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Form 990

Return of Organization Exempt From Income Tax

2012

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

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

A For the 2012 calendar year, or tax year beginning 07-01-2012, 2012, and ending 06-30-2013

<input type="checkbox"/> Check if applicable	C Name of organization NET IMPACT		D Employer identification number 03-0552976
<input type="checkbox"/> Address change	Doing Business As		
<input type="checkbox"/> Name change			
<input type="checkbox"/> Initial return	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephone number (415) 495-4230
<input type="checkbox"/> Terminated			
<input type="checkbox"/> Amended return	City or town, state or country, and ZIP + 4 SAN FRANCISCO, CA 94105		
<input type="checkbox"/> Application pending			G Gross receipts \$ 4,869,182
F Name and address of principal officer ELIZABETH MAW 150 SPEAR ST STE 500 SAN FRANCISCO, CA 94105		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

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

J Website: ► WWW.NETIMPACT.ORG

K Form of organization Corporation Trust Association Other ► L Year of formation 1993 M State of legal domicile CA

Part I Summary

1 Briefly describe the organization's mission or most significant activities NET IMPACT'S MISSION IS TO MOBILIZE A NEW GENERATION TO USE THEIR CAREER TO DRIVE TRANSFORMATIONAL SOCIAL AND ENVIRONMENTAL CHANGE IN THE WORKPLACE AND THE WORLD	
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 14
4 Number of independent voting members of the governing body (Part VI, line 1b)	4 14
5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5 40
6 Total number of volunteers (estimate if necessary)	6 3
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a 0
b Net unrelated business taxable income from Form 990-T, line 34	7b 0

8 Contributions and grants (Part VIII, line 1h)	Prior Year 2,301,544	Current Year 2,505,005
9 Program service revenue (Part VIII, line 2g)	1,346,950	2,362,092
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,648	2,085
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)	3,650,142	4,869,182

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0 0
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)	1,872,073 2,709,854
16a Professional fundraising fees (Part IX, column (A), line 11e)	0 0
b Total fundraising expenses (Part IX, column (D), line 25) ► 326,852	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,444,479 1,559,808
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	3,316,552 4,269,662
19 Revenue less expenses Subtract line 18 from line 12	333,590 599,520

20 Total assets (Part X, line 16)	Beginning of Current Year 1,806,592	End of Year 2,299,974
21 Total liabilities (Part X, line 26)	596,708	490,570
22 Net assets or fund balances Subtract line 21 from line 20	1,209,884	1,809,404

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 ELIZABETH MAW CEO Type or print name and title	2014-02-11 Date
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Paid Preparer Use Only	Print/Type preparer's name PENNY L LANE CPA	Preparer's signature	Date	<input type="checkbox"/> If self-employed	PTIN P00743411
	Firm's name ► KARLSSON & LANE AN ACCOUNTANCY CORP			Firm's EIN ► 94-2590397	
	Firm's address ► 4725 FIRST ST STE 226 PLEASANTON, CA 94566			Phone no (925) 271-5519	

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

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

NET IMPACT'S MISSION IS TO MOBILIZE A NEW GENERATION TO USE THEIR CAREER TO DRIVE TRANSFORMATIONAL SOCIAL AND ENVIRONMENTAL CHANGE IN THE WORKPLACE AND THE WORLD

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 \$ 1,583,945 including grants of \$) (Revenue \$ 1,387,674)

CAMPUS PROGRAMS AND CHAPTER NETWORK NET IMPACT'S CAMPUS LEADERSHIP PROGRAMS GIVE STUDENTS OPPORTUNITIES TO BUILD SKILLS AND DRIVE ACTION, AND INCLUDE CAMPUS CAMPAIGNS LIKE SMALL STEPS, BIG WINS, AND UP TO US THE ORGANIZATION'S CAMPUS AND PROFESSIONAL CHAPTERS ARE LOCALLY BASED AND EDUCATE AND CONNECT EMERGING LEADERS AROUND THE GLOBE TO DRIVE SOCIAL AND ENVIRONMENTAL CHANGE ON CAMPUS AND THROUGHOUT THEIR CAREERS CHAPTERS HOST NETWORKING, EDUCATIONAL, AND COMMUNITY SERVICE EVENTS, MANY OF WHICH ARE OPEN TO THE PUBLIC NET IMPACT'S CHAPTERS DO NOT MEET THE DEFINITION OF LOCAL CHAPTERS OR AFFILIATES FOR PART VI, QUESTION 10A ON FORM 990 AS THE ORGANIZATION DOES NOT HAVE FINANCIAL OR PROGRAMMATIC OVERSIGHT OF LOCAL CHAPTERS

4b (Code) (Expenses \$ 1,137,327 including grants of \$) (Revenue \$ 705,118)

CONFERENCE EDUCATION THE ORGANIZATION'S FLAGSHIP ANNUAL CONFERENCE ATTRACT 2500+ PASSIONATE NEW LEADERS THE CONFERENCE IS OPEN TO THE PUBLIC AND FEATURES SPEAKERS, PANELS, AND WORKSHOPS FOCUSED ON TOPICS SUCH AS CORPORATE SOCIAL RESPONSIBILITY, SOCIAL ENTREPRENEURSHIP, AND ENVIRONMENTAL SUSTAINABILITY THE ORGANIZATION PROVIDES SCHOLARSHIPS AND BELOW-COST TICKET PRICING TO STUDENTS AND OTHER ATTENDEES OF NEED

4c (Code) (Expenses \$ 591,742 including grants of \$) (Revenue \$ 410,488)

MEMBERSHIP AND CAREER RESOURCES MEMBERSHIP TO NET IMPACT IS FREE AND AVAILABLE TO ANYONE MEMBERSHIP BENEFITS INCLUDE ACCESS TO ALMOST ALL EDUCATIONAL AND CAREER RESOURCES PROVIDED BY THE ORGANIZATION, INCLUDING EDUCATIONAL PUBLICATIONS, JOB BOARD, NETWORK NEWSLETTERS, AND THE IMPACT AT WORK PROGRAM ANNUAL PREMIUM MEMBERSHIP IS A PAID LEVEL OF ACCESS PROVIDING ALL THE BENEFITS OF THE FREE MEMBERSHIP PLUS A DISCOUNT ON CONFERENCE REGISTRATION AND ACCESS TO CAREER CONNECTIONS AND THE IN DEPTH WEBINAR SERIES CAREER RESOURCES ARE AVAILABLE ON THE WEBSITE AND INCLUDE SELF-ASSESSMENT TOOLS (FREE), ONLINE NETWORKING TOOLS (PREMIUM BENEFIT), AND THE JOB BOARD (FREE)

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

EDUCATION & CAREER THE ORGANIZATION'S EDUCATION AND CAREER PROGRAMS OFFER INFORMATION AND RESOURCES TO HELP INDIVIDUALS LEARN ABOUT TOPICS RELATED TO USING BUSINESS FOR SOCIAL/ENVIRONMENTAL INTEREST, AND WAYS IN WHICH THEY CAN INCORPORATE THEIR VALUES INTO THEIR CAREERS MOST OF THE RESOURCES LIVE ON THE ORGANIZATION'S WEBSITE AS FREE CONTENT OR DOWNLOADABLE PUBLICATIONS

4d Other program services (Describe in Schedule O)

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

4e Total program service expenses ► 3,313,014

Part IV Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A

2 Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?

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

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

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III

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

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

8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III

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

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

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
- 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
- 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
- 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
- e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part 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 XI

12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII

- 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

13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States?

- 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

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

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

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)

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

19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

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

	Yes	No
1	Yes	
2	Yes	
3		No
4		No
5		No
6		No
7		No
8		No
9	Yes	
10		No
11a	Yes	
11b		No
11c		No
11d	Yes	
11e		No
11f	Yes	
12a	Yes	
12b		No
13		No
14a		No
14b		No
15		No
16		No
17		No
18		No
19		No
20a		No
20b		

Part IV Checklist of Required Schedules (continued)

21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

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? If "Yes," complete Schedule I, Parts I and III

23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?

d 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? If "Yes," complete Schedule L, Part I

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I

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? If "Yes," complete Schedule L, Part II

27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III

28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M

30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M

31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II

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? If "Yes," complete Schedule R, Part I

34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

b 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)? If "Yes," complete Schedule R, Part V, line 2

36 **Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2

37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

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

21		No
22		No
23	Yes	
24a		No
24b		
24c		
24d		
25a		No
25b		No
26		No
27		No
28a		No
28b		No
28c		No
29	Yes	
30		No
31		No
32		No
33		No
34		No
35a		No
35b		
36		No
37		No
38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	17	
1b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
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	40	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	No	
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	No	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	No	
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	No	
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5b	No	
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5c	No	
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	6a	No	
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?	6b	No	
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	7a	Yes	
7 Organizations that may receive deductible contributions under section 170(c).	7b	Yes	
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?	7c	No	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7d	No	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7e	No	
d If "Yes," indicate the number of Forms 8282 filed during the year	7f	No	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7g	No	
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7h	No	
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	8	No	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	9a	No	
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?	9b	No	
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	10a	No	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	No	
11 Section 501(c)(12) organizations. Enter			
a Gross income from members or shareholders	11a	No	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b	No	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	No	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	No	
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	13b	No	
c Enter the amount of reserves on hand	13c	No	
14a Did the organization receive any payments for indoor tanning services during the tax year?			
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	No	

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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	1a	14		
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	1b	14		
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?	2		No	
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?	3		No	
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No	
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No	
6 Did the organization have members or stockholders?	6	Yes		
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?	7a		No	
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No	
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	8a	Yes		
a The governing body?	8b	Yes		
b Each committee with authority to act on behalf of the governing body?	9		No	
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				

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?	10a	Yes	
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	Yes	
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13 Did the organization have a written whistleblower policy?	13	Yes	
14 Did the organization have a written document retention and destruction policy?	14	Yes	
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	Yes	
a The organization's CEO, Executive Director, or top management official	15b	Yes	
b Other officers or key employees of the organization			
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?	16a		No
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed CA
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (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
 THE ORGANIZATION 150 SPEAR STREET NO 500 SAN FRANCISCO, CA (415) 495-4230

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response to any question in this Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099- MISC)	(E) Reportable compensation from related organizations (W-2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Office	Key employee	Highest compensated	Former			
(1) MARK PINKSY CHAIR	1 00	X		X				0	0	0
(2) DAN BROSS VICE CHAIR	1 00	X		X				0	0	0
(3) MARCUS CHUNG SECRETARY	1 00	X		X				0	0	0
(4) LILA PRESTON TREASURER	1 00	X		X				0	0	0
(5) TOD ARBOGAST DIRECTOR	1 00	X						0	0	0
(6) CAROL CONE DIRECTOR	1 00	X						0	0	0
(7) PAULETTE FRANK DIRECTOR	1 00	X						0	0	0
(8) MARC GUNTHER DIRECTOR	1 00	X						0	0	0
(9) DARELL HAMMOND DIRECTOR	1 00	X						0	0	0
(10) NIKE IRVIN DIRECTOR	1 00	X						0	0	0
(11) JO MACKNESS DIRECTOR	1 00	X						0	0	0
(12) TIM MOHIN DIRECTOR	1 00	X						0	0	0
(13) BEN PACKARD DIRECTOR	1 00	X						0	0	0
(14) VINCENT ROBINSON DIRECTOR	1 00	X						0	0	0
(15) ANNA ROOSEVELT DIRECTOR	1 00	X						0	0	0
(16) JASON SAUL DIRECTOR	1 00	X						0	0	0
(17) MICHAEL SCHREIBER DIRECTOR	1 00	X						0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

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 ►1

	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>	3	No
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>	4	Yes
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>	5	No

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.

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**

Part VIII Statement of Revenue

Check 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	1a Federated campaigns	1a			
	b Membership dues	1b 191,639			
	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 2,313,366			
	g Noncash contributions included in lines 1a-1f \$	40,795			
	h Total. Add lines 1a-1f		2,505,005		
Program Service Revenue	2a CORPORATE SERVICE	Business Code 900099	1,307,179	1,307,179	
	b CONFERENCE REVENUE	611430	705,118	705,118	
	c GOVERNMENT SERVICE	900099	263,947	263,947	
	d ADS-MBA GUIDE, PUB'S	900099	50,450	50,450	
	e JOB BOARD REVENUE	900099	35,398	35,398	
	f All other program service revenue				
	g Total. Add lines 2a-2f		2,362,092		
	3 Investment income (including dividends, interest, and other similar amounts)		2,085		2,085
4 Income from investment of tax-exempt bond proceeds					
5 Royalties					
6a Gross rents	(i) Real	(ii) Personal			
b Less rental expenses					
c Rental income or (loss)					
d Net rental income or (loss)					
7a 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)					
8a 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					
9a Gross income from gaming activities See Part IV, line 19	a				
b Less direct expenses	b				
c Net income or (loss) from gaming activities					
10a 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				
11a					
b					
c					
d All other revenue					
e Total. Add lines 11a-11d					
12 Total revenue. See Instructions		4,869,182	2,362,092	0	2,085

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				
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	378,071	169,793	163,822	44,456
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	1,935,938	1,539,897	206,050	189,991
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	212,965	157,348	34,040	21,577
10 Payroll taxes	182,880	135,119	29,232	18,529
11 Fees for services (non-employees)				
a Management				
b Legal	5,373	4,239	1,134	
c Accounting	56,231		56,231	
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 Schedule O)	173,857	105,994	55,758	12,105
12 Advertising and promotion				
13 Office expenses	158,789	115,539	27,512	15,738
14 Information technology	103,460	91,246	7,098	5,116
15 Royalties				
16 Occupancy	44,657	23,314	14,188	7,155
17 Travel	35,420	3,926	26,636	4,858
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	499,214	499,214		
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	153,471	142,807	5,285	5,379
23 Insurance	7,130	5,268	1,140	722
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 PROJECTS	184,496	184,496		
b DIRECT PROGRAM COSTS	105,776	105,776		
c MERCHANT FEES	31,934	29,038	1,670	1,226
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	4,269,662	3,313,014	629,796	326,852
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 <input type="checkbox"/> 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	410,994	1	906,485
	2 Savings and temporary cash investments	879,100	2	580,633
	3 Pledges and grants receivable, net	47,568	3	326,948
	4 Accounts receivable, net	13,885	4	81,952
	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 instructions) Complete Part II of Schedule L			6
	7 Notes and loans receivable, net			7
	8 Inventories for sale or use			8
	9 Prepaid expenses and deferred charges			9
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	536,841	
	b Less accumulated depreciation	10b	258,556	330,049
				10c
				278,285
	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		124,996	15	125,671
16 Total assets. Add lines 1 through 15 (must equal line 34)		1,806,592	16	2,299,974
Liabilities	17 Accounts payable and accrued expenses	331,899	17	295,688
	18 Grants payable		18	
	19 Deferred revenue	246,404	19	175,823
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D	18,405	21	19,059
	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	596,708	26	490,570
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	566,678	27	594,980
	28 Temporarily restricted net assets	643,206	28	1,214,424
	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	1,209,884	33	1,809,404
	34 Total liabilities and net assets/fund balances	1,806,592	34	2,299,974

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	4,869,182
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,269,662
3	Revenue less expenses Subtract line 2 from line 1	3	599,520
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,209,884
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	1,809,404

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

	Yes	No
1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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 <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	No
2b 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 <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	Yes
2c 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	2c	Yes
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? 3b 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	3a	No
	3b	

SCHEDULE A
(Form 990 or 990EZ)**Public Charity Status and Public Support****2012****Open to Public
Inspection**

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.

Department of the Treasury
Internal Revenue Service**Employer identification number**

03-0552976

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 of churches, 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

e a Type I b Type II c Type III - Functionally integrated d Type III - Non-functionally integrated

f 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)

g 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

h 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?

i Provide the following information about the supported organization(s)

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?	(v) Did you notify the organization in col (i) of your support?	(vi) Is the organization in col (i) organized in the U S ?	(vii) Amount of monetary support
Total						

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")						
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						
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						

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						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
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)						
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 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	
15 Public support percentage for 2011 Schedule A, Part II, line 14	15	
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		►
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		►
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		►
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		►
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		►

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")	1,204,693	1,674,001	1,404,351	2,301,544	2,518,303	9,102,892
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	729,863	783,851	885,309	1,346,950	2,348,794	6,094,767
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	1,934,556	2,457,852	2,289,660	3,648,494	4,867,097	15,197,659
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0
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	135,236	422,633	270,261	526,988	1,573,639	2,928,757
c Add lines 7a and 7b	135,236	422,633	270,261	526,988	1,573,639	2,928,757
8 Public support (Subtract line 7c from line 6)						12,268,902

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	1,934,556	2,457,852	2,289,660	3,648,494	4,867,097	15,197,659
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	13,086	10,858	3,082	1,648	2,085	30,759
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	13,086	10,858	3,082	1,648	2,085	30,759
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)	1,947,642	2,468,710	2,292,742	3,650,142	4,869,182	15,228,418
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	80 570 %
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	88 180 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	0 200 %
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	0 300 %
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		

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

SCHEDULE D

(Form 990)

OMB No 1545-0047

2012**Open to Public
Inspection****Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
 ► Attach to Form 990. ► See separate instructions.

Department of the Treasury
Internal Revenue Service**Name of the organization**
NET IMPACT**Employer identification number**

03-0552976

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)	<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education) <input type="checkbox"/> Preservation of an historically important land area
	<input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of a certified historic structure
	<input type="checkbox"/> Preservation of open space
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year	
a Total number of conservation easements	Held at the End of the Year
b Total acreage restricted by conservation easements	2a
c Number of conservation easements on a certified historic structure included in (a)	2b
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2c
	2d

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

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

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

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

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

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

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

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ► \$ _____

(ii) Assets included in Form 990, Part X ► \$ _____

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

a Revenues included in Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

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

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

a <input type="checkbox"/> Public exhibition	d <input type="checkbox"/> Loan or exchange programs
b <input type="checkbox"/> Scholarly research	e <input type="checkbox"/> Other
c <input type="checkbox"/> Preservation for future generations	

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

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

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

	Amount
1c	18,405
1d	11,573
1e	10,919
1f	19,059

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

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

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

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

a Board designated or quasi-endowment

b Permanent endowment

c Temporarily restricted endowment

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

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

(i) unrelated organizations

(ii) related organizations

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

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

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

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

	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land					
b Buildings					
c Leasehold improvements					
d Equipment					
e Other		536,841	258,556	278,285	
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)					278,285

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12.) ►		

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

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13.) ►		

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

(a) Description	(b) Book value
(1) PREPAID EXPENSES	92,480
(2) LEASE DEPOSITS	33,191
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.) ►	125,671

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

(a) Description of liability	(b) Book value
Federal income taxes	
See Additional Data Table	
Total. (Column (b) must equal Form 990, Part X, col (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

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

1	Total revenue, gains, and other support per audited financial statements	1	4,869,182
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	4,869,182
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	4,869,182

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

1	Total expenses and losses per audited financial statements	1	4,269,662
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	4,269,662
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	4,269,662

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, lines 1b and 2b, Part V, 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 additional information

Identifier	Return Reference	Explanation
	PART IV, LINE 2B	NET IMPACT HOLDS A PORTION OF PROFESSIONAL MEMBERSHIP DUES FOR USE BY THE PROFESSIONAL CHAPTERS FOR ACTIVITIES. REGULAR (CORE) CHAPTERS RECEIVE 15% AND GOLD AND SILVER-STANDING CHAPTERS RECEIVE 20% OF THE DUES FOR MOST MEMBERSHIP TYPES. THIS AMOUNT IS CALCULATED MONTHLY. THE BALANCE ON EACH CUSTODIAL ACCOUNT IS E-MAILED ON A QUARTERLY BASIS BY THE COMMUNITY TEAM TO THE HEAD OF EACH CORRESPONDING PROFESSIONAL CHAPTER, WHO MAY THEN REQUEST THAT BALANCE BE REMITTED TO THEM. BALANCES ARE ONLY PAID TO CHAPTERS WHO HAVE AN ESTABLISHED BANK ACCOUNT IN THEIR CHAPTERS NAME WITH THE CHECK BEING MADE OUT TO THE CHAPTER'S MAIN POINT OF CONTACT. ALTERNATIVELY, CHAPTER MEMBERS WHO ORGANIZE AND FUND AN EVENT MAY SUBMIT THEIR QUALIFIED RECEIPTS FOR AN EXPENSE REIMBURSEMENT, PAID OUT OF THEIR CHAPTERS BALANCE.
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	THE ORGANIZATION HAS ADOPTED THE ACCOUNTING GUIDANCE RELATED TO UNCERTAIN TAX POSITIONS, AND HAS EVALUATED ITS TAX POSITIONS TAKEN FOR ALL OPEN TAX YEARS CURRENTLY, THE 2009 THROUGH 2012. INFORMATION RETURNS ARE OPEN AND SUBJECT TO EXAMINATION IN MANAGEMENT'S JUDGMENT. THERE ARE NO UNCERTAIN TAX POSITIONS AS OF JUNE 30, 2013.

Schedule J
(Form 990)**Compensation Information**

OMB No 1545-0047

Department of the Treasury
Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.
► Attach to Form 990. ► See separate instructions.

2012**Open to Public Inspection**Name of the organization
NET IMPACT**Employer identification number**

03-0552976

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items

<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)

b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III

<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract
<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization

a Receive a severance payment or change-of-control payment?

Yes**No**

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

4a**No**

c Participate in, or receive payment from, an equity-based compensation arrangement?

4b**No**

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

4c**No****Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.**

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

a The organization?

5a**No**

b Any related organization?

5b**No**

If "Yes," to line 5a or 5b, describe in Part III

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of

a The organization?

6a**No**

b Any related organization?

6b**No**

If "Yes," to line 6a or 6b, describe in Part III

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

7**No**

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

8**No**

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

9**No**

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) ELIZABETH MAW CEO	(i) 165,981 0	(ii) 0 0	(iii) 0 0	0	0	18,299 0	184,280 0

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
	PART I, LINE 3	BAY AREA COMPENSATION DATA FOR COMPARABLE ORGANIZATIONS AND POSITIONS WAS COMPILED PRIOR TO RECOMMENDING COMPENSATION FOR EXECUTIVE DIRECTOR AND CFO TO BOARD FOR APPROVAL

SCHEDULE M
(Form 990)

Noncash Contributions

OMB No 1545-0047

2012

Open to Public
InspectionDepartment of the Treasury
Internal Revenue Service

►Complete if the organization answered "Yes" on Form
990, Part IV, lines 29 or 30.
►Attach to Form 990.

Name of the organization
NET IMPACT

Employer identification number

03-0552976

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (FURNITURE)	X	1	23,680	FMV
26 Other ► (GIFT CARDS)	X	1	5,000	FMV
27 Other ► (_____)				
28 Other ► (_____)				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement			29	

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a	No
b If "Yes," describe the arrangement in Part II		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	Yes
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a	No
b If "Yes," describe in Part II		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II		

Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
THIRD PARTY USE	PART I, LINE 32B	NOT APPLICABLE. SCHEDULE M, LINE 31, THE FOLLOWING

THIRD PARTY USE PART I, LINE 32D	<p>POLICIES GOVERN THE ACCEPTANCE OF GIFTS MADE TO NET IMPACT, A CALIFORNIA NONPROFIT PUBLIC BENEFIT CORPORATION, FOR PURPOSES THAT WILL HELP NET IMPACT FURTHER ITS CHARITABLE MISSION. PURPOSE-THE PURPOSE OF THIS GIFT ACCEPTANCE POLICY IS TO GOVERN ACCEPTANCE OF GIFTS AND TO PROVIDE GUIDANCE TO DONORS AND THEIR PROFESSIONAL ADVISORS IN COMPLETING GIFTS. DONOR'S USE OF LEGAL COUNSEL-NET IMPACT SHALL ENCOURAGE A DONOR TO SEEK HIS OR HER OWN LEGAL COUNSEL ABOUT ANY LEGAL AND TAX CONSEQUENCES TO THE DONOR RESULTING FROM A GIFT TO NET IMPACT. NET IMPACT SHALL NOT PROVIDE LEGAL ADVICE TO ANY DONOR ORGANIZATION'S USE OF LEGAL COUNSEL-NET IMPACT SHALL SEEK THE ADVICE OF LEGAL COUNSEL OR OTHER QUALIFIED PROFESSIONAL ADVISOR IN MATTERS RELATED TO THE ACCEPTANCE OF A GIFT, PRIOR TO SUCH ACCEPTANCE, WHEN APPROPRIATE REVIEW BY LEGAL COUNSEL IS RECOMMENDED FOR GIFTS OF REAL PROPERTY, GIFTS OF STOCK/MEMBERSHIPS/OWNERSHIP INTERESTS OF CLOSELY HELD COMPANIES, GIFTS INVOLVING CONTRACTS OR ANY ASSUMPTION OF AN OBLIGATION BY NET IMPACT, GIFTS SUBJECT TO UNUSUAL RESTRICTIONS, GIFTS THAT MAY INVOLVE AN ACTUAL OR PERCEIVED CONFLICT OF INTEREST, TRANSACTIONS IN WHICH THE PRESIDENT, BOARD, OR AUTHORIZED BOARD COMMITTEE BELIEVES THAT THE USE OF LEGAL COUNSEL IS APPROPRIATE RESTRICTIONS ON GIFTS-NET IMPACT WILL GENERALLY ACCEPT UNRESTRICTED GIFTS, AND GIFTS FOR SPECIFIC PROGRAMS AND PURPOSES, PROVIDED THAT SUCH GIFTS ARE NOT INCONSISTENT WITH NET IMPACT'S MISSION, CHARITABLE PURPOSES, AND PRIORITIES. NET IMPACT WILL NOT ACCEPT GIFTS THAT ARE TOO RESTRICTIVE IN PURPOSE OR THAT OTHERWISE RESULT IN A BURDEN THAT MAY DIMINISH NET IMPACT'S ABILITY TO FURTHER ITS MISSION. GIFTS THAT ARE TOO RESTRICTIVE INCLUDE THOSE THAT ARE INCONSISTENT WITH NET IMPACT'S ARTICLES OF INCORPORATION, GIFTS THAT ARE TOO DIFFICULT TO ADMINISTER, OR GIFTS THAT ARE FOR PURPOSES OUTSIDE THE MISSION OF THE CHARITY. ALL FINAL DECISIONS ON THE RESTRICTIVE NATURE OF A GIFT, AND ITS ACCEPTANCE OR REFUSAL, SHALL BE MADE BY THE BOARD AS OUTLINED BELOW. TYPES OF GIFTS-THE FOLLOWING TYPES OF GIFTS MAY BE ACCEPTABLE, SUBJECT TO OTHER PROVISIONS OF THIS GIFT ACCEPTANCE POLICY. CASH, SECURITIES, 1-PUBLICLY TRADED SECURITIES PUBLICLY TRADED SECURITIES MAY BE TRANSFERRED TO AN ACCOUNT MAINTAINED AT ONE OR MORE BROKERAGE FIRMS OR DELIVERED PHYSICALLY WITH THE TRANSFEROR'S SIGNATURE OR STOCK POWER ATTACHED. AS A GENERAL RULE, ALL MARKETABLE SECURITIES SHALL BE SOLD UPON RECEIPT UNLESS OTHERWISE DIRECTED BY THE BOARD OR EXECUTIVE COMMITTEE. IN SOME CASES, MARKETABLE SECURITIES MAY BE RESTRICTED BY APPLICABLE SECURITIES LAWS, IN SUCH INSTANCE THE FINAL DETERMINATION ON THE ACCEPTANCE OF THE RESTRICTED SECURITIES SHALL BE MADE BY THE BOARD OR EXECUTIVE COMMITTEE. 2 CLOSELY HELD SECURITIES CLOSELY HELD SECURITIES, WHICH INCLUDE DEBT AND EQUITY POSITIONS IN NON-PUBLICLY TRADED COMPANIES AS WELL AS INTERESTS IN LLPS, LLCs AND OTHER OWNERSHIP FORMS, MAY BE ACCEPTED SUBJECT TO THE APPROVAL OF THE BOARD OR [FINANCE] COMMITTEE. HOWEVER, GIFTS MUST BE REVIEWED PRIOR TO ACCEPTANCE TO DETERMINE THAT (1) THERE ARE NO RESTRICTIONS ON THE SECURITY THAT WOULD PREVENT NET IMPACT FROM ULTIMATELY CONVERTING THOSE ASSETS TO CASH, (2) THE SECURITY IS MARKETABLE (I.E., A BUYER IS IN A POSITION TO BUY THE STOCK), AND (3) THE SECURITY WILL NOT GENERATE ANY UNDESIRABLE TAX CONSEQUENCES FOR NET IMPACT. FURTHER, PRIOR TO ACCEPTANCE, GIFTS SHALL BE VALUED BY AN INDEPENDENT APPRAISAL, WHICH SHALL TYPICALLY BE THE DONOR'S OBLIGATION (THE DONOR MAY REQUIRE A QUALIFIED APPRAISAL IN ORDER TO TAKE AN INCOME TAX DEDUCTION IF A GIFT OF NON-PUBLICLY TRADED SECURITIES IS VALUED AT \$10,000 OR MORE) IF POTENTIAL PROBLEMS ARISE ON INITIAL REVIEW OF THE SECURITY, FURTHER REVIEW AND RECOMMENDATION BY AN OUTSIDE PROFESSIONAL MAY BE SOUGHT BEFORE MAKING A FINAL DECISION ON ACCEPTANCE OF THE GIFT. THE FINAL DETERMINATION ON THE ACCEPTANCE OF CLOSELY HELD SECURITIES SHALL BE MADE BY THE BOARD OR [FINANCE] COMMITTEE, AND, AS NECESSARY, LEGAL COUNSEL. EVERY EFFORT WILL BE MADE TO SELL NON-MARKETABLE SECURITIES AS QUICKLY AS POSSIBLE. TANGIBLE PERSONAL PROPERTY GIFTS OF TANGIBLE PERSONAL PROPERTY TO BE USED BY NET IMPACT IN FURTHERANCE OF ITS MISSION MAY BE ACCEPTED SUBJECT TO APPROVAL OF THE PRESIDENT. GIFTS OF TANGIBLE PERSONAL PROPERTY THAT WILL NOT BE USED BY NET IMPACT IN FURTHERANCE OF ITS MISSION MAY BE ACCEPTED SUBJECT TO APPROVAL OF THE BOARD OR [FINANCE] COMMITTEE. HOWEVER, SUCH GIFTS MUST BE REVIEWED PRIOR TO ACCEPTANCE FOR (1) MARKETABILITY, (2) RESTRICTIONS ON THEIR USE AND SALE, AND (3) COSTS ASSOCIATED WITH POSSESSION, OWNERSHIP AND SALE. REAL ESTATE GIFTS OF REAL ESTATE MAY INCLUDE DEVELOPED PROPERTY, UNDEVELOPED PROPERTY, OR GIFTS SUBJECT TO A PRIOR LIFE INTEREST. PRIOR TO ACCEPTANCE OF REAL ESTATE, NET IMPACT SHALL REQUIRE AN INITIAL ENVIRONMENTAL REVIEW OF THE PROPERTY TO ENSURE THAT THE PROPERTY HAS NO ENVIRONMENTAL OR HAZARDOUS WASTE PROBLEMS. IN THE EVENT THAT THE INITIAL INSPECTION REVEALS A POTENTIAL PROBLEM, NET IMPACT SHALL RETAIN A QUALIFIED INSPECTION FIRM TO CONDUCT AN ENVIRONMENTAL AUDIT. THE COST OF THE ENVIRONMENTAL AUDIT SHALL GENERALLY BE AN EXPENSE OF THE DONOR. WHEN APPROPRIATE, A TITLE BINDER SHALL BE OBTAINED BY NET IMPACT PRIOR TO THE ACCEPTANCE OF THE REAL PROPERTY. GIFT THE COST OF THIS TITLE BINDER SHALL GENERALLY BE AN EXPENSE OF THE DONOR. PRIOR TO ACCEPTANCE OF THE REAL PROPERTY, THE GIFT SHALL BE APPROVED BY THE BOARD OR A BOARD COMMITTEE, WITH GUIDANCE FROM NET IMPACT'S LEGAL COUNSEL. CRITERIA FOR ACCEPTANCE OF THE PROPERTY SHALL INCLUDE (1) USEFULNESS TO NET IMPACT, (2) VALUATION, (3) MARKETABILITY, (4) RESTRICTIONS, RESERVATIONS, EASEMENTS, OR OTHER LIMITATIONS ASSOCIATED WITH THE PROPERTY, (5) CARRYING COSTS, WHICH MAY INCLUDE INSURANCE, PROPERTY TAXES, MORTGAGES, OR NOTES, ETC., ASSOCIATED WITH THE PROPERTY, (6) ENVIRONMENTAL, HAZARDOUS WASTE, AND OTHER RISKS ASSOCIATED WITH THE PROPERTY. BEQUESTS DONORS AND SUPPORTERS OF NET IMPACT WILL BE ENCOURAGED TO MAKE BEQUESTS TO NET IMPACT UNDER THEIR WILLS AND TRUSTS TO THE EXTENT POSSIBLE AND APPROPRIATE. NET IMPACT SHALL ENCOURAGE DONORS TO DESCRIBE THE SPECIFIC PURPOSES OF THEIR GIFTS AS BROADLY AS POSSIBLE AND TO AVOID DETAILED LIMITATIONS AND RESTRICTIONS IN RECOGNITION OF THE CHANGING NEEDS, POLICIES AND CIRCUMSTANCES OF A CHARITY OVER TIME. BECAUSE OF SUCH CHANGES OVER TIME, TO THE EXTENT POSSIBLE AND PERMISSIBLE UNDER APPLICABLE LAW - ENDOWMENTS SHALL CONTAIN THE FOLLOWING (OR A SIMILAR) CONTINGENCY CLAUSE: "IF IN THE OPINION OF NET IMPACT'S BOARD OF DIRECTORS, ALL OR PART OF THE FUNDS CANNOT BE APPLIED IN STRICT CONFORMANCE WITH THE PURPOSE(S) PREVIOUSLY STATED, THE BOARD MAY USE THESE FUNDS FOR OTHER APPROPRIATE PURPOSES AS NEARLY ALIGNED TO THE ORIGINAL INTENT OF THE DONOR AS GOOD CONSCIENCE AND NEED DICTATE WITHIN THE AUTHORIZED POWERS OF NET IMPACT." THE NATURE OF THE BEQUEST (E.G., CASH, SECURITIES, PERSONAL PROPERTY, REAL ESTATE) AND ANY ASSOCIATED RESTRICTIONS SHALL DETERMINE WHETHER AND HOW THE BEQUEST SHALL BE ACCEPTED BY NET IMPACT, SUBJECT TO OTHER PROVISIONS OF THIS GIFT ACCEPTANCE POLICY. BEQUESTS WILL NOT BE RECORDED AS GIFTS TO NET IMPACT UNTIL SUCH TIME AS THE GIFT IS IRREVOCABLE. WHERE THE GIFT IS IRREVOCABLE, BUT IS NOT DUE UNTIL A FUTURE DATE, THE PRESENT VALUE OF THAT GIFT MAY BE RECORDED AT THE TIME THE GIFT BECOMES IRREVOCABLE. LIFE INSURANCE BENEFICIARY DESIGNATIONS DONORS AND SUPPORTERS OF NET IMPACT WILL BE ENCOURAGED TO NAME NET IMPACT AS BENEFICIARY OR CONTINGENT BENEFICIARY OF THEIR LIFE INSURANCE POLICIES. SUCH DESIGNATIONS SHALL NOT BE RECORDED AS GIFTS TO NET IMPACT UNTIL SUCH TIME AS THE GIFT IS IRREVOCABLE. WHERE THE GIFT IS IRREVOCABLE, BUT IS NOT DUE UNTIL A FUTURE DATE, THE PRESENT VALUE OF THAT GIFT MAY BE RECORDED AT THE TIME THE GIFT BECOMES IRREVOCABLE. RETIREMENT PLAN BENEFICIARY DESIGNATIONS DONORS AND SUPPORTERS OF NET IMPACT WILL BE ENCOURAGED TO NAME NET IMPACT AS BENEFICIARY OF THEIR RETIREMENT PLANS. SUCH DESIGNATIONS SHALL NOT BE RECORDED AS GIFTS TO NET IMPACT UNTIL SUCH TIME AS THE GIFT IS IRREVOCABLE. WHERE THE GIFT IS IRREVOCABLE, BUT IS NOT DUE UNTIL A FUTURE DATE, THE PRESENT VALUE OF THAT GIFT MAY BE RECORDED AT THE TIME THE GIFT BECOMES IRREVOCABLE. CHARITABLE REMAINDER TRUST BENEFICIARY OF A CHARITABLE REMAINDER TRUST WITH THE APPROVAL OF THE BOARD OR [FINANCE] COMMITTEE. NET IMPACT WILL NOT ACCEPT AN APPOINTMENT AS TRUSTEE OF A CHARITABLE REMAINDER TRUST. CHARITABLE LEAD TRUSTS NET IMPACT MAY ACCEPT A CHARITABLE DESIGNATION AS AN INCOME BENEFICIARY OF A CHARITABLE LEAD TRUST. NET IMPACT WILL NOT ACCEPT AN APPOINTMENT AS TRUSTEE OF A CHARITABLE LEAD TRUST. CHARITABLE LEAD TRUSTS NET IMPACT WILL NOT ACCEPT AN APPOINTMENT AS TRUSTEE OF A CHARITABLE LEAD TRUST.</p>
NON REPORTING OF REVENUE	PART I, LINE 33

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 to provide any additional information.
► Attach to Form 990 or 990-EZ.

2012**Open to Public
Inspection**Name of the organization
NET IMPACT**Employer identification number**

03-0552976

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	THE ORGANIZATION HAS NONVOTING MEMBERS
	FORM 990, PART VI, SECTION B, LINE 11	THE EXECUTIVE DIRECTOR SHALL ENSURE THAT FORM 990 AND FORM 990-T (IF NECESSARY) SHALL BE FILED AND ANY ASSOCIATED TAXES OR PAYMENTS MADE, IN A TIMELY AND ACCURATE MANNER. THE EXECUTIVE DIRECTOR SHALL SIGN AND CERTIFY THAT THE FORM 990 IS ACCURATE AND COMPLETE. EACH DIRECTOR ON THE BOARD SHALL RECEIVE FOR THEIR REVIEW AND CONSIDERATION AN ELECTRONIC DRAFT OF FORM 990 AND FORM 990-T (IF NECESSARY) AT LEAST TWO WEEKS IN ADVANCE OF FILING. ALL DIRECTORS WILL BE ENCOURAGED TO REVIEW THE ENTIRE FORM WITHIN ONE WEEK OF RECEIPT OF THE DRAFT FORM 990 AND FORM 990-T (IF NECESSARY). ALL DIRECTORS SHALL SUBMIT THEIR COMMENTS AND CONCERNs, IF ANY, TO THE CFO AND THE EXECUTIVE DIRECTOR, EITHER OF WHOM MAY ADDRESS THE COMMENTS AND CONCERNs, CONSULTING WITH LEGAL COUNSEL AS NECESSARY. DIRECTORS SHALL IDENTIFY AND SUBMIT ANY CRITICAL CONCERNs TO THE CFO, THE EXECUTIVE DIRECTOR, AND THE BOARD CHAIR. CRITICAL CONCERNs SHALL BE RESOLVED JOINTLY BY THE EXECUTIVE DIRECTOR AND CHAIR OR BY THE EXECUTIVE COMMITTEE OF THE BOARD, AND RESOLUTION OF SUCH CONCERNs SHALL BE COMMUNICATED WITH THE DIRECTOR RAISING THE CONCERN AND THE BOARD, IF DEEMED NECESSARY BY THE EXECUTIVE DIRECTOR AND CHAIR. A COPY OF THE FILED FORM 990 AND FORM 990-T (IF NECESSARY) SHALL BE DISTRIBUTED TO THE ENTIRE BOARD WITHIN ONE WEEK AFTER FILING, TOGETHER WITH A NOTE IDENTIFYING ANY MATERIAL AND SUBSTANTIAL CHANGES FROM THE DRAFT VERSIONS DISTRIBUTED EARLIER
	FORM 990, PART VI, SECTION B, LINE 12C	THE ORGANIZATION'S CONFLICT OF INTEREST POLICY IS DISTRIBUTED AT THE FIRST IN-PERSON BOARD MEETING EACH CALENDAR YEAR. AT THE MEETING, EACH BOARD MEMBER REVIEWS AND SIGNS THE POLICY, CERTIFYING THEY HAVE NO CONFLICT OF INTEREST
	FORM 990, PART VI, SECTION B, LINE 15	BAY AREA COMPENSATION DATA FOR COMPARABLE ORGANIZATIONS AND POSITIONS WAS COMPILED PRIOR TO RECOMMENDING COMPENSATION FOR EXECUTIVE DIRECTOR AND CFO TO BOARD FOR APPROVAL
	FORM 990, PART VI, SECTION C, LINE 18	THE ORGANIZATION MAKES ITS FORM 1023, 990 AND 990-T (IF APPLICABLE) AVAILABLE TO THE GENERAL PUBLIC UPON REQUEST
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, POLICIES AND FINANCIAL STATEMENTS AVAILABLE TO THE GENERAL PUBLIC UPON REQUEST