## Form **990**

Department of the Treasury Internal Revenue Service

## **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung

benefit trust or private foundation)
 The organization may have to use a copy of this return to satisfy state reporting requirements.

2012

Open to Public Inspection

A	For the	2012 calendar year, or tax year beginning JUL 1, 2012 and end	ding J	UN 30, 2013									
	Check if applicable	C Name of organization		D Employer identific	cation number								
	Addres	BONNY DOON COMMUNITY SCHOOL FOUNDATION											
	Name change			77-0	412170								
	Initial		om/suite	E Telephone number									
	Termin-			831-477-0800									
	Amend			G Gross receipts \$	68,300.								
	Application	BONNY DOON, CA 95061		H(a) Is this a group re									
	pendin	F Name and address of principal officer:LONNY SCHWARTZ		for affiliates?	Yes X No								
		PO BOX 8089, BONNY DOON, CA 95061		H(b) Are all affiliates inc	luded? Yes No								
17	Гах-ехе	mpt status: X 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) or	527	If "No," attach a	list. (see instructions)								
		e: ▶ N/A		H(c) Group exemption	n number 🕨								
		organization: X Corporation	L Year o	of formation: 1995 N	State of legal domicile: CA								
Pa	art I	Summary											
ø		Briefly describe the organization's mission or most significant activities: ${ t SUPPOR'}$											
Activities & Governance		CREATING OPPORTUNITIES FOR LEARNING AND PRO											
ern		2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.											
Š		Number of voting members of the governing body (Part VI, line 1a)		3	10								
ø	4 1	Number of independent voting members of the governing body (Part VI, line 1b) $$	•••••	4	0								
ies	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)		5	0								
ξ	6	Total number of volunteers (estimate if necessary)	•••••	6	0								
Act		Total unrelated business revenue from Part VIII, column (C), line 12			0.								
	bl	Net unrelated business taxable income from Form 990-T, line 34	·····		0.								
			-	Prior Year	Current Year								
ne		Contributions and grants (Part VIII, line 1h)		0.	3,415.								
Revenue		Program service revenue (Part VIII, line 2g)		0.	0.								
Re		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	0.								
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		43,311.	44,603.								
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		43,311.	48,018.								
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.								
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.								
Expenses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.								
Sen		Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.								
EX		Total fundraising expenses (Part IX, column (D), line 25)  Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		20 254	22 407								
		Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		30,354. 30,354.	23,497.								
		Revenue less expenses. Subtract line 18 from line 12		12,957.	23,497. 24,521.								
or	13 1	isvende less expenses. Subtract line 10 nom line 12		inning of Current Year	End of Year								
ets	20 7	Total assets (Part X, line 16)		143,612.	168,133.								
Vet Assets or und Balances	21 7	Fotal liabilities (Part X, line 26)		0.	0.								
E SE	22 1	Net assets or fund balances. Subtract line 21 from line 20		143,612.	168,133.								
	art II	Signature Block			100/1001								
Und	er penal	ties of perjury, I declare that I have examined this return, including accompanying schedules and	d stateme	nts, 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 p	preparer l	has any knowledge.	The State of the S								
Sig	n	Signature of officer		Date									
Her	е	LONNY SCHWARTZ, TREASURER											
		Type or print name and title	10	-1-									
n-''		Print/Type preparer's name Preparer's signature		lif —	PTIN								
Paid	-	SCOTT BLOOM	11	0/16/13 self-employe									
		Firm's name PACIFIC TAX SERVICE		Firm's EIN	77-0586148								
096	Only	Firm's address 133 MISSION ST., SUITE 240 SANTA CRUZ, CA 95060		Dh 0	21 426 1220								
Mar	v the ID	SANTA CRUZ, CA 95060  S discuss this return with the preparer shown above? (see instructions)		Phone no. 8	31-426-1320 X Yes No								
1410	, 1110 11				X Yes No								

	Check if Schedule O contains a response to any question in this Part III		
1	Briefly describe the organization's mission: NONE		
2	Did the organization undertake any significant program services during the year which were not in the prior Form 990 or 990-EZ?		Yes X No
3	If "Yes," describe these new services on Schedule O.  Did the organization cease conducting, or make significant changes in how it conducts, any prog	ram services?	Yes X No
4	If "Yes," describe these changes on Schedule O.  Describe the organization's program service accomplishments for each of its three largest program.		
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allo revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$24 , 800 . including grants of \$	) (Revenue \$	68,300.
	PROVIDE FUNDS TO SUPPORT VARIOUS PROGRAMS AT BON	NY DOON ELEME	NTARY
	SCHOOL SUCH AS LIFE LAB, ART AND MUSIC PROGRAMS		
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 \$		
	Total program service expenses ► 24,800.		

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)?	1		
	If "Yes," complete Schedule A	1	X	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		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? If "Yes," complete Schedule C, Part II	4		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? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	l		1
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			ŀ
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
_	Part VI	11a		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? If "Yes," complete Schedule D, Part VII	11b	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? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
10-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	-	X
124	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII			
h	***************************************	12a		X
U	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			42
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	13		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		X
~	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			v
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	14b		X
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	4.5		v
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	15		<u> </u>
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		<u> </u>
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	x	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	<u></u> -		
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	-1	x
b	16 9\/   A-         O-   -	20b		
			~~~	

Form **990** (2012)

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			1
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		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? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
_	any tax-exempt bonds?	24c		ļ
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	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	25a		X
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			1
	Schedule L, Part I	25b		x
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			<del></del> -
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		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? If "Yes," complete Schedule L, Part III	27		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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		x
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
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	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	-		
	Schedule N, Part II	32		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? If "Yes," complete Schedule R, Part I	33		X
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	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		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? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	1		
	Note. All Form 990 filers are required to complete Schedule O	38	X	

Form **990** (2012)

	Check if Schedule O contains a response to any question in this Part V								
			Vaa	No					
4	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		168	NO					
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable								
C	: Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming								
٥.	(gambling) winnings to prize winners?								
2a	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								
D	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)			<b>.</b>					
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X					
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		╁—					
<del>4</del> a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			١,,					
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		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.								
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	_5a		X					
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X					
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		<b></b>					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			l					
	any contributions that were not tax deductible as charitable contributions?	6a		X					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts								
_	were not tax deductible?	_6b		—					
7	Organizations that may receive deductible contributions under section 170(c).								
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X					
	b If "Yes," did the organization notify the donor of the value of the goods or services provided?								
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			l					
	to file Form 8282?	7c		X					
	If "Yes," indicate the number of Forms 8282 filed during the year								
_	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e							
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f							
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		L					
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h							
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?	8							
9	Sponsoring organizations maintaining donor advised funds.	ĺ							
	Did the organization make any taxable distributions under section 4966?	9a		<u> </u>					
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>					
0	Section 501(c)(7) organizations. Enter:								
a	Initiation fees and capital contributions included on Part VIII, line 12								
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities								
11	Section 501(c)(12) organizations. Enter:			l					
a	Gross income from members or shareholders	İ		1					
D	Gross income from other sources (Do not net amounts due or paid to other sources against								
ο-	amounts due or received from them.)			1					
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year								
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			-					
а	Is the organization licensed to issue qualified health plans in more than one state?	13a							
L	Note. See the instructions for additional information the organization must report on Schedule O.								
	Enter the amount of reserves the organization is required to maintain by the states in which the	1	- 1						
_	organization is licensed to issue qualified health plans	ŀ							
C A=	Enter the amount of reserves on hand	$\dashv$							
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u> </u>					
<u>a</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		_					

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					X			
Sec	tion 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	10						
	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							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi								
2		2	59	2	incomp.	X			
3	officer, director, trustee, or key employee?  Did the organization delegate control over management duties customarily performed by or under the direct supervision								
3	of officers, directors, or trustees, or key employees to a management company or other person?			2		Х			
				3		X			
4	Did the organization make any significant changes to its governing documents since the prior Form 9			4					
5	Did the organization become aware during the year of a significant diversion of the organization's as			5		X			
6	Did the organization have members or stockholders?			6	-	X			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a								
	more members of the governing body?			7a		X			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s		REALSONS MEDICAL AUTO OF DATES						
	persons other than the governing body?			7b		X			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the ye	1.50	10 <del>5</del> 77		争				
а	The governing body?			8a	X				
b	Each committee with authority to act on behalf of the governing body?			8b	X				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ched	at the						
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenu	e Code.)						
				10000 1	Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?			10a		Х			
	If "Yes," did the organization have written policies and procedures governing the activities of such cl								
	and branches to ensure their operations are consistent with the organization's exempt purposes?	•		10b					
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod			11a	Х				
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	•	•	200	SHE III	A TAK			
12a	Did the association become itter a file of the file of			12a	2-(0)(0)(0)	X			
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b		-21			
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y			120					
_	in Schedule O how this was done			10-					
13				12c		v			
14	Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?			13		X			
15	Did the process for determining compensation of the following persons include a review and approve			14		Λ			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	ai by i	ndependent						
2					20.200	37			
h	The organization's CEO, Executive Director, or top management official			15a		<u>X</u>			
D	Other officers or key employees of the organization	•••••		15b		<u>X</u>			
16-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	120min 2001 h <b>4</b> 1 1 1 1	PO-1-1 (1 PP-)						
IUa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger								
_	taxable entity during the year?			16a		<u>X</u>			
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalua								
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	nizatio	on's	True de					
500	exempt status with respect to such arrangements?			16b					
DATE OF THE OWNER OWNER OF THE OWNER OWNE	ion 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 Forms 1023 (or 1024 if applicable), 990, and 990-T	(Sec	tion 501(c)(3)s only) a	availab	le				
	for public inspection. Indicate how you made these available. Check all that apply.								
40	Own website Another's website X Upon request Other (explain								
19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and fin									
00	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 at	nd rec	ords of the organizat	ion: 🕨					
	LONNY SCHWARTZ - 831-477-0800								
23200	PO BOX 8089, BONNY DOON, CA 95061								
12-10-	12			Form	990 (	2012)			

## Form 990 (2012) Part VII | Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

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

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

X Check this box if neither the organization n	or any related	orga					nsat	ed any current officer, o	director, or trustee.	
(A) Name and Title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)		(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other				
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	<b>Р</b> огтег	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) JOHN WEST	4.00	ļ								•
PRESIDENT (2) BECKY JACOBS	4.00	-	-	$\vdash$	┝	-	-	0.	0.	0.
VICE-PRESIDENT	<b>4.00</b>	ĺ			l	ŀ		0.	0.	0.
(3) LONNY SCHWARTZ	4.00									
TREASURER						$ldsymbol{f eta}$		0.	0.	0.
(4) REYNA LINGEMANN SECRETARY	4.00							0.	0.	0.
									9.9	
						-				

232007 12-10-12

Pai	t VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, an	d Hi	ghe	st C	Compensated Employe	es (continued)			
	(A)	(B)	(B) (C) (D)				(E)		(F)				
	Name and title			not c	heck	more	than		Reportable	Reportable		timate	
		week box, unless person is both an officer and a director/trustee)							compensation	compensation from related	1690160	other	of
		(list any	ctor						the	organizations		pensa	tion
		hours for	Individual trustee or director	a)			ted		organization	(W-2/1099-MISC)		om the	
		related	stee c	ruste			pensa		(W-2/1099-MISC)		_	anizat	
		organizations below	ual tru	ionalt		ploye	t com				20080702	d relat	
		line)	divid	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			orga	anizatio	ons
			=	=	-	×	Ξω	-					
			1										
				$\vdash$									
			1										
			_	_	_	_							
			_	_									
			-										
			_	-									
			-										
	Cub Antal						_		0	0			_
ar	Sub-total Total from continuation sheets to Part V					•••••			0.	0.			0.
d									0.	0.			0.
	Total (add lines 16 and 16)						a) wh	00 10					0.
_	compensation from the organization	iot illilited to th	1036	liste	u ai	JOVE	ej wi	10 16	eceived more than \$100	,000 of reportable			0
	Temperature mem and organization	- All Control of the same							***************************************			Yes	No
3	Did the organization list any former officer,	director, or tru	ıste	e. ke	v er	olan	vee.	or l	highest compensated er	mplovee on		100	
	line 1a? If "Yes," complete Schedule J for s										3		X
4	For any individual listed on line 1a, is the su	um of reportabl	le co	ompe	ensa	ation	and	oth	her compensation from	the organization		1944	
	and related organizations greater than \$15										4		X
5	Did any person listed on line 1a receive or	accrue comper	nsat	ion f	rom	any	unr	elate	ed organization or indivi	dual for services	776	1000	
	rendered to the organization? If "Yes," com										5		X
Sec	tion B. Independent Contractors												
1	Complete this table for your five highest co										ation fi	rom	
	the organization. Report compensation for	the calendar y	ear (	endi	ng w	vith	or w	ithin	the organization's tax y	ear.			
	(A)	- 11							(B)		(C		
	Name and business	address	N	ONE	<u> </u>			$\dashv$	Description of s	ervices (	Comper	nsation	า
								-					
								$\dashv$					
								+					
								+					
2	Total number of independent contractors (i	ncluding but n	ot lir	nited	d to	thos	se lis	ted	above) who received m	ore than			mella
	\$100,000 of compensation from the organi				- E0E	(							
											Form 9	90 (2	012)

					MMUNITY :	SCHOOL FOU	NDATION	77-0412	2170 Page 9
P	rt V	111							
			Check if Schedule O cont	ains a response	to any question i	n this Part VIII (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, gran similar amounts not included abor Noncash contributions included in lines Total. Add lines 1a-1f	1b 1c 1d ions) 1e ts, and ve 1f 1a-1f: \$	3,415.	3,415.			
Program Service Revenue	2	a b c d e f	All other program service reve	nue	Business Code				
Other Revenue	3 4 5 6 7 7 8 8 8 8 8 10 10 10 10 10 10 10 10 10 10 10 10 10	abeda bea com	Investment income (including other similar amounts) Income from investment of tax Royalties  Gross rents Less: rental expenses Rental income or (loss) Net rental income or (loss) Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss) Net gain or (loss) Gross income from fundraising including \$ contributions reported on line Part IV, line 18 Less: direct expenses Net income or (loss) from fund Gross income from gaming act Part IV, line 19 Less: direct expenses Net income or (loss) from gami Gross sales of inventory, less rand allowances Less: cost of goods sold Net income or (loss) from sales Miscellaneous Revenue	dividends, interested in the control of the control	est, and  proceeds  (ii) Personal  (ii) Other  64,885. 20,282.	44,603.			44,603.
3200	12_	, 	Total. Add lines 11a-11d Total revenue. See instructions.			48,018.	0.	0.	44,603.

44,603. Form **990** (2012)

orm 990 (2012)

Part IX | Statement of Functional Expenses

Sect	tion 501(c)(3) and 501(c)(4) organizations must com				
	Check if Schedule O contains a respon	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and	j			
	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,			İ	
	trustees, and key employees				<del></del>
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):				
а					
b					
C	• • • • • • • • • • • • • • • • • • • •	375.		375.	
d					
е					
f	Investment management fees				
g	,				
	column (A) amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion				
13	Office expenses	24.	· · · · · · · · · · · · · · · · · · ·	24.	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	86.		86.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	1,102.		1,102.	
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.)				
а	FUNDS TO BONNY DOON ELE	24,800.	24,800.		
b	FOUNDATION SERVICE FEE	4,418.		4,418.	
C	SALES TAX	1,803.		1,803.	
d	BANK AND CREDIT CARD ME	1,492.		1,492.	
е	All other expenses	<10,603.>		<10,603.>	
25_	Total functional expenses. Add lines 1 through 24e	23,497.	24,800.	<1,303.>	
26	Joint costs. Complete this line only if the organization	T			
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)			ĺ	

232010 12-10-12

**Balance Sheet** Part X Check if Schedule O contains a response to any question in this Part X Beginning of year End of year 49,560. 64,830. 1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 3 4 Accounts receivable, net Loans and other receivables from current and former officers, directors. trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L 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 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D \_\_\_\_\_ 10a b Less: accumulated depreciation 10b 10c Investments - publicly traded securities ..... 11 11 Investments - other securities. See Part IV, line 11 12 94,052. 103,303. 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 Total assets. Add lines 1 through 15 (must equal line 34) 16 143,612. 168,133 16 Accounts payable and accrued expenses ..... 17 17 18 Grants payable 18 Deferred revenue ..... 19 19 Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties ..... 24 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D ..... 25 Total liabilities. Add lines 17 through 25 0 0. 26 Organizations that follow SFAS 117 (ASC 958), check here ▶ and Vet Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 27 Temporarily restricted net assets ..... 28 Permanently restricted net assets ..... 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ X and complete lines 30 through 34. Capital stock or trust principal, or current funds ..... 0. 30 Paid-in or capital surplus, or land, building, or equipment fund ..... 0 31 Retained earnings, endowment, accumulated income, or other funds 143,612. 168,133. 32 Total net assets or fund balances ..... 33 143,612. 168,133. 33

> 168,133. Form **990** (2012)

Total liabilities and net assets/fund balances

143,612

34

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