage managing ownership partner?
									!		
										_	
Part W Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	ganizations Taxable as rporation or trust during	a Corpo	rration or Trust (Cor rear)	nplete if the o	rganizatioi	n answered "Yes"	to Form 990, Part	IV, line 34	because it had or	ле ог тоге	s related
(a) Name, address, and EIN of related organization	≧ c		(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
			;								
132162 01-23-12									Schedule	R (Form	Schedule R (Form 990) 2011

Page 3

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Schedule R (Form 990) 2011 Bay Area Council

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

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

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- a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity
 - **b** Gift, grant, or capital contribution to related organization(s)
- Gift, grant, or capital contribution from related organization(s)
- d Loans or loan guarantees to or for related organization(s)
- Loans or loan guarantees by related organization(s)
- Sale of assets to related organization(s)
- Purchase of assets from related organization(s)
- Exchange of assets with related organization(s)
- Lease of facilities, equipment, or other assets to related organization(s)
- Lease of facilities, equipment, or other assets from related organization(s)
- Performance of services or membership or fundraising solicitations for related organization(s)
- Performance of services or membership or fundraising solicitations by related organization(s)
- Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) Ε
- Sharing of paid employees with related organization(s)
- Reimbursement paid to related organization(s) for expenses 0
- Reimbursement paid by related organization(s) for expenses a
- q Other transfer of cash or property to related organization(s)
- Other transfer of cash or property from related organization(s)

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.	who must complete th	ils line, including covered	elationships and transaction thresholds.
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) Bay Area Council Foundation	A	83,635.FMV	FMV
g Bay Area Council Foundation	M	65,016.FMV	FMV
(3) Bay Area Council Foundation	Z	962,589.FMV	FMV
(4) Bay Area Council, LLC	A	16,042.FMV	FMV
(5) Bay Area Council, LLC	W	11,557.FMV	FMV
(6) Bay Area Council, LLC	N	213,998.FMV	FMV
132163 01-23-12			Schedule R (Form 990) 2011

Page 4

23-7325853

Schedule R (Form 990) 2011 Bay Area Council

Part Vt Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

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.

(k) Percentage ownership				
(j) General or managing partner? Yes No				
Code V-UBI General of Percentage amount in box 20 managing ownership of Schedule K-I partner? (Form 1065) Yes No				
(h) Disproportonate allocations?				
Share of Dr end-of-year all assets				
(f) Share of total Income				
Are all Are all Solicicity orgs?			 	
Predominant income particulated, excluded from tax under section 512-514) ry	,			
(c) Legal domicile (state or foreign country)				
(b) Primary activity				
(a) Name, address, and EIN of entity				

Schedule R (Form 990) 2011

<u>Schedule R</u>	(Form 990) 2011 Bay Area Council	23-/325853 Page 5
Part VII	Supplemental Information	
	Complete this part to provide additional information for responses to questions on Schedule R (see instruc	ctions).
	_	
		
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	<u>-</u>	
-		

Part VII Section A. Officers, Directors (A)		пріс	yee			ugn	esi			(D
Name and title	(B) Average hours per	(C		Posi all t	tion		ly)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	week	Individual trustee or director	Institutional trustoe	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
27) C. David Cush	1.00	x						0.	0.	0
oard Member 28) John De Luca, Ph.D.	1.00	^			\vdash		-		0.	
oard Member	1.00	x	ļ					0.	0.	(
29) Lloyd Dean										
oard Member	1.00	Х						0.	0.	C
30) Christopher Digiorgio										
oard Member	1.00	X	<u> </u>	ļ				0.	0.	(
31) Paula Downey	1 00									_
oard Member	1.00	X	ļ					0.	0.	(
32) Robert Duffy	1.00	l.			ŀ			0.	0.	
oard Member 33) Lee Dutra	1.00	X	-		-	-	-	1	<u> </u>	(
33) Lee Dutra oard Member	1.00	X						0.	0.	(
34) David Dutton			 		-					
loard Member	1.00	X			l			0.	0.	(
35) Mark Edmunds				-						
oard Member	1.00	X						0.	0.	(
36) Chris Eldridge						ļ				
oard Member	1.00	X	ļ	<u> </u>	_			0.	0.	(
37) Kevin Elliott	1 00	,,] ,
Soard Member	1.00	X		<u> </u>	_		⊢	0.	0.	(
38) Ted Fang	1.00	X						0.	0.	(
Soard Member 39) Guy Gecht	1.00	^	╁	╁┈	-	-	├		0.	
Soard Member	1.00	x						0.	0.	(
40) M. Arthur Gensler, Jr.							T			
loard Member	1.00	X						0.	0.	(
41) Michael Ghielmetti										
Board Member	1.00	X	ļ		<u> </u>		<u> </u>	0.	0.	(
(42) Andrew Giacomini					1					_
Board Member	1.00	X	_	_	-	<u> </u>	<u> </u>	0.	0.	(
43) Johnnie Giles	1 00	U							^	,
Board Member	1.00	X	+	┼	ļ	├-	-	0.	0.	(
44) Jim Gonzalez Board Member	1.00	×						0.	0.	(
45) George Halvorson	1.00	1	+	+	\vdash	\vdash	\vdash	1	.	
Board Member	1.00	X						0.	0.	
(46) Joerg Heidrich		1	1		ŀ					
Board Member	1.00	l _x	1		1		1	0.	0.	(

Part VII Section A. Officers, Directo (A)	(B)			(C				(D)	(E)	(F)	
Name and title	Average hours per	(cl		Posr all t	tion		ly)	Reportable compensation from	Reportable compensation from related	Estimated amount of other	
	week	Individual trustee or director	Institutional frustee	Officer	Кеу етріоусе	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
47) Jeffrey Heller	1.00	Х						0.	0.	0	
card Member 48) F. Warren Hellman	1.00	Λ.		\vdash		_		0.		<u> </u>	
oard Member	1.00	x		1				0.	0.	0	
49) Jim Henry										_	
oard Member	1.00	Х	L			L'		0.	0.	0	
50) Richard Henry											
oard Member	1.00	X	<u>L</u> .					0.	0.	C	
51) Peter Hillan							İ			_	
oard Member	1.00	X						0.	0.		
52) Jeffrey Hoopes	1 00	,					ļ	0	^	,	
oard Member	1.00	X					<u> </u>	0.	0.	(
53) Timothy Hoxie	1.00	x						0.	0.	(
oard Member	1.00	^	-			-		0.	0.		
54) Mary Huss loard Member	1.00	X	1					0.	0.	(
55) Robert James		+==	<u> </u>								
Board Member	1.00	X						0.	0.	C	
56) Greg Johnson											
Soard Member	1.00	X						0.	0.		
57) Todd Kaufman										_	
Soard Member	1.00	X	ļ					0.	0.	(
58) James Keenan	1 00	,,								,	
Board Member	1.00	X	-		-		├	0.	_0.	(
59) Donald Knauss	1.00	X		'	1			0.	0.	(
Soard Member	1.00	1	+	╁	┢╌	├	├				
60) Luke Kowalski Board Member	1.00	x				Ì	l	0.	0.	(
61) Richard Kramlich	200,0	+		├─	┢	t					
Board Member	1.00	X			1	1	i	0.	0.	(
(62) Sylvia Kwan											
Board Member	1.00	X			L	L		0.	0.	(
(63) David Lacey											
Board Member	1.00	X	<u> </u>	<u> </u>	_	\perp	ot	0.	0.	(
(64) Janet Lamkin											
Board Member	1.00	X	-	1	-		┼	0.	0.	(
(65) James Levine	1 00	J						0.	0.	(
Board Member	1.00	X	-	+-	ļ	+-	\vdash	<u> </u>	0.	· · · · · · · · · · · · · · · · · · ·	
(66) Ronald Longinotti	1.00	v						0.	0.		
Board Member	1.00	ΙΛ.		ــــــــــــــــــــــــــــــــــــــ]	 	· · · · · · · · · · · · · · · · · · ·	 	

Part VII Section A. Officers, Directors, Tru	stees, Key En	nplo	yee	s, a	nd F	ligh	est	Compensated Employ	ees (continued)	
. (A) Name and title	(B) Average hours			(e Pos	C) ition that	ı		(D) Reportable compensation	(E) Reportable compensation from related	(F) Estimated amount of
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
67) Erik Lundh	1 00	v						0.	0.	0
coard Member	1.00	Х		_	-	-	-	0.	U .	<u> </u>
68) Robert Lurie coard Member	1.00	X						0.	0.	0
69) Rebecca Macieira-Kaufmann	1.00			-						<u> </u>
loard Member	1.00	x						0.	0.	0
70) Stacy Magill										
Soard Member	1.00	X						0.	0.	0
71) George Marcus										
soard Member	1.00	X		<u> </u>	<u> </u>		<u> </u>	0.	0.	0
72) Paul Markovich	1:00								0	0
oard Member	1.00	X		<u> </u>	\vdash	-		0.	0.	0
73) John Martin	1.00	х				ŀ		0.	0.	0
soard Member	1.00	^			+		-	0.	<u> </u>	
(74) George Marcus Board Member	1.00	X	1					0.	0.	0
75) Paul Markovich	1.00	-	-		+	+-	t^-			
Soard Member	1.00	X						0.	0.	0
(76) John Martin					1					
Board Member	1.00	X						0.	0.	0
(77) Duncan Matteson						İ	1			
Board Member	1.00	X		ļ	1	<u> </u>	<u> </u>	0.	0.	0
(78) Stephen Mayer	1 00		1						_	
Board Member	1.00	X	┼	\vdash	+	 	1	0.	0.	0
(79) Peg McAllister	1 00	X		ļ		1		0.	0.	0
Board Member	1.00	1^	╁	┝	+	+	\vdash			
(80) George McCown Board Member	1.00	x						0.	0.	О .
(81) James McKenna	1 200		┼		1	╁	+			
Board Member	1.00	X	Ì					0.	0.	0
(82) Kenneth McNeely				Ì.						
Board Member	1.00	X				<u> </u>	_	0.	0.	0
(83) Tim McVay		l					1			
Board Member	1.00	X	-	\vdash	-	4	\perp	0.	0.	0
(84) Alexander Mehran	1 00	.,						0.	0.	1 ^
Board Member	1.00	X	\vdash	+	+	+	+-	0.		0
(85) Lenny Mendonca	1.00	v			1			0.	0.	0
Board Member (86) Deborah Messemer	1.00	1	+	+	+	+-	+-		-	†
(86) Deborah Messemer	1.00	١.,			1	1	1	0.	0.	0

Part VII Section A. Officers, Directors,		nplo	yee			ligh	est			
. (A) Name and title	(B) Average hours	(cl		(C Posit	tion		ly)	(D) Reportable compensation	(E) Reportable compensation from related	(F) Estimated amount of
	per week	Individual trustee or director	Institutional frustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
87) Harold Messmer, Jr.	1 00	.,							0	0
oard Member	1.00	X	\vdash				-	0.	0.	
88) Mark Midkiff	1.00	Х						0.	0.	0
Soard Member 89) R. Clark Morrison	1.00	┢	-		_	-	-	<u> </u>	-	
(89) R. Clark Morrison Board Member	1.00	X						0.	0.	0
(90) Monique Moyer	1.00	† *	<u> </u>	$ \cdot $						
Board Member	1.00	x						0.	0.	0
(91) Narayan Nallicheri	" "									
Board Member	1.00	X	L					0.	0.	0
(92) Steve Neal										
Board Member	1.00	X		Ш				0.	0.	0
(93) Jack Nelson										
Board Member	1.00	X	ļ				_	0.	0.	0
(94) Dennis O'brien	1 00	,,			}	ļ				١ ,
Board Member	1.00	X	<u> </u>			-	-	0.	0.	0
(95) Robert Parry	1.00	X	i					0.	0.	0
Board Member	1.00	^	-			┢	-	<u>.</u>	0.	ļ
(96) Jay Paxton	1.00	Х						0.	0.	0
Board Member (97) Perry Pelos	1.00	 				 				-
Board Member	1.00	X					İ	0.	0.	c
(98) Mohammad Qayoumi		+==	1		T-					
Board Member	1.00	X						0.	0.	C
(99) David Radcliffe										
Board Member	1.00	X						0.	0.	(
(100) Gary Radine							1			l .
Board Member	1.00	X	<u> </u>	╙	<u> </u>	<u> </u>	_	0.	0.	(
(101) Clinton Reilly	1 00	1					Ì			,
Board Member	1.00	X	-	├		1	├ ─	0.	0.	C
(102) Jon Reynolds	1 00	l.			1			0.	0.	c
Board Member	1.00	X	╁	-	 	╁	┼	<u> </u>	- 0.	-
(103) Tuck Richards	1.00	X						0.	0.	C
Board Member	1.00	╁	+	┼	\vdash	+	+	<u> </u>	•	
(104) George Roberts Board Member	1.00	X				1		0.	0.	(
(105) T. Gary Rogers	1.00	+==	1	t	 	1	+-			†
Board Member	1.00	X			i			0.	0.	. (
(106) Richard Rosenberg			1	1			Τ			
Board Member	1.00	X	1	1	1	1	1	0.	0.	. (

Form 990 (2011)

	a Counci.								23-132	5055
Part VII Section A. Officers, Directors,	Trustees, Key Er	nplo	yee	s, ar	nd H	ligh	est	Compensated Employ	ees (continued)	
(A) Name and title	(B) Average hours			Posi all t	;) ition			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(107) Herman Rowland, Sr.	1 00	.,							0	0
Board Member	1.00	X					_	0.	0.	0.
(108) Paul Rydberg Board Member	100	x						0.	0.	0.
•	1.00	^	-					0.		0 .
(109) Garth Saloner Board Member	1.00	X				i		0.	0.	0 .
(110) Joseph Saunders	1 2000					H				
Board Member	1.00	x						0.	0.	0.
(111) Leslie Tang Schilling										
Board Member	1.00	X						0.	0.	0
(112) Karl Schroeder		ŀ								_
Board Member	1.00	X	<u> </u>		_	<u> </u>	<u> </u>	0.	0.	. 0
(113) Glenn Shannon	1 00		ł]			
Board Member	1.00	X		-		<u> </u>	├	0.	0.	0
(114) J. Michael Shepherd	1.00	x						0.	0.	0
Board Member	1.00	┢	\vdash	\vdash	-	-	├	0.	0.	
(115) L. Stephen Smith Board Member	1.00	X						0.	0.	0
(116) John Sobrato	1000						1			
Board Member	1.00	X						0.	0.	0
(117) Larry Sonsini							П			
Board Member	1.00	X						0.	0.	0
(118) Thomas Sprinkle										
Board Member	1.00	X		igspace		<u> </u> _	$oxed{}$	0.	0.	0
(119) Valari Staab										_
Board Member	1.0,0	<u> X</u>	-	₩	ļ	<u> </u>	<u> </u>	0.	0.	0
(120) Thomas Sullivan	1 00	U							0.	o
Board Member	1.00	 ^	┼	1		┢	╂	0.	0.	<u> </u>
(121) Stanley Taylor	1.00	X				Ì		0.	0.	0
Board Member (122) John Trefethen	1.00	A	┼-	-	\vdash	+	╁	- 0.	•	,
Board Member	1.00	x	İ	ĺ				0.	0.	0
(123) James Vohs						+-	T			
Board Member	1.00	X				-		0.	0.	0
(124) Michael Walker										
Board Member	1.00	X		$oldsymbol{ol}}}}}}}}}}}}}}$			L	0.	0.	0
(125) Keith Wetmore										
Board Member	1.00	X	_	<u> </u>	<u> </u>	1	<u> </u>	0.	0.	0
(126) Mark Whiteley										_
Board Member	1.00	X	1	1	1	1	1	0.	0.	0

Part VII Section A. Officers, Director	s, Trustees, Key E		yee	s, aı	nd H	ligh	est	Compensated Employ	ees (continued)	
. (A) Name and title	(B) Average hours			Posi all t	;) ition			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(127) L. Leland Whitney	1 00	v						0	0	
Board Member	1.00	X						0.	0.	0
(128) Kenneth Wilcox Board Member	1.00	X						0.	0.	0
(129) Paul Witkay	1.00	┢			\vdash			0.	0.	0
Board Member	1.00	х						0.	0.	0
(130) Richard Wolford	1.50	 					_		-	
Board Member	1.00	X						0.	0.	0
(131) Jed York		ļ —								
Board Member	1.00	X						0.	0.	0
(132) Kevin Zavaglia										
Board Member	1.00	X						0.	0.	0
(133) Rhonda Zygocki										
Board Member	1.00	X						0.	0.	0
(134) James Wunderman	40.00						İ	450 400		
President and CEO	40.00	_	_	X		_		453,489.	0.	59,820
(135) Jim Tighe	40.00			, .				157 360	_	42 424
C00	40.00		-	X	-			157,368.	0.	42,434
(136) Kenneth Regalia	40.00			Х				116,006.	0.	24,858
Controller (137) Sean Randolph	40.00	\vdash		^	<u> </u>		\vdash	110,000.	0.	24,030
(137) Sean Kandolph President - Economic Insti	40.00			х				166,032.	0.	41,344
(138) John Grubb	10.00	$\dagger -$	 	-				100,032.		11,311
VP-Special Projects	40.00					X		157,680.	0.	32,820
(139) Del Christensen						-				
VP-Membership	40.00					X		138,245.	0.	26,493
(140) Matt Regan										-
VP-Gov. Relations	40.00				<u> </u>	X		112,680.	0.	36,178
(141) Linda Galliher										
VP-Education	40.00	_		_		Х		110,000.	0.	18,457
(142) Scott Zengel	1000							110 05-	_	00 00:
VP Real Estate	40.00	┞	<u> </u>	ļ		X		110,977.	0.	20,324
(143) Chandra Alexandre	40.00		1			U		104 900	_	26 402
VP Foundation	40.00	\vdash	\vdash	\vdash		X	<u> </u>	104,809.	0.	26,493
		+	\vdash	-	-	\vdash	-		-	
		}								
		+	 	 	 	 	╁╾			
				-						
			•	•		•	_			
Total to Part VII, Section A, line 1c								1,627,286.	Į.	329,221

	,					
	868 (Rev. 1-2012)					Page 2
	u are filing for an Additional (Not Automatic) 3-Month Ex					
	Only complete Part II if you have already been granted an a			led Form 8	3868.	
	u are filing for an Automatic 3-Month Extension, comple			al (na a	onico noce	lod\
Part	Additional (Not Automatic) 3-Month E	xtensio				
			Enter filer's			e instructions
Type o	r Name of exempt organization or other filer, see instru	ictions		Employer	identification	number (EIN) or
print File by th	Bay Area Council			X	23-732	5853
due date filing you return Se	Number, street, and room or suite no. If a P.O. box, s		tions.	Social sec	curity number	(SSN)
instructio	• •		ress, see instructions.			
Enter t	he Return code for the return that this application is for (file	e a separa	te application for each return)			0 1
Applic	ation	Return	Application	· · · · · · · · · · · · · · · · · · ·		Return
Is For		Code	Is For			Code
Form 9	ΩΛ	01	13 1 01			Code
Form 9		02	Form 1041-A			08
Form 9		01	Form 4720	-		09
Form 9		04	Form 5227			10
	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
	90·T (trust other than above)	06	Form 8870			12
	Do not complete Part II if you were not already granted	-1		iously file	d Form 8868	
<u> </u>	Kenneth R. Rea	alia	- 201 California S	treet	. Suite	1450 -
• The	books are in the care of San Francisco,				,	
	ephone No. ► (415) 981–6600		FAX No. ► (415)981-6	408		
	e organization does not have an office or place of busines	s in the U				• \Box
	is is for a Group Return, enter the organization's four digit			f this is fo	r the whole ar	oup, check this
box ▶		٠ .	ach a list with the names and EINs of			
			ber 15, 2012.			
	For calendar year 2011, or other tax year beginning		, and endin	a		
	f the tax year entered in line 5 is for less than 12 months, or	check reas		Final r	eturn	
	Change in accounting period					
7 5	State in detail why you need the extension					
	We are currently undergoing a	cert	ified audit of our	fina	ncial	
	statements and wish to await	compl	etion before filin	g. Ta	x retur	ns will
	oe filed as expeditiously as					······································
	f this application is for Form 990-BL, 990-PF, 990-T, 4720,		 	T .		
	nonrefundable credits. See instructions.	_		8a	\$	0.
-	f this application is for Form 990-PF, 990-T, 4720, or 6069	, enter any	refundable credits and estimated			
	ax payments made. Include any prior year overpayment a	-				
	previously with Form 8868.			8b	\$	0.
-	Balance due. Subtract line 8b from line 8a. Include your p	ayment wi	th this form, if required, by using			
	EFTPS (Electronic Federal Tax Payment System). See insti	•		8c	\$	0.
			st be completed for Part II o	only.		

Signature >

Under penalties of periory, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I sim authorized to prepare this form

Signature

Title

President/CEO

Date

Form **8868** (Rev. 1-2012)