

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



Form 990-PF

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements Open to Public Inspection 10/9/2012 12/31/2012 For calendar year 2012 or tax year beginning , and ending Name of foundation Employer identification number 46-1164217 Start It Foundation Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) Foundation Source 501 Silverside Rd 123 (800) 839-1754 City or town, state, and ZIP code C If exemption application is pending, check here 19809-1377 Wilmington G Check all that apply Initial return Initial return of a former public charity D 1. Foreign organizations, check here Amended return Final return 2 Foreign organizations meeting the 85% test, Address change Name change check here and attach computation X Section 501(c)(3) exempt private foundation H Check type of organization E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end J Accounting method X Cash Accrual F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here Other (specify) of year (from Part II, col (c), 504,154 (Part I, column (d) must be on cash basis) Ine 16) ► \$ Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily equal expenses per ıncome income purposes hooks the amounts in column (a) (see instructions)) (cash basis only) 510.000 Contributions, gifts, grants, etc., received (attach schedule) Check ▶ If the foundation is not required to attach Sch B Interest on savings and temporary cash investments Dividends and interest from securities 5 a Gross rents b Net rental income or (loss) 6 a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) Net short-term capital gain S. ARENTO Income modifications . 10 a Gross sales less returns and allowances **b** Less Cost of goods sold. c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 . 510,004 13 Compensation of officers, directors, trustees, etc Expenses 14 Other employee salanes and wages 15 Pension plans, employee benefits . . 16 a Legal fees (attach schedule) . **b** Accounting fees (attach schedule) . Operating and Administrative (V) c Other professional fees (attach schedule) . 17 Interest 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy . 21 Travel, conferences, and meetings . 22 Printing and publications 23 5,850 5,850 Other expenses (attach schedule) 24 Total operating and administrative expenses. 5,850 5,850 Add lines 13 through 23 . . . 25 Contributions, gifts, grants paid . . 26 Total expenses and disbursements Add lines 24 and 25 0 5.850 5,850 Subtract line 26 from line 12 504,154 a Excess of revenue over expenses and disbursements. 4 **b Net investment income** (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)



| Da | at II | Balance Sheets Attached schedules and amounts in the description column | Beginning of year | Er | nd of year |
|--|--------------------------------------|---|-----------------------|---------------------------------------|-----------------------|
| Pal | Œ | should be for end-of-year amounts only (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash—non-interest-bearing | | | |
| - 1 | 2 | Savings and temporary cash investments | - | 504,1 | 54 504,154 |
| | 3 | Accounts receivable | | | |
| Assets 1 2 3 4 5 6 7 7 8 9 9 10 2 8 | Less allowance for doubtful accounts | | | | |
| Assets Liabilities Assets Liabilities Liab | Pledges receivable | | | | |
| | | Less allowance for doubtful accounts | | | |
| | 5 | Grants receivable | | | |
| | 6 | Receivables due from officers, directors, trustees, and other | | | |
| | _ | disqualified persons (attach schedule) (see instructions) | <u> </u> | | |
| | 7 | Other notes and loans receivable (attach schedule) | | | |
| | | Less allowance for doubtful accounts | | | - |
| ets | | Inventories for sale or use | | | |
| SS | | Prepaid expenses and deferred charges | | | |
| ¥ | | a Investments—US and state government obligations (attach schedule) | | ···· | |
| | | b Investments—corporate stock (attach schedule) | | · · · · · · · · · · · · · · · · · · · | |
| | | c Investments—corporate bonds (attach schedule) | | | |
| | 77 | Investments—land, buildings, and equipment basis | | | |
| | 40 | Less accumulated depreciation (attach schedule) | | | |
| | | Investments—mortgage loans | | | |
| | | Investments—other (attach schedule) | | | |
| | 14 | Land, buildings, and equipment basis ▶ | | | |
| | 45 | Less accumulated depreciation (attach schedule) | | | |
| | | Other assets (describe | | · | |
| | 10 | Total assets (to be completed by all filers—see the instructions. Also, see page 1, item l) | ol | 504,1 | 154 504,154 |
| | 17 | Accounts payable and accrued expenses | | 001,1 | 001,10 |
| | | Grants payable | | | |
| ies | | Deferred revenue | | | |
| Ħ | | Loans from officers, directors, trustees, and other disqualified persons | * | | |
| jab | | Mortgages and other notes payable (attach schedule) | | | |
| _ | 22 | Other liabilities (describe | | | |
| | 23 | Total liabilities (add lines 17 through 22) | 0 | | 0 |
| | | Foundations that follow SFAS 117, check here | | | |
| es | | and complete lines 24 through 26 and lines 30 and 31. | | | |
| Ĕ | 24 | Unrestricted | | | |
| ä | 25 | Temporanly restricted | | | |
| 8 | 26 | Permanently restricted | | | |
| Ĕ | | Foundations that do not follow SFAS 117, check here X | | | |
| Ē | | and complete lines 27 through 31. | | | |
| 0 | 27 | Capital stock, trust principal, or current funds | | | |
| ets | 28 | Paid-in or capital surplus, or land, bldg, and equipment fund | | | |
| SS | 29 | Retained earnings, accumulated income, endowment, or other funds. | | 504,1 | 154 |
| tΑ | 30 | Total net assets or fund balances (see instructions) | 0 | 504,1 | 154 |
| Se | 31 | Total liabilities and net assets/fund balances (see | | | |
| | | instructions) | 0 | 504,1 | 154 |
| | rt-III | Analysis of Changes in Net Assets or Fund Balances | | | |
| 1 | | I net assets or fund balances at beginning of year—Part II, column (a), line | ਤਹ (must agree with | | |
| _ | | of-year figure reported on prior year's return) | | · - | 1 (|
| 2 | | r amount from Part I, line 27a | | | 2 504,154 |
| 3 | | er increases not included in line 2 (itemize) | | | 504.15 |
| 4 | | | | | 4 504,154 |
| 5 6 | | eases not included in line 2 (itemize) I net assets or fund balances at end of year (line 4 minus line 5)—Part II, c | | | |
| _6_ | rota | i net assets or fund balances at end of year (line 4 minus line 5)—Part II, c | oranni (b), iine 30 . | | 6 504,154 |

| | Foundation | | | | 46 | 6-1164217 Page 3 |
|---|---|-------------------|--|--|------------------------------|--|
| Part IV Capital Gains | and Losses for Tax on Inve | <u>estment In</u> | | | | |
| | the kind(s) of property sold (e.g., real estatouse, or common stock, 200 shs MLC Co | | (b) How acquired P—Purchase D—Donation | | Date acquired mo , day, yr) | (d) Date sold (mo , day, yr) |
| <u> </u> | | | D Donation | İ | | |
| b | | | | | | |
| С | | | | | | |
| <u>d</u> | _ | | | <u> </u> | | - |
| <u>e</u> | | | <u> </u> | 1 | | <u></u> |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | | est or other basis expense of sale | | , , | in or (loss) (f) minus (g) |
| a | | | | | | |
| b | | <u> </u> | | | | |
| <u>c</u> | | | | | | |
| <u>d</u> | - | | | | | |
| Complete only for assets sh | owing gain in column (h) and owne | d by the found | lation on 12/31/69 | | (I) Coinc (Co | ol /h) goin minus |
| Complete only for assets sit | (j) Adjusted basis | 1 | xcess of col (i) | 1 | | ol (h) gain minus ot less than -0-) or |
| (i) F M V as of 12/31/69 | as of 12/31/69 | | r col (j), if any | | | from col (h)) |
| a | | ļ | | <u> </u> | <u></u> | |
| <u>b</u> | | | | ļ | | |
| <u>c</u> | | | | ├ ─ | | |
| e e | | | | | | |
| | [If gain. | also enter in | Part I, line 7 | <u> </u> | · | |
| 2 Capital gain net income of | | enter -0- ın | | 2 | | 0 |
| 3 Net short-term capital gai | in or (loss) as defined in sections | s 1222(5) and | d (6) | | | |
| If gain, also enter in Part | I, line 8, column (c) (see instruct | ions) If (loss |), enter -0- | | | |
| ın Part I, line 8 . | <u> </u> | • | <u></u> | 3 | | 0 |
| | nder Section 4940(e) for R | | | | | |
| (For optional use by domestic | c private foundations subject to t | he section 4 | 940(a) tax on net inv | estme | ent income.) | |
| If section 4940(d)(2) applies, | leave this part blank. | | | | | |
| | the section 4942 tax on the disti | ributable amo | ount of any year in th | ne bas | e period? | ☐ Yes ☐ No |
| | not qualify under section 4940(e | | * * | .0 .00 | о ролос | |
| | mount in each column for each y | | | nakınd | anv entries | |
| (a) | | ,, | (c) | | | (d) |
| Base period years Calendar year (or tax year beginnin | (b) Adjusted qualifying distribution | ons Net va | lue of noncharitable-use | ssets | I | stribution ratio divided by col (c)) |
| 2011 | 9 117 | | | | (00) (0) | 0.000000 |
| 2010 | | | | | | 0 000000 |
| 2009 | | | | | | 0 000000 |
| 2008 | | | _ | | | 0 000000 |
| 2007 | | | | | <u> </u> | 0 000000 |
| | | | | | | 0.000000 |
| 2 Total of line 1, column (d |)....... for the 5-year base period—div | | | • | 2 | 0.000000 |
| | for the 5-year base period—div foundation has been in existence | | | | 3 | 0 000000 |
| the number of years the | dulidation has been in existence | o ii icoo tilali | o years | | | |
| 4 Enter the net value of no | ncharitable-use assets for 2012 | from Part X, | line 5 . | | 4 | |
| 5 Multiply line 4 by line 3 | | | | | 5 | |
| | | - \ | | | 6 | |
| 6 Enter 1% of net investme | ent income (1% of Part I, line 27b | 0) . | | | 6 | 0 |
| 7 Add lines 5 and 6 | | | | | 7 | 0 |

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See

8 Enter qualifying distributions from Part XII, line 4

the Part VI instructions.

0

| Form | 990-PF (2012) | Start It Foundation | | 46-1164 | 217 | Pa | ge 4 |
|--------|---------------------|---|------------|-------------|------|-----|-------------|
| Pại | t VI | Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948- | -see | instructi | ons) | | |
| 1 a | Exempt operating | ig foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. | | | | | |
| | | determination letter (attach copy of letter if necessary—see instructions) | | | | |] |
| b | | ations that meet the section 4940(e) requirements in Part V, check | 1 | | | | |
| | | nd enter 1% of Part I, line 27b | | | | | |
| C | | tic foundations enter 2% of line 27b Exempt foreign organizations enter 4% | | | | | |
| _ | of Part I, line 12, | • • • | ا م | | | اہ | |
| 2 | | on 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) . | 3 | | | 0 | |
| 3 | Add lines 1 and | | 4 | | | 씍 | |
| 4 5 | • | ne) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) nvestment income. Subtract line 4 from line 3 If zero or less, enter -0 | 5 | | | 0 | |
| 6 | Credits/Paymen | | <u> </u> | | | ┈┤ | |
| | - | tax payments and 2011 overpayment credited to 2012 . 6a 6 | | | | | |
| | | organizations—tax withheld at source 6b | | | | | |
| | | opplication for extension of time to file (Form 8868) 6c | | | | | |
| | • | ding erroneously withheld 6d | 1 | | | | ļ |
| 7 | • | d payments Add lines 6a through 6d | 7 | | | 0 | |
| 8 | Enter any pena | Ity for underpayment of estimated tax. Check here | 8 | | | | |
| 9 | Tax due. If the t | otal of lines 5 and 8 is more than line 7, enter amount owed | 9 | | | 0 | |
| 10 | Overpayment. | If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | 10 | | | 0 | |
| 11 | | nt of line 10 to be Credited to 2013 estimated tax ► Refunded ► | 11 | <u> </u> | | 0 | |
| Par | t VII-A State | ments Regarding Activities | | | | | |
| 1 a | | ear, did the foundation attempt to influence any national, state, or local legislation or did it | | | | Yes | No |
| | participate or int | tervene in any political campaign? | | | 1a | | <u> </u> |
| b | Did it spend mo | re than \$100 during the year (either directly or indirectly) for political purposes (see | | | | | |
| | Instructions for t | | | | 1b | | X |
| | | "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials | | | ļ | ļ | |
| _ | • | stributed by the foundation in connection with the activities | | | 10 | | X |
| | | on file Form 1120-POL for this year? nt (if any) of tax on political expenditures (section 4955) imposed during the year | • | • | 1c | | ^ |
| u | | ndation. ► \$(2) On foundation managers ► \$ | | | | | |
| ٥ | | ursement (if any) paid by the foundation during the year for political expenditure tax imposed | | | | | |
| · | | nanagers > \$ | | | | | |
| 2 | | tion engaged in any activities that have not previously been reported to the IRS? | | . | 2 | | X |
| | | a detailed description of the activities | | | | | |
| 3 | Has the foundat | tion made any changes, not previously reported to the IRS, in its governing instrument, articles | | | | | |
| | of incorporation | , or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | | | 3 | | X |
| 4 a | Did the foundati | on have unrelated business gross income of \$1,000 or more during the year? | | | 4a | | X |
| b | • | iled a tax return on Form 990-T for this year? | • | | | N/A | |
| 5 | • | uldation, termination, dissolution, or substantial contraction during the year? | | | 5 | | Х |
| _ | • | the statement required by General Instruction T | | | | | |
| 6 | | ments of section 508(e) (relating to sections 4941 through 4945) satisfied either | | | | | |
| | | In the governing instrument, or slation that governing instrument so that no mandatory directions | | | | | |
| | , , | n the state law remain in the governing instrument? | | | | X | |
| 7 | | ion have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), ar | ıd Par | t XV | 7 | X | |
| | | to which the foundation reports or with which it is registered (see instructions) | | | | | |
| | DE | , to which the federal of the first the federal of | | | | | |
| b | | "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney | | | | | ļ |
| | | signate) of each state as required by General Instruction G? If "No," attach explanation . | | | 8b | X | |
| 9 | | n claiming status as a private operating foundation within the meaning of section 4942(j)(3) | | i | | | |
| | or 4942(j)(5) for | calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," | | | | | |
| | complete Part | | | • | 9 | | Х |
| 10 | | s become substantial contributors during the tax year? If "Yes," attach a schedule listing | | | | | |
| | their names an | d addragear | | | 100 | У | |

| Form | 990-PF (2012) Start It Foundation 46-11 | <u>64217</u> | Pi | age 5 |
|------|---|--------------|--------------|--|
| Pạr | t VII-A Statements Regarding Activities (continued) | | | |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) | 11 | | × |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had | | | |
| | advisory privileges? If "Yes," attach statement (see instructions) | 12 | | X |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | Х | |
| | Website address | | | |
| 14 | The books are in care of ▶ c/o Foundation Source Telephone no. ▶ | (800 |) 839- | 1754 |
| | Located at ► 501 Silverside Road, Suite 123 Wilmington DE ZIP+4 ► 19809-137 | 7 | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here | | • | · 🗆 |
| | and enter the amount of tax-exempt interest received or accrued during the year ▶ 15 | | | |
| 16 | At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority | | Yes | No |
| | over a bank, securities, or other financial account in a foreign country? | 16 | L | |
| | See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes," enter the name of | | 1 | |
| | the foreign country | | | |
| Pai | rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | , | |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Yes | _No_ |
| 1a | During the year did the foundation (either directly or indirectly) | | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | 1 | | |
| | a disqualified person? Yes X No | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No | | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" | | | |
| | If the foundation agreed to make a grant to or to employ the official for a period | | | |
| | after termination of government service, if terminating within 90 days) Yes X No | | | |
| b | If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations | | | |
| | section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | 1b | N/A | |
| | Organizations relying on a current notice regarding disaster assistance check here | | | |
| С | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2012? | 1c | | |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private | | | |
| | operating foundation defined in section 4942(j)(3) or 4942(j)(5)) | | | |
| а | At the end of tax year 2012, did the foundation have any undistributed income (lines 6d | | | |
| | and 6e, Part XIII) for tax year(s) beginning before 2012? Yes X No | | | |
| | If "Yes," list the years 20 , 20 , 20 , 20 | | | |
| b | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) | 1 | | |
| | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) | | | |
| | to all years listed, answer "No" and attach statement—see instructions) | 2b | N/A | |
| С | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20 | | | |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? | | | |
| b | If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation | | | |
| | or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved | 1 | | |
| | by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) | | | |
| | the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine | | | |
| | If the foundation had excess business holdings in 2012) | 3b | N/A | |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes? | 4a | | Х |
| b | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable | | | |
| | purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012? | 4b | | Х |
| · | | Form 9 | 90-PF | (2012) |

| -om | 990-PF (2012) Start It Foundation | | | | | | | | 40 | 5-116 | 121 / | P | age o |
|-------------|---|----------|--|----------|-------------------------|-------|-------------------------------|-----------------------|----------------|--------|------------------|----------|-------|
| Pa | t VII-B Statements Regarding Activit | ties | for Which For | m 4 | 1720 May Be | Rec | uired (co | ontinu | ed) | | | | |
| 5a | During the year did the foundation pay or incur any | amo | unt to | | | | _ | _ | _ | | | | |
| | (1) Carry on propaganda, or otherwise attempt to | o ınflu | ience legislation (s | ecti | on 4945(e))? | | | Yes | X | No | | | |
| | (2) Influence the outcome of any specific public of | electi | on (see section 49 | 55), | or to carry | | _ | _ | _ | | | | |
| | on, directly or indirectly, any voter registration | n drıv | e? | | • | | L | Yes | X | No | | | |
| | (3) Provide a grant to an individual for travel, stu | dy, o | other similar purp | ose | s? | | . [| Yes | \mathbf{x} | No | | | |
| | (4) Provide a grant to an organization other than | a ch | aritable, etc , orgai | nıza | on described | | | _ | | | | | |
| | in section 509(a)(1), (2), or (3), or section 49- | 40(d) | (2)? (see instruction | ns) | | | . [| Yes | X | No | | | |
| | (5) Provide for any purpose other than religious, | chan | table, scientific, lite | eran | , or | | _ | _ | \equiv | | | 1 | |
| | educational purposes, or for the prevention o | of crue | elty to children or a | nım | als? . | | | Yes | X | No | | | |
| b | If any answer is "Yes" to 5a(1)-(5), did any of the t | ransa | ctions fail to qualif | y ur | der the exception | ns de | scribed in | | | | | | |
| | Regulations section 53 4945 or in a current notice | regar | ding disaster assis | tand | æ (see instructioi | าร)? | | | <u></u> | | 5b | N/A | |
| | Organizations relying on a current notice regarding | l disa | ster assistance ch | eck | here | | | • | ·Ш | | | | |
| C | If the answer is "Yes" to question 5a(4), does the fo | ounda | ation claim exempt | ion 1 | rom the | | _ | _ | _ | | | | |
| | tax because it maintained expenditure responsibilit | - | _ | | • • • | | | Yes | Ш | No | | | |
| | If "Yes," attach the statement required by Regulat | | | | | | | | | | | | |
| ба | Did the foundation, during the year, receive any fur | nds, c | lirectly or indirectly | , to | pay | | | ٦ . | | | | | |
| _ | premiums on a personal benefit contract? | | | • • | | | · · L | Yes | X | No | | | J |
| b | Did the foundation, during the year, pay premiums, | , dire | ctly or indirectly, or | nap | ersonal benefit c | ontra | ct?. | | | | 6b | | X |
| 7 . | If "Yes" to 6b, file Form 8870 | | | . | - h - là à à | 2 | | ٦٧ | $ \mathbf{x} $ | N. | | | |
| | At any time during the tax year, was the foundation If "Yes," did the foundation receive any proceeds of | - | • | | | | | Yes | | No | 7b | N/A | |
| | art VIII Information About Officers, | | | | | | | liably | Dai | d Em | | | |
| | and Contractors | , Dii | ectors, riuste | сэ, | i oundation | IVIAI | iageis, i | ngmy | ran | u LIII | рюу | ccs, | |
| 1 | List all officers, directors, trustees, foundat | tion i | managers and t | neir | compensation | (se | e instructi | ons). | | | | | |
| <u> </u> | | (b) | Title, and average | (c |) Compensation | | (d) Contribu | tions to | | (0) | Evnens | se accou | unt |
| | (a) Name and address | | hours per week evoted to position | (H | not paid, enter -0-) | | employee ber d deferred co | | | | | owance | |
| SE | ATTACHMENT | | , | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | <u> </u> | | | | | | | | | | | |
| | | 1 | | | | | | | | | | | |
| | | <u> </u> | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| _ | | <u> </u> | -414141 | . : | alandan lina | | : | 4:1 | 16 | | | | |
| 2 | Compensation of five highest-paid employe enter "NONE." | ees (| otner than those | e in | ciuaea on line | 1—S | ee instrud | uons) | . IT NO | one, | | | |
| | enter NONE. | | | | | | (d) Contr | hutions | 0 | | | | |
| (a |) Name and address of each employee paid more than \$50,0 | 300 | (b) Title, and avera hours per week | ge | (c) Compensation | n I | employe | e benefi | t | | | se acco | |
| , | , | | devoted to position | n | () - (| | | d deferre ensation | a | c | tner all | owance | es |
| NO | NE | | | | | | | | | | | | |
| | | | | 00 | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | 00 | | | | | | | | | |
| | | | li | | | | | | | | | | |
| | | | | 00 | | | | | | | | | |
| · - | | | | | | | | | | | | | |
| | | | | 00 | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | 00 | | | | | | | | | |

| form 990-PF (2012) Start It Foundation | | 16-1164217 Page |
|---|---|------------------|
| Part VIII Information About Officers, Directors, Trustees, | Foundation Managers, Highly Paid | l Employees, |
| and Contractors (continued) | | |
| 3 Five highest-paid independent contractors for professional services (se | e instructions). If none, enter "NONE." | |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Total number of others receiving over \$50,000 for professional services | | |
| | | |
| Part IX-A Summary of Direct Charitable Activities | | |
| List the foundation's four largest direct chantable activities during the tax year. Include relevant st | atistical information such as | Expenses |
| the number of organizations and other beneficiaries served, conferences convened, research page | pers produced, etc | Expenses |
| 1 | | |
| | | |
| | | |
| 2 | | |
| | | |
| | | |
| 3 | | |
| | | |
| | | |
| 4 | | |
| | | |
| | | |
| Part IX-B Summary of Program-Related Investments (see | instructions) | |
| Describe the two largest program-related investments made by the foundation during the tax year | | Amount |
| 1 | | |
| | | |
| | | |
| 2 | | |
| | | |
| | | |
| All other program-related investments See instructions | | |
| 3 | | |
| · | | |
| | | |

Total. Add lines 1 through 3

| Form 990-PF (2012) | Start It Foundation |
|--------------------|-----------------------|
| | Start it i Guirdation |

46-1164217 Page **8**

| P.ar | Minimum Investment Return (All domestic foundations must complete this part. Foreign | ı foundatıo | ns, |
|----------|--|-------------|--------|
| | see instructions.) | | |
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., | | |
| | purposes | <u> </u> | |
| а | Average monthly fair market value of securities | 1a | 0 |
| b | Average of monthly cash balances | 1b | 85,409 |
| С | Fair market value of all other assets (see instructions) | 1c | 0 |
| d | Total (add lines 1a, b, and c) | 1d | 85,409 |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | '9.", | |
| | 1c (attach detailed explanation) | -, , | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | |
| 3 | Subtract line 2 from line 1d | 3 | 85,409 |
| 4 | Cash deemed held for charitable activities. Enter 1 ½ % of line 3 (for greater amount, see | | |
| | ınstructions) | 4 | 1,281 |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 | 5 | 84,128 |
| 6 | Minimum investment return. Enter 5% of line 5 . MIR Proratet R-PS honter Tax Year | 6 | 968 |
| Par | t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating | | |
| | foundations and certain foreign organizations check here And do not complete this part) | | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 968 |
| 2a | Tax on investment income for 2012 from Part VI, line 5 2a | . | |
| b | Income tax for 2012 (This does not include the tax from Part VI) | | |
| С | Add lines 2a and 2b | 2c | |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 968 |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | |
| 5 | Add lines 3 and 4 | 5 | 968 |
| 6 | Deduction from distributable amount (see instructions) | 6 | |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, | | |
| | line 1 | | 968 |
| Par | Qualifying Distributions (see instructions) | | |
| | | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes | <u> </u> | |
| а | Expenses, contributions, gifts, etc —total from Part I, column (d), line 26 | 1a | 5,850 |
| b | Program-related investments—total from Part IX-B | 1b | |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., | | |
| _ | purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the | | |
| a | Suitability test (prior IRS approval required) | 3a | |
| b | Cash distribution test (attach the required schedule) | 3b | |
| 4 | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 5,850 |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | _ | |
| _ | income Enter 1% of Part I, line 27b (see instructions) | 5 | |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 5,850 |
| | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the four | dation | |
| | qualifies for the section 4940(e) reduction of tax in those years. | | |

| ar. | Undistributed income (see instructions) | | | | |
|-----|--|---------------|----------------------------|--------------|--------------|
| 1 | Distributable amount for 2012 from Part XI, | (a) Corpus | (b) Years prior to 2011 | (c) 2011 | (d) 2012 |
| | line 7 | | | | 968 |
| 2 | Undistributed income, if any, as of the end of 2012 | | | | |
| а | Enter amount for 2011 only | | | 0 | |
| b | | | | | |
| 3 | Excess distributions carryover, if any, to 2012 | | | | |
| а | From 2007 | | | | |
| b | From 2008 | | | | |
| C | From 2009 | | | | |
| d | From 2010 . | | | | |
| е | From 2011 | | | | |
| f | Total of lines 3a through e | 0 | | | |
| 4 | Qualifying distributions for 2012 from Part | | | | |
| | XII, line 4 ► \$5,850 | | | | |
| а | Applied to 2011, but not more than line 2a . | | | | |
| þ | Applied to undistributed income of prior years | | | | |
| | (Election required—see instructions) | | | | |
| C | Treated as distributions out of corpus (Election | | | | |
| | required—see instructions) | ** | | | |
| d | Applied to 2012 distributable amount | | | | 968 |
| е | · · · · · · · · · · · · · · · · · · · | 4,882 | | | |
| 5 | Excess distributions carryover applied to 2012 . | | | | |
| | (If an amount appears in column (d), the | | | | |
| _ | same amount must be shown in column (a)) | | | | |
| 6 | Enter the net total of each column as | | | | |
| | indicated below: | 4.000 | | : | |
| a | | 4,882 | | | |
| C | Prior years' undistributed income Subtract | | _ | | |
| | line 4b from line 2b | | 0 | | |
| C | Enter the amount of prior years' undistributed | | | | |
| | income for which a notice of deficiency has | | | | |
| | been issued, or on which the section 4942(a) | | | | |
| _ | tax has been previously assessed | | | | |
| C | | | | | |
| | amount—see instructions | | | | |
| € | Undistributed income for 2011. Subtract line | | | | |
| | 4a from line 2a Taxable amount—see | | | ا | |
| | instructions | | | U | |
| f | Undistributed income for 2012 Subtract lines 4d and 5 from line 1. This amount must | | | | |
| | | | | | o |
| 7 | be distributed in 2013 | | | - | |
| ′ | | | | | |
| | corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions). | | | | ' |
| 8 | Excess distributions carryover from 2007 | | <u> </u> | | |
| 0 | not applied on line 5 or line 7 (see instructions) | | | | |
| 9 | · · · · · · · · · · · · · · · · · · · | | | - | |
| J | Excess distributions carryover to 2013. | 4,882 | | | |
| 10 | Subtract lines 7 and 8 from line 6a | 4,002 | | | |
| 10 | Analysis of line 9 | | | | |
| | Excess from 2008 | | | | |
| | Excess from 2009 | | | | |
| | | | | | |
| | Excess from 2011 | | | | |

| | t XIV Private Operating Foundations (| coo instructions | and Bart VIII A | augstion (1) | 46-116 | N/A Page 10 |
|----|--|-----------------------|-----------------------|--------------------------|------------------|--------------|
| | If the foundation has received a ruling or determina | | | t, question 9) | | 11// |
| | foundation, and the ruling is effective for 2012, enter | | | • | | |
| b | Check box to indicate whether the foundation is a p | | - | ın section | 4942(j)(3) or | r 4942(j)(5) |
| | Enter the lesser of the adjusted net | Tax year | T | Prior 3 years | | |
| | income from Part I or the minimum investment return from Part X for each | (a) 2012 | (b) 2011 | (c) 2010 | (d) 2009 | (e) Total |
| | year listed | (-) | (, | (4) 22.12 | (-, | 0 |
| h | 85% of line 2a | | | | | 0 |
| | Qualifying distributions from Part XII, | | | | | |
| | line 4 for each year listed | | | | | 0 |
| d | Amounts included in line 2c not used directly | | | | | |
| | for active conduct of exempt activities | | | | | 0 |
| е | Qualifying distributions made directly | | | | | |
| | for active conduct of exempt activities Subtract line 2d from line 2c | | | | | • |
| 3 | Complete 3a, b, or c for the | - | | + | | 0 |
| | alternative test relied upon | | | | | |
| а | "Assets" alternative test—enter | | | | 1 | • |
| | (1) Value of all assets | | | | | 0 |
| | (2) Value of assets qualifying | | | | | |
| L | under section 4942(j)(3)(B)(i) | | 1 | 1 | 1 | 0 |
| IJ | of minimum investment return shown in | | | | | |
| | Part X, line 6 for each year listed | | | | | 0 |
| C | "Support" alternative test—enter | | | | | |
| | (1) Total support other than gross investment income (interest, | | | | | |
| | dividends, rents, payments | | | | 1 | |
| | on securities loans (section 512(a)(5)), or royalties) | | | | | _ |
| | , | <u> </u> | | | | 0 |
| | (2) Support from general public and 5 or more exempt | | | | | |
| | organizations as provided in section 4942(j)(3)(B)(III) | | | | | _ |
| | - | | | | | . 0 |
| | (3) Largest amount of support from an exempt organization | | | | | o |
| | (4) Gross investment income | | | | | 0 |
| Pa | rt XV Supplementary Information (Co | mplete this par | rt only if the fo | undation had \$ | 5.000 or more in | <u> </u> |
| | assets at any time during the ye | | | • | ., | |
| 1 | Information Regarding Foundation Manage | | | | | |
| а | List any managers of the foundation who have con | | | | | |
| | before the close of any tax year (but only if they ha | ive contributed mor | e than \$5,000) (Se | ee section 507(d)(2)) | | |
| | vin Robert Cheung | | | | | |
| t | List any managers of the foundation who own 10% ownership of a partnership or other entity) of which | | | | ortion of the | |
| NC | NE | Title tourioution has | su rom or greater | microst | | |
| 2 | Information Regarding Contribution, Grant, | Gift, Loan, Scho | olarship, etc., Pro | ograms: | | |
| - | Check here ► X if the foundation only makes | • | • • • | _ | loes not accept | |
| | unsolicited requests for funds. If the foundation ma | | | | | |
| _ | other conditions, complete items 2a, b, c, and d | | | | | |
| а | The name, address, and telephone number or e-m | all of the person to | whom applications | should be addresse | d | |
| | | | | | | |
| - | The form in which applications should be submitte | d and information a | nd materials they s | should include | | |
| • | , | | , | | | |
| | Ann anternacion deservationes | | | | | - |
| (| : Any submission deadlines | | | | | |
| | | | | | | |
| (| Any restrictions or limitations on awards, such as t factors | by geographical are | as, charitable fields | s, kinds of institutions | s, or otner | |
| | | | | | | |
| | | | | | | |

| - 4 | oupplementary information (continu | | | | |
|-----|---|--|----------------------|----------------------------------|--|
| 3 | Grants and Contributions Paid During th | e Year or Approved | for Future | Payment | |
| | Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | Amount |
| | Name and address (home or business) | or substantial contributor | recipient | | |
| a | Name and address (home or business) Paid during the year | | Tecipient | | |
| | | | | | |
| | T-4-1 | <u> </u> | | <u> </u> | |
| b | Total | T | · · | <u>▶ 3a</u> | 0 |
| | | | | | |
| | Takal | _ | | ► 2h | |

| Enter gross amounts unless otherwise indicated. | Unrelated bus | iness income | Excluded by section | n 512, 513, or 514 | (e) |
|---|----------------------|----------------------|------------------------------|----------------------|--|
| 1 Program service revenue | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | Related or exempt function income (See instructions) |
| a | | | 7 | _ | |
| b | | | | | |
| С | | | | | |
| d | | | | | |
| e | | | | | |
| f | | | | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash investments | | | 14 | 4 | |
| # Douglands and interest from a country | | | • | 7 | |
| 5 Net rental income or (loss) from real estate | | | • | | |
| Bold Consultation | | | | | |
| · · · · | | | | | |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal property | | | | | |
| 7 Other investment income | | | | | |
| 8 Gain or (loss) from sales of assets other than inventory . | | | | | |
| 9 Net income or (loss) from special events . | | | | | |
| O Gross profit or (loss) from sales of inventory | | | | | |
| 1 Other revenue a | | | | | |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| | | | | | |
| e | | | | | <u> </u> |
| 2 Subtotal Add columns (b), (d), and (e) | | 0 | | 4 | _ |
| 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) | | | | 13 | 0 |
| 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) | | • | | | _ |
| 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Acc | complishment | of Exempt F | Purposes | 13 | _ |
| 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Acc Line No. Explain below how each activity for which income | complishment | of Exempt F | Ourposes VI-A contributed in | 13 | 4 |
| 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Acc | complishment | of Exempt F | Ourposes VI-A contributed in | 13 | 4 |
| 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Acc Line No. Explain below how each activity for which income | complishment | of Exempt F | Ourposes VI-A contributed in | 13 | 4 |
| 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Acc Line No. Explain below how each activity for which income | complishment | of Exempt F | Ourposes VI-A contributed in | 13 | 4 |
| 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Acc Line No. Explain below how each activity for which income | complishment | of Exempt F | Ourposes VI-A contributed in | 13 | 4 |
| 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Acc Line No. Explain below how each activity for which income | complishment | of Exempt F | Ourposes VI-A contributed in | 13 | 4 |
| 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Acc Line No. Explain below how each activity for which income | complishment | of Exempt F | Ourposes VI-A contributed in | 13 | 4 |
| 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Acc Line No. Explain below how each activity for which income | complishment | of Exempt F | Ourposes VI-A contributed in | 13 | 4 |
| 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Acc Line No. Explain below how each activity for which income | complishment | of Exempt F | Ourposes VI-A contributed in | 13 | 4 |
| 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Acc Line No. Explain below how each activity for which income | complishment | of Exempt F | Ourposes VI-A contributed in | 13 | 4 |
| 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Acc Line No. Explain below how each activity for which income | complishment | of Exempt F | Ourposes VI-A contributed in | 13 | 4 |
| 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Acc Line No. Explain below how each activity for which income | complishment | of Exempt F | Ourposes VI-A contributed in | 13 | 4 |
| 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Acc Line No. Explain below how each activity for which income | complishment | of Exempt F | Ourposes VI-A contributed in | 13 | 4 |
| 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Acc Line No. Explain below how each activity for which income | complishment | of Exempt F | Ourposes VI-A contributed in | 13 | 4 |
| 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Acc Line No. Explain below how each activity for which income | complishment | of Exempt F | Ourposes VI-A contributed in | 13 | 4 |
| 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Acc Line No. Explain below how each activity for which income | complishment | of Exempt F | Ourposes VI-A contributed in | 13 | 4 |
| 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Acc Line No. Explain below how each activity for which income | complishment | of Exempt F | Ourposes VI-A contributed in | 13 | 4 |
| 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Acc Line No. Explain below how each activity for which income | complishment | of Exempt F | Ourposes VI-A contributed in | 13 | 4 |
| 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Acc Line No. Explain below how each activity for which income | complishment | of Exempt F | Ourposes VI-A contributed in | 13 | 4 |
| 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Acc Line No. Explain below how each activity for which income | complishment | of Exempt F | Ourposes VI-A contributed in | 13 | 4 |
| 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Acc Line No. Explain below how each activity for which income | complishment | of Exempt F | Ourposes VI-A contributed in | 13 | 4 |
| 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Acc Line No. Explain below how each activity for which income | complishment | of Exempt F | Ourposes VI-A contributed in | 13 | 4 |
| 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Acc Line No. Explain below how each activity for which income | complishment | of Exempt F | Ourposes VI-A contributed in | 13 | 4 |
| 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Acc Line No. Explain below how each activity for which income | complishment | of Exempt F | Ourposes VI-A contributed in | 13 | 4 |

| raitA | | • | _ | Sieis io aliu italisa | ictions and ite | iationompo w | | | | |
|--|------------|--|-------------------------|---|--------------------------------------|--------------------------|-----------------------------|----------------|----------|--------------|
| l Dia | | Exempt Organiza | | gage in any of the follow | and with any other | or organization do | scribed | | Yes | No |
| | | • | • | ection 501(c)(3) organiza | - | - | | | 169 | 140 |
| | anızatı | ` ' | (Otries trial) se | schort sort(c)(s) organiza | idons) or in scollo | in ozr, relating to | pontioui | | | |
| _ | | | | | | | | | | |
| | | from the reporting f | roundation to a | a noncharitable exempt of | organization of | | | 10/1) | | _ |
| . , | Cash | | | | | | • | 1a(1) 1a(2) | | X |
| ٠, | | assets | | • • | | | | 14(2) | \vdash | <u> </u> |
| | | of assets to a nonc | sharitable ever | mot organization | | | | 1b(1) | | X |
| | | | | ble exempt organization | • | | • | 1b(1) | | X |
| | | | | | • | • • | | 1b(3) | | X |
| (3) Rental of facilities, equipment, or other assets | | | | | | | | | | |
| ٠, | | s or loan guarantees | | | | | | 1b(4) 1b(5) | | X |
| | | - | | p or fundraising solicitati | | | | 1b(6) | | Х |
| | | | | s, other assets, or paid e | | | | 1c | | Х |
| | - | | _ | complete the following so | | (b) should always | show the fair n | narket | | |
| val | ue of th | ne goods, other ass | ets, or service | s given by the reporting | foundation If the | foundation receive | ed less than fa | ır marke | et | |
| val | ue in a | ny transaction or sh | arıng arrange | ment, show in column (d | the value of the | goods, other ass | ets, or services | receive | ed. | |
| (a) Line | no | (b) Amount involved | (c) Name | of noncharitable exempt organiz | zation (d) De | escription of transfers, | transactions, and sh | anng arra | ıngeme | nts |
| | | | | | | | | | | |
| | | | | | | · | | | | |
| | | | | | | | | | _ | |
| | | | | | | | | | | |
| | | | | · · · · | | | | | | |
| | | | | | | | | | | |
| | | | | , | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| _ | | | | | | | | - | | |
| | _ | | | | | | | | | |
| | | | | | | . | <u> </u> | | | |
| | | | | · | | | | | | |
| | \dashv | | | | | | | | | |
| | | | | | - | | _ - | | | |
| 2a Ist | he foui | ndation directly or in | ndirectly affiliat | ted with, or related to, or | ne or more tax-ex | empt organization | าร | | _ | |
| de | scribed | In section 501(c) of | f the Code (otl | her than section 501(c)(3 | 3)) or in section 5 | 27? | | res 🗓 | No | |
| b If" | Yes," c | omplete the following | ng schedule | | | | | | | |
| | | (a) Name of organization | | (b) Type of orga | inization | (c) | Description of relation | nship | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| _ | | | | | | | | | | |
| | | | | | | | | | | |
| | T | | | <u> </u> | | 1 | | | | |
| | 1 | | | this return, including accompanying so taxpayer) is based on all information | | | ledge and belief, it is tru | e, | | |
| Sign | Correct | i, and complete Declaration of | i preparer (outer trait | taxpayer) is based on an information (| or writer preparer rias arry | Kilowieuge | May the IRS | discuss th | ıs retun | n |
| Here | L . | ac on | _ | 14/9/13 | P | | with the prepare | _ | | 1 |
| | ' | nature of officer or twister | <u> </u> | | President | | instructions)? | X Y | es | No |
| | Sig | nature of officer or trustee Print/Type preparer's na | | Preparer's signature | 1 IUE | Date , | | PTIN | | |
| Paid | | i milo rype preparers na | ame | Freparer a signature | | Jaic , | Check I if | ' ''' | | |
| raiu Prepa | ror | Jeffrey D Haskell | | Jeffrey D. Haskel | il | 3/16/2013 | self-employed | P0134 | 5770 | |
| • | | | oundation Soul | | | | Firm's EIN ► 5 | 1-0398 | | |
| Use Ulily | | | | | | | | 0) 839-1 | | |

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

2012

| Name of the organization | | | Employer identification number |
|--|--|--|--|
| Start It Foundation | | | 46-1164217 |
| Start It Foundation Organization type (check | one) | ***** | 40-1104217 |
| | | | |
| Filers of: | Section: | | |
| Form 990 or 990-EZ | 501(c)() (ente | er number) organization | |
| | 4947(a)(1) nonexemp | pt charitable trust not treated as a private fo | undation |
| | 527 political organiza | ation | |
| Form 990-PF | X 501(c)(3) exempt priv | vate foundation | |
| | 4947(a)(1) nonexemp | pt charitable trust treated as a private found | ation |
| | 501(c)(3) taxable priv | vate foundation | |
| | s covered by the General Rul (7), (8), or (10) organization co | e or a Special Rule. an check boxes for both the General Rule a | nd a Special Rule See |
| General Rule | | | |
| | n filing Form 990, 990-EZ, or 9 one contributor Complete Pai | 990-PF that received, during the year, \$5,000 rts I and II |) or more (in money or |
| Special Rules | | | |
| sections 509(a)(1) | and 170(b)(1)(A)(vi) and recei | 990 or 990-EZ that met the 33 1/3% support wed from any one contributor, during the yea n 990, Part VIII, line 1h, or (ii) Form 990-EZ, | ar, a contribution of the greater |
| the year, total con | ributions of more than \$1,000 | filing Form 990 or 990-EZ that received from for use <i>exclusively</i> for religious, charitable, sy to children or animals. Complete Parts I, II | scientific, literary, or |
| the year, contribut total to more than year for an exclus applies to this org | ons for use <i>exclusively</i> for relig \$1,000 If this box is checked, <i>vely</i> religious, charitable, etc, | filing Form 990 or 990-EZ that received from gious, charitable, etc., purposes, but these center here the total contributions that were repurpose. Do not complete any of the parts unonexclusively religious, charitable, etc., con | contributions did not received during the inless the General Rule |
| 990-EZ, or 990-PF), but it | nust answer "No" on Part IV, I | eral Rule and/or the Special Rules does not line 2 of its Form 990, or check the box on li meet the filing requirements of Schedule B | ne H of its Form 990-EZ or on |

| Schedule B (F | Form 990, 990-EZ, or 990-PF) (2012) | | Page 2 |
|----------------------------|--|-------------------------------------|--|
| Name of or Start It For | ganization undation | | Employer identification number 46-1164217 |
| Part I | Contributors (see instructions). Use duplicate copie | es of Part I if additional space is | s needed. |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | Cheung, Kevin Robert 6000 17th Avenue SW, #19 Seattle WA 98106 Foreign State or Province Foreign Country | \$510,000 | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | Foreign State or Province Foreign Country | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | Foreign State or Province Foreign Country | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | Foreign State or Province Foreign Country | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | Foreign State or Province Foreign Country | \$ | Person Payroll Occupation (Complete Part II if there is a noncash contribution) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | | Person Payroll |

Foreign State or Province

Foreign Country

(Complete Part II if there is a noncash contribution.)

Noncash

Name of organization

Employer identification number Start It Foundation 46-1164217

| Part II | Noncash Property (see instructions). Use duplicate co | opies of Part II if additional spa | ce is needed. |
|---------------------------|---|--|----------------------|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |

| Name of or Start It Fou | | | | | Employer identification number | | | | | |
|----------------------------|--|-------------------|--|--------------------------|-------------------------------------|--|--|--|--|--|
| Part III | Exclusively religious, charitable, etc., ind | ividual contribut | ione to costion | 501(0)(7) | 46-1164217 | | | | | |
| raillii | total more than \$1,000 for the year. Comp | | | | | | | | | |
| | For organizations completing Part III, enter t | | | - | | | | | | |
| | contributions of \$1,000 or less for the year. | | | | | | | | | |
| | Use duplicate copies of Part III if additional s | | | | · | | | | | |
| (a) No. | | • | <u> </u> | | - | | | | | |
| from | (b) Purpose of gift | (c) Us | e of gift | (d |) Description of how gift is held | | | | | |
| Part I | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | (e) Trans | fer of gift | 1 | | | | | | |
| | | (0) | nor or gift | | | | | | | |
| | Transferee's name, address, and Zl | D + 1 | Relationship of transferor to transferee | | | | | | | |
| | Transferee 3 hame, address, and 21 | 1 | - Neiatio | manip or t | ialisieroi to transieree | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | For Prov Country | | | | | | | | | |
| (a) No. | | • | | | | | | | | |
| from Part I | (b) Purpose of gift | (c) Use of gift (| | | (d) Description of how gift is held | | | | | |
| Parti | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | (e) Trans | fer of gift | • | | | | | | |
| | | , , | J | | | | | | | |
| | Transferee's name, address, and Zi | P + 4 | Relatio | nship of t | ransferor to transferee | | | | | |
| | | | - A. | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | For Prov Country | | | | | | | | | |
| (a) No. from | (b) Purpose of gift | (a) Ha | e of gift | 1.4 | \ Description of how wife in hold | | | | | |
| Part I | (b) Furpose of grit | (0) 05 | e or girt | (4 |) Description of how gift is held | | | | | |
| • | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | _ | | | | | | |
| | | | | | | | | | | |
| | | (e) Trans | sfer of gift | | | | | | | |
| | | | | | | | | | | |
| | Transferee's name, address, and Z | P + 4 | Relatio | onship of t | ransferor to transferee | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | 5 | | | | | | | | | |
| (a) No. | For Prov Country | | | | | | | | | |
| from | (b) Purpose of gift | (c) Us | e of gift | (d |) Description of how gift is held | | | | | |
| Part I | , , , | | | <u> </u> ` | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | (a) T | for of sift | | | | | | | |
| | | (e) irans | sfer of gift | | | | | | | |
| | Transferrale name address 1.70 | _ , | | | | | | | | |
| | Transferee's name, address, and Z | <u> </u> | Relatio | transferor to transferee | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | For. Prov. Country | | | | | | | | | |
| | | | | | | | | | | |

Part I, Line 23 (990-PF) - Other Expenses

| | | | 5,850 | 0 | 0 | 5,850 |
|---|---|-----------------------------|-------------|----------------|--------------|----------------|
| Γ | | | Revenue and | | _ <u></u> | Disbursements |
| ۱ | | | Expenses | Net Investment | Adjusted Net | for Charitable |
| L | | Description | per Books | Income | Income | Purposes |
| | 1 | Administrative Set-Up Fee | 4,500 | 0 | | 4,500 |
| | 2 | Delaware Incorporation Fees | 500 | 0 | | 500 |
| | 3 | IRS Application Fees | 850 | 0 | | 850 |

Start It Foundation

46-1164217

Part VII-A, Line 10 (990-PF) - Substantial Contributors

| · · · · · · · · · · · · · · · · · · · | Check "X" | | | | | |
|---------------------------------------|-------------|--------------------------|---------|-------|----------|-----------------|
| Name | if Business | Street | City | State | Zıp Code | Foreign Country |
| 1 Kevin Robert Cheung | | 6000 17th Avenue SW, #19 | Seattle | WA | 98106 | |

Start It Foundation

48-1164217

Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

| | | | | | | | | | | 0 | 0 | 0 |
|-----|---------------------|-------------|-------------------------------------|------------|-------|----------|-----------------|-------------|----------|--------------|----------|---------|
| | | Check "X" | - | | | | | | Avg Hrs | | | Expense |
| | Name | if Business | Street | City | State | Zip Code | Foreign Country | Title | Per Week | Compensation | Benefits | Account |
| Г | Kevin Robert Cheung | | Foundation Source 501 Silverside Rd | Wilmington | DE | 19809 | | President / | 1 00 | 0 | 0 | 0 |
| 1 | _ | | | _ | | | | Director / | | | | |
| 1 1 | | | | | 1 | | | Secretary | | | | |