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Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

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

OMB No 1545-0047

2011Open to Public
Inspection**A For the 2011 calendar year, or tax year beginning****and ending****B** Check if applicable

- ☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization

BAINBRIDGE ISLAND ONE CALL FOR ALL

Doing Business As

Number and street (or P O box if mail is not delivered to street address)

PO BOX 10487

Room/suite

City or town, state or country, and ZIP + 4

BAINBRIDGE ISLAND, WA 98110

F Name and address of principal officer JOE WILCYNski

PO BOX 10487, BAINBRIDGE ISLAND, WA 98110

D Employer identification number

91-0782393

E Telephone number

206-842-5449

G Gross receipts \$

1,092,603.

H(a) Is this a group return

for affiliates?

☐ Yes☒ No**H(b)** Are all affiliates included?☐ Yes☐ No

If "No," attach a list. (see instructions)

H(c) Group exemption number ▶**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c)() (insert no) ☐ 4947(a)(1) or ☐ 527**J** Website: ▶ WWW.ONECALLFORALL.ORG**K** Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation 1950**M** State of legal domicile WA**Part I Summary**

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: CHARITABLE FUND RAISER AND DISTRIBUTION TO CHARITIES		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	13
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	13
	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	0
	6 Total number of volunteers (estimate if necessary)	6	0
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
7b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 958,236.	Current Year 1,091,606.
	9 Program service revenue (Part VIII, line 2g)	0.	0.
	10 Investment income (Part VII, column (A), lines 3, 4, and 7d)	1,011.	997.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.
	12 Total revenue - add lines 8 through 11 (must equal Part VII, column (A), line 12)	959,247.	1,092,603.
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	872,593.	1,030,313.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
Expenses	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶	0.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	100,122.	84,938.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	972,715.	1,115,251.
	19 Revenue less expenses. Subtract line 18 from line 12	-13,468.	-22,648.
	Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 903,867.
21 Total liabilities (Part X, line 26)		838,940.	894,203.
22 Net assets or fund balances. Subtract line 21 from line 20		64,927.	42,279.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here ▶ W. Joseph Wilcynski 11-15-2012
 Signature of officer Date
 ▶ JOE WILCYNski, TREASURER
 Type or print name and title

Paid Preparer Use Only
 Print/Type preparer's name HARVEY DORFSMAN Preparer's signature [Signature] Date 9-5-12 Check ☐ if self-employed PTIN P01289865
 Firm's name ▶ MKD CPAS, PLLC Firm's EIN ▶ 45-1070919
 Firm's address ▶ 1809 7TH AVENUE, SUITE 1300
SEATTLE, WA 98101-1313 Phone no (206) 624-7434

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

☒ Yes ☐ No

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III ☐

1 Briefly describe the organization's mission:

COLLECTS FUNDS FROM THE CITIZENS OF BAINBRIDGE ISLAND, WA BASED ON
THEIR PLEDGE CARDS AND THEN DISTRIBUTES THE CONTRIBUTIONS TO THE
DESIGNATED 501 C 3 CHARITIES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

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

4a (Code) (Expenses \$ 1,030,313. including grants of \$) (Revenue \$ 0.)

COLLECTS FUNDS FROM THE CITIZENS OF BAINBRIDGE ISLAND, WA BASED ON
THEIR PLEDGE CARDS AND THEN DISTRIBUTES THE CONTRIBUTIONS TO THE
DESIGNATED 501 C 3 CHARITIES.

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 1,030,313.

Part IV Checklist of Required Schedules

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

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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? <i>If "Yes," complete Schedule I, Parts I and II</i>	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? <i>If "Yes," complete Schedule I, Parts I and III</i>	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? <i>If "Yes," complete Schedule J</i>	23	X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part II</i>	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? <i>If "Yes," complete Schedule L, Part III</i>	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):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	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? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38 X	

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Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response to any question in this Part V ☐

		Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 0		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 0		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b If "Yes," enter the name of the foreign country: <u>See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.</u>			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		X
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9a		
b Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b		
c Enter the amount of reserves on hand	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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

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

☒**Section A. Governing Body and Management**

	1a	1b	2	3	4	5	6	7a	7b	8a	8b	9	Yes	No
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 the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O	13													
b Enter the number of voting members included in line 1a, above, who are independent		13												
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?														X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?														X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?														X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?														X
6 Did the organization have members or stockholders?														X
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?														X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?														X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following														
a The governing body?										X				
b Each committee with authority to act on behalf of the governing body?										X				
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O														X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)

	10a	10b	11a	11b	12a	12b	12c	13	14	15a	15b	16a	16b	Yes	No
10a Did the organization have local chapters, branches, or affiliates?															X
b If "Yes," 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's exempt purposes?															
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?			X												
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.															
12a Did the organization have a written conflict of interest policy? If "No," go to line 13					X										
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?					X										
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done															X
13 Did the organization have a written whistleblower policy?								X							
14 Did the organization have a written document retention and destruction policy?								X							
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?															
a The organization's CEO, Executive Director, or top management official															X
b Other officers or key employees of the organization															X
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).															
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?															X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?															

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **WA**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☐ Another's website ☒ Upon request

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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **▶**
JOE WILCYNski, TREASURER - 206-382-7722
PO BOX 10487, BAINBRIDGE ISLAND, WA 98110

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck 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 nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) KI KILCHER DIRECTOR	1.00	X						0.	0.	0.
(2) DONNA DAHLQUEST DIRECTOR	1.00	X						0.	0.	0.
(3) BRUCE WHITE DIRECTOR	1.00	X						0.	0.	0.
(4) AMY CURRAN DIRECTOR	1.00	X						0.	0.	0.
(5) JON GREEN DIRECTOR	1.00	X						0.	0.	0.
(6) BRIAN LAWLER DIRECTOR	1.00	X						0.	0.	0.
(7) KEITH HAUSCHULZ DIRECTOR	1.00	X						0.	0.	0.
(8) JOE WILCYNski TREASURER	5.00	X						0.	0.	0.
(9) STEPHEN STRUEFERT DIRECTOR	1.00	X						0.	0.	0.
(10) ERIC STEVENS DIRECTOR	1.00	X						0.	0.	0.
(11) CINDY BELLAS DIRECTOR	1.00	X						0.	0.	0.
(12) ROBIN SIMONS DIRECTOR	1.00	X						0.	0.	0.
(13) TOM WEED DIRECTOR	1.00	X						0.	0.	0.

2011.04020 BAINBRIDGE ISLAND ONE CALL 500310-1

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,091,606.				
	g Noncash contributions included in lines 1a-1f \$						
h Total. Add lines 1a-1f			1,091,606.				
Program Service Revenue			Business Code				
	2 a						
	b						
	c						
	d						
	e						
	f All other program service revenue						
g Total. Add lines 2a-2f							
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			997.			997.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	(ii) Personal				
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss)						
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
	b Less: direct expenses	b					
	c Net income or (loss) from fundraising events						
	9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
	10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a							
b							
c							
d All other revenue							
e Total. Add lines 11a-11d							
12 Total revenue. See instructions			1,092,603.	0.	0.	997.	

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 response to any question in this Part IX ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	1,030,313.	1,030,313.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, 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, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses	821.		821.	
14 Information technology				
15 Royalties				
16 Occupancy	2,136.		2,136.	
17 Travel	380.		380.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
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.)				
a EXECUTIVE DIRECTOR	29,000.		29,000.	
b ANNUAL REPORT COSTS	12,508.		12,508.	
c CHARGE CARD FEES	9,543.		9,543.	
d CAMPAIGN OTHER	7,705.		7,705.	
e All other expenses	22,845.		22,845.	
25 Total functional expenses. Add lines 1 through 24e	1,115,251.	1,030,313.	84,938.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Check here ☐ if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	867,144.	1	915,744.
	2 Savings and temporary cash investments	7,054.	2	
	3 Pledges and grants receivable, net	29,669.	3	18,781.
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	1,957.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b	10c	
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	903,867.	16	936,482.	
Liabilities	17 Accounts payable and accrued expenses		17	
	18 Grants payable	838,940.	18	894,203.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	838,940.	26	894,203.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	41,477.	27	26,079.
	28 Temporarily restricted net assets	23,450.	28	16,200.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	64,927.	33	42,279.
	34 Total liabilities and net assets/fund balances	903,867.	34	936,482.

Form 990 (2011)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response to any question in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,092,603.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,115,251.
3	Revenue less expenses. Subtract line 2 from line 1	3	-22,648.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	64,927.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	0.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	42,279.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII ☐

- 1** Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
- b** Were the organization's financial statements audited by an independent accountant?
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- d** If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:
☐ Separate basis ☐ 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 Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b		X
2c		
3a		X
3b		

Form 990 (2011)

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	811,400.	9749969.	930,170.	971,636.	1091606.	13554781.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	811,400.	9749969.	930,170.	971,636.	1091606.	13554781.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						13554781.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4	811,400.	9749969.	930,170.	971,636.	1091606.	13554781.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,377.	5,670.	2,694.	1,011.	997.	13,749.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support. Add lines 7 through 10						13568530.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	14	99.90 %
15 Public support percentage from 2010 Schedule A, Part II, line 14	15	99.82 %
16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input checked="" type="checkbox"/>		
b 33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/>		

Schedule A (Form 990 or 990-EZ) 2011

Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

b 33 1/3% support tests - 2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

SCHEDULE D
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**▶ Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011Open to Public
Inspection

Name of the organization

BAINBRIDGE ISLAND ONE CALL FOR ALL

Employer identification number

91-0782393

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 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?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 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
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

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

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

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

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

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

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

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

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (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	▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

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

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

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

- a ☐ Public exhibition
 b ☐ Scholarly research
 c ☐ Preservation for future generations
 d ☐ Loan or exchange programs
 e ☐ Other _____

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes ☐ No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes ☐ No

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

- c Beginning balance
 d Additions during the year
 e Distributions during the year
 f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment ▶ _____ %
 b Permanent endowment ▶ _____ %
 c Temporarily restricted endowment ▶ _____ %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
 (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

0.

Schedule D (Form 990) 2011

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		

Total (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		

Total (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Total. (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	

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

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

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,092,603.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,115,251.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-22,648.
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	-22,648.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	1,092,603.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	1,092,603.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,092,603.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	1,115,251.
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	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	1,115,251.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,115,251.

Part XIV Supplemental Information

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

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2011.

Open to Public
Inspection

Name of the organization

BAINBRIDGE ISLAND ONE CALL FOR ALL

Employer identification number
91-0782393

Part I General Information on Grants and Assistance

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

☐ Yes ☒ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed ▶ ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SEE ATTACHED							
SEE ATTACHED			0.	0.			
SEE ATTACHED STATEMENT			0.	0.			
SEE ATTACHED STATEMENT			0.	0.			

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2011)

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.

[illegible]

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

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization

BAINBRIDGE ISLAND ONE CALL FOR ALL

Employer identification number
91-0782393

FORM 990, PART VI, SECTION B, LINE 11: THE ORGANIZATION'S TREASURER
REVIEWS THE 990 RETURN PRIOR TO SIGNING AND FILING THE RETURN.

FORM 990, PART VI, SECTION C, LINE 18: THE ORGANIZATION'S FINANCIAL
INFORMATION IS AVAILABLE ON ITS WEB PAGE AND UPON REQUEST.

FORM 990, PART VI, SECTION C, LINE 19: ALL CORPORATE DOCUMENTS, IE BY LAWS
AND ARTICLES ARE AVAILABLE AT THE ORGANIZATION'S OFFICE FOOR ANYONE WHO
WANTS TO READ THEM.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Enter filer's identifying number, see instructions	
Type or print	Name of exempt organization or other filer, see instructions
File by the due date for filing your return See instructions	Employer identification number (EIN) or <input checked="" type="checkbox"/> 91-0782393
	Number, street, and room or suite no. If a P.O. box, see instructions.
	PO BOX 10487
	Social security number (SSN) <input type="checkbox"/>
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.
	BAINBRIDGE ISLAND, WA 98110

Enter the Return code for the return that this application is for (file a separate application for each return)

01

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

JOE WILCZYNSKI, TREASURER

- The books are in the care of ☒ PO BOX 10487 - BAINBRIDGE ISLAND, WA 98110

Telephone No. ☒ 206-382-7722

FAX No. ☐

- If the organization does not have an office or place of business in the United States, check this box ☐

- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ☐. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until NOVEMBER 15, 2012.

5 For calendar year 2011, or other tax year beginning , and ending .

6 If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

7 State in detail why you need the extension

THE TAXPAYER REQUIRES ADDITIONAL TIME TO GATHER INFORMATION NECESSARY TO FILE AN ACCURATE RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$	0.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0.

Signature and Verification must be completed for Part II only.

Under penalties of perjury, 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 am authorized to prepare this form

Signature ☐

Title ☐ CPA

Date ☐

Form 8868 (Rev. 1-2012)

Organization Name	Billing Street	Billing City	Billing	Billing Zip/Postal
ABC Conservation Education Foundation	221 Winslow Way W #304	Bainbridge	WA	98110
Arms Around Bainbridge	PO Box 4538	Rolling Bay	WA	98061-4538
Bainbridge Arts & Crafts	151 Winslow Way East	Bainbridge	WA	98110
Bainbridge Chorale	P O Box 10572	Bainbridge	WA	98110
Bainbridge Community Piano Association	10575 Darden Lane	Bainbridge	WA	98110
Bainbridge Cooperative Nursery School	501 Cave Avenue	Bainbridge	WA	98110
Bainbridge Island Ambulance Association	P.O. Box 11548	Bainbridge	WA	98110
Bainbridge Island Arts and Humanities	221 Winslow Way W #201	Bainbridge	WA	98110
Bainbridge Island Boys & Girls Club	8521 Madison Ave NE	Bainbridge	WA	98110
Bainbridge Island Child Care Centers	502 Cave Avenue	Bainbridge	WA	98110
Bainbridge Island Historical Museum	215 Ericksen Ave NE	Bainbridge	WA	98110
Bainbridge Island Japanese American		Bainbridge		
Exclusion Memorial Assoc	221 Winslow Way West #306	Island	WA	98110
Bainbridge Island Kiwanis Foundation	P O Box 10602	Bainbridge	WA	98110
Bainbridge Island Land Trust	P O Box 10144	Bainbridge	WA	98110
Bainbridge Island Parks Foundation	P.O. Box 11127	Bainbridge	WA	98110
Bainbridge Island Rowing	P O Box 11168	Bainbridge	WA	98110
Bainbridge Island Senior Community	370 Brien Dr SE	Bainbridge	WA	98110
Bainbridge Island Senior Community	370 Brien Dr SE	Bainbridge	WA	98110
Bainbridge Island Special Needs	P O Box 10919	Bainbridge	WA	98110
Bainbridge Island Sportsmen's Club	PO Box 10421	Bainbridge	WA	98110
Bainbridge Island Visually Impaired		Bainbridge		
Persons Support Group	P O. Box 11464	Island	WA	98110
Bainbridge Island Volunteer Firefighters		Bainbridge		
Association	8895 Madison Avenue NE	Island	WA	98110
Bainbridge Island Youth Orchestra	P O Box 10052	Bainbridge	WA	98110
Bainbridge Island Youth Soccer Club	P O Box 10949	Bainbridge	WA	98110
Bainbridge Ometepe Sister Islands				
Association	P O Box 4484	Rolling Bay	WA	98061-0484
Bainbridge Performing Arts	200 Madison Avenue N	Bainbridge	WA	98110
Bainbridge Public Library	PO Box 11815	Bainbridge	WA	98110
Bainbridge Public Library	PO Box 11815	Bainbridge	WA	98110
Bainbridge Schools Foundation	8489 Madison Ave	Bainbridge	WA	98110
Bainbridge Student Loan Fund	P O Box 10602	Bainbridge	WA	98110
Bainbridge Youth Services	P.O. Box 11173	Bainbridge	WA	98110
Battle Point Astronomical Association	P O. Box 10914	Bainbridge	WA	98110
Bloedel Reserve	7571 NE Dolphin Dr	Bainbridge	WA	98110
Camp Fire USA Central Puget Sound				
Council	4241 21st Avenue West	Seattle	WA	98199-1250
Carden Country School	P O Box 10160	Bainbridge	WA	98110
Chuckwagon Senior Nutrition Program	2817 Wheaton Way, Suite 208	Bremerton	WA	98310
Community Energy Solutions	221 Winslow Way West #301	Bainbridge	WA	98110
Crisis Clinic of The Peninsulas	5455 Almira Drive	Bremerton	WA	98311
Dispute Resolution Center of Kitsap	9004 Washington Avenue NW	Silverdale	WA	98383
Elder and Adult Day Services	12831 NE 21st Place	Bellevue	WA	98005
Filipino American Community of B I &		Bainbridge		
Vicinity	PO Box 11163	Island	WA	98110
Fred Hutchinson Cancer Research Center	P O Box 19024, J5-200	Seattle	WA	98109
Friends of the Farms	221 Winslow Way West #303	Bainbridge	WA	98110
Habitat for Humanity of Kitsap County	P O Box 5347	Bremerton	WA	98312-0516
Helpline House	282 Knechtel Way NE	Bainbridge	WA	98110
Hope House of Bainbridge Island	11955 Sunrise Dr NE	Bainbridge	WA	98110
Hospice of Kitsap County	P O Box 3416	Silverdale	WA	98383-3416
Housing Resources Board	250 Madrona Way NE, Ste 110-B	Bainbridge	WA	98110
Interfaith Volunteer Caregivers of		Bainbridge		
Bainbridge Island	P O Box 11253	Island	WA	98110
Island Cooperative Preschool	PO Box 10453	Bainbridge	WA	98110
Island Music Center (IMC)	10598 NE Valley Rd	Bainbridge	WA	98110
Island Theatre	7781 NE North Street	Bainbridge	WA	98110

Islandwood	4450 Blakely Ave NE	Bainbridge	WA	98110
Just Know Coalition	P.O. Box 10431	Bainbridge	WA	98110
Kids Discovery Museum	301 Ravine Lane NE	Bainbridge	WA	98110
Kids in Concert	PO Box 11623	Bainbridge	98110	WA
Kids Up!	403 Madison Ave Suite 240	Bainbridge	WA	98110
Killpack Scholarship Fund	P.O. Box 10242	Bainbridge	WA	98110
Kitsap Audubon Society	P.O. Box 961	Poulsbo	WA	98370
Kitsap Audubon Society	P O Box 961	Poulsbo	WA	98370
Kitsap Legal Services	P O Box 1446	Bremerton	WA	98337
League of Women Voters Education Fund	P.O. Box 10383	Bainbridge	WA	98110
Literacy Council of Kitsap County	616 5th Street	Bremerton	WA	98337
Madrona School	P.O. Box 11371	Bainbridge	WA	98110
Marge Williams Office Center	221 Winslow Way W #308	Bainbridge	WA	98110
Martha & Mary	PO Box 127	Poulsbo	WA	98370
Montessori Country School	10994 Arrow Point Drive	Bainbridge	WA	98110
Ovation! Musical Theatre Bainbridge	9630 NE Raccoon Lane	Bainbridge	WA	98110
P.A W S. of Bainbridge	P.O. Box 10811	Bainbridge	WA	98110
Peacock Family Services	305 Madison Ave N	Bainbridge	WA	98110
Peninsula Community Health Services	P.O. Box 960	Bremerton	WA	98337
Planned Parenthood of Western	2001 E Madison St	Seattle	WA	98122-2959
Puget Sound Restoration Fund	590 Madison Ave North	Bainbridge	WA	98110
Rotary Club of Bainbridge Island		Bainbridge		
Scholarship Foundation	P O Box 11286	Island	WA	98110
Salish Sea Expeditions	647 Horizon View Place NW	Bainbridge	WA	98110
Sound Works Job Center	P O Box 2019	Poulsbo	WA	98370
Sustainable Bainbridge	221 Winslow Way West #205	Bainbridge	WA	98110
Teen Talking Circles	P.O. Box 4492	Rolling Bay	WA	98061
The Educulture Project at Global Source	PO Box 11316	Bainbridge	WA	98110
The Island School	8553 NE Day Road	Bainbridge	WA	98110
Virginia Mason Winslow Clinic	380 Winslow Way	Bainbridge	WA	98110
Voyager Montessori Elementary School	P.O. Box 11252	Bainbridge	WA	98110
Washington State Smile Partners (WSSP)	221 Winslow Way W. #302	Bainbridge	WA	98110
West Sound Wildlife Shelter	7501 NE Dolphin Drive	Bainbridge	WA	98110
YWCA Alive-Bainbridge Island Domestic Violence Program	PO Box 137	Rollingbay	WA	98061

One Call For All Transaction Detail By Account

Type	Date	Num	January through December 2011 Name	Memo	Amount	Balance
Check	01/22/2011	6908	ABC Conservation Education F	267	2,608 93	2,608 93
Check	01/22/2011	6909	Arms Around Bainbridge		4,797 39	7,406 32
Check	01/22/2011	6910	Bainbridge Arts & Crafts	202	6,243 31	13,649 63
Check	01/22/2011	6911	Bainbridge Chorale	263	2,496 00	16,145 63
Check	01/22/2011	6912	Bainbridge Coop Nursery School	221	2,351 84	18,497 47
Check	01/22/2011	6913	Bainbridge Island Ambulance	201	15,305 52	33,802 99
Check	01/22/2011	6914	Bainbridge Island Arts and Human	226	7,193 53	40,996 52
Check	01/22/2011	6915	Bainbridge Island Boys & Girls Club	252	12,653 42	53,649 94
Check	01/22/2011	6916	Bainbridge Island Child Care	204	3,467 45	57,117 39
Check	01/22/2011	6917	Bainbridge Island Downtown Asso	268	1,168 00	58,285 39
Check	01/22/2011	6918	Bainbridge Island Historical	207	7,449 57	65,734 96
Check	01/22/2011	6919	B I JAPANESE AMER EXCLUSION MEMORIAI	288	9,622 59	75,357 55
Check	01/22/2011	6920	Bainbridge Island Kiwanis	270	1,232.00	76,589 55
Check	01/22/2011	6921	Bainbridge Island Land Trust	217	22,194 20	98,783 75
Check	01/22/2011	6922	Bainbridge Isl Mandarin Learning		36 17	98,819 92
Check	01/22/2011	6923	Bainbridge Island Parks Foundation	253	7,769 68	106,589 60
Check	01/22/2011	6924	Bainbridge Island Rowing Club	245	1,810 91	108,400 51
Check	01/22/2011	6925	Bainbridge Island Senior Com	211	13,078 19	121,478 70
Check	01/22/2011	6926	Bainbridge Island Special Needs Found	260	8,869 19	130,347 89
Check	01/22/2011	7133	Bainbridge Island Teen Center	replacem	3,140 95	133,488 84
Check	01/22/2011	6928	Bainbridge Island Visually Impaired	241	3,244 42	136,733 26
Check	01/22/2011	6929	Bainbridge Island Volunteer Firefig	206	19,038 03	155,771 29
Check	01/22/2011	6930	Bainbridge Island Youth Orchestr	269	2,309 83	158,081 12
Check	01/22/2011	6931	Bainbridge Island Youth Soccer	289	1,310 80	159,391 92
Check	01/22/2011	6932	Bainbridge-Ometepe Sister Isla	215	5,354 08	164,746 00
Check	01/22/2011	6933	Bainbridge Performing Arts	264	6,812 49	171,558 49
Check	01/22/2011	6934	Bainbridge Public Library	208	44,937 70	216,496 19
Check	01/22/2011	6935	Bainbridge School Foundation		15,805 94	232,302 13
Check	01/22/2011	6936	Bainbridge Student Loan	209	3,534 34	235,836 47
Check	01/22/2011	6937	Bainbridge Youth Services	210	18,276 46	254,112 93
Check	01/22/2011	6938	Battle Point Astronomical Associatio	244	2,036 69	256,149 62
Check	01/22/2011	6939	Bloedel Reserve	281	4,363 67	260,513 29
Check	01/22/2011	6940	Camp Fire USA Central Puget So		48 00	260,561 29
Check	01/22/2011	6941	Camp Siberia	271	2,155 56	262,716 85
Check	01/22/2011	6942	Carden Country School	225	1,912 64	264,629 49
Check	01/22/2011	6943	Chuckwagon Senior Nutrition Prog	436	2,420.80	267,050 29
Check	01/22/2011	6944	Community Energy Solutions		1,737 27	268,787 56
Check	01/22/2011	6945	Crisis Clinic of the Peninsulas	417	3,673 63	272,461 19
Check	01/22/2011	6946	Dispute Resolution Center of Kitsa		2,766 00	275,227 19
Check	01/22/2011	6947	Elder and Adult Day Services		5,608 30	280,835 49
Check	01/22/2011	6948	Filipino-American Community of Bainbr	254	2,644 80	283,480 29
Check	01/22/2011	6949	Fred Hutchinson Cancer Researc		4,916 61	288,396 90
Check	01/22/2011	6950	Friends of the Farms	277	7,368 28	295,765 18
Check	01/22/2011	6951	Habitat for Humanity of Kitsap Co		8,735.67	304,500 85

4:57 PM
10/24/12
Accrual Basis

One Call For All Transaction Detail By Account

Type	Date	Num	January through December 2011 Name	Memo	Amount	Balance
Check	01/22/2011	6952	Hare Raisers (4-H)	279	681 85	305,182 70
Check	01/22/2011	6953	Helpline House	212	98,323 95	403,506 65
Check	01/22/2011	6954	Hope House of Bainbridge Island		6,362 49	409,869 14
Check	01/22/2011	6955	Hospice of Kitsap County	414	15,053 54	424,922 68
Check	01/22/2011	6956	Housing Resources Board	219	15,492 39	440,415 07
Check	01/22/2011	6957	Interfaith Volunteer Caregivers	256	21,207 52	461,622 59
Check	01/22/2011	6958	Island Cooperative Learning	291	1,902 63	463,525 22
Check	01/22/2011	6959	Island Music Center (IMC)	282	3,538 14	467,063 36
Check	01/22/2011	6960	Island Theatre	280	1,720 00	468,783 36
Check	01/22/2011	6961	Islandwood	292	8,646 93	477,430 29
Check	01/22/2011	6962	Just Know Coalition		1,330 40	478,760 69
Check	01/22/2011	6963	Kids Discovery Museum	293	2,656 91	481,417 60
Check	01/22/2011	6964	Kids Up!	275	1,631 92	483,049 52
Check	01/22/2011	6965	Killpack Scholarship Fund	265	916 80	483,966 32
Check	01/22/2011	6966	Kitsap Audubon Society		1,768 00	485,734 32
Check	01/22/2011	6967	Kitsap Humane Society	418	5,906 99	491,641 31
Check	01/22/2011	6968	Kitsap Legal Services	416	1,377 27	493,018 58
Check	01/22/2011	6969	League of Women Voters Educa	409	859 00	493,877 58
Check	01/22/2011	6970	Literacy Council of Kitsap County	433	2,615 94	496,493 52
Check	01/22/2011	6971	Madrona School	262	1,368 38	497,861 90
Check	01/22/2011	6972	Marge Williams Office Center	257	3,094 40	500,956 30
Check	01/22/2011	6973	Martha & Mary		844 00	501,800 30
Check	01/22/2011	6974	Montessori Country School	220	2,596 37	504,396 67
Check	01/22/2011	7028	Natural Landscapes Project	replaced	3,644 80	508,041 47
Check	01/22/2011	6976	Ovation! Musical Theatre Bainbridge	283	1,847 22	509,888 69
Check	01/22/2011	6977	P A W S of Bainbridge	213	17,631 55	527,520 24
Check	01/22/2011	7040	Peacock Family Service	void chec	2,333 88	529,854 12
Check	01/22/2011	6979	Peninsula Community Health Service		3,632 00	533,486 12
Check	01/22/2011	6980	Planned Parenthood of Western Wa		5,754 13	539,240 25
Check	01/22/2011	6981	Rotary Club of B I Scholarship Foun	295	2,745 39	541,985 64
Check	01/22/2011	6982	Salish Sea Expeditions	276	1,869 64	543,855 28
Check	01/22/2011	6983	Sound Works Job Center		1,576 00	545,431 28
Check	01/22/2011	6984	Sustainable Bainbridge		4,911 90	550,343 18
Check	01/22/2011	6985	Teen Talking Circles	247	2,922 40	553,265 58
Check	01/22/2011	6986	Global Source Education		1,180 67	554,446 25
Check	01/22/2011	6987	The Island School		2,592 85	557,039 10
Check	01/22/2011	6988	Virginia Mason Winslow Clinic	297	645 27	557,684 37
Check	01/22/2011	6989	Voyager Montessori Elementary	258	1,067 80	558,752 17
Check	01/22/2011	6990	Washington Poison Center	441	528 00	559,280 17
Check	01/22/2011	6991	Washington State Smile Partners	248	3,149 94	562,430 11
Check	01/22/2011	6992	West Sound Wildlife Shelter	232	17,290 03	579,720 14
Check	01/22/2011	6993	YWCA Alive-Bainbridge Island Do	251	7,507 30	587,227 44
Check	01/28/2011	7020	ABC Conservation Education F	267	400 00	587,627 44
Check	01/28/2011	6995	Arms Around Bainbridge		400 00	588,027 44
Check	01/28/2011	6995	Bainbridge Arts & Crafts	202	400 00	588,427 44

One Call For All Transaction Detail By Account

Type	Date	Num	January through December 2011 Name	Memo	Amount	Balance
Check	01/28/2011	6996	Bainbridge Island Ambulance	201	800 00	589,227 44
Check	01/28/2011	6997	B I JAPANESE AMER EXCLUSION MEMORIAL	288	200 00	589,427 44
Check	01/28/2011	6998	Bainbridge Island Land Trust	217	400 00	589,827 44
Check	01/28/2011	7134	Bainbridge Island Teen Center	replacem	400 00	590,227 44
Check	01/28/2011	7000	Bainbridge Island Volunteer Firefig	206	400 00	590,627 44
Check	01/28/2011	7001	Bainbridge Island Youth Soccer	289	80 00	590,707 44
Check	01/28/2011	7002	Bainbridge Public Library	208	1,200 00	591,907 44
Check	01/28/2011	7003	Bainbridge Youth Services	210	400 00	592,307 44
Check	01/28/2011	7004	Montessori Country School	220	400 00	592,707 44
Check	01/28/2011	7005	Ovation! Musical Theatre Bainbridge	283	400 00	593,107 44
Check	01/28/2011	7041	Peacock Family Service	void chec	800 00	593,907 44
Check	01/28/2011	7007	Salish Sea Expeditions	276	400 00	594,307 44
Check	01/28/2011	7008	Sustainable Bainbridge		600 00	594,907 44
Check	01/28/2011	7009	Global Source Education		400 00	595,307 44
Check	01/28/2011	7010	West Sound Wildlife Shelter	232	400 00	595,707 44
Check	01/28/2011	7011	Community Energy Solutions		400 00	596,107 44
Check	01/28/2011	7012	Friends of the Farms	277	800 00	596,907 44
Check	01/28/2011	7013	Helpline House	212	1,200 00	598,107 44
Check	01/28/2011	7014	Island Music Center (IMC)	282	400 00	598,507 44
Check	01/28/2011	7015	Island Theatre	280	400 00	598,907 44
Check	01/28/2011	7016	Islandwood	292	400 00	599,307 44
Check	01/28/2011	7017	Kids Discovery Museum	293	800 00	600,107 44
Check	01/28/2011	7018	Kids Up!	275	800 00	600,907 44
Check	01/28/2011	7019	Madrona School	CHECK \	0 00	600,907 44
Check	01/28/2011	7136	OCFA	MADRON	200 00	601,107 44
Check	08/19/2011	7046	ABC Conservation Education F	267	1,207 05	602,314 49
Check	08/19/2011	7047	Arms Around Bainbridge		1,927 28	604,241 77
Check	08/19/2011	7048	Bainbridge Arts & Crafts	202	2,951 01	607,192 78
Check	08/19/2011	7049	Bainbridge Chorale	263	1,382 06	608,574 84
Check	08/19/2011	7050	Bainbridge Coop Nursery School	221	961 84	609,536 68
Check	08/19/2011	7051	Bainbridge Island Ambulance	201	7,514 73	617,051 41
Check	08/19/2011	7052	Bainbridge Island Arts and Human	226	3,165 96	620,217 37
Check	08/19/2011	7053	Bainbridge Island Boys & Girls Club	252	5,107 16	625,324 53
Check	08/19/2011	7054	Bainbridge Island Child Care	204	2,056 02	627,380 55
Check	08/19/2011	7055	Bainbridge Island Downtown Asso	268	849 10	628,229 65
Check	08/19/2011	7056	Bainbridge Island Historical	207	3,885 00	632,114 65
Check	08/19/2011	7057	B I JAPANESE AMER EXCLUSION MEMORIAL	288	4,485 11	636,599 76
Check	08/19/2011	7058	Bainbridge Island Kiwanis	270	564 36	637,164 12
Check	08/19/2011	7059	Bainbridge Island Land Trust	217	10,461 40	647,625 52
Check	08/19/2011	7060	Bainbridge Isl Mandarin Learning		38 34	647,663 86
Check	08/19/2011	7061	Bainbridge Island Parks Foundation	253	3,918 37	651,582 23
Check	08/19/2011	7062	Bainbridge Island Rowing Club	245	791 06	652,373 29
Check	08/19/2011	7063	Bainbridge Island Senior Com	211	6,663 49	659,036 78
Check	08/19/2011	7064	Bainbridge Island Special Needs Found	260	4,101 16	663,137 94
Check	08/19/2011	7065	Bainbridge Island Teen Center	218	1,651 17	664,789 11

One Call For All Transaction Detail By Account

Type	Date	Num	January through December 2011 Name	Memo	Amount	Balance
Check	08/19/2011	7066	Bainbridge Island Visually Impaired	241	1,389 17	666,178 28
Check	08/19/2011	7067	Bainbridge Island Volunteer Firefig	206	9,000 69	675,178 97
Check	08/19/2011	7068	Bainbridge Island Youth Orchestr	269	1,039 60	676,218 57
Check	08/19/2011	7069	Bainbridge Island Youth Soccer	289	886 03	677,104 60
Check	08/19/2011	7070	Bainbridge-Ometepe Sister Isla	215	3,070 57	680,175 17
Check	08/19/2011	7071	Bainbridge Performing Arts	264	4,654 96	684,830 13
Check	08/19/2011	7072	Bainbridge Public Library	208	19,924 58	704,754 71
Check	08/19/2011	7073	Bainbridge School Foundation		6,615 46	711,370 17
Check	08/19/2011	7074	Bainbridge Student Loan	209	1,470 22	712,840 39
Check	08/19/2011	7075	Bainbridge Youth Services	210	8,239 18	721,079 57
Check	08/19/2011	7076	Battle Point Astronomical Associatio	244	1,297 78	722,377 35
Check	08/19/2011	7077	Bloedel Reserve	281	2,195 34	724,572 69
Check	08/19/2011	7078	Camp Fire USA Central Puget So		12 00	724,584 69
Check	08/19/2011	7079	Camp Siberia	271	933 84	725,518 53
Check	08/19/2011	7080	Carden Country School	225	648 03	726,166 56
Check	08/19/2011	7081	Chuckwagon Senior Nutrition Prog	436	685 20	726,851 76
Check	08/19/2011	7082	Community Energy Solutions		1,272 87	728,124 63
Check	08/19/2011	7083	Crisis Clinic of the Peninsulas	417	1,026 91	729,151 54
Check	08/19/2011	7084	Dispute Resolution Center of Kitsa		896 50	730,048 04
Check	08/19/2011	7085	Elder and Adult Day Services		2,553 87	732,601 91
Check	08/19/2011	7086	Filipino-American Community of Bainbr	254	922 56	733,524 47
Check	08/19/2011	7087	Fred Hutchinson Cancer Researc		1,267 15	734,791 62
Check	08/19/2011	7088	Friends of the Farms	277	4,588 76	739,380 38
Check	08/19/2011	7089	Habitat for Humanity of Kitsap Co		2,853 92	742,234 30
Check	08/19/2011	7090	Hare Raisers (4-H)	check wr	0 00	742,234.30
Check	08/19/2011	7091	Helpline House	212	41,615 63	783,849 93
Check	08/19/2011	7092	Hope House of Bainbridge Island		2,753 36	786,603 29
Check	08/19/2011	7093	Hospice of Kitsap County	414	5,283 38	791,886 67
Check	08/19/2011	7094	Housing Resources Board	219	6,047 95	797,934 62
Check	08/19/2011	7095	Interfaith Volunteer Caregivers	256	10,579 00	808,513 62
Check	08/19/2011	7096	Island Cooperative Learning	291	766 31	809,279 93
Check	08/19/2011	7097	Island Music Center (IMC)	282	1,996 63	811,276 56
Check	08/19/2011	7098	Island Theatre	280	1,096 22	812,372 78
Check	08/19/2011	7099	Islandwood	292	3,830 10	816,202 88
Check	08/19/2011	7100	Just Know Coalition		659 58	816,862 46
Check	08/19/2011	7101	Kids Discovery Museum	293	1,549 05	818,411 51
Check	08/19/2011	7102	Kids Up!	275	915 61	819,327 12
Check	08/19/2011	7103	Killpack Scholarship Fund	265	422 31	819,749 43
Check	08/19/2011	7104	Kitsap Audubon Society		927 00	820,676 43
Check	08/19/2011	7105	Kitsap Humane Society	418	2,221 75	822,898 18
Check	08/19/2011	7106	Kitsap Legal Services	416	834 32	823,732 50
Check	08/19/2011	7107	League of Women Voters Educa	409	431 00	824,163 50
Check	08/19/2011	7108	Literacy Council of Kitsap County	433	748 99	824,912 49
Check	08/19/2011	7109	Madrona School	262	679 16	825,591 65
Check	08/19/2011	7110	Marge Williams Office Center	257	1,739 33	827,330 98

One Call For All Transaction Detail By Account

January through December 2011

Type	Date	Num	Name	Memo	Amount	Balance
Check	08/19/2011	7111	Martha & Mary		236 00	827,566 98
Check	08/19/2011	7112	Montessori Country School	220	1,236 94	828,803 92
Check	08/19/2011	7113	Natural Landscapes Project	294	1,273 48	830,077 40
Check	08/19/2011	7114	Ovation! Musical Theatre Bainbridge	283	1,157 23	831,234 63
Check	08/19/2011	7115	P.A W S of Bainbridge	213	8,678 39	839,913 02
Check	08/19/2011	7116	Peacock Family Service		1,155 65	841,068 67
Check	08/19/2011	7117	Peninsula Community Health Service		2,077 50	843,146.17
Check	08/19/2011	7118	Planned Parenthood of Western Wa		1,584 78	844,730 95
Check	08/19/2011	7119	Rotary Club of B I Scholarship Foun	295	1,181 87	845,912 82
Check	08/19/2011	7120	Salish Sea Expeditions	276	1,117 58	847,030 40
Check	08/19/2011	7121	Sound Works Job Center		444 00	847,474 40
Check	08/19/2011	7122	Sustainable Bainbridge		3,469 46	850,943 86
Check	08/19/2011	7123	Teen Talking Circles	247	2,031 09	852,974 95
Check	08/19/2011	7124	Global Source Education		776 18	853,751 13
Check	08/19/2011	7125	The Island School		5,239 94	858,991 07
Check	08/19/2011	7126	Virginia Mason Winslow Clinic	297	495 35	859,486 42
Check	08/19/2011	7127	Voyager Montessori Elementary	258	453 09	859,939 51
Check	08/19/2011	7128	Washington Poison Center	441	137 00	860,076 51
Check	08/19/2011	7129	Washington State Smile Partners	248	1,773 87	861,850 38
Check	08/19/2011	7130	West Sound Wildlife Shelter	232	7,841 85	869,692 23
Check	08/19/2011	7131	YWCA Alive-Bainbridge Island Do	251	5,019 21	874,711 44
Check	08/19/2011	7136	OCFA	check wr	338 92	875,050 36
			Distribution to Ocfa		45,970 91	921,021 27
Check	12/13/2011	7135	Hope House of Bainbridge Island	early dist	100,000 00	1,021,021 27
					<u>1,021,021 27</u>	<u>1,021,021 27</u>
TOTAL					<u><u>1,021,021.27</u></u>	<u><u>1,021,021.27</u></u>
			Unreconciled difference			<u>9,292.00</u>
						<u><u>1,030,313.27</u></u>