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Form 990

4

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

Department of the Treasury Internal Revenue Service The organization may have to use a copy of this return to satisfy state reporting requirements For the 2012 calendar year, or tax year beginning 2012, and ending D Employer Identification Number Check if applicable REDF Address change 54-2132153 221 Main Street #1550 Telephone number Name change San Francisco, CA 94105 415-561-6677 Initial return Terminated G Gross receipts \$ 6,733,865. Amended return H(a) Is this a group return for affiliates? Application pending F Name and address of principal officer $|X|_{N_0}$ Carla I. Javits Yes H(b) Are all affiliates included?

If 'No.' attach a list (see instructions) 221 Main Street, #1550 San Francisco, CA 94105 Tax-exempt status X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527 Website: ► H(c) Group exemption number www.redf.org L Year of Formation 2003 Form of organization X Corporation Trust Association Other > M State of legal domicile CA Part I Summary Briefly describe the organization's mission or most significant activities REDF creates jobs and pathways to employment for people facing the greatest barriers to work. Activities & Governance If the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 7 a **b** Net unrelated business taxable income from Form 990-T, line 34 7 b 0. Prior Year **Current Year** Contributions and grants (Part VIII, line 1h) 6,691,248. 4,524,754. Program service revenue (Part VIII, line 2q) Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10,409 10,392. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) -285,914. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 4,535,163 6,415,726. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 2,299,688. 1,295,284. 14 Benefits paid to or for members (Part IX, column (A), line 4). 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,771,540 2,177,665. 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 428,271. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,758,306 2,527,757. Total expenses Add lines 13-17 (must equal Part IX, or 7,005,110. 4,825,130. Revenue less expenses Subtract line 18 from line 12 -589,384. -289,967Beginning of Current Year End of Year RS-OS Total assets (Part X, line 16) 849 20 8,088,025. 7,461,917. OCT 1 5 2013 21 Total liabilities (Part X, line 26) 272,054 235,330.Net assets or fund balances Subtract line 21-from-line-20-7,815,971. 7,226,587. Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Sign Carla I. Javits
Type or print name and title Here President PTIN Print/Type preparer's name Preparer's signature Check Griffin Kow Robert H. Griffin Robert H. P00201416 Paid ANNED Preparer Firm's name WILLIAMS, ADLEY AND CO-CA. Use Only Firm's EIN > 94-3408364 Firm's address 1330 BROADWAY OAKLAND, CA 94612 (510) 893-8114 X Yes

May the IRS discuss this return with the preparer shown above? (see instructions) OBAA For Paperwork Reduction Act Notice, see the separate instructions.

TEEA0113L 12/18/12

Form 990 (2012) 7

Form	990 (2012) REDF	54-213	2153	3	Р	age 2
Par	t III Statement of Program Service Accomplishments					
	Check if Schedule O contains a response to any question in this Part III					X
1	Briefly describe the organization's mission					
	REDF creates jobs and pathways to employment for people facing the	<u>ie great</u>	<u>est</u>	bar	<u>rie</u>	rs
	to work.					
		. 				
2	Did the organization undertake any significant program services during the year which were not listed on the price	r				
	Form 990 or 990-EZ?		□ `	Yes	X	No
_	If 'Yes,' describe these new services on Schedule O	_				
3	Did the organization cease conducting, or make significant changes in how it conducts, any program set	vices '	Ш	Yes	X	No
	If 'Yes,' describe these changes on Schedule O					
4	Describe the organization's program service accomplishments for each of its three largest program serv Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of others, the total expenses, and revenue, if any, for each program service reported	grants and a	asured allocati	ons t	expen	ses
4 a	(Code) (Expenses \$ 3,700,620. including grants of \$ 2,184,688.) (R	evenue \$)
	Portfolio Relationships: REDF funds and supports nonprofit organi	zations	in	a		
	hands-on, engaged partnership. The portfolio organizations own a	and oper	ate	soc		
	enterprises to employ individuals with barriers to work. During	2012, R	EDF	cor	tin	ued
	to increase the scale and diversity of its portfolio with the ac				e	
	portfolio organizations in southern California. As of 12/31/12, I	&EDF_has	<u>nir</u>	ie_		
	Organizations in its Portfolio.					
					-	
4 b	(Code) (Expenses \$1,426,615. including grants of \$) (Fig. 25,000.))
	Leadership, Innovation and Impact: REDF seeks to advance the field		c <u>i</u> a]	L		
	enterprise, workforce development and venture philanthropy in ord				-	
	*develop more effective social enterprise and workforce developme		<u>ıctu</u> ı	c <u>es</u> .		
	*generate more sound philanthropic funding of employment strateg					
	*identify "breakthrough" approaches that could significantly income	<u>:ease_em</u>	ibTo?	mer	<u>ıt.</u> _	
		. – – – –				
		. – – – –			- - -	
						· – – –
		·				
	(Code) (Eveneses \$ 507.052 including areats of \$ 00.000) (F	lovonus A				```
40	(Code				(D) 7	—,
	Developing Social Enterprise Leaders: REDF through its Farber Pro				JRW	-
	students and graduates at REDF and its portfolio organizations s					
	providing REDF and its portfolio organizations with talent and providing reductor with a pathway towards careers that focus or social characteristics.		<u> </u>	<u>ıae</u> ı	<u> 1LS</u> _	and_
	graduates with a pathway towards careers that focus on social characteristics of social characteristics of the social characte	inde				
		. – – – –				
					-	
		. – – – –				
						· -
4 0	d Other program services (Describe in Schedule O) See Schedule O				`	
1	(Expenses \$ including grants of \$) (Revenue \$ ≥ Total program service expenses > 5,635,088.)	
BAA				Form	990	(2012)

Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
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 98-197 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 provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
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		Х
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		Х
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, VII, VIII, IX, or X as applicable			
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10° If 'Yes,' complete Schedule D, Part VI	11 a	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	11 b		Х
	c Did the organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16° If 'Yes,' complete Schedule D, Part VIII	11 c		X
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		X
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		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	11 f		X
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a	Х	
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E a Did the organization maintain an office, employees, or agents outside of the United States?	13		X
		14a		
•	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
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 located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18	х	
	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		Х
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X
١	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

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Pai	rt IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	in the 21	х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States of IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	on Part 22	_	х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J		х	
24 a	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b throug complete Schedule K. If 'No, 'go to line 25	as of gh 24d and 24a		х
ı	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to dainy tax-exempt bonds?	efease 24c		
(d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transacting disqualified person during the year? <i>If 'Yes,' complete Schedule L, Part I</i>	tion with a 25a		х
ı	b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior ye that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' con Schedule L, Part I	ear, and applete		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule	, or e <i>L, Part II</i> 26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantia contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family me of any of these persons? If 'Yes,' complete Schedule L, Part III	ember 27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part N instructions for applicable filing thresholds, conditions, and exceptions)	/		
	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a	1	X
ı	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	286	,	Х
•	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	as an 28 0	:	Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule	M 29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified contributions? <i>If 'Yes,' complete Schedule M</i>	d conservation 30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule	N, Part I 31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	. 32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations se 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	ections 33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts and V, line 1	II, III, IV,		x
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
I	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a centity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	controlled 35t	5	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable rorganization? If 'Yes,' complete Schedule R, Part V, line 2	elated 36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization at treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	nd that is		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	9?	x	

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Part V Statements Regarding Other IRS Filings and Tax Compliance			
Check if Schedule O contains a response to any question in this Part V			. L
		Yes	No
1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	47		
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	X	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a	35		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3 b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			.,
financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
b If 'Yes,' enter the name of the foreign country			1
See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organiza solicit any contributions that were not tax deductible as charitable contributions?	ation 6 a	х	ļ
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b	Х	
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a	X	
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 a	X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file	/ 5	41	
Form 8282?	7 c		Х
d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		ĹΧ
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		İ
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Description organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	old the ss 8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9a		_X
b Did the organization make a distribution to a donor, donor advisor, or related person?	9 b		Х
10 Section 501(c)(7) organizations. Enter			
a Initiation fees and capital contributions included on Part VIII, line 12			1
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			ĺ
11 Section 501(c)(12) organizations. Enter			ĺ
a Gross income from members or shareholders 11a	i		l
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b			
12a Section 4947(a)(1) non - exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a is the organization licensed to issue qualified health plans in more than one state?	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 organization is licensed to issue qualified health plans			
c Enter the amount of reserves on hand			1
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14 b		

Form 990 (2012) REDF 54-2132153 Page 6 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 X Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 13 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent 1 b 12 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee? 2 Х Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Х X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 X 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х 7 a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? 7 b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following. X a The governing body? 8 a X b Each committee with authority to act on behalf of the governing body? 8 b Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O Х 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code Nο Yes 10a Did the organization have local chapters, branches, or affiliates? 10 a Х b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes 10b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a X b Describe in Schedule O the process, if any, used by the organization to review this Form 990 See Schedule O X 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12a b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise 12b Х c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 120 Х 13 Did the organization have a written whistleblower policy? 13 Х X Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official Х 15 a X b Other officers of key employees of the organization 15b If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16a taxable entity during the year? b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16_b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public 18 inspection. Indicate how you make these available. Check all that apply Another's website X Upon request Own website Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year See Schedule O

Carla I. Javits 221 Main Street, Suite 1550 San Francisco CA 94105 415-561-6679

BAA TEEA0106L 08/08/12 Form 990 (2012)

State the name, physical address, and telephone number of the person who possesses the books and records of the organization.

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

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

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - · List all of the organization's current key employees, if any See instructions for definition of 'key employee.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order: individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

		(C)								
(A) Name and Title	(B) Average hours per week (list	Average one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	any hours for related organiza tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W 2/1099 MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) George R. Roberts	1									
Board Chair	0	Х						0.	0.	0.
(2) Stuart Davidson	1_1_									
Treasurer	0	Х						0.	0.	0.
_(3) Dan_Rose	1									
Secretary	0	Х						0.	0.	0.
_(4)_Lande_Ajose	1	ļ <u></u>								_
Board Member	0	X						0.	0.	0.
_(5) Harris Barton	1									_
Board Member	0	Х						0.	0.	0.
(6) Elizabeth Y.A. Ferguson	1	l l								_
Board Member	0	X		Ш			<u> </u>	0.	0.	0.
	1	ļ ,, l								
Board Member	0	Х					_	0.	0.	0.
_(8) Mack Jenkins	1	,,							_	•
Board Member	0	Х		_			<u> </u>	0.	0.	0.
_(9)_Julia_Lopez	1	١., ا		1						•
Board Member	0	Х						0.	0.	0.
(10) Chris O'Donnell	1	١ ,, ا								•
Board Member	0	Х					_	0.	0.	0.
(11) Bob Peck	1	,								•
Board Member	0	Х						0.	0.	0.
(12) Richard M. Rosenberg Board Member	$-\frac{1}{0}$	Х						0.	0.	0.
(13) Adam Smith	11									
Board Member	0	X						0.	0.	0.
(14) Carla I. Javits	40									
President	0			X				180,000.	0.	20,400.

Page 8

Part VII Section A. Officers, Directors, Trus	(B)	Tey		(C		5 5, 6	ant	i riigilest coll	ipensateu Emp	loyees (com)
(A) Name and title	Average hours per	box	not ch , unles cer and	Pos heck	sition more erson	is both	าลก	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	week (list any hours	or d	DS.	Officer	Кcy	em High	Forr	the organization (W 2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization
	(list any hours for related organiza - tions below dotted line)	vidual	nstitutional trustee	ଝ	Kcy employed	lest co	ner			and related organizations
	- tions below	trust	al E		оусс	mper				
	line)	8	ice			Highest compensated employee				
(15) Eun K. Kim	_40_							-		
Managing Director (16) Cynthia Gair	40		\vdash			Х		144,711.	0.	13,573.
Managing Director	$-\frac{40}{0}$	ł				х		142,083.	0.	12,826.
(17) Oliver Trimiew	40							212,000.		12,0201
Managing Director	0					Х		140,286.	0.	10,320.
(18) Samra Haider	_40_									
Portfolio Director	0		-			Х		118,709.	0.	12,912.
<u>(19)</u>	 	-								
(20)	 								-	
(21)										
(22)								<u></u>		
(22)	<u> </u>									
(23)		-								
(24)										
(25)										
1 b Sub-total		1			l		•	725,789.	0.	70,031.
c Total from continuation sheets to Part VII, Section	n A					1	•	0.	0.	0.
d Total (add lines 1b and 1c)							•	725,789.	0.	70,031.
2 Total number of individuals (including but not limited to from the organization ► 5	o those I	ısted	abov	re) v	who i	receiv	ved	more than \$100,00	10 of reportable comp	pensation
		-								Yes No
3 Did the organization list any former officer, directed on line 1a? If 'Yes,' complete Schedule J for such	or or trus <i>individu</i>	stee, <i>ial</i>	key	em	ploy	ee, o	r h	ghest compensat	ed employee	3 X
4 For any individual listed on line 1a, is the sum of related organization and related organizations greater	eportab than \$1	le co 50,00	mpei 00? /	nsa If 'Y	ition ⁄es′	and comp	oth olet	er compensation e Schedule J for	from	
such individualDid any person listed on line 1a receive or accrue	compen	satio	n fro	om a	any	unre	late	d organization or	ındıvıdual	4 X
for services rendered to the organization? If 'Yes,' Section B. Independent Contractors	compie	te So	cneal	uie	J 10.	r suc	n p	erson		5 X
1 Complete this table for your five highest compensation	ated ind	epen	dent	cor	ntrac	ctors	tha	t received more t	han \$100,000 of	
compensation from the organization Report compensation		tne c	aieno	ar y	year	enair	ng v	vith or within the or (B)		(C)
(A) Name and business addre	ss							Description	of services	Compensation
Peter Lippman 750 Elizabeth Street San Francisco, CA 94105							Financial Man	agement	115,348.	
Theresa Feely 3869 17Th Street San Francisco, CA 94114								Soc. Enterpri	se Sup.	103,655.
								L		
2 Total number of independent contractors (including bu \$100,000 in compensation from the organization		ned to	o thos	se I	isted	abov	ve)	wno received more	tnan	

	Check if Schedule O contains a response to any questi	ion in this Part VIII			
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns1 ab Membership dues1 bc Fundraising events1 c1,061,531.d Related organizations1 d				
ONTRIBUTIONS, AND OTHER SIMI	e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in Ins 1a-1f \$				
Č V	h Total. Add lines 1a-1f	6,691,248.			
3	Business Code				
ERVICE REVE	2a				
S	d				
PROGRA	f All other program service revenue g Total. Add lines 2a-2f ▶				
	 Investment income (including dividends, interest and other similar amounts) Income from investment of tax-exempt bond proceeds 	10,914.			10,914.
	5 Royalties				
	(i) Real (ii) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss)				
	d Net rental income or (loss)			-	-
	(i) Securities (ii) Other				
	assets other than inventory —522.	-			
	b Less cost or other basis and sales expenses c Gain or (loss) -522.	_			_
	d Net gain or (loss)	-522.			-522.
OTHER REVENUE	8a Gross income from fundraising events (not including \$\frac{1,061,531}{0}\$ of contributions reported on line 1c) See Part IV, line 18 b Less. direct expenses a 32,225. b 318,139.				
9	c Net income or (loss) from fundraising events.	-285,914.			
	9a Gross income from gaming activities See Part IV, line 19				
	b Less direct expenses b	-			
	c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances				
	b Less cost of goods sold c Net income or (loss) from sales of inventory	-			
	Miscellaneous Revenue Business Code				
	11a	1			
	b				
	d All other revenue e Total. Add lines 11a-11d				
	12 Total revenue. See instructions	6,415,726.			10 202
BAA		1 6,415,726.	0.	<u> </u>	10,392.

Part IX | Statement of Functional Expenses

	tion $501(c)(3)$ and $501(c)(4)$ organizations must con		ner organizations must co	molete column (A)	-
	Check if Schedule O contains a r			implete column (r)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
2	Grants and other assistance to governments and 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	2,299,688.	2,299,688.		
3	organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	795,471.	675,713.	45,735.	74,023.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	1,057,758.	611,095.	306,289.	140,374.
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)	23,275.	13,643.	6,215.	3,417.
9	Other employee benefits	160,924.	74,461.	68,625.	17,838.
10	Payroll taxes	140,237.	96,001.	28,990.	15,246.
	Fees for services (non-employees)				
	Management				
	Legal	24,255.	11,316.	12,939.	
	Accounting	144,164.	16,478.	127,686.	
	Lobbying				
	e Professional fundraising services See Part IV, line 17 Investment management fees				
g	other (If line 11g amt exceeds 10% of line 25, column (A) amt, list line 11g expenses on Sch O) Advertising and promotion				
	Office expenses	33,992.	14,664.	15,886.	3,442.
14	Information technology	399, 208.	293,730.	64,769.	40,709.
15	Royalties	333,200.	2,3,730.	04,700.	40, 105.
16	Occupancy	263,142.	167,736.	67,320.	28,086.
17	Travel	159,850.	118,193.	20,603.	21,054.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
	Conferences, conventions, and meetings	25,970.	19,493.	3,171.	3,306.
20	Interest				
21	Payments to affiliates				
	Depreciation, depletion, and amortization	4,749.		4,749.	
23 24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)	9,024.	5,788.	2,254.	982.
	Industry Expertise	1,076,256.	1,000,119.	39,538.	36,599.
	Outreach and Promotion	136,621.	107,169.		29,452.
	Recruiting	93,577.	11,429.	82,103.	45.
	Events	58,612.	53,462.	3,382.	1,768.
	All other expenses	98,337.	44,910.	41,497.	11,930.
25	Total functional expenses. Add lines 1 through 24e	7,005,110.	5,635,088.	941,751.	428,271.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here				
RΔΔ					Form 990 (2012)

Balance Sheet

Part X

Check if Schedule O contains a response to any question in this Part X (A) Beginning of year (B) End of year Cash - non-interest-bearing 2,407,388 1 2,478,256. 2,802,471. Savings and temporary cash investments 2 2,540,616 3 Pledges and grants receivable, net 3,047,954 3 2,105,771.4 Accounts receivable, net 10.308 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 25,455 19,644 10a Land, buildings, and equipment, cost or other basis Complete Part VI of Schedule D 10a 17,020 b Less accumulated depreciation 10b 5,443 3,879 10 c 11,577. 11 Investments - publicly traded securities 11 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV. line 11 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 58,236 37,615 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 8,088,025 7,461,917. Accounts payable and accrued expenses 17 272,054 17 235,330 Grants pavable 18 18 Deferred revenue 19 19 20 20 Tax-exempt bond liabilities Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 26 Total liabilities. Add lines 17 through 25 26 272,054 235,330 X and complete Organizations that follow SFAS 117 (ASC 958), check here > lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 4,577,550 27 4,891,820. Temporarily restricted net assets 28 3,238,421 2,334,767. Permanently restricted net assets 29 R Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 33 Total net assets or fund balances 33 7,815,971 7,226,587. 34 Total liabilities and net assets/fund balances 34 8,088,025 7,461,917. BAA Form 990 (2012)

Form 990 (2012) REDF 54	-2132153		Pa	ge 12
Part XI Reconciliation of Net Assets				
Check if Schedule O contains a response to any question in this Part XL				
1 Total revenue (must equal Part VIII, column (A), line 12)	1	6,4	15,7	26.
2 Total expenses (must equal Part IX, column (A), line 25)	2	7,0	05,1	10.
3 Revenue less expenses Subtract line 2 from line 1	3		89,3	
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		15,9	
5 Net unrealized gains (losses) on investments	5			
6 Donated services and use of facilities	6			
7 Investment expenses	7			
8 Prior period adjustments	8			
9 Other changes in net assets or fund balances (explain in Schedule O).	9			0.
Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	7.2	26,5	
Part XII Financial Statements and Reporting	1 1	-,,-		
Check if Schedule O contains a response to any question in this Part XII				
Check it Schedule O Contains a response to any question in this Part XII		i	V	No
1 Accounting method used to prepare the Form 990.			Yes	NO
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O				
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both	ved on a			
Separate basis Consolidated basis Both consolidated and separate basis				
b Were the organization's financial statements audited by an independent accountant?		2 b	Х	
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa	rate			
basis, consolidated basis, or both				
X Separate basis Consolidated basis Both consolidated and separate basis		-		
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the aud review, or compilation of its financial statements and selection of an independent accountant?	t,	2 c	Х	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			_	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3 a	X	
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required at or audits, explain why in Schedule O and describe any steps taken to undergo such audits	ıdıt	3 b	Х	
BAA				(2012)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

Employer identification number

Open to Public Inspection

RED	EDF 54-2132153										
Par	t I	Reason for Publ	ic Charity Status	(All organizations	must c	omple	te this	part.)	See ir	nstruct	ions.
The o	orga	nization is not a priva	te foundation because	e it is: (For lines 1 thro	ugh 11,	check o	nly one	box)			
1	П	A church, convention	of churches or assoc	ation of churches desc	cribed in	section	170(b)	(1)(A)(i)			
2	П	A school described in	section 170(b)(1)(A)	(ii). (Attach Schedule E	:)						
3	П	A hospital or a coope	erative hospital service	e organization describe	d in sec	tion 170)(b)(1)(A	()(iii).			
4	П	A medical research of	rganization operated	in conjunction with a h	ospital d	lescribe	d in sec	tion 17	0(b)(1)(A)(iii) Er	nter the hospital's
		name, city, and state	!	•	•						·
5		An organization operat	ed for the benefit of a complete Part II)	college or university own	ed or ope	erated by	a gover	nmenta	unit des	cribed in	section
6		A federal, state, or lo	cal government or go	vernmental unit descri	bed in s	ection 1	70(b)(1)	(A)(v).			
7	X	in section 170(b)(1)(A	A)(vi). (Complete Par				ental uni	t or fron	n the gen	eral pub	lic described
8	Ш	A community trust de	escribed in section 17	0(b)(1)(A)(vi). (Comple	te Part I	l.)					
9		related to its exempt fi	An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities elated to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and inrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 Seesection 509(a)(2). Complete Part III)								
10		An organization orga	nized and operated e	xclusively to test for pu	iblic safe	ety See	section	509(a)	(4).		
11		An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h									
	a ☐ Type I b ☐ Type II c ☐ Type III — Functionally integrated d ☐ Type III — Non-functionally integrated										
е	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)										
f		If the organization rece check this box	eived a written determir	nation from the IRS that i	s a Type	I, Type	II or Typ	e III sup	porting c	rganızat	ion,
g		Since August 17, 200	06, has the organization	on accepted any gift o	r contrib	ution fro	om any	of the fo	llowing	persons	i?
			-				-		_	•	Yes No
		(i) A person who debelow, the gove	lirectly or indirectly co erning body of the sup	ontrols, either alone or opported organization?	together	with pe	ersons d	escribe	d in (ii) a	and (III)	11 g (i)
		(ii) A family member	er of a person describ	ped in (i) above?							11 g (ii)
		(iii) A 35% controlle	ed entity of a person of	described in (i) or (ii) a	bove?						11 g (iii)
h		• •	•	e supported organization							119(11)
		(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1 9 above or IRC section (see instructions))	organız column (i	(iv) Is the organization in column (i) listed in your governing (v) Did you notify the organization is column (i) of your support?			n organization in		(vii) Amount of monetary support
					Yes	No	Yes	No	Yes	No	
(A)		-									
(B)											
/C\											
(C)			-		 						
(D)				_							
(E)											
Tota											
BAA	Fo	Paperwork Reductio	n Act Notice, see the	Instructions for Form	990 or 9	90-EZ.			Schedule	A (Forn	n 990 or 990-EZ) 2012

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

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

Sec	tion A. Public Support								
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012		(f) Total	
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')	1,339,359.	779,393.	6,939,616.	4,524,754.	6,723,47	73.	20,306,595.	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							0.	
3	The value of services or facilities furnished by a governmental unit to the organization without charge							0.	
4	Total. Add lines 1 through 3	1,339,359.	779,393.	6,939,616.	4,524,754.	6,723,47	73.	20,306,595.	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).	,	,					10,030,721.	
6	Public support. Subtract line 5 from line 4							10,275,874.	
Sec	tion B. Total Support								
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012		(f) Total	
7	Amounts from line 4	1,339,359.	779,393.	6,939,616.	4,524,754.	6,723,47	73.	20,306,595.	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	101,285.	77,712.	22,888.	10,767.	10,91	L4.	223,566.	
9	Net income from unrelated business activities, whether or not the business is regularly carried on	,	,	, , , , , ,				0.	
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) See Part IV		9,923.			1,00	00.	10,923.	
11	Total support. Add lines 7 through 10					****		20,541,084.	
12	Gross receipts from related activ	rities, etc (see ins	tructions)				12	0.	
	First five years. If the Form 990 is organization, check this box and	stop here		ırd, fourth, or fifth t	tax year as a section	on 501(c)(3)		▶ 🗌	
	tion C. Computation of Pu								
	Public support percentage for 20 Public support percentage from			ne 11, column (f))		-	14	50.03%	
						L	15	36.74%	
16a	33-1/3% support test — 2012. If and stop here. The organization	the organization of qualifies as a pub	did not check the plicly supported o	box on line 13, a rganization	nd the line 14 is 3	33-1/3% or m	ore,	check this box	
Ь	33-1/3% support test - 2011. If and stop here. The organization	the organization d i qualifies as a pul	id not check a bo olicly supported o	x on line 13 or 16 organization	Sa, and line 15 is	33-1/3% or m	nore,	check this box	
17 a	10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts'	meets the 'facts-a	ind-circumstance:	s' test, check this	box and stop her	re. Explain in	Part	: IV how	
	b 10%-facts-and-circumstances test — 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.								
	Private foundation. If the organi	zation did not che	ck a box on line	ıз, 16а, 16b, 17а ———					
BAA					2	ممانات ۸ ۱۲۰۰۰		00 or 000 EZV 2012	

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Sec	tion A. Public Support					_	
Calen	dar year (or fiscal yr beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include any 'unusual grants')						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose			-			
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. The value of services or facilities furnished by a						
	governmental unit to the organization without charge						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						-
8	Public support (Subtract line 7c from line 6)						
<u>Sec</u>	tion B. Total Support				,		
	dar year (or fiscal yr beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add Ins 9, 10c, 11, and 12)						
	First five years. If the Form 990 organization, check this box and	stop here		nd, third, fourth, o	or fifth tax year as	a section 50	¹(c)(3) ► ∏
	tion C. Computation of Pu						
	Public support percentage for 20		•	ne 13, column (f))		15 %
	Public support percentage from :		_				16 %
	tion D. Computation of Inv						
17	Investment income percentage f			-	ımn (f))		17 %
18	Investment income percentage f						18 %
	33-1/3% support tests — 2012. If is not more than 33-1/3%, check	this box and sto	p here . The organ	ization qualifies	as a publicly supp	orted organiz	ation
	33-1/3% support tests — 2011. If line 18 is not more than 33-1/3%	, check this box	and stop here. The	e organization qu	ialifies as a public	ly supported	organization - 📘
20	Private foundation. If the organiz	zation did not che	ck a box on line	14, 19a, or 19b, (check this box and	i see instructi	ions.

	(Form 990 or 990-EZ) 20				54-2132153	Page 4
Part IV	Supplemental Info Part II, line 17a or (See instructions).	ormation. 17b; and	Complete this part to Part III, line 12. Als	to provide the explanations is complete this part for any	required by Part II, line additional information.	10;
				·		
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					· 	
	-					
					·	
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				- 	·	
						
- -						
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		-				
						.
				- 		

SCHEDULE D (Form 990)

Supplemental Financial Statements

201

Department of the Treasury Internal Revenue Service Name of the organization ► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

OMB No 1545 0047

e of the organization Employer identification number

REI)F		54-2132153
Par		or Advised Funds or Other Similar Fu	inds or Accounts. Complete if
1	the organization answered 'Yes'	to Form 990, Part IV, line 6.	•
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and do are the organization's property, subject to the	nor advisors in writing that the assets held in d organization's exclusive legal control?	donor advised funds
6	Did the organization inform all grantees, dono for charitable purposes and not for the benefilimpermissible private benefit?	ors, and donor advisors in writing that grant fur t of the donor or donor advisor, or for any othe	nds can be used only er purpose conferring Yes No
Par	t Conservation Easements. Comp	olete if the organization answered 'Yes	s' to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held b		-
	Preservation of land for public use (e.g.,	recreation or education) Preservation	of an historically important land area
	Protection of natural habitat	— — — — — — — — — — — — — — — — — — —	of a certified historic structure
	Preservation of open space	J	
2	Complete lines 2a through 2d if the organization last day of the tax year	held a qualified conservation contribution in the for	rm of a conservation easement on the
			Held at the End of the Tax Year
á	Total number of conservation easements		2 a
ŀ	Total acreage restricted by conservation ease	ments	2 b
C	: Number of conservation easements on a cert	fied historic structure included in (a)	2c
C	Number of conservation easements included structure listed in the National Register	n (c) acquired after 8/17/06, and not on a histo	oric 2 d
3	Number of conservation easements modified, tratax year ►	nsferred, released, extinguished, or terminated by	the organization during the
4	Number of states where property subject to cons	ervation easement is located >	
5	Does the organization have a written policy re and enforcement of the conservation easeme	egarding the periodic monitoring, inspection, hants it holds?	andling of violations,
6	Staff and volunteer hours devoted to monitoring,	inspecting, and enforcing conservation easements	during the year
7	Amount of expenses incurred in monitoring, insp ▶\$	ecting, and enforcing conservation easements duri	ing the year
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirements of s	ection 170(h)(4)(B)(i) Yes No
9	In Part XIII, describe how the organization report include, if applicable, the text of the footnote conservation easements	s conservation easements in its revenue and expe to the organization's financial statements that	ense statement, and balance sheet, and describes the organization's accounting for
Par	Organizations Maintaining Colle Complete if the organization ans	ections of Art, Historical Treasures, owered 'Yes' to Form 990, Part IV, line	r Other Similar Assets. e 8.
1 8	If the organization elected, as permitted under art, historical treasures, or other similar assets h in Part XIII, the text of the footnote to its fina	or SFAS 116 (ASC 958), not to report in its revield for public exhibition, education, or research in incial statements that describes these items	enue statement and balance sheet works of furtherance of public service, provide,
ı		er SFAS 116 (ASC 958), to report in its revenue or public exhibition, education, or research in furth	
	(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, amounts required to be reported under SFAS	historical treasures, or other similar assets for fina 116 (ASC 958) relating to these items.	ancial gain, provide the following
á	Revenues included in Form 990, Part VIII, lin	, ,	▶\$
1	Assets included in Form 990, Part X		► \$

Part III Organizations Maintain	ning Collections	of Art, Histo	rical Treasures, o	or Other Similar Ass	ets (co	ontinu	ed)		
3 Using the organization's acquisition, items (check all that apply)	accession, and other	records, check ar	ny of the following that a	are a significant use of its	collection	า			
a Public exhibition		d 🔲 Loan o	or exchange programs	;					
b Scholarly research		e 🗌 Other							
c Preservation for future genera	itions								
4 Provide a description of the organiza Part XIII	ition's collections and	l explain how they	further the organization	n's exempt purpose in					
5 During the year, did the organizati to be sold to raise funds rather that	an to be maintained	as part of the o	rganization's collectioi	n ^o	Yes		No		
Part IV Escrow and Custodial Arra reported an amount on	ngements. Comple Form 990, Part	te if the organiza X, line 21.	ation answered 'Yes'	to Form 990, Part IV, Iir	ne 9, or				
1 a Is the organization an agent, trust on Form 990, Part X?		_		ther assets not included	Yes		No		
b If 'Yes,' explain the arrangement i	n Part XIII and com	iplete the following	ng table		A				
e Pograning halance				1.	Amount				
 c Beginning balance d Additions during the year 				1 c					
e Distributions during the year				1 e					
f Ending balance				1 1			-		
2a Did the organization include an an	mount on Form 990.	Part X. line 21?		_ ' '	Yes		No		
b If 'Yes,' explain the arrangement in				ed in Part XIII	□]		
Part V Endowment Funds. Co	mplete if the or	ganization an	swered 'Yes' to Fo	orm 990. Part IV. lir	ne 10.				
	(a) Current	(b) Prior yea		(d) Three years		our year	rs		
1 a Beginning of year balance		· · · · · · · · · · · · · · · · · · ·			1				
b Contributions							-		
c Net investment earnings, gains, and losses									
d Grants or scholarships					+				
e Other expenditures for facilities and programs									
f Administrative expenses	•								
g End of year balance									
2 Provide the estimated percentage	of the current year	end balance (lin	e 1g, column (a)) held	d as:					
a Board designated or quasi-endowme	nt ►	%							
b Permanent endowment ►	એ								
c Temporarily restricted endowment	<u> </u>	_ %							
The percentages in lines 2a, 2b, a	and 2c should equal	100%							
3 a Are there endowment funds not in the possession of the organization that are held and administered for the organization by Yes No									
(i) unrelated organizations.					3a(i)	103	-110		
(ii) related organizations					3a(ii)				
b If 'Yes' to 3a(ıı), are the related or	roanizations listed a	s required on So	chedule R?		3b		l -		
4 Describe in Part XIII the intended	-	-			132 1		L		
Part VI Land, Buildings, and E									
Description of property		st or other basis	(b) Cost or other	(c) Accumulated	(d) E	Book va	alue		
		nvestment)	basis (other)	depreciation					
1 a Land									
b Buildings	-			<u> </u>					
c Leasehold improvements		16 014		F 443		10	E 71		
d Equipment e Other	 	16,014.		5,443.			<u>, 571 .</u>		
Total. Add lines 1a through 1e (Column	a (d) must squal Fo	1,006.	column (P) line 10(a))	1		<u>,006.</u>		
BAA	i (u) must equal Fol	THE SOU, PAIL X, C	Joint (D), line 10(C)		lule D (Fo		,577.		
DAA				Sched	ימוב די (רנ	טבב ווויג	, 2012		

Total (Column (b) must equal Form 990, Part X, column (B) line 25)

2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

(8) (9) (10) (11)

Schedule D (Form 990) 2012 REDF 54	-2132153	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	turn	
1 Total revenue, gains, and other support per audited financial statements		5,733,865.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12.		
a Net unrealized gains on investments 2 a		
b Donated services and use of facilities 2b		
c Recoveries of prior year grants		
d Other (Describe in Part XIII)		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3 6	6,733,865.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a Investment expenses not included on Form 990, Part VIII, line 7b	Í	
b Other (Describe in Part XIII) See Part XIII 4b -318,139.		
c Add lines 4a and 4b.	4 c	-318,139.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		6,415,726.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per		<u> </u>
1 Total expenses and losses per audited financial statements		7,323,249.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	' 	,,020,210.
a Donated services and use of facilities		
b Prior year adjustments 2b		
c Other losses 2c		
d Other (Describe in Part XIII)		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1		7,323,249.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		1,323,247.
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII) See Part XIII 4b -318,139.		
c Add lines 4a and 4b	4 c	-318,139.
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	7,005,110.
Part XIII Supplemental Information		
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, line 4; Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any	lines 1b and additional in	2b, Part V, formation
BAA	Schedule D (Form 990) 2012

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545 0047

Department of the Treasury Internal Revenue Service

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

Open to Public Inspection

Name of the organization						Employer identific	
REDF				<u></u>		54-213215	3
Part I Fundraising Activities. Compound Form 990-EZ filers are not re	equired to comp	lete this p	part				
1 Indicate whether the organization	raised funds th	rough any	of the follo	owing activities. Check	all that	apply	
a X Mail solicitations			е	X Solicitation of non-	-governn	nent grants	
b X Internet and email solicitation	s		f	Solicitation of gove	ernment	grants	
c X Phone solicitations			g	X Special fundraising	g events		
d X In-person solicitations			•				
2a Did the organization have a written of employees listed in Form 990, Pa	r oral agreemen	t with any	individual (i	ncluding officers, directo	ors, truste	es or key	Yes XNo
b If 'Yes,' list the ten highest paid indiscompensated at least \$5,000 by the	uduals or entities	s (fundraise	•	•			
(i) Name and address of individual	(ii) Activity	(III) Did	fundraiser	(iv) Gross receipts		nount paid to	(vi) Amount paid to
or entity (fundraiser)		have custo of conti	dy or control ributions?	from activity	fundra	etained by) aiser listed in olumn (i)	(or retained by) organization
		Yes	No				
1							
2							
3	-						
4							
5							
6	,,						
7							
8							
9							
10							
Total			•				0.
3 List all states in which the organizati or licensing	on is registered	or licensed	to solicit c	ontributions or has been	notified i	t is exempt from	registration
<u>CA</u>							
			-				
				_			
							
							
· -	- ·	-					

Part II Fundraising Events. Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

			(a) Event #1	(b) Event #2	(c) Other events None	(d) Total events (add column (a)					
R			(event type)	(event type)	(total number)	through column (c)					
ボーンルフラル	1	Gross receipts	1,093,756.			1,093,756.					
Ě	2	Less. Charitable contributions	1,061,531.			1,061,531.					
	3	Gross income (line 1 minus line 2)	32,225.	_		32,225.					
	4	Cash prizes									
D	5	Noncash prizes									
ローRECT	6	Rent/facility costs	38,856.			38,856.					
	7	Food and beverages	93,197.			93,197.					
X P E	8	Entertainment	35,835.			35,835.					
EXPESSES	9	Other direct expenses	150,251.			150,251.					
S	10 11	•	318,139. -285,914.								
Par		t IV, line 19, or rep									
		\$15,000 on Form 990-EZ, line 6a.									
WESH SH			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))					
Ē	1	Gross revenue									
F	2	Cash prizes.									
DIRECT	3	Non-cash prizes									
Č S T E S	4	Rent/facility costs									
	5	Other direct expenses									
	6	Volunteer labor	Yes%	Yes%	Yes %						
	7	Direct expense summary Add lines 2 thr	ough 5 in column (d)		•	. <u>-</u>					
i	8	Net gaming income summary Combine I	ines 1, column (d) and	line 7	•						
9 a	Yes No										
	10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No										

Sche	edule G (Form 990 or 990-EZ) 2012 REDF	54-21321	53	Page 3
11	Does the organization operate gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?		Yes	No
12	Indicate the percentage of gaming activity operated in.	1 1		
	The organization's facility	13a		٧
	An outside facility	13b		<u>,</u>
	Enter the name and address of the person who prepares the organization's gaming/special events books and record			
	Name •			- -
	Address >			
	Does the organization have a contact with a third party from whom the organization receives gaming revenue if 'Yes,' enter the amount of gaming revenue received by the organization \$ and of gaming revenue retained by the third party \$		Yes	No
	: If 'Yes,' enter name and address of the third party			
•	Name •			- ₁
	Address ►	_		
16	Gaming manager information			
	Name •			
	Gaming manager compensation ► \$			
	Description of services provided			-
	☐ Director/officer ☐ Employee ☐ Independent contractor			
17	Mandatory distributions			
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		_ Yes	No
	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in organization's own exempt activities during the tax year > \$			
Par	TIV Supplemental Information. Complete this part to provide the explanations require columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as appl this part to provide any additional information (see instructions).	ed by Part icable. Als	I, line so com	2b, plete
	Part I, Line 2b - Fundraiser Additional Information			
	REDF Benefit & Social Enterprise Expo			
			<u>.</u>	
-				
				
_				

BAA

SCHEDULE I (Form 990)

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

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

2012

OMB No 1545-0047

Open to Public ্রি Inspection ক্ষ্যা

Employer identification number

54-2132153

Department of the Treasury Internal Revenue Service Name of the organization

Part I General Information on Grants and Assistance REDF

≗ □ XXes

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

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

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Buckelew Programs	23-7088977 501	501 (c) (3)	. 265, 122	0.	Cash	N/A	Enterprise
(2) Center for Employment Opport.	13-3843322 501	501 (c) (3)	240,645.	0.	Cash	N/A	Enterprise
(3) Chrysalis516 South Main Street Los Angeles, CA 90013	-95-3972624 501	501 (c) (3)	383,539.	0.	Cash	N/A	Enterprise
(4) Coalition for Resp. Comm. Dev. 3101 South Grand Avenue. Los Angeles, CA 90007	20-2445113 501	501(c)(3)	115,315.	0.	Cash	N/A	Enterprise
(5) Community Housing Partnership 20 Jones Street, Suite 200 - San Francisco, CA 94102	94-3112338 501	501 (c) (3)	278,850.	0.	Cash	N/A	Enterprise
(6) Community Resource Center 169_Saxony_Rd_Suite_104 Encinitas, CA 92024	95-3497926 501	501 (c) (3)	146,378.	0.	Cash	N/A	Enterprise
(7) Soc. of St. Vincent de Paul 9235 San Leandro Street Oakland, CA 94603	94-1156493 501	501 (c) (3)	7,500.	0.	Cash	N/A	Enterprise
(8) Social Enterprise Alliance 4737 County Rd #101, #311 Minnetonka. MN 55345	74-2964255 501	501 (c) (3)	25,000.	0.	Cash	N/A	Enterprise
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table) and government o	rganizations listed	in the line 1 table			•	. 12

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

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

Schedule I (Form 990) (2012)

TEEA3901L 11/30/12

Page.2 Schedule I (Form 990) (2012) REDF

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(f) Description of non-cash assistance								2, Part III, column (b), and any other	ļ										Schedule I (Form 990) (2012)
(e) Method of valuation (book, FMV, appraisal, other)								ırt I, Iine 2, Part III, colı				 		 		 			
(d) Amount of non-cash assistance								nation required in Pa				 	 	1 1 1 1 1 1 1 1 1 1		 			
(c) Amount of cash grant								provide the inforn		! ! ! ! !	 	 	 	 	 	 	 	 	
(b) Number of recipients		,						plete this part to		! 	1 	•	 	! ! ! ! ! !	-	 	! ! ! ! ! !	 	
(a) Type of grant or assistance	-	2	E	4	S	9	7	Part IV Supplemental Information. Complete this part to provide the information required in Part I, line		! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! !			ĺ	 	 	 	Ī	 	ВАА

Continuation Sheet for Schedule I (Form 990)

2012

 Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

Schedule I Cont (Form 990) 2012 (h) Purpose of grant or assistance ₹ Enterprise Enterprise **Enterprise** Enterprise Continuation Page Employer identification number Part II | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (g) Description of non-cash assistance 54-2132153 N/A N/A N/A N/A (f) Method of valuation (book, FMV, appraisal, other) Cash Cash Cash Cash (e) Amount of non-cash assistance (d) Amount of cash grant 251,331 261,120 184,455 139,933 TEEA4001L 12/10/12 (c) IRC section if applicable 59-3816355 501 (c) (3) 43-1141027 501 (c) (3) 94-1279807 501 (c) (3) 95-6054617 501 (c) (3) (p) EIN (a) Name and address of organization or government 801_N._Broadway_________ 566_South_San_Pedro_Street____ Weingart_Center_Association_ Volunteers of Amer. Bay Area 1601 Harbor Bay Pkwy, S 150 -720_01ive_Street__Suite_2600_ Los Angeles, CA 90013 Santa Anna, CA 92701 St. Louis, MO 63101 <u>Urban Strategies</u> Alameda, CA 94502 Name of the organization 1

SCHEDULE J (Form 990)

Compensation Information

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

2012

Department of the Treasury Internal Revenue Service Name of the organization ► Complete if the organization answered 'Yes' to Form 990, Part IV, line 23.
 ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Employer identification number

REI	<u>/Ľ</u>		54-2132153			
Par	t I Questions Regarding Compensation					
					Yes	No
1 a	Check the appropriate box(es) if the organization provided any o VII, Section A, line 1a Complete Part III to provide any rele	of the levant	following to or for a person listed in Form 990, Part information regarding these items			
	First-class or charter travel		Housing allowance or residence for personal use			
	Travel for companions	Ē	Payments for business use of personal residence			
	Tax indemnification and gross-up payments	Ē	Health or social club dues or initiation fees			
	Discretionary spending account	Ē	Personal services (e.g., maid, chauffeur, chef)	5 w		
t	If any of the boxes on line 1a are checked, did the organization freimbursement or provision of all of the expenses described			1 b		
2	Did the organization require substantiation prior to reimbursing of trustees, and the CEO/Executive Director, regarding the item			2		
3	Indicate which, if any, of the following the filing organization use CEO/Executive Director Check all that apply Do not check establish compensation of the CEO/Executive Director, but expenses the compensation of the CEO/Executive Director, but expenses the compensation of the CEO/Executive Director.	k any	boxes for methods used by a related organization to			
	Compensation committee		Written employment contract			
	Independent compensation consultant	X	Compensation survey or study			
	Form 990 of other organizations	X	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, or a related organization		ction A, line 1a with respect to the filing organization			
	Receive a severance payment or change-of-control paymen			4 a		X
	Participate in, or receive payment from, a supplemental nor	•	•	4 b		X
(Participate in, or receive payment from, an equity-based coll If 'Yes' to any of lines 4a-c, list the persons and provide the			4 c		Х
	Only section 501(c)(3) and 501(c)(4) organizations must co	omple	ete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, contingent on the revenues of	a, dıd	the organization pay or accrue any compensation			
á	The organization?			5 a		X
ŧ	Any related organization?			5 b		Х
	If 'Yes' to line 5a or 5b, describe in Part III.					
6	For persons listed in Form 990, Part VII, Section A, line 1a, contingent on the net earnings of	a, dıd	the organization pay or accrue any compensation			
á	The organization?			6a		X
ı	Any related organization?			6 b		Х
	If 'Yes' to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, line 1a, payments not described in lines 5 and 6? If 'Yes,' describe	a, did e in Pa	the organization provide any non-fixed Part III	7	Х	
8	Were any amounts reported in Form 990, Part VII, paid or a					
	to the initial contract exception described in Regulations see if 'Yes,' describe in Part III	ection	53 4958-4(a)(3)?	8		х
9	If 'Yes' to line 8, did the organization also follow the rebuttable p section 53 4958-6(c)?	presu	mption procedure described in Regulations	9		

Page.2

54-2132153

Schedule J (Form 990) 2012 REDF

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 columns (D) and (E) amounts for that individual.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement	(D) Nontaxable	(E) Total of	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation	and other deferred compensation	penents	columns(b)(l)-(U)	deferred in prior Form 990
Carla I. Javits	ω	180,000.	0	0	$[007]_{L} = 1$	-13,200.	200,400.	.0
1 President	(ii)		0	0.	0	0.	0	0.
Eun K. Kim	Θ	144,711.	<u> -0</u>		4_583.	<u>-066</u> 78	158,284.	.0
2 Managing Director	€			0.		0.	0.	0.
Cynthia Gair	Ξ	142,083.	0	 - - -	$-\frac{3}{2}$ $\frac{788}{2}$	9,038	154,909.	 - - - - -
3 Managing Director	€		0	0.	0		0.	
Oliver Trimiew	Θ	140,286.		0	0	10, 320.	150,606.	
4 Managing Director	⊕		0		0	0.	0.	
	Ξ			, 	 	 	 	
5	Ξ			i				
	Θ							
9	Ξ							
	Ξ		 				 	
7	(ii)		:					
	(ω)							
8	<u>(ii)</u>	i						
] (i)		 		 	 	 	
6	€							
	Θ		1 1 1	 	 			
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545 0047

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Open to Public Inspection

REDF	54-2132153
Form 990, Part III, Line 4d - Other Program Services Description	10. 220220
Organization	
REDF began as a project of The Roberts Foundation in 1997	and was incorporated in
November 2003 as an independent nonprofit corporation unde	
California to create opportunities for homeless and low in	
of poverty.	
Work transforms lives, strengthens communities and is an e	ffective strategy for
ending chronic poverty. However, for discrete populations	of low-income
individuals- homeless people, at-risk youth, those that ha	ve been incarcerated or
struggle with mental illness and addiction- disproportiona	tely high rates of
joblessness approaching 70% for some of these populations	exacerbates and protracts
already_difficult_circumstances. REDF_addresses_both_this	opportunity and challenge
by creating job opportunities for people who face the grea	test_barriers_to
employment.	
Approval of New 2011-2015 Strategy	
	-
During the Fall of 2010, REDF's Board of Directors approve	d REDF's new five-year
strategy. Between 2011 and 2015, REDF aims to: help 2,50	O more people who face
significant barriers move into the workforce through socia	l_enterprise_jobs_created
by_nonprofits in California communities; and create a sust	ainable, scalable,
replicable social enterprise model that can employ tens of	thousands more people in
California and throughout the United States.	

adding three new organizations to its portfolio. REDF's portfolio of social

enterprises is selected based on their potential to not only succeed operationally,

but also because of what their work will demonstrate that can contribute to building

___the field of social enterprise. REDF shares lessons learned from its portfolio with

Name of the organization	Employer identification number
REDF	54-2132153
Form 990, Part III, Line 4d - Other Program Services Description	
other nonprofit, business community, and public sector leaders	to spur on the
development of social enterprises in other communities. The th	ree new organizations
added include Coalition for Responsible Community Development	(CRDC) in Los Angeles,
which serves at-risk young adults through collaborations with	residents, businesses,
community-based organizations and civic leaders to improve the	quality of life in
the_Vernon-Central_area of Los_Angeles; Community Resource Cen	ter (CRC) in
Encinitas, which provides comprehensive domestic violence serv	ices_and_social
services to women and their families, and Taller San Jose in San	anta_Ana,which
assists_at-risk_young_adults_in_overcoming_poverty_through_an_	intensive,
strategically designed job training program.	
In 2012, REDF has continued work on its second goal of develop	ing a sustainable,
replicable and scalable model for social enterprises employing	individuals with
significant barriers. Some highlights of progress against REDF's	second goal include:
	
Helping early stage enterprises. In October, REDF, in partner	ship with Academies
for Social Entrepreneurship, launched its Early Stage Social E	nterprise Academy
(ESSEA) in Los Angeles. ESSEA is a pilot program to help inter	ested_nonprofit
organizations go through the process of developing and launchi	ng a social enterprise
to_employ their target population. The first half of the 12-mo	nth_program_includes
six_full-day_work_sessions, as well as individualized coaching	to help organizations
identify a social enterprise idea and write a business plan. T	he second half of the
program is comprised of facilitated peer meetings focused on 1	aunching the social
enterprise. By the end of the program, organizations involved	will have a social
enterprise idea and an implementation plan to launch the busin	ess

Name of the organization	Employer identification number
REDF	54-2132153
Form 990, Part III, Line 4d - Other Program Services Description	
Developing the market for social enterprise goods, services, an	d_employeesIn
2012, _REDF_also made progress_against_its_goal_of_helping_soci	al_enterprises_make
better_and_more_durable_connections_to_private_sector_companies	that can: (1) buy
social_enterprise_goods_and_services_and, (2) hire_social_enter	prise <u>"graduates"</u>
(social_enterprise_employees_intentionally_transitioning_from_s	ocial enterprise
employment to more "mainstream" work opportunities). In partner	ship_with_private
equity firm KKR and another intermediary, NISH, that supports a	national network of
social_enterprises_employing_individuals_with_significant_disab	ilities, REDF has
initiated the discovery/qualification phase for potential proje	cts_with_several
KKR-owned_companies.	
Building the field. REDF also gained much momentum in 2012 in	regard to model
development and building the field of social enterprise. The RE	DF-convened_and_led
SE4Jobs Working Group - a national learning community that enga	qes_practitioners_all
over the US - continued to meet regularly through a quarterly t	eleconference, and
one in person meeting. Each meeting includes a presentation by	national leaders in
social innovation and social enterprise - from research and eva	luation presentations
by organizations like Mathematica, to presentations on financia	l_resources_for
social enterprise from funders such as Bank of America, to 'bes	t practices' in the
delivery of workforce services in a social enterprise context f	rom_organizations
like Chicago-based Cara Programs. Members discuss issues criti	cal_to_the_'scaling
up' of social enterprise during the large-group meetings, and i	n smaller
subcommittees. A white paper was developed outlining the case	for employment social
enterprise, and highlighting the evidence base that exists now,	and the kinds of
evidence required to further expand support for social enterpri	se growth.

Schedule 0 (Form 990 or 990-EZ) 2012 Name of the organization	Page 2
REDF	Employer identification number 54–2132153
	10
Form 990, Part III, Line 4d - Other Program Services Description	
We invite you to learn more about REDF on our website at	http://www.redf.org
Form 990, Part VI, Line 11b - Form 990 Review Process	
Pt VI-B, Line 11a The process REDF uses to review the form	n 990 includes initial
review by the President, following which the 990 is made a	available to REDF's Audit
committee, which is comprised of members of the Board of I	Directors who act on behalf
of the Board, for their review prior to filing. The 990 is	s_provided_to_the_full
Board of Directors prior to filing.	·
	·
Pt VI-B, Line 12c REDF regularly and consistently enforces	s_compliance_with_our
conflict of interest policy through ongoing monitoring by	our President as well as
annually requiring each member of the board of Directors	to sign the written
conflict of interest policy.	
	·
Pt VI-B, Line 15 The process for determining compensation	of the President and key
employees of REDF includes benchmarking by a third-party	firm, followed by review
and_approval by the Board of Directors, as noted in their	approval of the annual
budget.	·
Pt_VI-C, Line 19 REDF makes its governing documents, conf.	lict of interest policy and
financial_statements_available_to_the_public_upon_request	via dissemination of hard
copy in person or via post.	
	·
Pt III, Line 4d See attached program accomplishments state	ement

Schedule 0 (Form 990 or 990-EZ) 2012	Page 2
Name of the organization	Employer identification number
REDF	54-2132153
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available	
REDF maintains a close relationship with the organizations we f	und. Monthly
meetings, weekly calls, frequent emails, periodic risk assessme	nts and monitoring
and_ongoing_strategic_and_business_support_enable_us_to_monitor	the use of grant
funds we disburse to each organization. In addition, and as ap	propriate, we
officially restrict the use of funds to particular projects or	initiatives and
require_evidence that the funds have been spent in alignment wi	th restrictions. We
review agency and enterprise financials and quarterly grant spe	nding reports that
ensure appropriate expenditures have been made by each organiza	tion. Lastly, we
review_each_organization's_Audited_Financials_and_IRS_Form_990.	
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2012	Schedule D, Part XIII - Supplen	nental Information	Page
	REDF		54-213215
Schedule D, Other Reven	Part XI, Line 4b ue Included On Form 990 But Not Included In F/S		
Direct Fun	draising Expenses	Total \$	-318,139. -318,139.
Schedule D, Other Expen	Part XII, Line 4b ses Included On Form 990 But Not Included In F/S	;	
	draising Expenses	Total <u>\$</u>	-318,139. -318,139.

Schedule A, Part IV - Supplemental Information						Page					
				REDF		_					 54-2132
Part II, Line 10 - Othe	er Income										
Nature and Sourc		2012		2011			2010			2009	2008
Honoraria and Ot	her Revenu	ie									
	Total 💲	1,000. 1,000.	\$		0.	\$		0.	<u>\$</u>	9,923. 9,923.	\$ 0