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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

2012

Open to Public Inspection

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

A For the 2012 calendar year, or tax year beginning and ending

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization
BAINBRIDGE ISLAND ONE CALL FOR ALL

D Employer identification number
91-0782393

E Telephone number
206-842-5449

G Gross receipts \$ 1,077,355.

H(a) Is this a group return for affiliates? ☐ Yes ☒ No
H(b) Are all affiliates included? ☐ Yes ☐ No
 If "No," attach a list. (see instructions)

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c)() (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: WWW.ONECALLFORALL.ORG

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1950 **M State of legal domicile** WA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: CHARITABLE FUND RAISER AND DISTRIBUTION TO CHARITIES

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a) 3 12

4 Number of independent voting members of the governing body (Part VI, line 1b) 4 12

5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 0

6 Total number of volunteers (estimate if necessary) 6 0

7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0.

7b Net unrelated business taxable income from Form 990-T, line 34 7b 0.

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	1,091,606.	1,076,951.
9 Program service revenue (Part VIII, line 2g)	0.	0.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	997.	404.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,092,603.	1,077,355.
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,030,313.	940,582.
14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
b Total fundraising expenses (Part IX, column (D), line 25)	0.	0.
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	84,938.	83,881.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,115,251.	1,024,463.
19 Revenue less expenses. Subtract line 18 from line 12	-22,648.	52,892.

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	936,482.	986,793.
21 Total liabilities (Part X, line 26)	894,203.	891,622.
22 Net assets or fund balances. Subtract line 21 from line 20	42,279.	95,171.

Part II Signature Block

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

Sign Here

Signature of officer: *W. Joseph Wilczynski* Date: 6-24-12

JOE WILCYNISKI, TREASURER

Paid Preparer Use Only

Print/Type preparer's name: JESSE M. SABEY Preparer's signature: *Jesse M. Sabe* Date: 6/22/13 Check ☐ if self-employed PTIN: P01653737

Firm's name: MKD CPAS, PLLC Firm's EIN: 45-1070919

Firm's address: 1809 7TH AVENUE, SUITE 1300 SEATTLE, WA 98101-1313 Phone no: (206) 624-7434

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

SCANNED JUL 09 2013

9-16 20

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III ☐**1** Briefly describe the organization's mission:

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

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

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

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

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

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

4a (Code _____) (Expenses \$ 940,582. including grants of \$ 940,582.) (Revenue \$ 0.)
COLLECTS FUNDS FROM THE CITIZENS OF BAINBRIDGE ISLAND, WA BASED ON
THEIR PLEDGE CARDS AND THEN DISTRIBUTES THE CONTRIBUTIONS TO THE
DESIGNATED 501 C 3 CHARITIES. SEE ATTACHED.

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

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

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

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

4e Total program service expenses  940,582.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, 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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>		X
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

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

Note. All Form 990 filers are required to complete Schedule O

Form 990 (2012)

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

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

Form 990 (2012)

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

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

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

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	12	
1b	Enter the number of voting members included in line 1a, above, who are independent.	12	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.		X

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

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

Section C. Disclosure

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

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

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

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

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

[illegible]

Part VII	Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees <i>(continued)</i>
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[illegible]

2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization	0
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		Yes	No
3	Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		X
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization	0
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Part VIII Statement of RevenueCheck if Schedule O contains a response to any question 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
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,076,951.				
	g Noncash contributions included in lines 1a-1f \$						
	h Total. Add lines 1a-1f	▶			1,076,951.		
Program Service Revenue	2 a _____	Business Code					
	b _____						
	c _____						
	d _____						
	e _____						
	f All other program service revenue						
	g Total. Add lines 2a-2f	▶					
	3 Investment income (including dividends, interest, and other similar amounts)	▶		404.			404.
4 Income from investment of tax-exempt bond proceeds	▶						
5 Royalties	▶						
Other Revenue	6 a Gross rents	(i) Real	(ii) Personal				
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)	▶					
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss)	▶					
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
	b Less: direct expenses	b					
	c Net income or (loss) from fundraising events	▶					
	9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities	▶					
	10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory	▶					
	Miscellaneous Revenue			Business Code			
	11 a _____						
	b _____						
c _____							
d All other revenue							
e Total. Add lines 11a-11d	▶						
12 Total revenue. See instructions	▶			1,077,355.	0.	0.	404.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	940,582.	940,582.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	1,800.		1,800.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O)				
12 Advertising and promotion	3,359.		3,359.	
13 Office expenses	2,310.		2,310.	
14 Information technology				
15 Royalties				
16 Occupancy	2,151.		2,151.	
17 Travel	350.		350.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	7,719.		7,719.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a EXECUTIVE DIRECTOR	27,915.		27,915.	
b CHARGE CARD FEES	9,957.		9,957.	
c CAMPAIGN PRINTING	5,836.		5,836.	
d AUDIT FEE	4,000.		4,000.	
e All other expenses	18,484.		18,484.	
25 Total functional expenses. Add lines 1 through 24e	1,024,463.	940,582.	83,881.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

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

Part X Balance SheetCheck if Schedule O contains a response to any question in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	915,744.	1	975,736.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	18,781.	3	9,100.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under 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 instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	1,957.	9	1,957.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b	10c	
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	936,482.	16	986,793.	
Liabilities	17 Accounts payable and accrued expenses		17	
	18 Grants payable	894,203.	18	891,622.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 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	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	894,203.	26	891,622.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	26,079.	27	71,871.
	28 Temporarily restricted net assets	16,200.	28	23,300.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	42,279.	33	95,171.
34 Total liabilities and net assets/fund balances	936,482.	34	986,793.	

Form 990 (2012)

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,077,355.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,024,463.
3	Revenue less expenses. Subtract line 2 from line 1	3	52,892.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	42,279.
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.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	95,171.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII ☐**1** Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____

If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:

☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis**b** Were the organization's financial statements audited by an independent accountant?

If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:

☐ 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 audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?**b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Yes No

2a

X

2b

X

2c

3a

X

3b

Form 990 (2012)

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2012

**Open to Public
Inspection**

Name of the organization

BAINBRIDGE ISLAND ONE CALL FOR ALL

Employer identification number

91-0782393

Part I	Reason for Public Charity Status (All organizations must complete this part.) See instructions.
---------------	--

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to 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

e ☐ 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 received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

(ii) A family member of a person described in (i) above?

(iii) A 35% controlled entity of a person described in (i) or (ii) above?

h Provide the following information about the supported organization(s).

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

[illegible]

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

Schedule A (Form 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.)

Section A. Public Support

Calendar year (or fiscal year 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.")	9749969.	930,170.	971,636.	1091606.		12743381.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	9749969.	930,170.	971,636.	1091606.		12743381.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						12743381.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	9749969.	930,170.	971,636.	1091606.		12743381.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	5,670.	2,694.	1,011.	997.		10,372.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						12753753.
12 Gross receipts from related activities, etc. (see instructions)					12	

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

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	99.92	%
15 Public support percentage from 2011 Schedule A, Part II, line 14	15	99.90	%
16a 33 1/3% support test - 2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>			
b 33 1/3% support test - 2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>			
17a 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>			
b 10% -facts-and-circumstances test - 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 <input type="checkbox"/>			
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>			

Schedule A (Form 990 or 990-EZ) 2012

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 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						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support. (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

b 33 1/3% support tests - 2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

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

Name of the organization

BAINBRIDGE ISLAND ONE CALL FOR ALL

Part I	General Information on Grants and Assistance
--------	--

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

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
SEE ATTACHED SEE ATTACHED			0.	0.			
SEE ATTACHED STATEMENT SEE ATTACHED STATEMENT			0.	0.			

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

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

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

Schedule I (Form 990) (2012)

One Call For All
Transaction Detail By Account
January through December 2012

2012

Agency Distribution

Type	Date	Num	Name	Memo	Class	Ctr	Split	Amount	Balance
Check	01/14/2012	7137	ABC Conservation Education F		Agencies Income & Loss		Columbia Campaign checking	1 838 60	1 838 60
Check	01/14/2012	7138	Arms Around Bainbridge		Agencies Income & Loss		Columbia Campaign checking	8 290 50	8 129 10
Check	01/14/2012	7139	Bainbridge Arts & Crafts		Agencies Income & Loss		Columbia Campaign checking	9 930 04	18 059 14
Check	01/14/2012	7140	Bainbridge Chorale		Agencies Income & Loss		Columbia Campaign checking	2 001 78	20 060 92
Check	01/14/2012	7141	Bainbridge Community Piano Ass		Agencies Income & Loss		Columbia Campaign checking	2 854 40	22 915 32
Check	01/14/2012	7142	Bainbridge Coop Nursery School		Agencies Income & Loss		Columbia Campaign checking	2 361 93	25 277 25
Check	01/14/2012	7143	Bainbridge Island Ambulance		Agencies Income & Loss		Columbia Campaign checking	16 539 70	41 813 95
Check	01/14/2012	7144	Bainbridge Island Arts and Human		Agencies Income & Loss		Columbia Campaign checking	9 551 98	51 385 93
Check	01/14/2012	7145	Bainbridge Island Boys & Girls Club		Agencies Income & Loss		Columbia Campaign checking	12 063 80	63 429 83
Check	01/14/2012	7146	Bainbridge Island Child Care		Agencies Income & Loss		Columbia Campaign checking	4 306 50	67 736 33
Check	01/14/2012	7147	Bainbridge Island Historical		Agencies Income & Loss		Columbia Campaign checking	9 575 11	77 311 44
Check	01/14/2012	7148	B I JAPANESE AMER EXCLUSION MEMORIAL		Agencies Income & Loss		Columbia Campaign checking	8 215 46	85 526 90
Check	01/14/2012	7149	Bainbridge Island Kwans		Agencies Income & Loss		Columbia Campaign checking	1 358 80	86 883 70
Check	01/14/2012	7150	Bainbridge Island Land Trust		Agencies Income & Loss		Columbia Campaign checking	22 282 15	109 165 85
Check	01/14/2012	7151	Bainbridge Island Parks Foundation		Agencies Income & Loss		Columbia Campaign checking	8 899 72	118 065 57
Check	01/14/2012	7152	Bainbridge Island Rowing Club		Agencies Income & Loss		Columbia Campaign checking	2 010 19	120 075 76
Check	01/14/2012	7153	Bainbridge Island Senior Corn		Agencies Income & Loss		Columbia Campaign checking	13 561 88	133 637 64
Check	01/14/2012	7154	Bainbridge Island Special Needs Found		Agencies Income & Loss		Columbia Campaign checking	11 491 65	145 129 29
Check	01/14/2012	7155	Bainbridge Island Visually Impaired		Agencies Income & Loss		Columbia Campaign checking	1 898 80	147 028 09
Check	01/14/2012	7156	Bainbridge Island Volunteer Firefig		Agencies Income & Loss		Columbia Campaign checking	20 885 14	167 913 23
Check	01/14/2012	7157	Bainbridge Island Youth Orchestr		Agencies Income & Loss		Columbia Campaign checking	3 024 19	170 937 42
Check	01/14/2012	7158	Bainbridge Island Youth Soccer		Agencies Income & Loss		Columbia Campaign checking	1 403 89	172 341 11
Check	01/14/2012	7159	Bainbridge-Ometepe Sister Isla		Agencies Income & Loss		Columbia Campaign checking	6 339 50	178 680 61
Check	01/14/2012	7160	Bainbridge Performing Arts		Agencies Income & Loss		Columbia Campaign checking	7 903 02	186 583 63
Check	01/14/2012	7161	Bainbridge Public Library		Agencies Income & Loss		Columbia Campaign checking	48 110 78	232 694 41
Check	01/14/2012	7162	Bainbridge School Foundation		Agencies Income & Loss		Columbia Campaign checking	23 837 30	256 531 71
Check	01/14/2012	7163	Bainbridge Student Loan		Agencies Income & Loss		Columbia Campaign checking	2 894 19	259 425 90
Check	01/14/2012	7164	Bainbridge Youth Services		Agencies Income & Loss		Columbia Campaign checking	17 729 50	277 155 40
Check	01/14/2012	7165	Battle Point Astronomical Associatio		Agencies Income & Loss		Columbia Campaign checking	1 817 38	278 972 78
Check	01/14/2012	7166	Bloedel Reserve		Agencies Income & Loss		Columbia Campaign checking	6 507 29	285 540 07
Check	01/14/2012	7167	Camp Fire USA Central Puget So		Agencies Income & Loss		Columbia Campaign checking	216 80	285 756 87
Check	01/14/2012	7168	Carden Country School		Agencies Income & Loss		Columbia Campaign checking	2 927 38	288 684 25
Check	01/14/2012	7169	Chuckwagon Senior Nutrition Prog		Agencies Income & Loss		Columbia Campaign checking	2 364 80	291 049 05
Check	01/14/2012	7170	Community Energy Solutions		Agencies Income & Loss		Columbia Campaign checking	1 814 82	292 863 87
Check	01/14/2012	7171	Cross Clinic of the Peninsulas		Agencies Income & Loss		Columbia Campaign checking	5 159 20	298 022 87
Check	01/14/2012	7172	Dispute Resolution Center of Kisa		Agencies Income & Loss		Columbia Campaign checking	2 801 72	300 824 59
Check	01/14/2012	7173	Elder and Adult Day Services		Agencies Income & Loss		Columbia Campaign checking	5 220 82	306 045 41
Check	01/14/2012	7174	Filipino-American Community of Bainb		Agencies Income & Loss		Columbia Campaign checking	1 113 60	307 159 01
Check	01/14/2012	7175	Fred Hutchinson Cancer Researc		Agencies Income & Loss		Columbia Campaign checking	2 744 80	309 903 81
Check	01/14/2012	7176	Friends of the Farms		Agencies Income & Loss		Columbia Campaign checking	9 382 31	319 286 12
Check	01/14/2012	7177	Habitat for Humanity of Kitsap Co		Agencies Income & Loss		Columbia Campaign checking	11 021 27	330 287 39
Check	01/14/2012	7178	Helpline House		Agencies Income & Loss		Columbia Campaign checking	106 804 75	437 092 14
Check	01/14/2012	7179	Hospice of Kitsap County		Agencies Income & Loss		Columbia Campaign checking	15 222 55	452 314 69
Check	01/14/2012	7180	Housing Resources Board		Agencies Income & Loss		Columbia Campaign checking	20 564 33	472 879 02
Check	01/14/2012	7181	Interfaith Volunteer Caregivers		Agencies Income & Loss		Columbia Campaign checking	18 475 11	491 354 13
Check	01/14/2012	7182	Island Cooperative Learning		Agencies Income & Loss		Columbia Campaign checking	2 086 11	493 442 24
Check	01/14/2012	7183	Island Music Center (IMC)		Agencies Income & Loss		Columbia Campaign checking	5 524 27	498 966 51
Check	01/14/2012	7184	Island Theatre		Agencies Income & Loss		Columbia Campaign checking	2 100 83	501 067 34
Check	01/14/2012	7185	Islandwood		Agencies Income & Loss		Columbia Campaign checking	8 889 23	507 756 57
Check	01/14/2012	7186	Just Know Coalition		Agencies Income & Loss		Columbia Campaign checking	824 43	508 581 00
Check	01/14/2012	7187	Kids Discovery Museum		Agencies Income & Loss		Columbia Campaign checking	3 981 52	512 562 52
Check	01/14/2012	7188	Kids in Concert		Agencies Income & Loss		Columbia Campaign checking	1 833 86	514 396 38

One Call For All
Transaction Detail By Account
January through December 2012

2012	Type	Date	Num	Name	Memo	Class	Clr	Split	Amount	Balance
	Check	01/14/2012	7189	Kids Up!		Agencies Income & Loss		Columbia Campaign checking	1,213.67	515,610.05
	Check	01/14/2012	7190	Kilpeck Scholarship Fund		Agencies Income & Loss		Columbia Campaign checking	1,065.46	516,685.51
	Check	01/14/2012	7191	Kilsap Audubon Society		Agencies Income & Loss		Columbia Campaign checking	2,883.80	519,579.31
	Check	01/14/2012	7192	Kilsap Legal Services		Agencies Income & Loss		Columbia Campaign checking	3,106.80	522,686.11
	Check	01/14/2012	7193	League of Women Voters Educa		Agencies Income & Loss		Columbia Campaign checking	1,273.40	523,959.51
	Check	01/14/2012	7194	Literacy Council of Kitsap County		Agencies Income & Loss		Columbia Campaign checking	3,248.00	527,207.51
	Check	01/14/2012	7195	Madrona School		Agencies Income & Loss		Columbia Campaign checking	3,789.38	530,996.87
	Check	01/14/2012	7196	Marge Williams Office Center		Agencies Income & Loss		Columbia Campaign checking	2,526.12	533,522.99
	Check	01/14/2012	7197	Martha & Mary		Agencies Income & Loss		Columbia Campaign checking	744.80	534,267.79
	Check	01/14/2012	7198	Montessori Country School		Agencies Income & Loss		Columbia Campaign checking	4,763.26	539,051.05
	Check	01/14/2012	7199	Ovation! Musical Theatre Bainbridge		Agencies Income & Loss		Columbia Campaign checking	2,241.80	541,292.85
	Check	01/14/2012	7200	P A W S. of Bainbridge		Agencies Income & Loss		Columbia Campaign checking	23,351.92	564,644.77
	Check	01/14/2012	7201	Peacock Family Service		Agencies Income & Loss		Columbia Campaign checking	769.78	565,414.55
	Check	01/14/2012	7202	Peninsula Community Health Service		Agencies Income & Loss		Columbia Campaign checking	3,728.60	569,173.15
	Check	01/14/2012	7203	Planned Parenthood of Westlsm Wa		Agencies Income & Loss		Columbia Campaign checking	9,533.20	578,706.35
	Check	01/14/2012	7204	Puget sound restoration fund		Agencies Income & Loss		Columbia Campaign checking	4,800.67	583,507.02
	Check	01/14/2012	7205	Rotary Club of B 1 Scholarship Foun		Agencies Income & Loss		Columbia Campaign checking	3,227.31	586,734.33
	Check	01/14/2012	7206	Salish Sea Expeditions	lost check 7207 replaced	Agencies Income & Loss		Columbia Campaign checking	2,664.18	589,398.51
	Check	01/14/2012	7303	Sound Works Job Center		Agencies Income & Loss		Columbia Campaign checking	827.20	590,225.71
	Check	01/14/2012	7208	Sustainable Bainbridge		Agencies Income & Loss		Columbia Campaign checking	7,475.22	597,700.93
	Check	01/14/2012	7209	Teen Talking Circles		Agencies Income & Loss		Columbia Campaign checking	3,345.06	601,045.99
	Check	01/14/2012	7210	Global Source Education		Agencies Income & Loss		Columbia Campaign checking	1,060.66	602,106.65
	Check	01/14/2012	7211	The Island School		Agencies Income & Loss		Columbia Campaign checking	2,530.30	604,636.95
	Check	01/14/2012	7212	Virginia Mason Winslow Clinic		Agencies Income & Loss		Columbia Campaign checking	2,837.99	607,574.94
	Check	01/14/2012	7213	Voyager Montesson Elementary		Agencies Income & Loss		Columbia Campaign checking	861.46	608,436.40
	Check	01/14/2012	7214	Washington State Smile Partners		Agencies Income & Loss		Columbia Campaign checking	4,993.53	613,429.93
	Check	01/14/2012	7215	West Sound Wildlife Shelter		Agencies Income & Loss		Columbia Campaign checking	17,242.82	630,672.75
	Check	01/14/2012	7216	YWCA Alive-Bainbridge Island Do		Agencies Income & Loss		Columbia Campaign checking	9,118.82	639,791.57
	Check	01/14/2012	7217	Bainbridge island Sportsmen's Club		Agencies Income & Loss		Columbia Campaign checking	1,571.50	641,363.07
	Check	08/20/2012	7220	ABC Conservation Education F		Agencies Income & Loss		Columbia Campaign checking	982.65	642,345.72
	Check	08/20/2012	7221	Arms Around Bainbridge		Agencies Income & Loss		Columbia Campaign checking	2,809.07	645,254.79
	Check	08/20/2012	7222	Bainbridge Arts & Crafts		Agencies Income & Loss		Columbia Campaign checking	3,497.15	648,751.94
	Check	08/20/2012	7223	Bainbridge Chorale		Agencies Income & Loss		Columbia Campaign checking	1,172.98	649,924.92
	Check	08/20/2012	7224	Bainbridge Community Piano Ass		Agencies Income & Loss		Columbia Campaign checking	946.66	650,873.90
	Check	08/20/2012	7225	Bainbridge Coop Nursery School		Agencies Income & Loss		Columbia Campaign checking	1,226.70	652,100.60
	Check	08/20/2012	7226	Bainbridge Island Ambulance		Agencies Income & Loss		Columbia Campaign checking	7,217.82	659,318.22
	Check	08/20/2012	7227	Bainbridge Island Arts and Human		Agencies Income & Loss		Columbia Campaign checking	3,568.48	662,886.70
	Check	08/20/2012	7228	Bainbridge Island Boys & Girls Club		Agencies Income & Loss		Columbia Campaign checking	13,694.00	676,580.70
	Check	08/20/2012	7229	Bainbridge Island Child Care		Agencies Income & Loss		Columbia Campaign checking	2,231.38	678,832.08
	Check	08/20/2012	7230	Bainbridge Island Historical		Agencies Income & Loss		Columbia Campaign checking	4,544.90	683,376.98
	Check	08/20/2012	7231	B 1 JAPANESE AMER EXCLUSION MEMORIAL		Agencies Income & Loss		Columbia Campaign checking	3,926.01	687,304.99
	Check	08/20/2012	7232	Bainbridge Island Kwans		Agencies Income & Loss		Columbia Campaign checking	562.73	687,867.72
	Check	08/20/2012	7233	Bainbridge Island Lend Trust		Agencies Income & Loss		Columbia Campaign checking	10,164.92	698,052.64
	Check	08/20/2012	7234	Bainbridge Island Parks Foundation		Agencies Income & Loss		Columbia Campaign checking	4,341.07	702,393.71
	Check	08/20/2012	7235	Bainbridge Island Rowing Club		Agencies Income & Loss		Columbia Campaign checking	916.49	703,310.20
	Check	08/20/2012	7236	Bainbridge Island Senior Com		Agencies Income & Loss		Columbia Campaign checking	5,789.15	709,099.35
	Check	08/20/2012	7237	Bainbridge Island Special Needs Found		Agencies Income & Loss		Columbia Campaign checking	4,872.80	713,972.15
	Check	08/20/2012	7238	Bainbridge island Sportsmen's Club		Agencies Income & Loss		Columbia Campaign checking	534.62	714,506.77
	Check	08/20/2012	7239	Bainbridge island Visually Impaired		Agencies Income & Loss		Columbia Campaign checking	1,019.96	715,526.73
	Check	08/20/2012	7240	Bainbridge Island Volunteer Firefig		Agencies Income & Loss		Columbia Campaign checking	8,537.82	724,064.55
	Check	08/20/2012	7241	Bainbridge Island Youth Orchestr		Agencies Income & Loss		Columbia Campaign checking	1,272.21	725,336.76
	Check	08/20/2012	7242	Bainbridge Island Youth Soccer		Agencies Income & Loss		Columbia Campaign checking	844.45	726,181.21
	Check	08/20/2012	7243	Bainbridge-Ometepe Sister Isla		Agencies Income & Loss		Columbia Campaign checking	3,184.89	729,366.10
	Check	08/20/2012	7244	Bainbridge Performing Arts		Agencies Income & Loss		Columbia Campaign checking	4,711.95	734,078.05

One Call For All
Transaction Detail By Account
January through December 2012

2012

Type	Date	Num	Name	Memo	Class	Ctr	Split	Amount	Balance
Check	08/20/2012	7245	Bainbridge Public Library		Agencies Income & Loss		Columbia Campaign checking	17,928.10	752,008.15
Check	08/20/2012	7246	Bainbridge School Foundation		Agencies Income & Loss		Columbia Campaign checking	8,380.16	760,388.31
Check	08/20/2012	7247	Bainbridge Student Loan		Agencies Income & Loss		Columbia Campaign checking	1,235.09	761,621.40
Check	08/20/2012	7248	Bainbridge Youth Services		Agencies Income & Loss		Columbia Campaign checking	19,887.50	781,308.90
Check	08/20/2012	7249	Battle Point Astronomical Assocatio		Agencies Income & Loss		Columbia Campaign checking	1,393.26	782,702.16
Check	08/20/2012	7250	Biodel Reserve		Agencies Income & Loss		Columbia Campaign checking	2,814.67	785,516.83
Check	08/20/2012	7251	Garden Country School		Agencies Income & Loss		Columbia Campaign checking	924.98	786,441.79
Check	08/20/2012	7252	Community Energy Solutions		Agencies Income & Loss		Columbia Campaign checking	769.95	787,231.74
Check	08/20/2012	7253	Elder and Adult Day Services		Agencies Income & Loss		Columbia Campaign checking	2,488.32	789,720.06
Check	08/20/2012	7306	Filipino-American Community of Bainbr	reprinted check 7254	Agencies Income & Loss		Columbia Campaign checking	606.47	790,326.53
Check	08/20/2012	7255	Friends of the Farms		Agencies Income & Loss		Columbia Campaign checking	4,271.19	794,597.72
Check	08/20/2012	7256	Helpline House		Agencies Income & Loss		Columbia Campaign checking	39,478.04	834,075.76
Check	08/20/2012	7257	Hope House of Bainbridge Island		Agencies Income & Loss		Columbia Campaign checking	10,262.41	844,338.17
Check	08/20/2012	7258	Housing Resources Board		Agencies Income & Loss		Columbia Campaign checking	7,454.69	851,792.86
Check	08/20/2012	7259	Interfaith Volunteer Caregivers		Agencies Income & Loss		Columbia Campaign checking	9,250.25	861,043.11
Check	08/20/2012	7260	Island Cooperative Learning		Agencies Income & Loss		Columbia Campaign checking	785.58	861,828.67
Check	08/20/2012	7261	Island Music Center (IMC)		Agencies Income & Loss		Columbia Campaign checking	1,871.39	863,800.06
Check	08/20/2012	7262	Island Theatre		Agencies Income & Loss		Columbia Campaign checking	1,046.00	864,846.06
Check	08/20/2012	7263	Islandwood		Agencies Income & Loss		Columbia Campaign checking	3,478.95	868,323.01
Check	08/20/2012	7264	Just Know Coalition		Agencies Income & Loss		Columbia Campaign checking	2,236.11	870,559.12
Check	08/20/2012	7265	Kids Discovery Museum		Agencies Income & Loss		Columbia Campaign checking	1,768.82	872,327.94
Check	08/20/2012	7266	Kids in Concert		Agencies Income & Loss		Columbia Campaign checking	616.13	872,944.07
Check	08/20/2012	7267	Kilpatrick Scholarship Fund		Agencies Income & Loss		Columbia Campaign checking	468.55	873,412.62
Check	08/20/2012	7268	Madrone School		Agencies Income & Loss		Columbia Campaign checking	1,204.97	874,617.59
Check	08/20/2012	7269	Merle Williams Office Center		Agencies Income & Loss		Columbia Campaign checking	1,328.23	875,945.82
Check	08/20/2012	7270	Montessori Country School		Agencies Income & Loss		Columbia Campaign checking	1,627.01	877,572.83
Check	08/20/2012	7271	Ovation! Musical Theatre Bainbridge		Agencies Income & Loss		Columbia Campaign checking	1,030.83	878,603.66
Check	08/20/2012	7272	P A W S. of Bainbridge		Agencies Income & Loss		Columbia Campaign checking	9,390.08	888,023.74
Check	08/20/2012	7273	Peacock Family Service		Agencies Income & Loss		Columbia Campaign checking	451.79	888,475.53
Check	08/20/2012	7274	Puglet sound restoration fund		Agencies Income & Loss		Columbia Campaign checking	2,505.12	890,980.65
Check	08/20/2012	7275	Rotary Club of B I Scholarship Foun		Agencies Income & Loss		Columbia Campaign checking	1,244.37	892,225.02
Check	08/20/2012	7276	Salish Sea Expeditions		Agencies Income & Loss		Columbia Campaign checking	1,125.90	893,350.92
Check	08/20/2012	7277	Sustainable Bainbridge		Agencies Income & Loss		Columbia Campaign checking	3,062.38	896,413.30
Check	08/20/2012	7278	Teen Talking Circles		Agencies Income & Loss		Columbia Campaign checking	4,222.36	900,635.66
Check	08/20/2012	7279	Global Source Education		Agencies Income & Loss		Columbia Campaign checking	689.45	901,305.11
Check	08/20/2012	7280	The Island School		Agencies Income & Loss		Columbia Campaign checking	1,410.65	902,715.76
Check	08/20/2012	7281	Virginia Mason Winslow Clinic		Agencies Income & Loss		Columbia Campaign checking	1,113.13	903,828.89
Check	08/20/2012	7282	Voyager Montessori Elementary		Agencies Income & Loss		Columbia Campaign checking	410.74	904,239.63
Check	08/20/2012	7283	Washington State Smile Partners		Agencies Income & Loss		Columbia Campaign checking	2,081.83	906,321.46
Check	08/20/2012	7284	West Sound Wildlife Shelter		Agencies Income & Loss		Columbia Campaign checking	8,654.28	914,975.74
Check	08/20/2012	7285	YWCA Alive-Bainbridge Island Do		Agencies Income & Loss		Columbia Campaign checking	4,119.03	919,094.77
Check	08/20/2012	7286	Camp Fire USA Central Puget So		Agencies Income & Loss		Columbia Campaign checking	54.20	919,148.97
Check	08/20/2012	7287	Chuckwagon Senior Nutrition Prog		Agencies Income & Loss		Columbia Campaign checking	610.20	919,759.17
Check	08/20/2012	7288	Cross Clinic of the Peninsulas		Agencies Income & Loss		Columbia Campaign checking	1,317.55	921,076.72
Check	08/20/2012	7289	Dispute Resolution Center of Kitsa		Agencies Income & Loss		Columbia Campaign checking	808.43	921,885.15
Check	08/20/2012	7290	Fred Hutchinson Cancer Researc		Agencies Income & Loss		Columbia Campaign checking	815.20	922,700.35
Check	08/20/2012	7291	Habitat for Humanity of Kitsap Co		Agencies Income & Loss		Columbia Campaign checking	3,317.07	926,017.42
Check	08/20/2012	7292	Hospice of Kitsap County		Agencies Income & Loss		Columbia Campaign checking	4,772.64	930,790.06
Check	08/20/2012	7293	Kitsap Audubon Society		Agencies Income & Loss		Columbia Campaign checking	835.95	931,626.01
Check	08/20/2012	7294	Kitsap Legal Services		Agencies Income & Loss		Columbia Campaign checking	1,206.85	932,832.86
Check	08/20/2012	7295	League of Women Voters Educa		Agencies Income & Loss		Columbia Campaign checking	537.35	933,370.31
Check	08/20/2012	7296	Literacy Council of Kitsap County		Agencies Income & Loss		Columbia Campaign checking	830.00	934,200.31
Check	08/20/2012	7297	Martha & Mary		Agencies Income & Loss		Columbia Campaign checking	186.20	934,386.51
Check	08/20/2012	7298	Peninsula Community Health Service		Agencies Income & Loss		Columbia Campaign checking	2,353.40	936,739.91

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2012

Open to Public
Inspection

Name of the organization

BAINBRIDGE ISLAND ONE CALL FOR ALL

Employer identification number

91-0782393

FORM 990, PART VI, SECTION B, LINE 11: THE ORGANIZATION'S TREASURER

REVIEWS THE 990 RETURN PRIOR TO SIGNING AND FILING THE RETURN.

FORM 990, PART VI, SECTION C, LINE 18: THE ORGANIZATION'S FINANCIAL

INFORMATION IS AVAILABLE ON ITS WEB PAGE AND UPON REQUEST.

FORM 990, PART VI, SECTION C, LINE 19: ALL CORPORATE DOCUMENTS, IE BY LAWS

AND ARTICLES ARE AVAILABLE AT THE ORGANIZATION'S OFFICE FOOR ANYONE WHO

WANTS TO READ THEM.

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing (e-file) You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on **e-file for Charities & Nonprofits**.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. BAINBRIDGE ISLAND ONE CALL FOR ALL	Employer identification number (EIN) or 91-0782393
	Number, street, and room or suite no. If a P.O. box, see instructions. PO BOX 10487	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. BAINBRIDGE ISLAND, WA 98110	

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

0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

JOE WILCYNKI, TREASURER

- The books are in the care of ► **PO BOX 10487 - BAINBRIDGE ISLAND, WA 98110**
Telephone No. ► **206-382-7722** FAX No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2013**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
► ☒ calendar year **2012** or
► ☐ tax year beginning , and ending .

- 2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8868** (Rev. 1-2013)