

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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 Open to Public Inspection

► The organization may have to use a copy of this return to satisfy state reporting requirements A For the 2012 calendar year, or tax year beginning and ending D Employer identification number C Name of organization Check if applicable * Change Bay Area Council Name change 23-7325853 Doing Business As Initial Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number (415)981-6600 1450 Termin-201 California Street 6,991,284. Amended G Gross receipts \$ City, town, or post office, state, and ZIP code Applica-San Francisco, CA 94111 H(a) Is this a group return pendina F Name and address of principal officer: Jim Wunderman JYes X No for affiliates? H(b) Are all affiliates included? same as C above Tax-exempt status: 501(c)(3) X 501(c) (4) **◄** (insert no.) L 」4947(a)(1) or l If "No," attach a list (see instructions) J Website: ▶ www.bayareacouncil.org **H(c)** Group exemption number ▶ K Form of organization: X Corporation Trust Association Other > L Year of formation: 1945 M State of legal domicile: CA Part I Summary Briefly describe the organization's mission or most significant activities. We are business leaders Activities & Governance committed to working with public and civic leaders to make the Bay Check this box If the organization discontinued its operations or disposed of more than 25% of its net assets 113 Number of voting members of the governing body (Part VI, line 1a) 113 4 Number of independent voting members of the governing body (Part VI, line 1b) 37 5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 0 6 Total number of volunteers (estimate if necessary) 6 0. 7a 7 a Total unrelated business revenue from Part VIII, column (C), line 12 <u>o.</u> 7b b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 1,730,008. 4,899,574. 8 Contributions and grants (Part VIII, line 1h) Revenue 265,583. 951,592. Program service revenue (Part VIII, line 2g) 280,246. 189,204. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) Q 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 2 2013 15,550. 21,559. 200,345 6,152,971. Total revenue - add lines 8 through 11 (must equal Part VII) 75,000.Grants and similar amounts paid (Part IX, column (A), lines 1-3) Ō. Ω. Benefits paid to or for members (Part IX, column (A), line 4) 3,699,746. 3,652,563. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 1,080,725. **b** Total fundraising expenses (Part iX, column (D), line 25) 2,685,829. 2,662,101. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 6,413,392. 6,361,847. 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) <161,502. <260,421.> Revenue less expenses Subtract line 18 from line 12 Beginning of Current Year End of Year 3,625,942. 3,753,449. 20 Total assets (Part X, line 16) 2,086,134. 2,166,870. 21 Total liabilities (Part X, line 26) 1,539,808. 1,586,579. Net assets or fund balances. Subtract line 21 from line 20 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 Jim Wunderman. President/CEO

Sign Here Type or print name and title Print/Type preparer's name ₽00475769 Carmen D. Mosley, Paid ▶ Harrington Group LLP Firm's EIN 95-4557617 Preparer Firm's name Firm's address 234 East Colorado Blvd. Suite M150 Pasadena, CA 91101 (626) 403-6801 X Yes No May the IRS discuss this return with the preparer shown above? (see instructions)

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

Form 990 (2012)

See Schedule O for Organization Mission Statement Continuation

Form 990 (Council	 	
Part IV	Checklist of Requ	red Sche	dules		

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			v
_	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors? Did the organization engage in direct or indirect political engaging activities on hebalf of or in opposition to candidates for	2		┢
з	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		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	۱.	N/	7
_	during the tax year? If "Yes," complete Schedule C, Part II	4	11/	<u> </u>
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	х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	٣		\vdash
٠	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			
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
C	, ,	11c		x
a	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 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	116		<u> </u>
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	400		x
h	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	12a		
Ü	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
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? If "Yes," complete Schedule F, Parts I and IV	14b	Х	<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	46		x
17	located outside the United States? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16	<u> </u>	 ^
17	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	_ <u></u>		
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	L
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X

20b

			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,			v
	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	-00	х	
	Schedule J	23		
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	04-		х
	Schedule K If "No", go to line 25	24a 24b		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24c		
_	any tax-exempt bonds?	24d		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24u		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	25a		х
	disqualified person during the year? If "Yes," complete Schedule L, Part I Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	230		
D	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified	200		
20	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
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		Х
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,			
	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		Х
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?			v
	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	~~		Х
	Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	33	х	
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	_33		
34	Part V, line 1	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
U	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
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		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	
		Form	990	(2012)

Form 990 (2012) Page 5 Statements Regarding Other IRS Filings and Tax Compliance Part V Check if Schedule O contains a response to any question in this Part V Yes No 0 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0 1b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 1c (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 37 filed for the calendar year ending with or within the year covered by this return 2a X b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Х 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a 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 Accounts. X 5a 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b 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 Х any contributions that were not tax deductible as charitable contributions? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). X 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 7b b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required X 7с to file Form 8282? 7d d If "Yes," indicate the number of Forms 8282 filed during the year X e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e X 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? N/If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g N/AIf the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting N/A organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. 9 N/A 9a Did the organization make any taxable distributions under section 4966? N/A 9ь Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter-N/A 10a a Initiation fees and capital contributions included on Part VIII, line 12 10b b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: N/A 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 11b amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a N/A 12b b If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. N/A a Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the 13b organization is licensed to issue qualified health plans

14a

X

13c

c Enter the amount of reserves on hand

14a Did the organization receive any payments for indoor tanning services during the tax year?

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

23-7325853 Page 6

Form 990 (2012) Bay Area Council 23-7325853 Page
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					لمكا
Sec	tion A. Governing Body and Management				<u> </u>	
		ـما	113		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	. 117			
•	If there are material differences in voting rights among members of the governing body, or if the governing			į		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.	46	113			
ь	Enter the number of voting members included in line 1a, above, who are independent	1b				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any other			х
	officer, director, trustee, or key employee?			2		
3	Did the organization delegate control over management duties customarily performed by or under the	e aire	t supervision			Х
	of officers, directors, or trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 9		is filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		5	X	Λ
6	Did the organization have members or stockholders?			6		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	point	one or	_	\ . .	
	more members of the governing body?			7a	X	
þ	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	tockh	olders, or		١,,	
	persons other than the governing body?			7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ir by th	e following:		١,,	
а	The governing body?			8a	X	
þ	Each committee with authority to act on behalf of the governing body?			_8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ched	at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenue	Code)			
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a	X	
b	If "Yes," did the organization have written policies and procedures governing the activities of such cl	napter	s, affiliates,		v	
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	y befo	re filing the form?	11a	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			12a	X	
þ	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es," de	escribe	_		
	in Schedule O how this was done			12c	X	
13	Did the organization have a written whistleblower policy?			13	X	
14	Did the organization have a written document retention and destruction policy?			14	Х	
15	Did the process for determining compensation of the following persons include a review and approve	al by ir	dependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				v	
a	The organization's CEO, Executive Director, or top management official			15a	X	ļ
b	Other officers or key employees of the organization			15b		
40	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 arranger	nent v	ith a	10-		Х
	taxable entity during the year?			16a		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate the control of the					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	nizatio	n's	466		
<u> </u>	exempt status with respect to such arrangements?			16b		
	tion C. Disclosure					-
17	List the states with which a copy of this Form 990 is required to be filed CA	10	ion E01(a)(2)= ==!-> :	valat		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-7	(Sect	ion ou i (c)(o)s only) a	ıvallaC	ii G	
	for public inspection. Indicate how you made these available. Check all that apply Own website X Another's website X Upon request Other (explain	ın Sal	nedule (1)			
40			•	d fine-	ane!	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, co	n nnC(or interest policy, an	u iiriar	icidi	
20	statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books a	nd 500	orde of the organiza	tion:		
20	Kenneth R. Regalia - (415)981-6600	iu rec	orus or trie organiza	ioii.		
	353 Sacramento Street, 10th Floor, San Francisco,	CA	94111			
	JJJ BUCLAMETICO BELECO, TOCH TTOOL, BUH TTUHCTBOO,					

23-7325853 Bay Area Council Form 990 (2012)

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

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

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 r	or any related	orga	anıza	ation	co	mpe	ns <u>a</u>	ted any current officer, o	director, or trustee	
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average	(do	not c	Pos	ntior more	than	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	amount of
	week		cei ai	I	I	T	100,	from	from related	other
	(list any	liecto						the	organizations (W-2/1099-MISC)	compensation
	hours for related	or d	<u> </u>	Ì		sated	l	organization (W-2/1099-MISC)	(VV-2/1099-WIIGC)	from the organization
	organizations	ruster	trus		2	nedic		(***2/1033*****100)		and related
	below	dualt	tiona	_	oldr	yee st	<u></u>			organizations
	line)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former			g
(1) Alton, Greg, J.D.	1.00		Ī	Ť	_	T				
Board Member		X		}				0.	0.	0.
(2) Amundson, Maria	1.00						Г			
Board Member		Х						0.	0.	0.
(3) Apostolopoulos, Christopher	1.00									
Board Member		Х				<u> </u>		0.	0.	0.
(4) Baer, Laurence	1.00								_	_
Board Member		Х						0.	0.	0.
(5) Baker, Anne	1.00								_	_
Board Member	ļ <u>.</u>	X						0.	0.	0.
(6) Ball, Andrew	1.00									
Board Member		X		L	_	<u> </u>	<u> </u>	0.	0.	0.
(7) Becker, Gregory	1.00									0
Board Member	1 00	X		<u> </u>	ļ	╙		0.	0.	0.
(8) Bonner, Kofi	1.00							0.	0.	0.
Board Member	1 00	Х		_	_	<u> </u>	<u> </u>	U •	0.	0.
(9) Briggs, Teresa	1.00	,,								0
Board Member	1.00	X		_	_	ļ		0.	0.	0.
(10) Brown, David	1.00									0
Board Member	1	X	<u> </u>		L.	ļ	_	0.	0.	0.
(11) Brown, William	1.00	١								0
Board Member	1 00	Х	ļ	_				0.	0.	0.
(12) Bryski, James	1.00	,,							•	0
Board Member	1 00	Х		<u> </u>			_	0.	0.	0.
(13) Burr, Curtis	1.00	,,							•	0
Board Member	1 00	Х	-	_	_	 	<u> </u>	0.	0.	0.
(14) Cardozo, Raymond	1.00	Ų.						0.	0.	^
Board Member	1 00	Х	├-	 		├	-	0.	U •	0.
(15) Cohen, Bruno	1.00	x						0.	0.	0
Board Member	1.00	<u> </u>		-	-	\vdash	_	ļ	<u> </u>	0.
(16) Cook II, Joseph	1.00	x						0.	0.	0.
Board Member (17) Covarrubias, Michael	1.00	<u> </u>	\vdash	\vdash			├─	- 0.		
Board Member	1.00	\mathbf{x}						0.	0.	0.
232007 12-10-12	1. 2.00		Ь	_	—	_			<u> </u>	Form 990 (2012)

Section A. Officers, Directors, Trus		pioy	ees			gne	SIC						
(A)	(B)			() Pos	C)			(D)	(E)		_	(F)	
Name and title	Average hours per		not c	heck	more	than		Reportable	Reportable	l		stimate nount	
	week					ıs bot or/trus		compensation from	compensatio from related		aı	other	Oi
	(list any	ģ	Ĭ					the	organizations		com	pensa	ition
•	hours for	direc				8		organization	(W·2/1099-MIS			om th	
•	related	tee oa	ustee			ensat		(W-2/1099-MISC)			org	anızat	ION
	organizations	at trus	nal tr		loyee	dwos						d relat	
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	ille Line				orga	anızatı	ons
(18) Cowan, Ronald	1.00	=	를	5	2	= 5	윤				 		
Board Member	1.00	X					İ	0.		0.	l		0.
(19) Crunican Grace	1.00	-	├-		 	\vdash	╁	 		<u> </u>			
Board Member	100	x	ł	1	ŀ			0.		0.			0.
(20) Currall Steven	1.00			\vdash	\vdash	1	┢						
Board Member		X						0.		0.			0.
(21) Cush, C. David	1.00				t		t						
Board Member		X						0.		0.			0.
(22) Dai, Weili	1.00												
Board Member		X						0.	,	0.			0.
(23) DeLuca, John	1.00												
Board Member		X						0.		0.			0.
(24) Dean, Lloyd	1.00												
Board Member		X						0.		0.			0.
(25) Del Santo, John	1.00									_			
Board Member	1.00	X			L	L	<u> </u>	0.		0.	<u> </u>		0.
(26) Downey, Paula	1.00]					ł				ĺ		•
Board Member		X	Ш.		<u></u>			0.		0.	<u> </u>		0.
1b Sub-total								0.		0.	-	4 0	0.
c Total from continuation sheets to Part V	II, Section A							1,923,685.		00.		4,8 4,8	
d Total (add lines 1b and 1c)						<u> </u>		1,923,685.				4,0	50.
2 Total number of individuals (including but n	ot limited to th	nose	liste	ed a	bov	e) w	no r	eceived more than \$100	0,000 of reportable	e			11
compensation from the organization												Yes	No
3 Did the organization list any former officer,	director or to	ıcto	o ka	O	mple	31/00	or	highest compensated e	mplovee on	ı		100	
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s			6, NC	>y	пріс	Јусс	, 0,	riighest compensated e	imployee on		3	•	x
4 For any individual listed on line 1a, is the st			nmn	ens:	atior	n and	d of	her compensation from	the organization				l
and related organizations greater than \$15									and organization		4	x	
5 Did any person listed on line 1a receive or a									idual for services	,			
rendered to the organization? If "Yes," com											5		Х
Section B. Independent Contractors													
1 Complete this table for your five highest co	mpensated in	dep	ende	ent c	cont	racto	ors 1	that received more than	\$100,000 of com	npens	ation	from	
the organization Report compensation for	the calendar y	ear	end	ing v	with	or w	/ithir	n the organization's tax	year.				
(A)			~	_				(B)		_		C)	_
Name and business	address	N	INC	<u> </u>				Description of s	services		ompe	nsatio	<u> </u>
									i				
							\dashv					-	
							\dashv						
							一						
							_ }						
2 Total number of independent contractors (including but r	not li	mıte	d to	tho	se li	stec	d above) who received r	nore than				
\$100,000 of compensation from the organi	zation >				(0							
See Part VII, Section	n A Con	tii	nua	at:	10	n	sh	eets			Form	990 (2012)
232008 12-10-12													

			,			9		Compensated Employ		i
(A)	(B)			(C				(D)	(E)	(F)
Name and title	Average	١.,		Posi				Reportable	Reportable	Estimated
	hours	(cl	neck	all t	hat	арр	ly)	compensation	compensation	amount of other
	per week					به ا		from the	from related organizations	compensation
	(list any	Į.				ploye		organization	(W-2/1099-MISC)	from the
•	hours for	direc				E D		(W-2/1099-MISC)	(11 27 1000 11110 07	organization
	related	JO aq	ste			nsate		`		and related
	organizations	Itrus	att		oyee	E O				organizations
	below	Individual trustee or director	Institutional trustee	Je.	Key employee	Highest compensated employee	Former		•	
	line)	Ē	is i	Officer	Key	£	2			
(27) Earley Jr., Tony	1.00									
Board Member	1.00	X						0.	0.	0.
(28) Eddy, John	1.00						Г			
Board Member		Х						0.	0.	0.
(29) Edwards, Robert	1.00									
Board Member		X						0.	0.	0.
(30) Elliott, Kevin	1.00									
Board Member		Х	L		L		L	0.	0.	0.
(31) Fang, Ted	1.00									
Board Member		Х						0.	0.	0.
(32) Fealk, Dean	1.00									
Board Member		Х						0.	0.	0.
(33) Fisher, Ora	1.00									
Board Member		X						0.	0.	0.
(34) Fore, Hank	1.00									
Board Member		Х	l					0.	0.	0.
(35) Ghielmetti, Michael	1.00									
Board Member	_	X	1					0.	0.	0.
(36) Giacomini, Andrew	1.00									
Board Member	1.00	X				l		0.	0.	0.
(37) Glynn, Dianne	1.00									
Board Member		Х				1		0.	0.	0.
(38) Herbert, Kristin	1.00									
Board Member		Х						0.	0.	0.
(39) Heidrich, Joerg	1.00									
Board Member		X						0.	0.	0.
(40) Heller, Jeffrey	1.00									
Board Member		X						0.	0.	0.
(41) Hennefer, David	1.00									
Board Member		X						0.	0.	0.
(42) Henry, Jim	1.00									
Board Member	1.00	X	<u>L</u>	L		L		0.	0.	0.
(43) Henry, Richard	1.00		[
Board Member		Х	L	L.	L	L		0.	0.	0.
(44) Hillan, Peter	1.00									
Board Member		X	L	L.			L	0.	0.	0.
(45) Hoopes, Jeffrey	1.00									
Board Member		Х	L	L		L	L	0.	0.	_ 0.
(46) Hoxie, Timothy	1.00		Π							
Board Member		Х					L	0.	0.	0.
									l	I

Part VII Section A. Officers, Directors,		npic	yee			ligh	est			(F)
(A) Name and title	(B) Average			(C Posi		1		(D) Reportable	(E) Reportable	(F) Estimated
Name and the	hours	(cl	neck				ly)	compensation	compensation	amount of
	per	Ť	Γ.			I	<u> </u>	from	from related	other
	week	L				oyee		the	organizations	compensation
•	(list any	recto				E E		organization	(W-2/1099-MISC)	from the
	hours for related	p 10	聖			sated		(W-2/1099-MISC)		organization and related
	organizations	ruste	l trus		e e	l adu				organizations
	below	Individual trustee or director	Institutional trustee	يا	(o)dw	Highest compensated employee	 15			
	line)	Indiv	listt.	Officer	Key employee	Hgh	Former			•
(47) Huss, Mary	1.00									
Board Member	1.00	X						0.	0.	0
(48) James, Robert	1.00							1	_ :	_
Board Member		X			L.			0.	0.	0
(49) Johnson, Gregory	1.00									
Board Member		X						0.	0.	0
50) Knauss, Donald	1.00									_
Board Member		X					ļ	0.	0.	0
(51) Kowalski, Luke	1.00								_	_
Board Member	1 00	X				<u> </u>	_	0.	0.	0
(52) Lamkin, Janet W.	1.00	ļ.,							0	_
Board Member		X			<u> </u>	_		0.	0.	0
(53) Levine, James	1.00	١.,							0.	0
Board Member	1 00	X	<u> </u>		<u> </u>			0.	0.	
(54) Lucas, Luke	1.00	x				ļ		0.	0.	0
Goard Member	1.00	₽	\vdash	\vdash				· · · · · · · · · · · · · · · · · · ·		
(55) Macieira-Kaufmann, Rebecca	1.00	X						0.	0.	0
Board Member	1.00	<u> </u>	-	\vdash	┢	├	-	0.		
(56) Marcus, George Board Member	1.00	X						0.	0.	0
(57) Markovich, Paul	1.00	<u> </u>	 	-	-	 	╁			
Board Member	1.00	\mathbf{x}						0.	0.	0
(58) Martin John L.	1.00	 	-	-		├	H			
Board Member	1.00	\mathbf{x}					ŀ	0.	0.	0
(59) Matteson Duncan	1.00	╁▔			_	†				· · · · · · · · · · · · · · · · · · ·
Board Member		x				1		0.	0.	0
(60) Mayer, Stephen	1.00									
Board Member		X			1			0.	0.	0
(61) McAllister, Peg	1.00									
Board Member		<u> </u>			<u>.</u>	<u> </u>		0.	0.	0
(62) McCown, George	1.00									_
Board Member		X		L		L	<u> </u>	0.	0.	0
(63) McNeely, Kenneth P.	1.00									•
Board Member	1.00					$oxed{oxed}$	L	0.	0.	0
(64) Mehran, Alexander R.	1.00		1			1			_	_
Board Member	1.00						 	0.	0.	0
(65) Messemer, Deborah	1.00		1						_	_
Board Member	1.00	X		<u> </u>		-	-	0.	0.	0
(66) Messmer, Harold	1.00	↓	ĺ					0.	0.	0
Board Member		X	ı	ļ	l	1	$_{\rm L}$, ,,	<u> </u>	lU

Part VII Section A. Officers, Directors, T		nplo	oyee		•	ligh	est	I .		
(A)	(B)			(C				(D)	(E)	(F)
Name and title	Average hours	(cl	heck	Posi all t			ly)	Reportable compensation	Reportable compensation	Estimated amount of
•	per week (list any hours for related organizations below line)	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
(67) Midkiff, Mark	1.00	드	드	0	3	=	-			
Board Member	1.00	x						0.	0.	0.
(68) Moore, Constance	1.00					-				
Board Member		Х						0.	0.	0.
(69) Morishita, Leroy	1.00									
Board Member		X				l		0.	0.	0.
(70) Morrison, R. Clark	1.00								· —·	
Board Member		X					L	0.	0.	0.
(71) Moyer, Monique	1.00								_	_
Board Member		X	<u> </u>			L_	<u> </u>	0.	0.	0.
(72) Nallicheri, Narayan	1.00									_
Board Member	1 00	Х	<u> </u>				<u> </u>	0.	0.	0.
(73) Nash, Laurie	1.00									0
Board Member	1 00	X	_		<u> </u>	_		0.	0.	0.
(74) Paxton, Jay	1.00	x						0.	0.	0.
Board Member	1.00	<u> </u>	┢	_	-	_		ļ		0.
(75) Pedersen, Jes Board Member		X		ŀ				0.	0.	0.
(76) Pelos, Perry	1.00	<u> ^ </u>	╁		-					
Board Member	1.00	X						0.	0.	0.
(77) Perkovic, Olga	1.00	 	╁╌╴	-	-					
Board Member		x						0.	0.	0.
(78) Preite, Russell	1.00	\vdash					-			
Board Member	·	X			ŀ			0.	0.	0.
(79) Qayoumi, Mohammad	1.00									
Board Member		X						0.	0.	0.
(80) Radcliffe, David	1.00								_	_
Board Member		Х						0.	0.	0.
(81) Radine, Gary	1.00	ļ								
Board Member		X	_	L				0.	0.	0.
(82) Rajgopal, Kausik K.	1.00	ļ								
Board Member	1.00	X		_	<u> </u>	_	_	0.	0.	0.
(83) Reilly, Clinton	1.00	١.,		ŀ		1			0	^
Board Member	1 00	X	├			_	⊢	0.	0.	0.
(84) Roberts, George	1.00	x					1	0.	0.	0.
Board Member (85) Rodriquez, Dennis	1.00	^	\vdash	-	\vdash	\vdash	\vdash	0.	0.	-
Board Member	1.00	x					1	0.	0.	0.
(86) Saloner, Garth	1.00	 ^	\vdash	\vdash	├─	╁	-	 		
Board Member	1.00	X					1	0.	0.	0.
	1									

(A) Name and title	(B)			(C)			(D)	(E)	/F\
Name and title									, ,	(F)
	Average	١		Posi	-			Reportable	Reportable	Estimated
	hours	(Cl	heck	allt	hat	app	ly)	compensation from	compensation from related	amount of other
	per week					<u>8</u>		the	organizations	compensation
_	(list any	喜				nploy		organization	(W-2/1099-MISC)	from the
•	hours for	or director				ra bal		(W-2/1099-MISC)	•	organization
	related	stee 0	rustee			BSuac				and related
	organizations	al tru	onalt		ploye	WO3				organizations
	below line)	Individual trustee	Institutional trustee	Officer	Key employee	Highest compensated employee	F ormer			
37) Sattler, Julie A.	1.00	=	臣	ō	×	=	<u> </u>		-,-	
37) Sattler, Julie A. pard Member	1.00	x						0.	0.	0.
38) Schilling, Leslie Tang	1.00		-							-
pard Member		Х						0.	0.	0.
39) Schmitt, Robert	1.00	-								-
oard Member	ŀ	X						0.	0.	0.
00) Shannon, Glenn	1.00									
pard Member		X						0.	0.	0.
)1) Sharp, William	1.00									_
oard Member		X	L					0.	0.	0.
32) Shepherd, J. Michael	1.00									
pard Member		X						0.	0.	0.
93) Smith, Todd	1.00								•	•
pard Member	1 00	X				_		0.	0.	0.
94) Smyrnios, Dimitrios	1.00	,,	ļ				1	0.	0.	0.
oard Member	1 00	X					<u> </u>	0.	0.	
95) Sobrato, John	1.00	x						0.	0.	0.
pard Member 96) Sonsini, Larry	1.00	^	 		-			0.	0.	
96) Sonsini, Larry oard Member	1.00	X						0.	0.	0.
97) Taylor, Stanley	1.00	<u> </u>				┢	-	0.		
oard Member	1.00	x						0.	0.	0.
98) Thom Sharon	1.00	-								-
pard Member		x					İ	0.	0.	0.
99) Tosta, Timothy	1.00		_	_						
pard Member		x						0.	0.	0.
100) Trefethen, John	1.00			Г						
oard Member		X						0.	0.	0.
101) Tyson, Bernard	1.00									
oard Member		X				Ĺ		0.	0.	0.
102) Tyson, Laura	1.00	_ ا							_	_
pard Member	1	Х			$ldsymbol{ldsymbol{ldsymbol{eta}}}$	<u> </u>	ļ	0.	0.	0.
103) Walker, Michael	1.00	,,				ŀ			•	_
pard Member	1 1 00	X		<u> </u>		<u> </u>	<u> </u>	0.	0.	0.
104) Webber, Michael	1.00	x				ŀ		0.	0.	0.
pard Member	1.00	┝	\vdash	\vdash	-	<u> </u>	-	J .	0.	· ·
105) Welts, Rick pard Member	1.00	X						0.	0.	0.
oard member 106) Whiteley, Mark	1.00	 ^ `	\vdash		-	┢	_			
pard Member	1.00	X						0.	0.	0.
, and a section of the section of th	 -					<u> </u>				

Part VII Section A. Officers, Directors		nplo	yee		_	ligh	est			/E)
(A)	(B)			(C				(D)	(E)	(F)
Name and title	Average hours	 	neck	Posi			kΑ	Reportable compensation	Reportable compensation	Estimated amount of
	per	(6	IECK	ant	.Hat	app	יעי	from	from related	other
	week					92		the	organizations	compensation
	(list any	cto				nploy		organization	(W-2/1099-MISC)	from the
•	hours for	ge				red er		(W-2/1099-MISC)	•	organization
	related	stee	ustee			ensa				and related
	organizations	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee				organizations
	below	I Aug n	titute	Officer	yem	jhest	Former			
	line)	를	Ę	₩	Ş.	ΗI	Foi			
(107) Wiecha, Elizabeth	1.00									•
Board Member		X			Ш			0.	0.	0
(108) Williams, John C.	1.00									
Board Member	1.00	Х	<u> </u>					0.	0.	0
(109) Winey, Daniel	1.00								_	_
Board Member		X						0.	0.	0
(110) Witkay, Paul	1.00									
Board Member		X	L_					0.	0.	0
(111) Wong, Leslie	1.00									
Board Member		X						0.	0.	0
(112) Yeaman, Kevin	1.00									
Board Member		Х						0.	0.	0
(113) York, Jed	1.00									
Board Member	1.00	X						0.	0.	0
(114) James Wunderman	40.00	1								
President and CEO		1		Х				518,840.	0.	13,320
(115) Jim Tighe	40.00	╁╴	-							···································
Advisor to CEO	1000	1		х				117,810.	0.	10,680
(116) Ken Regalia	40.00	t	\vdash				-			
CFO	1010	1		х				148,947.	0.	10,680
(117) Sean Randolph	40.00	╁	\vdash			_				
Economic Institute President	10.00	ł				x		182,197.	0.	212
(118) John Grubb	40.00	╁	┢					102/15/1		
Chief of Staff	40.00	1				х		207,973.	0.	13,320
(119) Del Christensen	40.00	┢	 	-		-		201,3131		10,000
Chief of Global Initiative	40.00	ł				Х		158,264.	0.	13,320
(120) John Haveman	40.00	├				<u>^</u>	-	130,204.	0.	13,320
	40.00	┨				v		140,221.	0.	10,680
VP Economic Institute	40.00	┡		-		X	_	140,221.		10,000
(121) Rufus Jeffris	40.00	1				х		113,560.	0.	983
VP Communication	40.00	 	<u> </u>	Н	<u> </u>	╚	<u> </u>	113,300.	<u>U •</u>	303
(122) Bing Wei	40.00	1				\ _V		100 057	0.	10 600
VP Global Initiative	40.00	\vdash	 	<u> </u>	_	Х		108,057.	U •	10,680
(123) Linda Galliher	40.00	-				\ •		113 500	^	002
VP Education	1000	 				X	<u> </u>	113,560.	0.	983
(124) Matt Regan	40.00	1				1		114 056		_
VP Gov. Relations			_	Ь	 	<u> </u>	<u> </u>	114,256.	0.	0
		1	1			Ī	l			
		lacksquare	<u> </u>	_		<u> </u>	<u> </u>			
		1								
		<u>L_</u>				L_	L			
								4 000 50-		04 050
Total to Part VII, Section A, line 1c								1,923,685.		84,858

<u> </u>		Check if Schedule O cont	ains a response	to any question	in this Part VIII			
		0.000.11 00.000.00 0 00.11	umo a responso	to uny quodition	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	b c	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, gran	1c 1d 1d 1e ts, and	154,250. 764,980.				
Contribu	_	similar amounts not included abor Noncash contributions included in lines Total. Add lines 1a-1f	 -	980,344.	4,899,574.			
	2 a	Program Service		Business Code 900099	700,293.			
Program Service Revenue	c b	Management Fees	- FOF	561000	251,299.	251,299.		
Progra	e f	All other program service reve	enue					
\dashv	<u>g</u> 3	Total. Add lines 2a-2f Investment income (including	dıvıdends, ınter	est, and	951,592.			
	4	other similar amounts) Income from investment of tax	x-exempt bond p	proceeds	280,246.			280,246.
	5	Royalties	(ı) Real	(II) Personal				
		Gross rents Less: rental expenses Rental income or (loss)						
		Net rental income or (loss) Gross amount from sales of assets other than inventory	(i) Securities	(II) Other			<u> </u>	
		Less: cost or other basis and sales expenses Gain or (loss)						
venue	d	Net gain or (loss) Gross income from fundraisin including \$ 764,9		>				
Other Reve	ь	contributions reported on line Part IV, line 18 Less: direct expenses	1c). See	838,313. 838,313.				
0	c	Net income or (loss) from fund Gross income from gaming ad	draising events stivities See	>	0.			
		Part IV, line 19 Less direct expenses Net income or (loss) from garr	a b ning activities	<u> </u>				
	b	Gross sales of inventory, less and allowances Less' cost of goods sold Net income or (loss) from sale	a b					
		Miscellaneous Revenu Gain on foreign Other income	е	Business Code 900099 900099	11,559. 10,000.			11,559.
	c d	All other revenue			21,559.			
232009 12-10-	12	Total. Add lines 11a-11d Total revenue. See instructions.		<u> </u>	6,152,971.	951,592.	0	301,805. Form 990 (2012)

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) Check if Schedule O contains a response to any question in this Part IX (B) Program service (**D)** Fundraising Do not include amounts reported on lines 6b, Management and general expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII expenses expenses Grants and other assistance to governments and 75,000. 75,000. organizations in the United States See Part IV, line 21 Grants and other assistance to individuals in the United States See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 820,278. 527,507 121,732. 171,039. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 2,122,992. 1,497,385. 331,673. 293,934. Other salaries and wages Pension plan accruals and contributions (include 127,784. 214,920. 42,594. 30,774. 212,973. 42,595. section 401(k) and 403(b) employer contributions) 312,809. 67,115. Other employee benefits 139,446. 11,363. 32,702. 183,511. Payroll taxes 10 Fees for services (non-employees): 817,626. 817,626 a Management 12,901 19,491. 6,590. Legal 73,199. 47,499. 25,700. c Accounting Lobbying d Professional fundraising services. See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, 2,220. 35,052. 316,185. 278,913. column (A) amount, list line 11g expenses on Sch O.) 1,783. 814. <u>594.</u> 375. Advertising and promotion 12 120,200. 68,539. 17,511. 34,150. 13 Office expenses 207,164. 151,535. 34,066. 21,563. 14 Information technology Royalties 15 282,798. 37,936. 199,573. 45,289. 16 Occupancy 92,422. 61,221. 29,066. 2,135. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 20,274. 183,471. 52,857. 110,340. Conferences, conventions, and meetings 19 20 Payments to affiliates 21 39,867. 28,458. 5,021 6,388. Depreciation, depletion, and amortization 22 11,590. 8.426. 1,398. 1,766. 23 Insurance Other expenses, Itemize expenses not covered 24 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.) 49,092. 21,000. 307,192. 237,100. Trade expense 971. 112,579. 114,331. 781. Other expenses 48,313. 27,256. 6,350. 41,963. Marketing commissions 20,223. 3,951. Rental and maintenance 3,082. 15,254. 22,941. 6,026. 1,661. All other expenses Total functional expenses. Add lines 1 through 24e 6,413,392. 4,498,324. 834,343. 1,080,725. 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)

Form 990 (2012)
Part X | Balance Sheet

Pa	rt X	Balance Sheet			····
		Check if Schedule O contains a response to any question in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing	1,693,464.	1	1,728,671.
	2	Savings and temporary cash investments	49,759.	2_	49,853.
•	3	Pledges and grants receivable, net	1 572 151	3	1 010 560
	4	Accounts receivable, net	1,576,151.	4	1,819,569.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		_5	
	6	Loans and other receivables from other disqualified persons (as defined under			
	l	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
Ø		employees' beneficiary organizations (see instr) Complete Part II of Sch L		6_	
Assets	7	Notes and loans receivable, net		7	· · · · · · · · · · · · · · · · · · ·
As	8	Inventories for sale or use	- 50 040	8	- CD - E 0.4
	9	Prepaid expenses and deferred charges	50,942.	9	67,591
	10a	Land, buildings, and equipment cost or other			
		basis Complete Part VI of Schedule D 10a 352, 154.	72 041		65 602
	Ь	Less accumulated depreciation 10b 286,551.	73,241.	10c	65,603.
	11	Investments - publicly traded securities	164,885.	11	0.
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments · program-related See Part IV, line 11		13	
	14	intangible assets	17 500	14	22 162
	15	Other assets See Part IV, line 11	17,500.	_15	22,162
	16	Total assets. Add lines 1 through 15 (must equal line 34)	3,625,942.	16	3,753,449
	17	Accounts payable and accrued expenses	1,462,582.	17	1,797,870.
	18	Grants payable	602 550	18	360 000
	19	Deferred revenue	623,552.	19	369,000.
	20	Tax-exempt bond liabilities		20	
ies	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	····
Ħ	22	Loans and other payables to current and former officers, directors, trustees,			
Liabilities		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	2,086,134.	25	2,166,870.
	26	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here X and	2,000,134.	26	2,100,070.
	ļ				
Ces		complete lines 27 through 29, and lines 33 and 34.	1,539,808.		1,586,579.
lan	27	Unrestricted net assets	1,339,000.	27	1,300,373.
89	28	Temporarily restricted net assets		28	
בַּ	29	Permanently restricted net assets		_29	
Ē		Organizations that do not follow SFAS 117 (ASC 958), check here			
S O		and complete lines 30 through 34.		20	
set	30	Capital stock or trust principal, or current funds		30	
As	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	1,539,808.	33	1,586,579.
_	33	Total net assets or fund balances	3,625,942.		3,753,449.
	34	Total liabilities and net assets/fund balances	3,023,342.	_34	5,755,445.

orm	990 (2012) Bay Area Council	23-732	<u> 5853</u>	Pag	_{je} 12
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				<u>Ц</u>
1 2 3 4. 5 6 7	Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses	1 2 3 4 5 6 7 8	1,53	3,3 0,4	92. 21. 08.
8	Prior period adjustments Other changes in not assets or fund balances (explain in Sahadula C)	9			0.
9 10	Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,58	6,5	
Pai	rt XIII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII		——	Yes	No
1 2a	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 Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	163	x
b	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate		2b	х	
С	consolidated basis, or both Separate basis K Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the 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 Sch	ne audit,	2c	X	
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S Act and OMB Circular A-133? If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?	ingle Audit	3a		x
D	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	anou udult	3ь		
	or desired original military in controlled to the desired military controlled to the		Form	990	2012)

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.
 See separate instructions.

2012

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35c (Proxy Tax), then

• Section 501(c)(4), (5), or (6) organiz	ations: Complete Part III	, ,		
Name of organization Bay Are	ea Council			oyer identification number 23-7325853
Part I-A Complete if the or	rganization is exempt und	er section 501(c) or is a section 527 o	rganization.
 Provide a description of the organ Political expenditures Volunteer hours 	nization's direct and indirect politic	al campaign activities	s in Part IV	3,000.
Part I-B Complete if the or	rganization is exempt und	er section 501(c)(3).	
1 Enter the amount of any excise ta2 Enter the amount of any excise ta3 If the organization incurred a sect4a Was a correction made?	x incurred by organization manage	ers under section 495	►\$ 55 ►\$	
b If "Yes," describe in Part IV Part I-C Complete if the or	rganization is exempt und	er section 501(c), except section 501(c)(3).
contributions received that were p	anization's funds contributed to other. Add lines 1 and 2. Enter here a n 1120-POL for this year?	ner organizations for and on Form 1120-PO N) of all section 527 particular organizations are political organizations.	section 527 \$ L, \$ political organizations to which in the section is funds. Also enter the ganization, such as a separa	3,000. 3,000. Yes X No h the filing organization se amount of political
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0
Save Hetch Hetchy	San Francisco, C. 94102	A	3,000.	0.

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

Schedule C (Form 990 or 990-EZ) 2012

LHA

See Part IV for Continuation

Schedule C (Form 990 or 990 EZ) 2012 B	ay Ai	cea Co	uncil	PA-1-1/01	23-7	7325853 Page 2
Part II-A Complete if the orga			mpt under sectio	n 501(c)(3) and fil	ea Form 5/68	
(election under secti						
				Part IV each affiliated	group member's nar	ne, address, EIN,
expenses, and share						
B Check Lifthe filing organization	n check	ed box A a	nd "limited control" pro	ovisions apply		T
		ying Expe	nditures ints paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
				· · · · · · · · · · · · · · · · · · ·		
1a Total lobbying expenditures to influe			=			
b Total lobbying expenditures to influe	-		dy (direct lobbying)			
c Total lobbying expenditures (add line		116)				
d Other exempt purpose expenditures						
e Total exempt purpose expenditures	•		•			ļ
f Lobbying nontaxable amount Enter	ľ				 	
If the amount on line 1e, column (a) or ((b) is:	The lob	bying nontaxable am	ount is:		
Not over \$500,000		20% of	the amount on line 1e			
Over \$500,000 but not over \$1,000,0	000	\$100,00	0 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,500	0,000	\$175,00	00 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17,00	00,000	\$225,00	00 plus 5% of the exce	ss over \$1,500,000		
Over \$17,000,000 \$1,000,000.						
				-		
g Grassroots nontaxable amount (ente	r 25% of	line 1f)				
h Subtract line 1g from line 1a If zero	or less, e	nter -0-				
i Subtract line 1f from line 1c If zero c	or less, er	nter -0-				
j If there is an amount other than zero	on eithe	r line 1h or	line 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this ye			,			Yes No
		4-Year Ave	eraging Period Under	Section 501(h)		
(Some organizat	ions tha	t made a s	ection 501(h) election	n do not have to comp	olete all of the five	
colu	mns bel	ow. See th	e instructions for line	es 2a through 2f on pa	ige 4.)	
	Lobb	ying Expe	nditures During 4-Yea	ar Averaging Period		
Calandan						
Calendar year (or fiscal year beginning in)	(a) 2	2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
(or fiscal year beginning in)						
2a Lobbying nontaxable amount	_					
b Lobbying ceiling amount						
(150% of line 2a, column(e))						
c Total lobbying expenditures						
, , , , , , , , , , , , , , , , , , , ,						
d Grassroots nontaxable amount						
e Grassroots ceiling amount						
(150% of line 2d, column (e))						
f Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2012 Bay Area Council 23-732585 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For eac	ch "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(6	a)	(t	o)
	lobbying activity	Yes	No	Amo	ount
1. [During the year, did the filing organization attempt to influence foreign, national, state or				
I	ocal legislation, including any attempt to influence public opinion on a legislative matter				
(or referendum, through the use of				
a \	Volunteers?				
ЬΙ	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	<u></u>			
	Media advertisements?	<u></u>			
d l	Mailings to members, legislators, or the public?				
e F	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
_	Direct contact with legislators, their staffs, government officials, or a legislative body?	<u> </u>			
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	<u> </u>			
	Other activities?				
-	Total. Add lines 1c through 1i	<u> </u>			
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	<u> </u>			
	f "Yes," enter the amount of any tax incurred under section 4912			.	
	f "Yes," enter the amount of any tax incurred by organization managers under section 4912				
Part	f the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).	on 501(c)	(5) or se	ction	
	501(c)(6).	011 00 1 (0)	(0), 01 30	Otion	
				Yes	No
1 \	Were substantially all (90% or more) dues received nondeductible by members?		1	Х	
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		X
	Did the organization agree to carry over lobbying and political expenditures from the prior year?		3	-	X
	III-B Complete if the organization is exempt under section 501(c)(4),	on 501(c)	(5), or se	ction	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	! "No," OI	R (b) Part	t III-A, lir	ne 3, is
	answered "Yes."				
1 (Dues, assessments and similar amounts from members		1_1		
2 5	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polit	ical			
	expenses for which the section 527(f) tax was paid).				
a (Current year		2a		
b (Carryover from last year		2b		
C	Total		2c		
	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4 1	f notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	cess			
(does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political			
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Part					
	ete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; F	art II-A (affilia	ated group	list); Part II-	A, line 2;
	art II-B, line 1 Also, complete this part for any additional information				
Par	t I-A, Line 1:				
The	Bay Area Council thru it's BAC Political Action	Commmi	ttee	made a	<u> </u>
<u>\$3,</u> (000 contribution payment in support of the Save He	tch He	tchy	water	
she	t system that supports delivering water to Bay Are	ea Comm	uniti	es. I	<u>.</u>
COM	pliance with California FPPC requirements, BAC ma	de the	appr	opriat	<u>:e</u>
disc	closures and reporting of this political campaign	activi	ty.		

Schedule C (Form 990 or 990 EZ) 2012 Bay Area Council	23-7325853 Page 4
Part IV Supplemental Information (continued)	
Part I-C Continuation for Incomplete Name/Address Information	nn:
Tare Te Conclination for incomplete Name/Hadrobs information	
Save Hetch Hetchy	
601 Van Ness Ave., Ste. S San Francisco, CA 94102	
The Bay Area Council thru it's BAC Political Action Committee	e made a
\$3,000 contribution payment in support of the Save Hetch Het	chy water
shot sustan that surposets deliveries water to Boy Amos Commu	nities. In
shet system that supports delivering water to Bay Area Commu	micies. in
compliance with California FPPC requirements, BAC made the a	appropriate
disclosures and reporting of this political campaign activit	<u>y.</u>
	
	

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 Open to Public Inspection

Name of the organization

Bay Area Council

Employer identification number 23-7325853

Par	t I Organizations Maintaining Donor Advised F	unds or Other Similar Funds or	Accounts. Complete if the
<u> </u>	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	ng that the assets held in donor advised fu	ınds
•	are the organization's property, subject to the organization's excl		Yes No
6	Did the organization inform all grantees, donors, and donor advis		only
•	for chantable purposes and not for the benefit of the donor or do		
	impermissible private benefit?	,,	Yes No
Pai		ation answered "Yes" to Form 990, Part IV	/, line 7
1	Purpose(s) of conservation easements held by the organization (c		·
•	Preservation of land for public use (e.g., recreation or educ.		ally important land area
	Protection of natural habitat	Preservation of a certified l	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified	conservation contribution in the form of a c	conservation easement on the last
_	day of the tax year.		
	2, 0, 1, 0, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic structu	re included in (a)	2c
d	Number of conservation easements included in (c) acquired after		
_	listed in the National Register		2d
3	Number of conservation easements modified, transferred, release	ed, extinguished, or terminated by the orga	anization during the tax
	year▶	-	
4	Number of states where property subject to conservation easem	ent is located >	
5	Does the organization have a written policy regarding the periodic		
	violations, and enforcement of the conservation easements it hol	ds?	└── 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 enfo	rcing conservation easements during the y	year ▶ \$
8	Does each conservation easement reported on line 2(d) above sa	itisfy the requirements of section 170(h)(4)	(B)(i)
	and section 170(h)(4)(B)(ii)?		└── Yes └── No
9	In Part XIII, describe how the organization reports conservation e		
	include, if applicable, the text of the footnote to the organization's	s financial statements that describes the o	organization's accounting for
	conservation easements		
Pai	t III Organizations Maintaining Collections of Ar		Similar Assets.
	Complete if the organization answered "Yes" to Form 990		
1a	If the organization elected, as permitted under SFAS 116 (ASC 9		
	historical treasures, or other similar assets held for public exhibiti		of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describes		
b	If the organization elected, as permitted under SFAS 116 (ASC 9		
	treasures, or other similar assets held for public exhibition, educa-	ition, or research in furtherance of public s	ervice, 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 treasur		n, provide
	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
b	Assets included in Form 990, Part X		> \$

Sche	dule D (Form 990) 2012 Bay Area	Council					2	<u>3-73</u>	<u> 25853</u>	Page 2
Par	t III Organizations Maintaining Co	llections of A	rt, Hist	torical Tr	easures,	or Other	Similar	Asse	ts (continu	ied)
3	Using the organization's acquisition, accession	n, and other record	ds, check	any of the	following tha	at are a sigr	nificant us	e of its	collection	items
	(check all that apply).									
а	Public exhibition	C	, <u> </u>	Loan or exc	hange progra	ams				
b	Scholarly research	е	. 🗀	Other						
С	Preservation for future generations									
4.	Provide a description of the organization's col	ections and explai	n how th	ey further t	he organizati	on's exemp	t purpos	e ın Par	t XIII.	
5	During the year, did the organization solicit or	receive donations	of art, hi	stoncal trea	sures, or oth	er sımılar a	ssets		_	
	to be sold to raise funds rather than to be mai	ntained as part of	the orga	nization's co	ollection?				Yes	No_
Par	t IV Escrow and Custodial Arrang	ements. Comple	ete if the	organizatio	n answered	"Yes" to Fo	rm 990, F	Part IV, I	ine 9, or	
	reported an amount on Form 990, Part	X, line 21.								
1a	Is the organization an agent, trustee, custodia	n or other intermed	diary for	contribution	ns or other as	sets not in	cluded		_	
	on Form 990, Part X?								Yes	No No
b	If "Yes," explain the arrangement in Part XIII a	nd complete the fo	ollowing t	able:						
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on For	m 990, Part X, line	21?					<u> </u>	Yes	∐ No
b	If "Yes," explain the arrangement in Part XIII (Check here if the e	xplanatio	n has been	provided in	Part XIII				
Par	t V Endowment Funds. Complete if	the organization ar	nswered	"Yes" to Fo						
		(a) Current year	(b) P	nor year	(c) Two yea	rs back (d	Three yea	rs back	(e) Four y	ears back
1 a	Beginning of year balance				<u></u>					
b	Contributions									
С	Net investment earnings, gains, and losses				ļ					
d	Grants or scholarships		ļ		<u> </u>					
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance		l							
2	Provide the estimated percentage of the curre	nt year end baland	ce (line 1	g, column (a	a)) held as:					
а	Board designated or quasi-endowment		%							
b	Permanent endowment >	%								
C	Temporarily restricted endowment ▶	%								
	The percentages in lines 2a, 2b, and 2c should	d equal 100%.								
3a	Are there endowment funds not in the posses	sion of the organiz	ation tha	at are held a	ind administe	ered for the	organiza	tion	_	
	by:								_	res No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(II), are the related organizations	•							3b	
4	Describe in Part XIII the intended uses of the			_						
Par					 					
	Description of property	(a) Cost or o			or other		umulated		(d) Book	value
		basis (investi	ment)	basis	(other)	aepre	ciation	\dashv		
	Land									
b	Buildings			9	£ 247	Ē	C 10	- -	0	020
С	Leasehold improvements				6,247. 5,907.		66,40 80,14		<u> </u>	,839. ,764.
d	Equipment	<u> </u>		28	5,30/•	43	, , <u>, , , 4</u>	- -	55	, /04.
	Other	15		(D) (:	10(-1)			\dashv	6 E	,603.
Total	. Add lines 1a through 1e (Column (d) must eq	uai Form 990, Part	x, colun	nn (B), line 1	U(C))			<u> </u>	6.5	,003.

liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Bay Area Council

23-7325853 Page 3

Schedule D (Form 990) 2012

Sche	dule D (Form 990) 2012 Bay Area Council	23-	7325853	Page 4
Par		leturi	i i	
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			
а	Net unrealized gains on investments]		
b	Donated services and use of facilities 2b] !		
С	Recovenes of prior year grants 2c] !		
d	Other (Describe in Part XIII.)]		
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]		
b	Other (Describe in Part XIII.)]		
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		
Par	t XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retu	ırn	
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			
а	Donated services and use of facilities 2a	-		
b	Prior year adjustments 2b	-		
С	Other losses 2c	-		
d	Other (Describe in Part XIII)			
е	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	1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4		
b	Other (Describe in Part XIII)	┥╻╵		
С	Add lines 4a and 4b	4c		
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5		
	t XIII Supplemental Information	lb and	2h: Part V. line	4: Port
	blete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, lines 1		20, Fait V, iiile	4, Fait
X, lin	e 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b Also complete this part to provide any additional informatic X, Line 2: Bay Area Council Inc. is exempt from taxation	ווטוו. 11 וזי	nder	
rai	C A, Hille Z. Day Area Council The The Chemps Liem candors			
<u>Int</u>	cernal Revenue Code Section 501(c)(4) and BACF is exempt a	ıs a	501(c)	(3).
BAC	LLC is subject to both Federal and State taxation. For	the	2012 ar	nd
201	1 financial years, BAC LLC had reported net loss of \$3,92	25 a	nd \$13,8	398,
	spectively. There was no Federal and State tax liabilities			
	ars ended December 31, 2012 and 2011.			
<u>y</u> ec	IIB CHACA December 31, 2012 and 2011			
				

Generally accepted accounting principles provide accounting and disclosure

Schedule D (Form 990) 2012

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.

2012
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

Bay	Area Counci	1			23-732585	53
Pai			ctivities Ou	tside the United States. Compl	ete if the organization answered "	Yes"
	to Form 990, Par	t IV, line 14b				
1				ds to substantiate the amount of its gr		
	the grantees' eligibility for	or the grants or a	assistance, and	the selection criteria used to award th	e grants or assistance?	Yes No
2	For grantmakers. Desc United States	nbe in Part V the	organization's	procedures for monitoring the use of it	ts grants and other assistance out	side the
3	Activities per Region (TI	he following Part	I, line 3 table ca	an be duplicated if additional space is	needed)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
				Program services to provide economic development in the		
Shan	ghai, China	1	2	Bay Area Region and China	Service Fees	745,053.
	-					

3 a	Sub-total	1	2			745,053.
	Total from continuation sheets to Part I	0	0			0.
С	Totals (add lines 3a and 3b)	1	2			745,053.

23-7325853

Page 2

Bay Area Council

Schedule F (Form 990) 2012

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000 Part II can be duplicated if additional space is needed

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2 Enter total number of the IRS, or for which t	recipient organization the grantee or counse	ns listed above that are related as section	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	foreign country,	recognized as tax-e>	empt by		
3 Enter total number of other organizations or entities	other organizations c	or entities				•		

Schedule F (Form 990) 2012

Page 3

23-7325853

Bay Area Council

Schedule F (Form 990) 2012

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

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

Schedule F (Form 990) 2012

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) 2012

Yes X No

for Form 5713)

Part V	Su	ople	mer	ntal Info	ormatio	n			,	_	
	_							 _		- 1	

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

SCHEDULE G

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

Open To Public Inspection

Name of the organization	Employer identification number							
Bay Are	23-7325853							
Part I Fundraising Activities required to complete this par	 Complete if the organization answer 	ered "Y	'es" to	Form 990, Part IV, I	ne 17	7 Form 990-EZ	filers are not	
Indicate whether the organization rais A Mail solicitations Internet and email solicitations	e Solicita	tion of	non-g	Check all that apply overnment grants nment grants	•			
c Phone solicitations d In-person solicitations	g Special	fundra	using	events				
 2 a Did the organization have a written of key employees listed in Form 990, P b If "Yes," list the ten highest paid ind 	art VII) or entity in connection with p	rofess	ional f	undraising services?	•	Yes		
compensated at least \$5,000 by the								
(i) Name and address of individual or entity (fundraiser)	(ii) Activity		Did aiser ustody trol of utions?	(iv) Gross receipts from activity	to (o	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization	
		Yes	No					
			_					
Total			<u> </u>					
3 List all states in which the organization or licensing	on is registered or licensed to solicit	contrib	outions	s or has been notified	d it is	exempt from re	egistration	
			<u> </u>					

b If "Yes," explain: ___

Sch	edule G (Form 990 or 990-EZ) 2012 Bay Area Council	<u>23-7</u>	325853	Page 3
	Does the organization operate gaming activities with nonmembers?		Yes	U No
	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:	!		
			13a	%
	The organization's facility		13b	
	An outside facility	ا ا	ַ וטט ן	
14.	Enter the name and address of the person who prepares the organization's gaming/special events books and record	as:		
	Name			
	Address >			
		-		
150	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	☐ No
100	boes the organization have a contract with a time party from whom the organization records garning revenue.			
		4		
t	off "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount of gaming revenue received by the organization in the amount of gaming revenue received by the organization in the amount of gaming revenue received by the organization in the amount of gaming revenue received by the organization in the amount of gaming revenue received by the organization in the amount of gaming revenue received by the organization in the amount of gaming revenue received by the organization in the amount of gaming revenue received by the organization in the amount of gaming revenue received by the organization in the amount of gaming revenue received by the organization in the amount of gaming revenue received by the organization in the amount of gaming revenue received by the organization in the amount of gaming revenue received by the organization in the amount of gaming revenue received by the organization in the amount of gaming revenue received by the organization in the amount of gaming revenue received by the organization in the amount of gaming revenue received by the organization in the amount of gaming revenue received by the organization of gaming revenue received by the organization in the gaming received by the organization of gaming received by the organization of gaming received by the organization of gaming received by the gaming received by the gaming received by the gaming received by the gaming received by the organization of gaming received by the gaming r	unt		
	of gaming revenue retained by the third party \$			
c	: If "Yes," enter name and address of the third party			
	Name ►			
	Address ►			
	Address			
	0			
16	Gaming manager information:			
	Name			
	Gaming manager compensation ▶ \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
	birector/officer Employee independent contractor			
	Mandatory distributions:			
ε	Is the organization required under state law to make charitable distributions from the gaming proceeds to			П.,
	retain the state gaming license?		L Yes	∟ No
t	enter the amount of distributions required under state law to be distributed to other exempt organizations or spent	ın the		
	organization's own exempt activities during the tax year ▶ \$			
Pa	Irt IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, colu	ımns (III)	and (v), and	d Part III,
	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional info			
				
2320	83 01-07-13 Schedule	G (Form	990 or 990)-EZ) 2012

232083 01-07-13

% X **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 General 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 (g) Description of non-cash assistance (f) Method 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, o (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ▶ Attach to Form 990. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 75,000 (d) Amount of cash grant (c) IRC section ıf applicable 501(c)3 20-1826827 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 201 California Street, Ste. 1450 Bay Area Community Foundation or government San Francisco, CA 94111 Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE (Form 990) Part Part

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

Schedule I (Form 990) (2012)

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.

Open to Public Inspection ➤ Attach to Form 990. ➤ See separate instructions.

Internal Revenue Service Name of the organization

Department of the Treasury

Bay Area Council

Employer identification number 23-7325853

OMB No. 1545-0047

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. Housing allowance or residence for personal use First-class or charter travel Payments for business use of personal residence Travel for companions Health or social club dues or initiation fees Tax indemnification and gross-up payments 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, but explain in Part III. X Written employment contract Compensation committee Compensation survey or study Independent compensation consultant 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 X 4b b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4c c Participate in, or receive payment from, an equity-based compensation arrangement? 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. 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 5a a The organization? X 5b b Any related organization? 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 X 6a a The organization? 6b b Any related organization? If "Yes" to line 6a or 6b, describe in Part III. 7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments Х 7 not described in lines 5 and 6? If "Yes," describe in Part III Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the Х initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

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

Regulations section 53 4958-6(c)?

Schedule J (Form 990) 2012

Schedule J (Form 990) 2012

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	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	able	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(a)·(b)(a)	reported as deferred in prior Form 990
(1) James Wunderman	(ii)	400,000.	25,000.	93,840.	0.	13,320.	532,160.	0
i e) (E	0	0	0	0	0	0	0
(2) Ken Regalia	Ξ	120,000.	28,947.	0.	0	10,680.	159,627.	
	<u> </u>		•	0	0 •	0	0	
(3) Sean Randolph	Θ	163,441.	18,756.	0.	0	212.	182,409.	0.
non	E	0		0.	0.	0.	0	0.
(4) John Grubb	ε	162,000.	45,973.	0	0	13,320.	221,293.	0.
44	: 🗉	0		0	* 0	0.		
(5) Del Christensen	Ξ	122,400.	35,864.	0.	• 0	13,320.	171,584.	
i.e	€	0	l	0.	0	0	0.	0
(6) John Haveman	Ξ	140,221.	0	0	0	10,680.	150,901.	0
ÿ	: 🗎	4	0	0	0	0	0	0
	ε							
	: 🗉							
	Ξ							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(II)							
	Ξ							
	(iii							
	Ξ							
	<u> </u>							
	Ξ							
	(ii)							
	ε							
	≘							
	Ξ							
	≘							
	Ξ							
	(ii)							
232112							Schedu	Schedule J (Form 990) 2012

Complete this part to provide the information, explanation, or descriptions required for Part I, tines 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.

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

commission on new memberships.

The Bay Area Council has a written policy regarding

None of the questions expense report submission and reimbursement policy.

expenses must be A11 identified in 1.a above apply to the Council.

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

receipts. Business trip travel requiring overnight stays require

pre-aproval

The Bay Area Council compensation policies and procedures for determining

and compensation are outlined in our Employee Policy Manual. Evaluations

staff members including the CEO and other approvals are secured for all Regarding BAC employer contribution for Approval is required. officers.

health benefits. BAC provides uniform employer contributions for those

The employer benefit individuals electing various health benefit coverage.

may vary between employees because the employer contribution is depending

upon whether an employee elects only for him or herself; for him/or her

Others may waive benefits because plus spouse; or full family coverage.

SCHEDULE 0

(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.

2012
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 opportunities 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, Line 4c, Program Service Accomplishments:
double bottom line results. Funds include; Bay Area Equity Fund I; Bay
Area Equity Fund II; Bay Area Smart Growth Fund I; Bay Area Smart
Growth Fund II.
Form 990, Part VI, Section A, line 6: Bay Area Council is a business
membership organization. Major companies join the Bay Area Council as
members.
Form 990, Part VI, Section A, line 7a: The Bay Area Council Executive
Committee may elect a member to the Committee.

Form 990, Part VI, Section A, line 7b: The Executive committee of the Board officially meets 4 times during each calendar year or as necessary to approve decisions based upon delegations of authority outlined in the by laws. Should decisions require Board approval, these are voted upon by the entire board during the Annual meeting.

Form 990, Part VI, Section B, line 11: The audited financial statements and tax returns are conducted and prepared by an independent CPA audit firm. The genesis of information presented on the 990 tax returns includes all of the audited figures. Copies of the tax return are made available to Board members and the Finance committee upon request. We submit the 990 tax return for posting to Guide Star so that organization's activities are transparent to the public at large.

Form 990, Part VI, Section B, Line 12c: The CEO and CFO has responsibility for monitoring and compliance with our policies. These policies are codified in our employee handbook, acknowledged by each staff member and also reviewed for compliance with current laws and regulations by outside legal council. The independent accountants also test for compliance in performing their independent financial audit at year end.

Form 990, Part VI, Section B, Line 15: The process for determining compensation for the CEO and key employees is benchmarking against comparability data with approval by the Board Chairman.

The BAC uses salary survey information provided by Opportunity Knocks as well as benchmarking the staff salaries with other similar 501(c)4 organizations of similar size and financial results.

Name of the organization Bay Area Council	Employer identification number 23-7325853
Form 990, Part VI, Section C, Line 19: The organization m	ake its governing
documents, conflicts of interest policy, and financial st	atements available
to the public upon request and is available in another or	ganization's
website.	
	· · · · · · · · · · · · · · · · · · ·
	<u> </u>

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

2012 Open to Public Inspection

OMB No 1545-0047

Employer identification number

23-7325853

Bay Area Council Name of the organization

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

Parti

	(a) Name, address, and EIN (if applicable) 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	guillo
Bay Are 201 Cal	Bay Area Council, LLC - 27-0819073 201 California Street, Suite 1450 San Francisco CA 94111	Pass thru organization for China WOFE	California	<15,484,	. 444,436,	Bay Area Council 501(c)4	1
Part II	Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)	ations (Complete if the organization an	Iswered "Yes" to Form 990, Pa	rt IV, line 34 because	et had one or more r	related tax-exempt	

כוממוודמוניוס מסוווופ ווויס וויס וויס וויס וויס וויס וו							
(a)	(q)	(၁)	(p)	(e)	(J)	(g) Section 512(b)(13)	2(b)(13)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section	Direct controlling entity	controllec entity?	led ?
				501(c)(3))		Yes	No
Bay Area Council Foundation - 20-1826827							
201 California Street, Suite 1450					Bay Area Council		
San Francisco CA 94111	Charitable Foundation	California	501(c)3	Line 7	501(c)4		×
	 						
	1						
	ſ			-		-	

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

Schedule R (Form 990) 2012

232161 12-10-12 LHA

23-7325853 Page 2

Schedule R (Form 990) 2012 Bay Area Council

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.) Part III

	Φ ^	ı				1			1			- 1			ı
¥	General or Percentage managing ownership														
	7 E C	9							\neg						
S	enera lanag lartne	YesNo					 					-	_		 _
	ğΕ <u>Ψ</u>	څ		-		\dashv	 		\dashv			_			
≘	Disproportion- Code V-UBI amount in box ate allocations?	.1 (Form 1065													
	100	15				-						\dashv			
_	tions	2							i						
Ξ	oropo Illoca	S				\dashv			\dashv			7			 -
	Disp ate a	Ye													
(b)	Share of end-of-year	doodlo													
			-	_						_					
€	Share of total income														,
	<u>v</u>														
	(related, unrelated,	2-514)													
<u>e</u>	nant E in in	s 51													
	ated	ign													
	P.e.	Se													
		Ď					 								
	j j														
_	at 5														
0	Direct controlling entity														
	rect														
	ቯ									_					
	교육하	<u>ج</u> کے					 	_		_	_			_	
છ	Legal domicile (state or	foreig							ļ						
		- 0								_					
	≥					ļ									
	Primary activity														
9	ر ح														
	mar														
	P.														
			<u> </u>												 _
	7														
	E E														
	anc anc														
(a)	ess, rgar														
(9	ddre 3d o														
	e, a slate														
	Name, address, and EIN of related organization									İ					
	_				ĺ			'							

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.) Part IV

											_
	(13 2 13 13 13 13 13 13 13 13 13 13 13 13 13	٥								
		512(b)(13) controlled entity?	Yes								
- 1	£	Percentage ownership									
	(6)	Share of end-of-year	assers								
		Share of total income									
	(e)	Type of entity (C corp, S corp,	or trust)								
	(g)	Legal domicile Direct controlling Ty (Controlling Controlling Co									
	<u> </u>	Legal domicile (state or	country)								
	(9)	Primary activity									
organizations treated as a corporation of the corporations	(a)	Name, address, and EIN of related organization									

Schedule R (Form 990) 2012

Page 3

Part V Transactions With Related Organizations (Complete of the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.) Schedule R (Form 990) 2012 Bay Area Council

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Yes No
	s with one or more re	elated organizations listed	et 1	××
 b clift, grant, or capital contribution to related organization(s) c Gift, grant, or capital contribution from related organization(s) 			╂╌┼	+
			:	××
e Loans or loan guarantees by related organization(s)				4
f Dividends from related organization(s)			:	×
g Sale of assets to related organization(s)	:	÷		××
h Purchase of assets from related organization(s)		•	<u> </u>	4 ×
 Exchange of assets with related organization(s) Lease of facilities, equipment, or other assets to related organization(s) 				×
k Lease of facilities, equipment, or other assets from related organization(s)			· · ·	×
i Performance of services or membership or fundraising solicitations for related organization(s)	nization(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) 	nization(s) on(s) .		\dashv	×
o Sharing of paid employees with related organization(s)			9	×
p Reimbursement paid to related organization(s) for expenses	· ·	•	dt 19	××
	: :			
r Other transfer of cash or property to related organization(s)		·		××
	ho must complete t	his line, including covered		
(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	
(1) Bay Area Council Foundation	A	82,254.	FMV	
(2) Bay Area Council Foundation	Д	75,000.FMV	FMV	
(3) Bay Area Council Foundation	Z	77,221.		
(4) Bay Area Council Foundation	0	982,257.	FMV	
(5) Bay Area Council, LLC	Ą	30,883.	FMV	

Schedule R (Form 990) 2012

~	-
ß)
α)
Ľ	1
C	1
~	
	•
١	
~	1
C	۹

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2) Bay Area Council Schedule R (Form 990)

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(n)Bay Area Council, LLC	0	349,995.FMV	FMV
(6)			
(10)			
(11)			
(12)			
(13)			
(14)			
. (15)			
(16)			
(17)			
(18)			
(19)			
(20)			
(21)			
(22)			
(23)			
(24)			

Schedule R (Form 990) 2012 Bay Area Council

Part VI 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.

(h) (i) (j) (k)

DisproporCode V-UBI General or Percentage
bonate amount in box 20 managing ownership
allocations? of Schedule K-1 partner? ownership
Yes No (Form 1065) Yes No end-of-year Share of assets <u>6</u> (f) Share of total Income Predominant income parties sec (related, unrelated, orgs / excluded from tax under section 512-514) yes No ত্ত Legal domicile (state or foreign country) Primary activity Name, address, and EIN of entity

Schedule R (Form 990) 2012

Schedule R	(Form 990) 2012	<u>Bay Area</u>	Council	<u>23-7325853</u>	Page 5
Part VII	(Form 990) 2012 Supplemental I	nformation			
			rmation for responses to questions on Schedule R (see instr	uctions)	
	Complete this part to	o provide additional infor	mation for responses to questions on schedule in (see insti-	uctions)	
					
•	•				
			· · · · · · · · · · · · · · · · · · ·		
	-				
					_
				 	
	·		· 		
					
_					
·					
				<u></u>	
		 			-
		-			

Form 8868 (Rev. 1-2013)					Page 2
If you are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II and check this	box		► X
Note. Only complete Part II if you have already been granted an a	automatic	3-month extension on a previously fi	led Form	8868	
 If you are filing for an Automatic 3-Month Extension, complete 					
Part II Additional (Not Automatic) 3-Month E	xtensio	n of Time.Only file the origina	al (no co	opies need	ed).
		Enter filer's	identifyır	ng number, s	ee instructions
Type or Name of exempt organization or other filer, see instru-	ctions		Employe	ridentification	n number (EIN) or
File by the Bay Area Council			_	23-732	
of the date for filing your return See 201 California Street, No. 1		tions.	Social se	cunty numbe	er (SSN)
City, town or post office, state, and ZIP code. For a for San Francisco, CA 94111	oreign add	lress, see instructions.			
Enter the Return code for the return that this application is for (file	a separa	te application for each return)			0 1
Application	Return	Application			Return
ls For	Code	Is For			Code
Form 990 or Form 990-EZ	01				
Form 990-BL	02	Form 1041-A			08
Form 4720 (individual)	03	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 autor	natic 3-month extension on a previ	iously file	d Form 8868	3
		- 353 Sacramento St	treet	, 10th	Floor -
 The books are in the care of ► San Francisco, 	CA 9				
Telephone No ▶ (415)981-6600		FAX No. \triangleright (415)981-64	408		
 If the organization does not have an office or place of business 					L
 If this is for a Group Return, enter the organization's four digit (Group Exe	emption Number (GEN) If	this is fo	r the whole g	roup, check this
box 🕨 📖 . If it is for part of the group, check this box 🕨 📖		ch a list with the names and EINs of	all memb	ers the exten	sion is for.
	Novem	ber 15, 2013			
For calendar year 2012 , or other tax year beginning	_	, and ending)		<u> </u>
6 If the tax year entered in line 5 is for less than 12 months, c	heck reas	on·	→ Final r	eturn	
Change in accounting period					
7 State in detail why you need the extension					
We are currently undergoing a	cert	ified audit of fina			
and wish to await a completion			eturn	s will	be
filed as expeditiously as poss	sible	•			
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or	or 6069, e	nter the tentative tax, less any			•
nonrefundable credits. See instructions.		<u> </u>	8a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069,	-				
tax payments made include any prior year overpayment all	owed as	a credit and any amount paid			
previously with Form 8868			86	\$	
c Balance due. Subtract line 8b from line 8a Include your pa	•	h this form, if required, by using			
EFTPS (Electronic Federal Tax Payment System) See instru	uctions.		8c	\$	0.
		st be completed for Part II o			
Under penalties of perwey, I declare that I have examined this form, includi it is true, correct, and complete, and that I am authorized to prepare this fo	ing accomp irm.	anying schedules and statements, and to	the best o	f my knowledg	e and belief,
		dent/CEO	Date	► 11-1	1-13
					368 (Rev. 1-2013)