

Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

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

2009

Open to Public Inspection

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

A For the 2009 calendar year, or tax year beginning 10-01-2009 and ending 09-30-2010

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

Please use IRS label or print or type. See Specific Instructions.

C Name of organization: Points of Light Foundation; Doing Business As: Points of Light Institute; Number and street (or P.O. box if mail is not delivered to street address): 600 Means Street NW Suite 210; Room/suite; City or town, state or country, and ZIP + 4: Atlanta, GA 30318

D Employer identification number: 65-0206641; E Telephone number: (404) 979-2900; G Gross receipts \$ 40,515,568

F Name and address of principal officer: Michelle Nunn, 600 MEANS STREET NW STE 210, ATLANTA, GA 30318

H(a) Is this a group return for affiliates? [ ] Yes [x] No; H(b) Are all affiliates included? [ ] Yes [ ] No; H(c) Group exemption number

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

J Website: www.pointsoflight.org

K Form of organization: [x] Corporation [ ] Trust [ ] Association [ ] Other; L Year of formation: 1990; M State of legal domicile: GA

Part I Summary

Table with 4 main sections: Activities & Governance (lines 1-7), Revenue (lines 8-12), Expenses (lines 13-19), and Net Assets or Fund Balances (lines 20-22). Each section contains a list of items with corresponding values for Prior Year and Current Year.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including attachments and all schedules, and believe 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: Kris Tecce CFO; Preparer's signature: GRANT THORNTON LLP, 1100 PEACHTREE STREET SUITE 1200, ATLANTA, GA 30309; Date

May the IRS discuss this return with the preparer shown above? (see instructions)

**Part III Statement of Program Service Accomplishments**

**1** Briefly describe the organization's mission

POINTS OF LIGHT INSTITUTE INSPIRES, EQUIPS AND MOBILIZES PEOPLE TO TAKE ACTION THAT CHANGES THE WORLD THE INSTITUTE HAS A GLOBAL FOCUS TO REDEFINE VOLUNTEERISM AND CIVIC ENGAGEMENT FOR THE 21ST CENTURY, PUTTING PEOPLE AT THE CENTER OF COMMUNITY PROBLEM SOLVING WE ARE ORGANIZED TO INNOVATE, INCUBATE AND ACTIVATE NEW IDEAS THAT HELP PEOPLE ACT UPON THEIR POWER TO MAKE A DIFFERENCE POINTS OF LIGHT INSTITUTE OPERATES DYNAMIC BUSINESS UNITS THAT SHARE OUR MISSION HANDSON NETWORK (THE LARGEST VOLUNTEER NETWORK IN THE U S ), MISSIONFISH AND THE CIVIC INCUBATOR, WHICH INCLUDES GENERATIONON (A YOUTH VOLUNTEER DIVISION), AMERICORPS ALUMS, AND GLOBAL AND CORPORATE VOLUNTEERISM

**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 exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 6,521,699 including grants of \$ 350,520 ) (Revenue \$ 522,395 )  
 POINTS OF LIGHT INSTITUTE Points of Light Institute inspires, equips and mobilizes people to take action that changes the world through four dynamic business units that share our mission HandsOn Network - focused on engaging people in volunteer service, MissionFish - focused on enabling people to use their purchasing power to support non-profit organizations, The Civic Incubator - focused on creating innovation, scale and efficiency in the civic sector, Children for Children Foundation - focused on mobilizing young people to discover their power and solve real world problems through volunteer opportunities

**4b** (Code ) (Expenses \$ 11,706,382 including grants of \$ 3,953,981 ) (Revenue \$ 1,560,632 )  
 HANDS ON NETWORK HandsOn Network, the volunteer-focused arm of Points of Light Institute, is one of the largest volunteer networks in the nation that includes more than 250 HandsOn Action Centers in 16 countries HandsOn includes a powerful network of more than 70,000 corporate, faith and nonprofit organizations that are answering the call to serve and creating meaningful change in their communities Annually, the network delivers approximately 30 million hours of volunteer service (unaudited) valued at about \$600 million (unaudited)

**4c** (Code ) (Expenses \$ 16,503,638 including grants of \$ 13,052,931 ) (Revenue \$ 4,535,630 )  
 MISSIONFISH MissionFish is a social enterprise of Points of Light Institute that provides people a vehicle to use their purchasing power to support causes that matter to them In partnership with eBay, MissionFish provides a suite of giving tools that enable members of the eBay community to designate donations to their charity of choice when buying or selling

**4d** Other program services (Describe in Schedule O ) **See also Additional Data for Description**  
 (Expenses \$ 755,872 including grants of \$ 117,921 ) (Revenue \$ )

**4e Total program service expenses** \$ 35,487,591

Part IV Checklist of Required Schedules

Table with 3 columns: Question number, Question text, and Yes/No response columns. Rows include questions 1 through 20 regarding organizational requirements and reporting.

**Part IV Checklist of Required Schedules** (continued)

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

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable . . . . .		
	<b>1a</b> 112		
<b>b</b>	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		
	<b>1b</b> 0		
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	Yes	
<b>2a</b>	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return . . . . .		
	<b>2a</b> 162		
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	Yes	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . . . .		No
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O . . . . .		
<b>4a</b>	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)? . . . . .	Yes	
<b>b</b>	If "Yes," enter the name of the foreign country <u>UK</u> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .		No
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? . . . . .		
<b>6a</b>	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? . . . . .		No
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	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? . . . . .		No
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .		
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .		No
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year . . . . .		
	<b>7d</b>		
<b>e</b>	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .		No
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .		No
<b>g</b>	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . . . . .		
<b>h</b>	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? . . . . .		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . . . . .		
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the organization make any taxable distributions under section 4966? . . . . .		
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person? . . . . .		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12 . . . . .	<b>10a</b>	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter		
<b>a</b>	Gross income from members or shareholders . . . . .	<b>11a</b>	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) . . . . .	<b>11b</b>	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? . . . . .	<b>12a</b>	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>	

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.

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body (27); 1b Enter the number of voting members that are independent (26); 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? (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? (No); 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? (No); 5 Did the organization become aware during the year of a material diversion of the organization's assets? (No); 6 Does the organization have members or stockholders? (No); 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? (No); 7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? (No); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a The governing body? (Yes); 8b Each committee with authority to act on behalf of the governing body? (Yes); 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 (No).

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Does the organization have local chapters, branches, or affiliates? (Yes); 10b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? (Yes); 11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? (Yes); 11A Describe in Schedule O the process, if any, used by the organization to review the Form 990; 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 (Yes); 12b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (Yes); 12c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done (Yes); 13 Does the organization have a written whistleblower policy? (Yes); 14 Does the organization have a written document retention and destruction policy? (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 The organization's CEO, Executive Director, or top management official (Yes); 15b Other officers or key employees of the organization (Yes); If "Yes" to line a or b, 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? (No); 16b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

Table with 2 columns: Question, Answer. Row 17: List the States with which a copy of this Form 990 is required to be filed (AZ, AR, CA, CT, DC, FL, GA, HI, IL, KS, KY, ME, MD, MI, MN, MS, MO, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI). Row 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 make these available. Check all that apply: [ ] Own website, [x] Another's website, [x] Upon request. Row 19: Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table. Row 20: State the name, physical address, and telephone number of the person who possesses the books and records of the organization. KRISTINA TECCE, 600 MEANS ST NW STE 210, ATLANTA, GA 30318, (404) 979-2910.



<b>1b Total</b>	1,233,191	0	147,276
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**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **▶**14

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
<b>4</b> 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>	Yes	
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		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

(A) Name and business address	(B) Description of services	(C) Compensation
The August Jackson Company 7830 Old Georgetown Road 3rd fl Bo BETHESDA, MD 20814	Production Mgmt	1,314,870
MN Technology PO Box 481 OAKTON, VA 22124	Computer Technology	794,345
NETDESQ 42879 Lindsey Heights Place ASHBURN, VA 20148	Web Technology	321,390
Radio City Productions 44 West 51st Street NEW YORK, NY 10020	Production Company	466,726
Freeman PO Box 650036 DALLAS, TX 75265	Transportation Comp	279,206

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **▶**6

**Part VIII Statement of Revenue**

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514		
<b>Contributions, gifts, grants and other similar amounts</b>	<b>1a</b>	Federated campaigns . . . . . <b>1a</b>						
	<b>b</b>	Membership dues . . . . . <b>1b</b>						
	<b>c</b>	Fundraising events . . . . . <b>1c</b>						
	<b>d</b>	Related organizations . . . . . <b>1d</b>						
	<b>e</b>	Government grants (contributions) <b>1e</b>	6,570,332					
	<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above <b>1f</b>	27,310,368					
	<b>g</b>	Noncash contributions included in lines 1a-1f \$ 100,000						
	<b>h</b>	<b>Total.</b> Add lines 1a-1f . . . . . ▶	33,880,700					
<b>Program Service Revenue</b>	<b>2a</b>	TRAINING & CONSULTING	900,099	199,680	199,680			
	<b>b</b>	CONFERENCES	900,099	1,360,952	1,360,952			
	<b>c</b>	MISSIONFISH	900,099	4,535,630	4,535,630			
	<b>d</b>	CERTIFICATE FEES	900,099	522,395	522,395			
	<b>e</b>							
	<b>f</b>	All other program service revenue						
	<b>g</b>	<b>Total.</b> Add lines 2a-2f . . . . . ▶	6,618,657					
<b>Other Revenue</b>	<b>3</b>	Investment income (including dividends, interest and other similar amounts) . . . . . ▶	16,211			16,211		
	<b>4</b>	Income from investment of tax-exempt bond proceeds . . . ▶	0					
	<b>5</b>	Royalties . . . . . ▶	0					
	<b>6a</b>	<b>b</b>	<b>c</b>	<b>d</b>	(i) Real	(ii) Personal		
					Gross Rents			
					Less rental expenses			
					Rental income or (loss)			
		<b>d</b>	Net rental income or (loss) . . . . . ▶					
	<b>7a</b>	<b>b</b>	<b>c</b>	<b>d</b>	(i) Securities	(ii) Other		
					Gross amount from sales of assets other than inventory			
					Less cost or other basis and sales expenses			
					Gain or (loss)			
		<b>d</b>	Net gain or (loss) . . . . . ▶	0				
	<b>8a</b>	<b>b</b>	<b>c</b>		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . . <b>a</b>			
Less direct expenses . . . . . <b>b</b>								
Net income or (loss) from fundraising events . . . ▶					0			
<b>9a</b>	<b>b</b>	<b>c</b>		Gross income from gaming activities See Part IV, line 19 . . . . . <b>a</b>				
				Less direct expenses . . . . . <b>b</b>				
				Net income or (loss) from gaming activities . . . ▶	0			
<b>10a</b>	<b>b</b>	<b>c</b>		Gross sales of inventory, less returns and allowances . . . <b>a</b>				
				Less cost of goods sold . . . . . <b>b</b>				
				Net income or (loss) from sales of inventory . . . ▶	0			
Miscellaneous Revenue		Business Code						
<b>11a</b>								
<b>b</b>								
<b>c</b>								
<b>d</b>	All other revenue . . . . .							
<b>e</b>	<b>Total.</b> Add lines 11a-11d . . . . . ▶	0						
<b>12</b>	<b>Total revenue.</b> See Instructions . . . . . ▶	40,515,568	6,618,657		16,211			

**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) but are not required to complete columns (B), (C), and (D).

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>		<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
<b>1</b>	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	12,574,893	12,574,893		
<b>2</b>	Grants and other assistance to individuals in the U S See Part IV, line 22	0	0		
<b>3</b>	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	4,900,460	4,900,460		
<b>4</b>	Benefits paid to or for members	0	0		
<b>5</b>	Compensation of current officers, directors, trustees, and key employees . . . . .	771,407	205,704	565,703	
<b>6</b>	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .	72,077	72,077		
<b>7</b>	Other salaries and wages	6,520,341	5,414,454	833,561	272,326
<b>8</b>	Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .	184,124	142,328	34,987	6,809
<b>9</b>	Other employee benefits . . . . .	1,044,446	807,314	198,454	38,678
<b>10</b>	Payroll taxes . . . . .	802,103	620,025	152,415	29,663
<b>11</b>	Fees for services (non-employees)				
<b>a</b>	Management . . . . .	0			
<b>b</b>	Legal . . . . .	17,975	17,975		
<b>c</b>	Accounting . . . . .	175,000		175,000	
<b>d</b>	Lobbying . . . . .	0			
<b>e</b>	Professional fundraising See Part IV, line 17 . . . . .	65,252			65,252
<b>f</b>	Investment management fees . . . . .	0			
<b>g</b>	Other . . . . .	8,340,157	7,966,530	373,627	
<b>12</b>	Advertising and promotion . . . . .	0			
<b>13</b>	Office expenses . . . . .	1,074,582	803,999	252,452	18,131
<b>14</b>	Information technology . . . . .	0			
<b>15</b>	Royalties . . . . .	0			
<b>16</b>	Occupancy . . . . .	714,832	596,032	92,968	25,832
<b>17</b>	Travel . . . . .	1,180,843	1,013,028	114,433	53,382
<b>18</b>	Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .	0			
<b>19</b>	Conferences, conventions, and meetings . . . . .	75,000	67,981	5,628	1,391
<b>20</b>	Interest . . . . .	108,765	108,765		
<b>21</b>	Payments to affiliates . . . . .	0			
<b>22</b>	Depreciation, depletion, and amortization . . . . .	118,261	80,953	33,304	4,004
<b>23</b>	Insurance . . . . .	36,294	27,155	8,527	612
<b>24</b>	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below )				
<b>a</b>	MISC EXPENSES	227,353	67,918	156,205	3,230
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>f</b>	All other expenses				
<b>25</b>	<b>Total functional expenses.</b> Add lines 1 through 24f	39,004,165	35,487,591	2,997,264	519,310
<b>26</b>	<b>Joint costs.</b> Check here <input type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

**Part X Balance Sheet**

		(A)		(B)
		Beginning of year		End of year
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	1,750,081	<b>1</b>	4,486,097
	<b>2</b> Savings and temporary cash investments . . . . .		<b>2</b>	
	<b>3</b> Pledges and grants receivable, net . . . . .	4,872,112	<b>3</b>	3,303,804
	<b>4</b> Accounts receivable, net . . . . .	1,135,867	<b>4</b>	1,358,849
	<b>5</b> Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .		<b>5</b>	
	<b>6</b> Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L . . . . .		<b>6</b>	
	<b>7</b> Notes and loans receivable, net . . . . .		<b>7</b>	
	<b>8</b> Inventories for sale or use . . . . .		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges . . . . .	136,635	<b>9</b>	166,424
	<b>10a</b> Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D . . . . .	1,571,355		
	<b>b</b> Less accumulated depreciation . . . . .	882,369	<b>10c</b>	688,986
	<b>11</b> Investments—publicly traded securities . . . . .	4,107,919	<b>11</b>	4,102,131
	<b>12</b> Investments—other securities. See Part IV, line 11 . . . . .		<b>12</b>	
	<b>13</b> Investments—program-related. See Part IV, line 11 . . . . .		<b>13</b>	
	<b>14</b> Intangible assets . . . . .		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 . . . . .		<b>15</b>	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	12,256,582	<b>16</b>	14,106,291	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	4,155,600	<b>17</b>	4,562,064
	<b>18</b> Grants payable . . . . .		<b>18</b>	
	<b>19</b> Deferred revenue . . . . .	1,763,353	<b>19</b>	2,354,345
	<b>20</b> Tax-exempt bond liabilities . . . . .		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .		<b>21</b>	
	<b>22</b> Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .	1,415,626	<b>23</b>	815,626
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .		<b>24</b>	
	<b>25</b> Other liabilities. Complete Part X of Schedule D . . . . .	585,270	<b>25</b>	0
	<b>26 Total liabilities.</b> Add lines 17 through 25 . . . . .	7,919,849	<b>26</b>	7,732,035
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets . . . . .	-2,842,371	<b>27</b>	-2,361,323
	<b>28</b> Temporarily restricted net assets . . . . .	2,796,769	<b>28</b>	4,343,244
	<b>29</b> Permanently restricted net assets . . . . .	4,382,335	<b>29</b>	4,392,335
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds . . . . .		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building or equipment fund . . . . .		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>32</b>	
<b>33</b> Total net assets or fund balances . . . . .	4,336,733	<b>33</b>	6,374,256	
<b>34</b> Total liabilities and net assets/fund balances . . . . .	12,256,582	<b>34</b>	14,106,291	

**Part XI Financial Statements and Reporting**

		Yes	No
<b>1</b>	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		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? . . .		No
<b>2b</b>	Were the organization's financial statements audited by an independent accountant? . . . . .	Yes	
<b>2c</b>	If "Yes," to 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 . . . .	Yes	
<b>2d</b>	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
<b>3a</b>	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? . . . . .	Yes	
<b>3b</b>	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . . .	Yes	

**SCHEDULE A**  
(Form 990 or 990EZ)

**Public Charity Status and Public Support**

**2009**

**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

Name of the organization  
Points of Light Foundation

Employer identification number

65-0206641

**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 **section 170(b)(1)(A)(i).**
- 2  A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E )
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state
  
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II )
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 8  A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 9  An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III )
- 10  An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h  
 a  Type I      b  Type II      c  Type III - Functionally integrated      d  Type III - Other
- e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f  If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  
 (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?  
 (ii) a family member of a person described in (i) above?  
 (iii) a 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s)

	Yes	No
<b>11g(i)</b>		
<b>11g(ii)</b>		
<b>11g(iii)</b>		

(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 support?
			Yes	No	Yes	No	Yes	No	
<b>Total</b>									

**Part II Support Schedule for Organizations Described in IRC 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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	20,611,072	19,022,882	23,288,662	25,094,789	33,780,698	121,798,103
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4 Total.</b> Add lines 1 through 3	20,611,072	19,022,882	23,288,662	25,094,789	33,780,698	121,798,103
<b>5</b> 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)						301,480
<b>6 Public Support.</b> Subtract line 5 from line 4						121,496,623

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>7</b> Amounts from line 4	20,611,072	352,900	23,288,662	25,094,789	33,780,698	121,798,103
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	611,613	352,900	226,853	45,317	16,211	1,252,894
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b> Other income (Explain in Part IV ) Do not include gain or loss from the sale of capital assets						
<b>11 Total support</b> (Add lines 7 through 10)						123,050,997
<b>12</b> Gross receipts from related activities, etc (See instructions )					<b>12</b>	29,786,175

**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**

<b>14</b> Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f))	<b>14</b>	98.737 %
<b>15</b> Public Support Percentage for 2008 Schedule A, Part II, line 14	<b>15</b>	76.783 %

**16a 33 1/3% support test—2009.** 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—2008.** If the organization did not check the 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—2009.** 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—2008.** 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 IRC 509(a)(2)**

(Complete only if you checked the box on line 9 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
<b>2</b> 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						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</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						
<b>c</b> Add lines 7a and 7b						
<b>8 Public Support</b> (Subtract line 7c from line 6 )						

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
<b>13 Total support</b> (Add lines 9, 10c, 11 and 12 )						

**14 First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here**

**Section C. Computation of Public Support Percentage**

<b>15</b> Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	<b>15</b>	
<b>16</b> Public support percentage from 2008 Schedule A, Part III, line 15	<b>16</b>	

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2009</b> (line 10c column (f) divided by line 13 column (f))	<b>17</b>	
<b>18</b> Investment income percentage from <b>2008</b> Schedule A, Part III, line 17	<b>18</b>	

**19a 33 1/3% support tests—2009.** 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—2008.** 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

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**Part IV** **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

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**SCHEDULE C**  
(Form 990 or 990-EZ)  
  
Department of the Treasury  
Internal Revenue Service

**Political Campaign and Lobbying Activities**  
  
**For Organizations Exempt From Income Tax Under section 501(c) and section 527**  
▶ **Complete if the organization is described below.**  
▶ **Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.**

OMB No 1545-0047  
  
**2009**  
**Open to Public Inspection**

**If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then**

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

**If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then**

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

**If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35a (regarding proxy tax), then**

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization Points of Light Foundation	Employer identification number 65-0206641
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**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV
- 2 Political expenditures ▶ \$ \_\_\_\_\_
- 3 Volunteer hours \_\_\_\_\_

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?  Yes  No
- 4a Was a correction made?  Yes  No
- b If "Yes," describe in Part IV

**Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ \_\_\_\_\_
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ \$ \_\_\_\_\_
- 4 Did the filing organization file **Form 1120-POL** for this year?  Yes  No
- 5 State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

- A** Check  if the filing organization belongs to an affiliated group
- B** Check  if the filing organization checked box A and "limited control" provisions apply

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)	(a) Filing Organization's Totals	(b) Affiliated Group Totals												
<b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying)														
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying)														
<b>c</b> Total lobbying expenditures (add lines 1a and 1b)														
<b>d</b> Other exempt purpose expenditures														
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d)														
<b>f</b> Lobbying nontaxable amount Enter the amount from the following table in both columns														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%; text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 50%; text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000													
Over \$17,000,000	\$1,000,000													
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f)														
<b>h</b> Subtract line 1g from line 1a If zero or less, enter -0-														
<b>i</b> Subtract line 1f from line 1c If zero or less, enter -0-														
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

**4-Year Averaging Period Under Section 501(h)**  
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
<b>2a</b> Lobbying non-taxable amount	1,000,000				1,000,000
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					1,500,000
<b>c</b> Total lobbying expenditures	120,000				120,000
<b>d</b> Grassroots non-taxable amount	250,000				250,000
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					375,000
<b>f</b> Grassroots lobbying expenditures					

**Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

	(a)		(b)
	Yes	No	Amount
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
<b>a</b> Volunteers?		No	
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
<b>c</b> Media advertisements?		No	
<b>d</b> Mailings to members, legislators, or the public?		No	
<b>e</b> Publications, or published or broadcast statements?		No	
<b>f</b> Grants to other organizations for lobbying purposes?		No	
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		6,250
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
<b>i</b> Other activities? If "Yes," describe in Part IV	Yes		43,750
<b>j</b> Total lines 1c through 1i			50,000
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		No	

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members?	<b>1</b>	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?	<b>2</b>	
<b>3</b> Did the organization agree to carryover lobbying and political expenditures from the prior year?	<b>3</b>	

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".**

<b>1</b> Dues, assessments and similar amounts from members	<b>1</b>	
<b>2</b> Section 162(e) non-deductible lobbying and political expenditures ( <b>do not include amounts of political expenses for which the section 527(f) tax was paid</b> ).		
<b>a</b> Current year	<b>2a</b>	
<b>b</b> Carryover from last year	<b>2b</b>	
<b>c</b> Total	<b>2c</b>	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	<b>3</b>	
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	<b>4</b>	
<b>5</b> Taxable amount of lobbying and political expenditures (see instructions)	<b>5</b>	

**Part IV Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1. Also, complete this part for any additional information.

Identifier	Return Reference	Explanation
Lobbying Activities	Schedule C, Part II-B, Line 1b & 1I	The Foundation has a staff member who is compensated to advocate for legislation that is to further the organization's mission. As a result, the Foundation worked to ensure the passage of the Serve America Act in 2009.

SCHEDULE D (Form 990)

OMB No 1545-0047

Supplemental Financial Statements

2009

Open to Public Inspection

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. Attach to Form 990. See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization Points of Light Foundation

Employer identification number 65-0206641

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.

Table with 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4 showing total number at end of year, aggregate contributions, aggregate grants, and aggregate value.

- 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?
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may 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?

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)
2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

Table with 2 columns: Line number, Held at the End of the Year. Rows 2a-2d.

- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable 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?
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 170(h)(4)(B)(ii)?
9 In Part XIV, 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, 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 XIV, the text of the footnote to its financial statements that describes these items
b If the organization elected, as permitted under SFAS 116, 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
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 relating to these items

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

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

- a**  Public exhibition
- b**  Scholarly research
- c**  Preservation for future generations
- d**  Loan or exchange programs
- e**  Other

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

**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 XIV and complete the following table

	Amount
<b>1c</b> Beginning balance	
<b>1d</b> Additions during the year	
<b>1e</b> Distributions during the year	
<b>1f</b> Ending balance	

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

**b** If "Yes," explain the arrangement in Part XIV

**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
<b>1a</b> Beginning of year balance . . . . .	4,016,082	3,981,055			
<b>b</b> Contributions . . . . .	10,000	68,814			
<b>c</b> Investment earnings or losses . . . . .	-24,675	-33,787			
<b>d</b> Grants or scholarships . . . . .					
<b>e</b> Other expenditures for facilities and programs . . . . .					
<b>f</b> Administrative expenses . . . . .					
<b>g</b> End of year balance . . . . .	4,001,407	4,016,082			

**2** Provide the estimated percentage of the year end balance held as

- a** Board designated or quasi-endowment
- b** Permanent endowment  **100.000 %**
- c** Term endowment

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

	Yes	No
<b>(i)</b> unrelated organizations . . . . .	<b>3a(i)</b>	No
<b>(ii)</b> related organizations . . . . .	<b>3a(ii)</b>	No
<b>b</b> If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? . . . . .	<b>3b</b>	

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land . . . . .				
<b>b</b> Buildings . . . . .				
<b>c</b> Leasehold improvements . . . . .		863,632	753,332	110,300
<b>d</b> Equipment . . . . .		707,723	129,037	578,686
<b>e</b> Other . . . . .				
<b>Total.</b> Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				688,986



**Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements**

<b>1</b>	Total revenue (Form 990, Part VIII, column (A), line 12)	<b>1</b>	40,515,568
<b>2</b>	Total expenses (Form 990, Part IX, column (A), line 25)	<b>2</b>	39,004,165
<b>3</b>	Excess or (deficit) for the year Subtract line 2 from line 1	<b>3</b>	1,511,403
<b>4</b>	Net unrealized gains (losses) on investments	<b>4</b>	-3,380
<b>5</b>	Donated services and use of facilities	<b>5</b>	
<b>6</b>	Investment expenses	<b>6</b>	
<b>7</b>	Prior period adjustments	<b>7</b>	
<b>8</b>	Other (Describe in Part XIV)	<b>8</b>	149,968
<b>9</b>	Total adjustments (net) Add lines 4 - 8	<b>9</b>	146,588
<b>10</b>	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	<b>10</b>	1,657,991

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

<b>1</b>	Total revenue, gains, and other support per audited financial statements	<b>1</b>	43,327,359
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
<b>a</b>	Net unrealized gains on investments	<b>2a</b>	-3,380
<b>b</b>	Donated services and use of facilities	<b>2b</b>	171,712
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIV)	<b>2d</b>	2,743,459
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	2,911,791
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	40,415,568
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIV)	<b>4b</b>	100,000
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	100,000
<b>5</b>	Total Revenue Add lines <b>3</b> and <b>4c</b> . (This should equal Form 990, Part I, line 12)	<b>5</b>	40,515,568

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

<b>1</b>	Total expenses and losses per audited financial statements	<b>1</b>	41,669,368
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25		
<b>a</b>	Donated services and use of facilities	<b>2a</b>	171,712
<b>b</b>	Prior year adjustments	<b>2b</b>	
<b>c</b>	Other losses	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIV)	<b>2d</b>	2,593,491
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	2,765,203
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	38,904,165
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIV)	<b>4b</b>	100,000
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	100,000
<b>5</b>	Total expenses Add lines <b>3</b> and <b>4c</b> . (This should equal Form 990, Part I, line 18)	<b>5</b>	39,004,165

**Part XIV 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, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
Endowment funds	Part V, Line 4 Endowment funds	The organization's endowment funds are used for general support of the organization
Land, Buildings, and Equipment	Schedule D, Part VI, Line 1d	The cost, depreciation, and book value for equipment also include furniture and fixtures
Footnote for Uncertain Tax Positions	Schedule D, Part X	The Foundation evaluates its uncertain tax positions using the provisions of FASB ASC Topic 740 Income Taxes The Foundation follows the criterion that an individual tax position has to meet some or all of the benefits of that position to be recognized in the Foundation's financial statements Tax years open to examination by tax authorities under the statute of limitations include fiscal 2006 through 2010 The Foundation has a policy to record interest and penalties (if any) related to income tax matters in income tax expense The Foundation has applied the more likely than not criterion to all the tax positions for which the statute of limitations remain open and has determined that the tax positions satisfy such criterion and that no provision for income taxes is required at September 30, 2010
Children For Children Excess in Net Assets	Schedule D, Part XI, Line 8	The audited financial statements are prepared on a consolidated basis The excess in Net Assets in the amount of \$149,968 for Children for Children Foundation is added in order to reconcile to the consolidated excess in Net Assets per the audited financial statements
Children For Children Revenue	Schedule D, Part XII, Line 2d	The audited financial statements are prepared on a consolidated basis Revenue in the amount of \$2,743,459 for Children for Children Foundation is deducted in order to reconcile to the revenues per the Form 990 The Form 990 is prepared separately by each entity
Children For Children Expenses	Schedule D, Part XIII, Line 2d	The audited financial statements are prepared on a consolidated basis Expenses in the amount of \$2,593,491 for Children for Children Foundation is deducted in order to reconcile to the expenses per the Form 990 The Form 990 is prepared separately by each entity
Transportation Credit Contribution	Part XII, Line 4b	The organization receives a transportation credit from a major air carrier that is administered through a Universal Air Travel Plan (UATP) account The credit provides air travel accomodations across the organization throughout the fiscal year The contribution revenue related to the transporation credit are not included in for financial statement purposes, but included for tax
Transportion Credit Expense	Part XIII, Line 4b	The organization receives a transportation credit from a major air carrier that is administered through a Universal Air Travel Plan (UATP) account The credit provides air travel expenses across the organization throughout the fiscal year The travel expenses related to the transporation credit are not included in for financial statement purposes, but included for tax

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047

2009

Open to Public Inspection

Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990. See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization Points of Light Foundation

Employer identification number 65-0206641

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance...
2 For grantmakers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States
3 Activities per Region (Use Schedule F-1 (Form 990) if additional space is needed)

Table with 6 columns: (a) Region, (b) Number of offices in the region, (c) Number of employees or agents in region, (d) Activities conducted in region, (e) If activity listed in (d) is a program service, (f) Total expenditures for region. Includes data for Europe and a Totals row.







SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

2009

Open to Public Inspection

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

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

Department of the Treasury Internal Revenue Service

Name of the organization Points of Light Foundation

Employer identification number

65-0206641

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
b Internet and e-mail solicitations
c Phone solicitations
d In-person solicitations
e Solicitation of non-government grants
f Solicitation of government grants
g Special fundraising events

2a Did the organization have a written or oral agreement with any individual... Yes No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements...

Table with 6 columns: (i) Name of individual or entity (fundraiser), (ii) Activity, (iii) Did fundraiser have custody or control of contributions?, (iv) Gross receipts from activity, (v) Amount paid to (or retained by) fundraiser listed in col (i), (vi) Amount paid to (or retained by) organization.

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

AL,AZ,AR,CA,CT,DC,FL,GA,HI,IL,KS,KY,LA,ME,MD,MI,MN,MS,MO,NH,NJ,NM,NY,OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WV,WI

**Part III Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		(event type)	(event type)	(total number)	(Add col (a) through col (c))
<b>Revenue</b>	<b>1</b> Gross receipts . . . . .				
	<b>2</b> Less Charitable contributions . . . . .				
	<b>3</b> Gross income (line 1 minus line 2) . . . . .				
<b>Direct Expenses</b>	<b>4</b> Cash prizes . . . . .				
	<b>5</b> Non-cash prizes . . . . .				
	<b>6</b> Rent/facility costs . . . . .				
	<b>7</b> Food and beverages . . . . .				
	<b>8</b> Entertainment . . . . .				
	<b>9</b> Other direct expenses . . . . .				
	<b>10</b> Direct expense summary Add lines 4 through 9 in column (d) . . . . . ▶				
	<b>11</b> Net income summary Combine lines 3, column d, and line 10. . . . . ▶				

**Part III Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
					(Add col (a) through col (c))
<b>Revenue</b>	<b>1</b> Gross revenue . . . . .				
<b>Direct Expenses</b>	<b>2</b> Cash prizes . . . . .				
	<b>3</b> Non-cash prizes . . . . .				
	<b>4</b> Rent/facility costs . . . . .				
	<b>5</b> Other direct expenses . . . . .				
	<b>6</b> Volunteer labor . . . . .	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
<b>7</b> Direct expense summary Add lines 2 through 5 in column (d) . . . . . ▶					
<b>8</b> Net gaming income summary Combine lines 1, column d, and line 7 . . . . . ▶					

	Yes	No
<b>9</b> Enter the state(s) in which the organization operates gaming activities _____		
<b>a</b> Is the organization licensed to operate gaming activities in each of these states? . . . . .	<b>9a</b>	
<b>b</b> If "No," Explain _____		
<b>10a</b> Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	<b>10a</b>	
<b>b</b> If "Yes," Explain _____		
<b>11</b> Does the organization operate gaming activities with nonmembers? . . . . .	<b>11</b>	
<b>12</b> Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . .	<b>12</b>	

		Yes	No
<b>13</b> Indicate the percentage of gaming activity operated in			
<b>a</b> The organization's facility . . . . .	<b>13a</b>		
<b>b</b> An outside facility . . . . .	<b>13b</b>		
<b>14</b> Enter the name and address of the person who prepares the organization's gaming/special events books and records			
Name ▶ _____			
Address ▶ _____			
<b>15a</b> Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . .			
		<b>15a</b>	
<b>b</b> If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____			
<b>c</b> If "Yes," enter name and address			
Name ▶ _____			
Address ▶ _____			
<b>16</b> Gaming manager information			
Name ▶ _____			
Gaming manager compensation ▶ \$ _____			
Description of services provided ▶ _____			
<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> Independent contractor			
<b>17</b> Mandatory distributions			
<b>a</b> Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . .		<b>17a</b>	
<b>b</b> Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____			

Schedule I (Form 990)

OMB No 1545-0047

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

2009

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization Points of Light Foundation

Employer identification number

65-0206641

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC Code section if applicable, (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation (book, FMV, appraisal, other), (g) Description of non-cash assistance, (h) Purpose of grant or assistance. Row 1 contains 'See Additional Data Table'.

2 Enter total number of section 501(c)(3) and government organizations . . . . . 262
3 Enter total number of other organizations . . . . .



**Schedule J**  
(Form 990)

**Compensation Information**

OMB No 1545-0047

**2009**

**Open to Public Inspection**

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.

Department of the Treasury  
Internal Revenue Service

Name of the organization  
Points of Light Foundation

Employer identification number

65-0206641

**Part I Questions Regarding Compensation**

Yes No

- 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 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 organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee          | <input type="checkbox"/> Written employment contract                                |
| <input type="checkbox"/> Independent compensation consultant        | <input type="checkbox"/> Compensation survey or study                               |
| <input checked="" 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?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?  
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

**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?
- b** Any related organization?  
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?
- b** Any related organization?  
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

**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 Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III

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

	Yes	No
<b>1b</b>		
<b>2</b>		
<b>4a</b>		No
<b>4b</b>		No
<b>4c</b>		No
<b>5a</b>		No
<b>5b</b>		No
<b>6a</b>		No
<b>6b</b>		No
<b>7</b>		No
<b>8</b>		No
<b>9</b>		

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space 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) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(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 in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
Amy Smith	(i)	136,422	0	0	5,428	15,235	157,085	0
	(ii)	0	0	0	0	0	0	0
Tracy Hoover	(i)	147,398	0	0	5,311	13,809	166,518	0
	(ii)	0	0	0	0	0	0	0
Meridith Rentz	(i)	131,960	0	0	7,638	15,894	155,492	0
	(ii)	0	0	0	0	0	0	0
Michelle Nunn	(i)	197,506	0	0	8,250	15,050	220,806	0
	(ii)	0	0	0	0	0	0	0
KRISTINA TECCE	(i)	154,007	0	0	2,622	10,446	167,075	0
	(ii)	0	0	0	0	0	0	0

**Part III Supplemental Information**

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

Identifier	Return Reference	Explanation
------------	------------------	-------------

Schedule L (Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2009

Open to Public Inspection

Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.

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

Department of the Treasury Internal Revenue Service

Name of the organization Points of Light Foundation

Employer identification number 65-0206641

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

Table with 3 main columns: (a) Name of disqualified person, (b) Description of transaction, (c) Corrected? (Yes/No)

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958
3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

Table with 7 main columns: (a) Name of interested person and purpose, (b) Loan to or from the organization?, (c) Original principal amount, (d) Balance due, (e) In default?, (f) Approved by board or committee?, (g) Written agreement?

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

Table with 3 main columns: (a) Name of interested person, (b) Relationship between interested person and the organization, (c) Amount of grant or type of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

Table with 5 main columns: (a) Name of interested person, (b) Relationship between interested person and the organization, (c) Amount of transaction, (d) Description of transaction, (e) Sharing of organization's revenues?

SCHEDULE M (Form 990)

NonCash Contributions

OMB No 1545-0047

2009

Open to Public Inspection

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

Department of the Treasury Internal Revenue Service

Name of the organization Points of Light Foundation

Employer identification number

65-0206641

Part I Types of Property

Table with 4 columns: (a) Check if applicable, (b) Number of Contributions, (c) Revenues reported on Form 990, Part VIII, line 1g, (d) Method of determining revenues. Rows include Art, Books, Cars, Boats, Intellectual property, Securities, Real estate, etc.

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 0

Table with 3 columns: Question, Yes, No. Rows include 30a, 31, 32a, 33 regarding contribution reporting and policies.

**Part II**

**Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
------------	------------------	-------------

**SCHEDULE O**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

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

OMB No 1545-0047

**2009**

**Open to Public  
Inspection**

**Name of the organization**  
Points of Light Foundation

**Employer identification number**  
65-0206641

Identifier	Return Reference	Explanation
The Civic Incubator	Form 990, Part III, Line 4d Other Program Services	The Civic Incubator creates innovation in civic activation - bringing together and supporting emerging service solutions and new ideas through social enterprise, mergers and joint ventures. Currently, the Foundation incubates Americorp Alums, GenerationOn, global volunteerism (International HandsOn Affiliates) and Corporate Strategy and Volunteerism (Corporate Service Council)

**SCHEDULE R  
(Form 990)**

**Related Organizations and Unrelated Partnerships**

OMB No 1545-0047

**2009**

**Open to Public  
Inspection**

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.**  
▶ **Attach to Form 990.** ▶ **See separate instructions.**

Department of the Treasury  
Internal Revenue Service

**Name of the organization**  
Points of Light Foundation

**Employer identification number**

65-0206641

**Part I Identification of Disregarded Entities** (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

**Part II Identification of Related Tax-Exempt Organizations** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
Children for Children Foundation 6 East 43rd Street 25 Floor New York, NY 10017 13-3880287	Youth Service	NY	501(c)(3)	7	NA

**Part III Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	
							Yes	No		Yes	No

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

**Part V Transactions With Related Organizations** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)

**Note.** Complete line 1 if any entity is listed in Parts II, III or IV

**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties **(iv)** rent from a controlled entity
- b** Gift, grant, or capital contribution to other organization(s)
- c** Gift, grant, or capital contribution from other organization(s)
- d** Loans or loan guarantees to or for other organization(s)
- e** Loans or loan guarantees by other organization(s)
  
- f** Sale of assets to other organization(s)
- g** Purchase of assets from other organization(s)
- h** Exchange of assets
- i** Lease of facilities, equipment, or other assets to other organization(s)
  
- j** Lease of facilities, equipment, or other assets from other organization(s)
- k** Performance of services or membership or fundraising solicitations for other organization(s)
- l** Performance of services or membership or fundraising solicitations by other organization(s)
- m** Sharing of facilities, equipment, mailing lists, or other assets
- n** Sharing of paid employees
  
- o** Reimbursement paid to other organization for expenses
- p** Reimbursement paid by other organization for expenses
  
- q** Other transfer of cash or property to other organization(s)
- r** Other transfer of cash or property from other organization(s)

	Yes	No
<b>1a</b>		No
<b>1b</b>	Yes	
<b>1c</b>		No
<b>1d</b>		No
<b>1e</b>		No
<b>1f</b>		No
<b>1g</b>		No
<b>1h</b>		No
<b>1i</b>		No
<b>1j</b>		No
<b>1k</b>	Yes	
<b>1l</b>	Yes	
<b>1m</b>		No
<b>1n</b>	Yes	
<b>1o</b>	Yes	
<b>1p</b>		No
<b>1q</b>		No
<b>1r</b>		No

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved
<b>(1)</b>			
<b>(2)</b>			
<b>(3)</b>			
<b>(4)</b>			
<b>(5)</b>			
<b>(6)</b>			



## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 65-0206641

**Name:** Points of Light Foundation

### Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

#### 4d. Other program services

(Code ) (Expenses \$ 755,872 including grants of \$ 117,921 ) (Revenue \$ )

CIVIC INCUBATOR

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(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	Officer	Key employee	Highest compensated employee	Former			
Neil Bush TRUSTEE	5 0	X						0	0	0
Raymond G Chambers TRUSTEE	5 0	X						0	0	0
STEVE CRANFORD TRUSTEE	5 0	X						0	0	0
JEFFREY K HAIDET TRUSTEE	5 0	X						0	0	0
MARIAN L HEARD TRUSTEE	5 0	X						0	0	0
JEFF HOFFMAN TRUSTEE	5 0	X						0	0	0
AJ JOHNSON TRUSTEE	5 0	X						0	0	0
MICHAEL KAY TRUSTEE	5 0	X						0	0	0
PATRICE KEEGAN TRUSTEE	5 0	X						0	0	0
SHERRY LANSING TRUSTEE	5 0	X						0	0	0
KATHERINE LAUDERDALE TRUSTEE	5 0	X						0	0	0
J BRADY LUM TRUSTEE	5 0	X						0	0	0
DIANE MELLEY TRUSTEE	5 0	X						0	0	0
BERNARD J MILANO TRUSTEE	5 0	X						0	0	0
BRAD SHAW TRUSTEE	5 0	X						0	0	0
DR JUDITH AM SMITH TRUSTEE	5 0	X						0	0	0
SILDA A WALL TRUSTEE	5 0	X						0	0	0
MARILEE CHINNICI-ZUERCHER TRUSTEE	5 0	X						0	0	0
MARCIA BULLARD TRUSTEE	5 0	X						0	0	0
KYLE CALDWELL TRUSTEE	5 0	X						0	0	0
DAVID EISNER TRUSTEE	5 0	X						0	0	0
DAVE BARGER TRUSTEE	5 0	X						0	0	0
MICHELLE KYDD LEE Trustee	5 0	X						0	0	0
MAYDE HENSON Trustee	5 0	X						0	0	0
KEVIN ARQUIT Trustee	5 0	X						0	0	0

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(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	Officer	Key employee	Highest compensated employee	Former			
Ken Sternad Trustee	5 0	X						0	0	0
Tracy Hoover COS	55 0			X				147,398	0	19,120
Meridith Rentz COO	55 0			X				131,960	0	23,532
Michelle Nunn CEO	55 0	X		X				197,506	0	23,300
KRISTINA TECCE CFO	55 0			X				154,007	0	13,068
Amy Smith President, HandsOn Network	55 0					X		136,422	0	20,663
Sean Milliken President, MissionFish	55 0					X		124,022	0	20,988
Oktay Dogramacı CTO, MissionFish	55 0					X		125,234	0	13,849
Paige Moody CEO, HandsOn Network	55 0					X		105,939	0	6,170
Jessica Kirkwood VP, Interactive Strategy	55 0					X		110,703	0	6,586

**Additional Data**

**Software ID:**  
**Software Version:**  
**EIN:** 65-0206641  
**Name:** Points of Light Foundation

**Form 990 Schedule F Part II - Grants or Entities Outside The United States**

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe/Iceland/Greenland	DONOR ADVISED FUND	386,011				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	168,054				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	124,736				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	124,561				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	91,047				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	88,269				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	81,193				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	80,275				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	77,852				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	77,560				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	68,223				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	67,567				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	50,675				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	42,528				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	37,661				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	33,679				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	33,470				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	31,895				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	31,849				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	31,221				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	28,536				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	28,368				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	28,279				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	26,978				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	26,653				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	26,267				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	25,787				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	24,848				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	24,564				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	24,312				FMV

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe/Iceland/Greenland	DONOR ADVISED FUND	21,946				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	19,641				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	19,614				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	19,499				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	18,720				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	17,783				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	17,551				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	16,954				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	16,864				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	16,824				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	16,725				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	14,462				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	14,332				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	13,789				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	13,348				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	13,292				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	12,694				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	10,618				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	10,227				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	10,195				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	10,157				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	10,026				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	10,007				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	8,965				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	8,898				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	8,848				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	8,761				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	8,531				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	8,129				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	7,995				FMV

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Europe/Iceland/Greenland	DONOR ADVISED FUND	7,279				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	7,040				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	6,898				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	6,884				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	6,849				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	6,575				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	6,205				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	6,137				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	6,053				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	5,998				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	5,834				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	5,817				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	5,764				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	5,735				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	5,650				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	5,633				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	5,621				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	5,215				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	5,181				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	5,098				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	5,093				FMV
		Europe/Iceland/Greenland	DONOR ADVISED FUND	5,056				FMV

**Software ID:**  
**Software Version:**  
**EIN:** 65-0206641  
**Name:** Points of Light Foundation

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
American Red Cross of Massachusetts Bay		501(c)(3)	101,317				VOLUNTEER SUPPORT
Boston Cares		501(c)(3)	259,794				VOLUNTEER SUPPORT
Business Volunteers Unlimited MD		501(c)(3)	14,615				VOLUNTEER SUPPORT
Center for Volunteer and Nonprofit Leadership of M		501(c)(3)	34,436				VOLUNTEER SUPPORT
Chicago Cares		501(c)(3)	56,456				VOLUNTEER SUPPORT
Children for Children		501(c)(3)	60,350				VOLUNTEER SUPPORT
City Parks Foundation		501(c)(3)	16,500				VOLUNTEER SUPPORT
Community Service Society of NY		501(c)(3)	69,077				VOLUNTEER SUPPORT
Duluth ISDMN Alliance with Youth		501(c)(3)	39,927				VOLUNTEER SUPPORT
Eden Village Camp		501(c)(3)	15,000				VOLUNTEER SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Federal Hill House		501(c)(3)	10,000				VOLUNTEER SUPPORT
FIRSTLINK Inc		501(c)(3)	53,971				VOLUNTEER SUPPORT
Florida Hometown USA Program Inc		501(c)(3)	10,000				VOLUNTEER SUPPORT
Friendship Volunteer Center-Sarasota		501(c)(3)	10,000				VOLUNTEER SUPPORT
Greater DC Cares		501(c)(3)	121,296				VOLUNTEER SUPPORT
Greater Philadelphia Cares		501(c)(3)	45,057				VOLUNTEER SUPPORT
Hands on Atlanta		501(c)(3)	112,174				VOLUNTEER SUPPORT
Hands on Bay Area		501(c)(3)	67,349				VOLUNTEER SUPPORT
Hands On Central California		501(c)(3)	19,897				VOLUNTEER SUPPORT
Hands on Central Texas		501(c)(3)	30,242				VOLUNTEER SUPPORT

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Hands On Charlotte		501(c)(3)	119,076				VOLUNTEER SUPPORT
Hands On Greater Portland		501(c)(3)	134,368				VOLUNTEER SUPPORT
Hands on Greater Richmond		501(c)(3)	30,754				VOLUNTEER SUPPORT
Hands on Hartford		501(c)(3)	48,432				VOLUNTEER SUPPORT
Hands on Jacksonville		501(c)(3)	115,679				VOLUNTEER SUPPORT
Hands on Jacksonville		501(c)(3)	8,726				VOLUNTEER SUPPORT
Hands on Miami		501(c)(3)	88,011				VOLUNTEER SUPPORT
Hands On Mid-Willamette Valley		501(c)(3)	15,264				VOLUNTEER SUPPORT
HANDS ON NASHVILLE		501(c)(3)	82,741				VOLUNTEER SUPPORT
Hands on New Orleans		501(c)(3)	5,500				VOLUNTEER SUPPORT

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Hands On North Texas		501(c)(3)	25,750				VOLUNTEER SUPPORT
Hands On Orlando		501(c)(3)	80,800				VOLUNTEER SUPPORT
Hands on Sacramento Volunteer Center		501(c)(3)	17,400				VOLUNTEER SUPPORT
Hands on Twin Cities		501(c)(3)	85,744				VOLUNTEER SUPPORT
Hannah's Socks Inc		501(c)(3)	15,300				VOLUNTEER SUPPORT
Infinite Family		501(c)(3)	10,000				VOLUNTEER SUPPORT
Jersey Cares		501(c)(3)	74,650				VOLUNTEER SUPPORT
Kiwaniis Pediatric Trauma Center		501(c)(3)	10,000				VOLUNTEER SUPPORT
LA Works		501(c)(3)	57,000				VOLUNTEER SUPPORT
Maine Commission for Community Service		501(c)(3)	42,989				VOLUNTEER SUPPORT

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Make A Difference		501(c)(3)	48,458				VOLUNTEER SUPPORT
Massachusetts Service Alliance		501(c)(3)	46,883				VOLUNTEER SUPPORT
Metro United Way's Volunteer Connection		501(c)(3)	14,350				VOLUNTEER SUPPORT
METRO VOLUNTEERS		501(c)(3)	28,178				VOLUNTEER SUPPORT
Michigan Nonprofit Association		501(c)(3)	41,720				VOLUNTEER SUPPORT
National Direct		501(c)(3)	53,857				VOLUNTEER SUPPORT
Nature Coast Volunteer Center		501(c)(3)	14,018				VOLUNTEER SUPPORT
New York Cares		501(c)(3)	176,497				VOLUNTEER SUPPORT
Non Profit Center of Milwaukee Inc		501(c)(3)	42,946				VOLUNTEER SUPPORT
North Coast Opportunities		501(c)(3)	29,238				VOLUNTEER SUPPORT

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Northern Calif Presbyterian		501(c)(3)	7,738				VOLUNTEER SUPPORT
Northern California Presbyterian Homes & Svcs		501(c)(3)	44,324				VOLUNTEER SUPPORT
OASES		501(c)(3)	10,000				VOLUNTEER SUPPORT
One World Children's Fund		501(c)(3)	10,000				VOLUNTEER SUPPORT
Operation Troop Appreciation		501(c)(3)	10,000				VOLUNTEER SUPPORT
OVARIAN CANCER RESEARCH FUND		501(c)(3)	65,000				VOLUNTEER SUPPORT
Pandora's Aquarium		501(c)(3)	30,000				VOLUNTEER SUPPORT
Pass It Along		501(c)(3)	13,798				VOLUNTEER SUPPORT
Pittsburgh Cares		501(c)(3)	17,316				VOLUNTEER SUPPORT
Polk County Board of County Commissioners		501(c)(3)	47,677				VOLUNTEER SUPPORT

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Poudre Wilderness Volunteers		501(c)(3)	10,000				VOLUNTEER SUPPORT
Santa Clarita Valley Resource Center		501(c)(3)	10,000				VOLUNTEER SUPPORT
Seattle Works		501(c)(3)	22,750				VOLUNTEER SUPPORT
Seminole County Volunteer Program Inc		501(c)(3)	10,000				VOLUNTEER SUPPORT
Serve Rhode Island		501(c)(3)	20,050				VOLUNTEER SUPPORT
Settanni Company Inc		501(c)(3)	7,750				VOLUNTEER SUPPORT
Student Conservation Association Inc		501(c)(3)	6,000				VOLUNTEER SUPPORT
Super Stars Literacy		501(c)(3)	10,000				VOLUNTEER SUPPORT
The Vol Cntr of Lewis Mason & Thurston Counties		501(c)(3)	38,343				VOLUNTEER SUPPORT
THE VOL CTR OF MADISON COUNTY		501(c)(3)	9,889				VOLUNTEER SUPPORT

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United Way & Volunteer Connections of Montcalm		501(c)(3)	5,039				VOLUNTEER SUPPORT
United Way for Southeastern Michigan		501(c)(3)	12,500				VOLUNTEER SUPPORT
United Way of Central Minnesota		501(c)(3)	32,374				VOLUNTEER SUPPORT
United Way of Central Texas		501(c)(3)	62,671				VOLUNTEER SUPPORT
United Way of Greater Chattanooga's Volunteer Cent		501(c)(3)	5,403				VOLUNTEER SUPPORT
United Way of Greater St Louis		501(c)(3)	10,500				VOLUNTEER SUPPORT
United Way of Greater Toledo		501(c)(3)	7,860				VOLUNTEER SUPPORT
United Way of King County		501(c)(3)	63,617				VOLUNTEER SUPPORT
United Way of Larimer County Volunteer Center		501(c)(3)	22,681				VOLUNTEER SUPPORT
United Way of Olmsted County Volunteer Center		501(c)(3)	55,448				VOLUNTEER SUPPORT

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United Way of Volusia-Flagler Counties		501(c)(3)	10,000				VOLUNTEER SUPPORT
United Way Palm Beach County		501(c)(3)	5,540				VOLUNTEER SUPPORT
Universidad del Sagrado Corazon		501(c)(3)	10,000				VOLUNTEER SUPPORT
Utah Food Bank Services		501(c)(3)	17,313				VOLUNTEER SUPPORT
UTD WAY OF GREATER CINCINNATI VOL CONN		501(c)(3)	64,425				VOLUNTEER SUPPORT
Vol Ctr of Greensboro & Randolph Cty		501(c)(3)	10,000				VOLUNTEER SUPPORT
VOL CTR OF LOS ANGELES		501(c)(3)	27,200				VOLUNTEER SUPPORT
Volunteer & Information Center		501(c)(3)	20,975				VOLUNTEER SUPPORT
Volunteer Broward		501(c)(3)	25,805				VOLUNTEER SUPPORT
Volunteer Canada		501(c)(3)	156,050				VOLUNTEER SUPPORT

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Volunteer Center of Chippewa County		501(c)(3)	9,667				VOLUNTEER SUPPORT
Volunteer Center of Gloucester County		501(c)(3)	18,467				VOLUNTEER SUPPORT
Volunteer Center of Greater Milwaukee		501(c)(3)	9,670				VOLUNTEER SUPPORT
Volunteer Center of North Texas		501(c)(3)	85,853				VOLUNTEER SUPPORT
Volunteer Center of Northwest Suburban Chicago		501(c)(3)	32,631				VOLUNTEER SUPPORT
VOLUNTEER CENTER OF THE LEHIGH VALLEY		501(c)(3)	27,730				VOLUNTEER SUPPORT
Volunteer Center of United Way		501(c)(3)	7,500				VOLUNTEER SUPPORT
Volunteer Center Orange County		501(c)(3)	12,400				VOLUNTEER SUPPORT
Volunteer Center United Way of Dane County		501(c)(3)	10,000				VOLUNTEER SUPPORT
VOLUNTEER CTR OF SOUTHERN NEVADA		501(c)(3)	18,150				VOLUNTEER SUPPORT

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Volunteer Florida		501(c)(3)	29,545				VOLUNTEER SUPPORT
VOLUNTEER FREDERICK INC		501(c)(3)	31,696				VOLUNTEER SUPPORT
Volunteer Macon Inc		501(c)(3)	78,755				VOLUNTEER SUPPORT
Volunteer Mobile Inc		501(c)(3)	21,667				VOLUNTEER SUPPORT
Volunteer San Diego		501(c)(3)	41,839				VOLUNTEER SUPPORT
Volunteer Services of Manatee County		501(c)(3)	17,167				VOLUNTEER SUPPORT
Volunteer Ventura County		501(c)(3)	7,500				VOLUNTEER SUPPORT
Washington RSVP		501(c)(3)	47,179				VOLUNTEER SUPPORT
Western New York AmeriCorps Fund		501(c)(3)	10,000				VOLUNTEER SUPPORT
American Red Cross		501(c)(3)	953,324				VOLUNTEER SUPPORT

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Doctors Without Borders USA (Medecins Sans Frontieres)		501(c)(3)	413,040				VOLUNTEER SUPPORT
Clinton Bush Haiti Fund		501(c)(3)	383,693				VOLUNTEER SUPPORT
Rock and Roll Hall of Fame Foundation Inc		501(c)(3)	249,070				VOLUNTEER SUPPORT
St Jude Children's Research Hospital		501(c)(3)	236,288				VOLUNTEER SUPPORT
US Fund for UNICEF		501(c)(3)	198,130				VOLUNTEER SUPPORT
Save the Children Emergency Response		501(c)(3)	160,387				VOLUNTEER SUPPORT
Susan G Komen for the Cure-Global Headquarters		501(c)(3)	158,156				VOLUNTEER SUPPORT
The Oprah Winfrey Leadership Academy Foundation		501(c)(3)	142,567				VOLUNTEER SUPPORT
The Humane Society of the United States		501(c)(3)	132,306				VOLUNTEER SUPPORT
Starlight Children's Foundation		501(c)(3)	102,269				VOLUNTEER SUPPORT

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New York Police and Fire Widows' and Children's Be		501(c)(3)	101,584				VOLUNTEER SUPPORT
American Cancer Society		501(c)(3)	99,382				VOLUNTEER SUPPORT
Marine Toys for Tots Foundation		501(c)(3)	98,947				VOLUNTEER SUPPORT
Habitat for Humanity International		501(c)(3)	92,906				VOLUNTEER SUPPORT
Education & Care at Shikamana School		501(c)(3)	85,893				VOLUNTEER SUPPORT
Save the Children		501(c)(3)	84,947				VOLUNTEER SUPPORT
Salvation Army National Headquarters		501(c)(3)	84,656				VOLUNTEER SUPPORT
Children of Fallen Soldiers Relief Fund		501(c)(3)	78,781				VOLUNTEER SUPPORT
Share Our Strength - No Kid Hungry		501(c)(3)	74,254				VOLUNTEER SUPPORT
Oxfam America		501(c)(3)	68,463				VOLUNTEER SUPPORT

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Partners In Health		501(c)(3)	66,347				VOLUNTEER SUPPORT
World Vision		501(c)(3)	61,612				VOLUNTEER SUPPORT
Wounded Warrior Project		501(c)(3)	57,002				VOLUNTEER SUPPORT
Children's Miracle Network		501(c)(3)	56,148				VOLUNTEER SUPPORT
World Wildlife Fund		501(c)(3)	55,400				VOLUNTEER SUPPORT
The Nature Conservancy		501(c)(3)	52,689				VOLUNTEER SUPPORT
The V Foundation for Cancer Research		501(c)(3)	51,830				VOLUNTEER SUPPORT
Blind Cat Rescue & Sanctuary Inc		501(c)(3)	49,170				VOLUNTEER SUPPORT
The Community Foundation of Middle Tennessee		501(c)(3)	43,436				VOLUNTEER SUPPORT
YouthAIDS		501(c)(3)	43,116				VOLUNTEER SUPPORT

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American Red Cross Nashville Area Chapter		501(c)(3)	41,248				VOLUNTEER SUPPORT
ASPCA American Society for the Prevention of Cru		501(c)(3)	40,753				VOLUNTEER SUPPORT
SHOPA Kids in Need Foundation		501(c)(3)	39,222				VOLUNTEER SUPPORT
The Bridge School		501(c)(3)	39,153				VOLUNTEER SUPPORT
Global Green USA		501(c)(3)	38,109				VOLUNTEER SUPPORT
The BubelAiken Foundation		501(c)(3)	35,387				VOLUNTEER SUPPORT
Save a Child's Heart Foundation		501(c)(3)	35,102				VOLUNTEER SUPPORT
The GRAMMY Foundation		501(c)(3)	34,312				VOLUNTEER SUPPORT
GlobalGiving Relief Fund for Haiti Earthquake		501(c)(3)	33,820				VOLUNTEER SUPPORT
The Whaleman Foundation		501(c)(3)	33,713				VOLUNTEER SUPPORT

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Bailey's Cafe		501(c)(3)	33,647				VOLUNTEER SUPPORT
The Tap Project by UNICEF - Clean Drinking Water f		501(c)(3)	33,596				VOLUNTEER SUPPORT
Dogs Deserve Better		501(c)(3)	31,618				VOLUNTEER SUPPORT
Young Storytellers Foundation		501(c)(3)	31,259				VOLUNTEER SUPPORT
Right To Play		501(c)(3)	29,363				VOLUNTEER SUPPORT
Happy PAWS Haven Inc		501(c)(3)	29,192				VOLUNTEER SUPPORT
PeaceJam Foundation		501(c)(3)	28,950				VOLUNTEER SUPPORT
ALS Association - Orange County Chapter - fighting		501(c)(3)	27,851				VOLUNTEER SUPPORT
America's Second Harvest		501(c)(3)	27,040				VOLUNTEER SUPPORT
Maasai Wilderness Conservation Fund		501(c)(3)	26,481				VOLUNTEER SUPPORT

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A Place To Bark		501(c)(3)	25,358				VOLUNTEER SUPPORT
American Breast Cancer Foundation		501(c)(3)	24,711				VOLUNTEER SUPPORT
The Breast Cancer Research Foundation		501(c)(3)	24,637				VOLUNTEER SUPPORT
March of Dimes National Office		501(c)(3)	24,265				VOLUNTEER SUPPORT
Charity Global charity water		501(c)(3)	24,184				VOLUNTEER SUPPORT
The Marine Mammal Center		501(c)(3)	22,547				VOLUNTEER SUPPORT
Special Olympics Inc		501(c)(3)	22,366				VOLUNTEER SUPPORT
Yellow Ribbon Fund		501(c)(3)	22,257				VOLUNTEER SUPPORT
Child's Play		501(c)(3)	21,981				VOLUNTEER SUPPORT
Glide		501(c)(3)	21,802				VOLUNTEER SUPPORT

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The Silicon Valley And Monterey Bay Area Chapter o		501(c)(3)	21,748				VOLUNTEER SUPPORT
Concern Worldwide US		501(c)(3)	20,701				VOLUNTEER SUPPORT
Children's Hospice Care Coalition		501(c)(3)	20,582				VOLUNTEER SUPPORT
The Akanksha Fund Inc		501(c)(3)	20,025				VOLUNTEER SUPPORT
Camp Hale Alumni Association Inc (CHAA)		501(c)(3)	19,773				VOLUNTEER SUPPORT
Kids With Heart National Assn for Children's Heart		501(c)(3)	19,632				VOLUNTEER SUPPORT
Paralyzed Veterans of America		501(c)(3)	19,054				VOLUNTEER SUPPORT
Make-A-Wish Foundation		501(c)(3)	19,024				VOLUNTEER SUPPORT
Solar Electric Light Fund (SELF)		501(c)(3)	18,774				VOLUNTEER SUPPORT
Baton Rouge Area Foundation		501(c)(3)	18,503				VOLUNTEER SUPPORT

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2nd Harvest Food Bnk & Santa Clara & San Mateo Cnt		501(c)(3)	18,295				VOLUNTEER SUPPORT
Sea Shepherd Conservation Society		501(c)(3)	18,281				VOLUNTEER SUPPORT
The Breast Cancer Fund		501(c)(3)	18,189				VOLUNTEER SUPPORT
Defenders of Wildlife		501(c)(3)	18,094				VOLUNTEER SUPPORT
Feed The Children		501(c)(3)	17,951				VOLUNTEER SUPPORT
Purrfect Pals		501(c)(3)	17,716				VOLUNTEER SUPPORT
Samaritan's Purse		501(c)(3)	17,550				VOLUNTEER SUPPORT
National Federation of the Blind		501(c)(3)	17,525				VOLUNTEER SUPPORT
Dream Fnd		501(c)(3)	17,401				VOLUNTEER SUPPORT
ANGEL ACRES HORSE HAVEN RESCUE INC		501(c)(3)	16,779				VOLUNTEER SUPPORT

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Children's Hospital of Orange County		501(c)(3)	16,703				VOLUNTEER SUPPORT
Natural Resources Defense Council		501(c)(3)	16,332				VOLUNTEER SUPPORT
Best Friends Animal Society		501(c)(3)	16,100				VOLUNTEER SUPPORT
Autism Speaks		501(c)(3)	16,069				VOLUNTEER SUPPORT
Musicians On Call		501(c)(3)	15,622				VOLUNTEER SUPPORT
Holy Family Institute		501(c)(3)	15,471				VOLUNTEER SUPPORT
Love-A-Stray Animal Rescue		501(c)(3)	15,110				VOLUNTEER SUPPORT
American Bird Conservancy		501(c)(3)	14,693				VOLUNTEER SUPPORT
AmeriCares Foundation Inc		501(c)(3)	14,576				VOLUNTEER SUPPORT
Heifer International		501(c)(3)	14,388				VOLUNTEER SUPPORT

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CFDA Foundation Inc		501(c)(3)	14,183				VOLUNTEER SUPPORT
Victory Junction Gang Camp		501(c)(3)	14,171				VOLUNTEER SUPPORT
North Shore Animal League America		501(c)(3)	13,644				VOLUNTEER SUPPORT
Young Survival Coalition		501(c)(3)	13,324				VOLUNTEER SUPPORT
USO World Headquarters (United Service Organizatio		501(c)(3)	13,291				VOLUNTEER SUPPORT
National Multiple Sclerosis Society		501(c)(3)	12,938				VOLUNTEER SUPPORT
International Breast Cancer Research Foundation		501(c)(3)	12,743				VOLUNTEER SUPPORT
International Fund for Animal Welfare		501(c)(3)	12,632				VOLUNTEER SUPPORT
American Heart Association National Center		501(c)(3)	12,445				VOLUNTEER SUPPORT
Women for Women International		501(c)(3)	12,338				VOLUNTEER SUPPORT

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Rain for the Sahel and Sahara		501(c)(3)	11,819				VOLUNTEER SUPPORT
Avon Foundation		501(c)(3)	11,773				VOLUNTEER SUPPORT
University Synagogue		501(c)(3)	11,575				VOLUNTEER SUPPORT
Homes for Our Troops		501(c)(3)	11,246				VOLUNTEER SUPPORT
The Heroes Project		501(c)(3)	11,125				VOLUNTEER SUPPORT
Catholic Relief Services		501(c)(3)	11,097				VOLUNTEER SUPPORT
The Elizabeth Glaser Pediatric AIDS Foundation		501(c)(3)	11,015				VOLUNTEER SUPPORT
The Foundation Fighting Blindness		501(c)(3)	10,654				VOLUNTEER SUPPORT
Deafness Research Foundation (DRF)		501(c)(3)	10,552				VOLUNTEER SUPPORT
Greyhound Friends Inc		501(c)(3)	10,549				VOLUNTEER SUPPORT

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ASAP Africa- A Self-help Assistance Program		501(c)(3)	10,205				VOLUNTEER SUPPORT
Big Cat Rescue		501(c)(3)	10,147				VOLUNTEER SUPPORT
ImpactKidz International		501(c)(3)	9,720				VOLUNTEER SUPPORT
The Robert Duvall Children's Fund		501(c)(3)	9,700				VOLUNTEER SUPPORT
The Voila Foundation		501(c)(3)	9,691				VOLUNTEER SUPPORT
One Laptop Per Child (OLPC Foundation)		501(c)(3)	9,429				VOLUNTEER SUPPORT
CITYarts Inc		501(c)(3)	9,338				VOLUNTEER SUPPORT
Boarding For Breast Cancer		501(c)(3)	9,166				VOLUNTEER SUPPORT
Hands On Nashville Inc		501(c)(3)	9,124				VOLUNTEER SUPPORT
To Write Love on Her Arms		501(c)(3)	9,049				VOLUNTEER SUPPORT

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Make It Right Foundation		501(c)(3)	8,988				VOLUNTEER SUPPORT
Jimmie Johnson Foundation		501(c)(3)	8,966				VOLUNTEER SUPPORT
The Elka Best Foundation- A Project of the Nationa		501(c)(3)	8,933				VOLUNTEER SUPPORT
VH1 Save The Music		501(c)(3)	8,884				VOLUNTEER SUPPORT
Conservation International		501(c)(3)	8,782				VOLUNTEER SUPPORT
Childrens Hospital Los Angeles		501(c)(3)	8,577				VOLUNTEER SUPPORT
Massachusetts General Hospital		501(c)(3)	8,471				VOLUNTEER SUPPORT
The Smile Train		501(c)(3)	8,328				VOLUNTEER SUPPORT
JJ Johnson Foundation		501(c)(3)	8,269				VOLUNTEER SUPPORT
Architecture for Humanity		501(c)(3)	8,225				VOLUNTEER SUPPORT

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Women's Heart Fnd		501(c)(3)	8,079				VOLUNTEER SUPPORT
Stand Up To Cancer		501(c)(3)	8,016				VOLUNTEER SUPPORT
Mended Hearts		501(c)(3)	7,900				VOLUNTEER SUPPORT
Barakat Inc		501(c)(3)	7,782				VOLUNTEER SUPPORT
Environmental Defense Fund		501(c)(3)	7,728				VOLUNTEER SUPPORT
Hope in Bloom Inc		501(c)(3)	7,725				VOLUNTEER SUPPORT
Feed My Lambs Inc		501(c)(3)	7,720				VOLUNTEER SUPPORT
US Olympic Committee		501(c)(3)	7,670				VOLUNTEER SUPPORT
Heads Up		501(c)(3)	7,556				VOLUNTEER SUPPORT
Global Fund for Women		501(c)(3)	7,539				VOLUNTEER SUPPORT

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A Good Idea		501(c)(3)	7,499				VOLUNTEER SUPPORT
Haitian Health Foundation		501(c)(3)	7,426				VOLUNTEER SUPPORT
GLORY VILLAGE COMMUNITY DEVELOPMENT CORPORATION		501(c)(3)	7,143				VOLUNTEER SUPPORT
DonorsChoose Inc		501(c)(3)	7,033				VOLUNTEER SUPPORT
ACE Association of Community Employment Prorams fo		501(c)(3)	6,903				VOLUNTEER SUPPORT
NetDay		501(c)(3)	6,871				VOLUNTEER SUPPORT
Operation Smile		501(c)(3)	6,803				VOLUNTEER SUPPORT
A Dog's Life Rescue		501(c)(3)	6,802				VOLUNTEER SUPPORT
New Orleans Area Habitat for Humanity		501(c)(3)	6,615				VOLUNTEER SUPPORT
The Milagro Foundation		501(c)(3)	6,569				VOLUNTEER SUPPORT

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Direct Relief International		501(c)(3)	5,103				VOLUNTEER SUPPORT
Juvenile Diabetes Research Foundation Internationa		501(c)(3)	5,051				VOLUNTEER SUPPORT

Identifier	Return Reference	Explanation
Review of Form 990	Form 990, Part VI, Section A, Line 10	The Form 990 is prepared by a major accounting firm in conjunction with management. The organization presents the Form 990 at Finance Committee meetings. All board members are invited, and the Form 990 and related materials are sent to the entire board prior to filing.

<b>Identifier</b>	<b>Return Reference</b>	<b>Explanation</b>
Conflict of Interest policy	Form 990, Part VI, Section B, Line 12c	The Board signs conflict of interest statements on an annual basis. These statements are reviewed by the governance committee, and any issues are addressed on a case-by-case basis.

<b>Identifier</b>	<b>Return Reference</b>	<b>Explanation</b>
Compensation review & approval process	Form 990, Part VI, Section B, Line 15a/15b	The Executive Committee acts as the Compensation Committee, whose responsibilities include reviewing and approving salaries for officers and/or key employees. The committee's review process includes a comparison of salaries to those of other similar non-profit organizations.

Identifier	Return Reference	Explanation
Administrative documents publicized	Form 990, Part VI, Section C, Line 19	The Foundation makes governing documents, conflict of interest policies, and financial statements available to the public. This information is available upon request.

<b>Identifier</b>	<b>Return Reference</b>	<b>Explanation</b>
Audited Financial Statements	Form 990, Part XI, Line 2b	The organization's financial statements were audited on a consolidated basis

Identifier	Return Reference	Explanation
New Program Service	Form 990, Part III, Line 2/4d Other Program Services	During the year, the organization purchased the assets of another not-for-profit organization, The League. The acquisition of The League brought important components to support GenerationOn's goal to reach youth, teachers and educators across the country with service learning curriculum, tools and resources to build a youth service movement.

<b>Identifier</b>	<b>Return Reference</b>	<b>Explanation</b>
Schedule G - Fundraising Activities	Schedule G, Part 1, Line 2b	The fundraising consultants are engaged to advise and solicit funds on the organization's behalf. However, the results are more reflective in fiscal year 2011.