

Form **990**

**Return of Organization Exempt From Income Tax**

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

**2012**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

**A** For the 2012 calendar year, or tax year beginning **APR 1, 2012** and ending **MAR 31, 2013**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>THE FAMILY GIVING TREE</b>		<b>D</b> Employer identification number <b>77-0284682</b>
	Doing Business As		<b>E</b> Telephone number <b>(408) 946-3111</b>
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	<b>606 VALLEY WAY</b>		<b>G</b> Gross receipts \$ <b>4,079,813.</b>
City, town, or post office, state, and ZIP code <b>MILPITAS, CA 95035</b>		<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>F</b> Name and address of principal officer: <b>JENNIFER PIETRASIK</b> <b>SAME AS C ABOVE</b>		<b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		If "No," attach a list. (see instructions)	
<b>J</b> Website: <b>FAMILYGIVINGTREE.ORG</b>		<b>H(c)</b> Group exemption number <b>▶</b>	
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other <b>▶</b>		<b>L</b> Year of formation: <b>1991</b>	<b>M</b> State of legal domicile: <b>CA</b>

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>FULFILL THE WISHES OF CHILDREN IN NEED WHILE INSPIRING PHILANTHROPY, KINDNESS, AND VOLUNTEERISM.</b>
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a) <b>3</b> <b>11</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) <b>4</b> <b>10</b>
	<b>5</b> Total number of individuals employed in calendar year 2012 (Part V, line 2a) <b>5</b> <b>23</b>
	<b>6</b> Total number of volunteers (estimate if necessary) <b>6</b> <b>7546</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12 <b>7a</b> <b>0.</b>
	<b>b</b> Net unrelated business taxable income from Form 990-T, line 34 <b>7b</b> <b>0.</b>

		Prior Year	Current Year
		<b>8</b> Contributions and grants (Part VIII, line 1h)	3,838,133.
<b>9</b> Program service revenue (Part VIII, line 2g)	7,900.	0.	
<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,696.	6,949.	
<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	804.	
<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,849,729.	4,079,813.	
<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	2,435,645.	2,383,000.	
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.	
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	932,039.	1,018,773.	
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.	
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) <b>▶</b> <b>223,470.</b>			
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	624,014.	658,931.	
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	3,991,698.	4,060,704.	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	-141,969.	19,109.	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	Beginning of Current Year 1,179,830.	End of Year 1,208,731.
	<b>21</b> Total liabilities (Part X, line 26)	160,666.	166,933.
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	1,019,164.	1,041,798.

**Part II Signature Block**

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

<b>Sign Here</b>	Signature of officer		Date
	<b>DAVID BRATTON-KEARNS, COO</b>		
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date
	<b>MAGA E. KISRIEV</b>		
	Firm's name <b>▶</b> <b>HOOD &amp; STRONG LLP</b>	Firm's EIN <b>▶</b> <b>94-1254756</b>	Check if self-employed <input type="checkbox"/>
	Firm's address <b>▶</b> <b>100 FIRST STREET, 14TH FLOOR</b>	Phone no. <b>415.781.0793</b>	PTIN <b>P01008919</b>
	<b>SAN FRANCISCO, CA 94105</b>		

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III [X]

1 Briefly describe the organization's mission: THE FAMILY GIVING TREE (THE ORGANIZATION) IS A CALIFORNIA NONPROFIT PUBLIC BENEFIT ORGANIZATION FORMED IN 1990 TO HELP BRIGHTEN THE LIVES OF CHILDREN IN THE GREATER SAN FRANCISCO BAY AREA AND BEYOND. THE ORGANIZATION IS DEDICATED TO FULFILLING THE WISHES OF LOW-INCOME

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 [X] No

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

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

4a (Code: ) (Expenses \$ 2,355,323. including grants of \$ 1,481,208. ) (Revenue \$ ) HOLIDAY WISH PROGRAM THE ORGANIZATION WORKS WITH APPROXIMATELY 300 SOCIAL SERVICE AGENCIES. THESE AGENCIES SUPPLY THE ORGANIZATION WITH THE NAMES AND WISHES OF THE CHILDREN THEY SERVE YEAR-ROUND. A WISH CARD IS PRINTED FOR EACH CHILD, DETAILING AGE, GENDER, FIRST NAME, AND HOLIDAY GIFT WISH. THESE WISHES ARE THEN DISPLAYED AT OVER 1,000 HOST COMPANIES AND SCHOOL LOCATIONS, OFTEN ON TREES, IN THEIR LOBBIES AND OTHER PUBLIC AREAS. IT IS THE GENEROSITY OF EMPLOYERS, EMPLOYEES, CUSTOMERS, AND STUDENTS THAT MAKE THIS PROGRAM A SUCCESS. BY SELECTING A WISH CARD, INDIVIDUALS PLEDGE TO PURCHASE A GIFT FOR A CHILD IN NEED. IN ADDITION, THE ORGANIZATION MAINTAINS A VIRTUAL GIVING TREE ON ITS WEBSITE: WWW.FAMILYGIVINGTREE.ORG. THE ORGANIZATION HOSTED APPROXIMATELY 6,700

4b (Code: ) (Expenses \$ 1,244,063. including grants of \$ 901,792. ) (Revenue \$ ) BACK-TO-SCHOOL BACKPACK PROGRAM USING A SIMILAR METHOD OF OPERATION, THE ORGANIZATION PROVIDED SCHOOL SUPPLIES AND BACKPACKS TO APPROXIMATELY 21,000 VERY-LOW INCOME CHILDREN IN THE FALL OF 2012. THE ORGANIZATION HOSTED APPROXIMATELY 800 VOLUNTEERS IN AUGUST 2012 TO PACK AND DISTRIBUTE THE CHILDREN'S BACKPACKS.

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

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 3,599,386.

**Part IV Checklist of Required Schedules**

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	X	
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

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

	Yes	No
<b>21</b> Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> .....	X	
<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> .....		X
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .....		X
<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 lines 24b through 24d and complete Schedule K. If "No," go to line 25</i> .....		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
<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>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
<b>25a 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> .....		X
<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> .....		X
<b>26</b> Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> .....		X
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....		X
<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> .....		X
<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> .....		X
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....	X	
<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> .....		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<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> .....		X
<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> .....		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....		X
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....		X
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		
<b>36 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> .....		X
<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> .....		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? .....	X	

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Main form area containing questions 1a through 14b with input fields and Yes/No columns.

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (11); 1b Enter the number of voting members included in line 1a, above, who are independent (10); 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? (X); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? (X); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (X); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (X); 6 Did the organization have members or stockholders? (X); 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? (X); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (X); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a The governing body? (X); 8b Each committee with authority to act on behalf of the governing body? (X); 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O (X).

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? (X); 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? (X); 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 (X); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (X); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done (X); 13 Did the organization have a written whistleblower policy? (X); 14 Did the organization have a written document retention and destruction policy? (X); 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a The organization's CEO, Executive Director, or top management official (X); 15b Other officers or key employees of the organization (X); 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? (X); 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed CA, OR, WA
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [ ] Another's website [X] Upon request [ ] Other (explain in Schedule O)
19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: JESS GUTIERREZ - (408)946-3111 606 VALLEY WAY, MILPITAS, CA 95035

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JENNIFER PIETRASIK EXECUTIVE DIRECTOR	40.00	X		X				114,900.	0.	28,758.
(2) MARGUERITE LEE VICE CHARPERSON	1.00	X		X				0.	0.	0.
(3) WILLIAM CILKER, JR. TREASURER	1.00	X		X				0.	0.	0.
(4) LORI YU CHAIRPERSON	1.00	X		X				0.	0.	0.
(5) CAROL WAGNER SECRETARY	1.00	X		X				0.	0.	0.
(6) LARRY SACKS DIRECTOR	1.00	X						0.	0.	0.
(7) JOSH MCFARLAND DIRECTOR	1.00	X						0.	0.	0.
(8) DOLORES MARQUEZ DIRECTOR	1.00	X						0.	0.	0.
(9) ELIZABETH LUNA DIRECTOR	1.00	X						0.	0.	0.
(10) CHRISTINE PIASECKI DIRECTOR	1.00	X						0.	0.	0.
(11) DAVID SELINGER FORMER DIRECTOR	1.00	X						0.	0.	0.
(12) TODD YOSHIDA DIRECTOR	1.00	X						0.	0.	0.
(13) DAVID BRATTON-KEARNS CHIEF OPERATING OFFICER	40.00			X				98,576.	0.	21,251.





**Part VIII Statement of Revenue**

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

		(A)	(B)	(C)	(D)	
		Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 4,072,060.				
	g Noncash contributions included in lines 1a-1f: \$	2,239,072.				
	h Total. Add lines 1a-1f	▶ 4,072,060.				
	Program Service Revenue	2 a _____	Business Code			
b _____						
c _____						
d _____						
e _____						
f All other program service revenue						
g Total. Add lines 2a-2f		▶				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)	▶	2,630.		2,630.	
	4 Income from investment of tax-exempt bond proceeds	▶				
	5 Royalties	▶				
	6 a Gross rents	(i) Real				
		(ii) Personal				
		b Less: rental expenses				
		c Rental income or (loss)				
	d Net rental income or (loss)	▶				
	7 a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other	4,319.			
		b Less: cost or other basis and sales expenses		0.		
		c Gain or (loss)		4,319.		
	d Net gain or (loss)	▶	4,319.		4,319.	
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a				
		b Less: direct expenses	b			
c Net income or (loss) from fundraising events		▶				
9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities	▶				
10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b				
	c Net income or (loss) from sales of inventory	▶				
Miscellaneous Revenue		Business Code				
11 a MISCELLANEOUS	900099	804.			804.	
b _____						
c _____						
d All other revenue						
e Total. Add lines 11a-11d	▶	804.				
12 Total revenue. See instructions.	▶	4,079,813.	0.	0.	7,753.	

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	2,383,000.	2,383,000.		
<b>2</b> Grants and other assistance to individuals in the United States. See Part IV, line 22				
<b>3</b> Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	282,420.	201,419.	34,940.	46,061.
<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)				
<b>7</b> Other salaries and wages	572,397.	408,228.	70,815.	93,354.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	22,643.	16,149.	2,801.	3,693.
<b>9</b> Other employee benefits	72,597.	51,776.	8,981.	11,840.
<b>10</b> Payroll taxes	68,716.	49,008.	8,501.	11,207.
<b>11</b> Fees for services (non-employees):				
<b>a</b> Management				
<b>b</b> Legal				
<b>c</b> Accounting	93,009.	50,393.	31,092.	11,524.
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees	2,224.		2,224.	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	11,893.	8,482.	1,471.	1,940.
<b>12</b> Advertising and promotion	101,039.	72,060.	12,500.	16,479.
<b>13</b> Office expenses	163,951.	137,909.	22,895.	3,147.
<b>14</b> Information technology	27,943.	19,929.	3,457.	4,557.
<b>15</b> Royalties				
<b>16</b> Occupancy	36,809.	26,252.	4,554.	6,003.
<b>17</b> Travel	22,817.	14,600.	8,217.	
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings	15,277.	242.	15,035.	
<b>20</b> Interest				
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	73,327.	52,296.	9,072.	11,959.
<b>23</b> Insurance	10,460.	7,461.	1,293.	1,706.
<b>24</b> Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
<b>a</b> <b>ADOPT A FAMILY</b>	59,087.	59,087.		
<b>b</b> <b>OPERATION REINDEER</b>	41,095.	41,095.		
<b>c</b>				
<b>d</b>				
<b>e</b> All other expenses				
<b>25</b> <b>Total functional expenses.</b> Add lines 1 through 24e	4,060,704.	3,599,386.	237,848.	223,470.
<b>26</b> <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year	
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	223,452.	<b>1</b>	581,466.	
	<b>2</b> Savings and temporary cash investments .....	521,773.	<b>2</b>	213,765.	
	<b>3</b> Pledges and grants receivable, net .....		<b>3</b>		
	<b>4</b> Accounts receivable, net .....		<b>4</b>		
	<b>5</b> Loans and other 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> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L .....		<b>6</b>		
	<b>7</b> Notes and loans receivable, net .....	4,925.	<b>7</b>	510.	
	<b>8</b> Inventories for sale or use .....		<b>8</b>		
	<b>9</b> Prepaid expenses and deferred charges .....	17,282.	<b>9</b>	28,393.	
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 481,125.			
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 360,309.	156,067.	<b>10c</b> 120,816.	
	<b>11</b> Investments - publicly traded securities .....	141,546.	<b>11</b>	148,560.	
	<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 .....	114,785.	<b>15</b>	115,221.	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	1,179,830.	<b>16</b>	1,208,731.		
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	57,595.	<b>17</b>	59,562.	
	<b>18</b> Grants payable .....		<b>18</b>		
	<b>19</b> Deferred revenue .....		<b>19</b>		
	<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> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		<b>22</b>		
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>		
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>		
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....	103,071.	<b>25</b>	107,371.	
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	160,666.	<b>26</b>	166,933.	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>				
	<b>27</b> Unrestricted net assets .....	1,019,164.	<b>27</b>	1,041,798.	
	<b>28</b> Temporarily restricted net assets .....		<b>28</b>		
	<b>29</b> Permanently restricted net assets .....		<b>29</b>		
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here</b> <input type="checkbox"/> <b>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 .....	1,019,164.	<b>33</b>	1,041,798.		
<b>34</b> Total liabilities and net assets/fund balances .....	1,179,830.	<b>34</b>	1,208,731.		

**Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,079,813.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,060,704.
3	Revenue less expenses. Subtract line 2 from line 1	3	19,109.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,019,164.
5	Net unrealized gains (losses) on investments	5	3,525.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,041,798.

**Part XII Financial Statements and Reporting**

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
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		

Form 990 (2012)



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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	3,555,838.	3,262,479.	3,288,731.	3,838,133.	4,072,060.	18,017,241.
<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 .....	3,555,838.	3,262,479.	3,288,731.	3,838,133.	4,072,060.	18,017,241.
<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) .....						253,015.
<b>6 Public support.</b> Subtract line 5 from line 4.						17,764,226.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
<b>7</b> Amounts from line 4 .....	3,555,838.	3,262,479.	3,288,731.	3,838,133.	4,072,060.	18,017,241.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....	14,536.	10,022.	9,286.	3,090.	2,630.	39,564.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....	771.	2,459.			804.	4,034.
<b>11 Total support.</b> Add lines 7 through 10						18,060,839.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	126,213.
<b>13 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

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

<b>14</b> Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) .....	<b>14</b>	98.36	%
<b>15</b> Public support percentage from 2011 Schedule A, Part II, line 14 .....	<b>15</b>	98.25	%
<b>16a 33 1/3% support test - 2012.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....	<input checked="" type="checkbox"/>		
<b>b 33 1/3% support test - 2011.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....	<input type="checkbox"/>		
<b>17a 10% -facts-and-circumstances test - 2012.</b> 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 <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....	<input type="checkbox"/>		
<b>b 10% -facts-and-circumstances test - 2011.</b> 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 <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....	<input type="checkbox"/>		
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....	<input type="checkbox"/>		

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
<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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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 section 501(c)(3) organization, check this box and **stop here**

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

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

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

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

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

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

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

**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

**2012**

Name of the organization

THE FAMILY GIVING TREE

Employer identification number

77-0284682

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)( 3 ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ..... ▶ \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)



Name of organization <b>THE FAMILY GIVING TREE</b>	Employer identification number <b>77-0284682</b>
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/> <hr/>	\$ <u>100,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	<hr/> <hr/> <hr/> <hr/>	\$ <u>125,561.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization <b>THE FAMILY GIVING TREE</b>	Employer identification number <b>77-0284682</b>
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**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____

Name of organization <b>THE FAMILY GIVING TREE</b>	Employer identification number <b>77-0284682</b>
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**Part III** Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once.) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	

**SCHEDULE D**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

**2012**

Open to Public  
Inspection

Name of the organization

THE FAMILY GIVING TREE

Employer identification number

77-0284682

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate contributions to (during year) .....		
3 Aggregate grants from (during year) .....		
4 Aggregate value at end of year .....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education)       Preservation of an historically important land area

Protection of natural habitat       Preservation of a certified historic structure

Preservation of open space

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

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register .....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....

Yes  No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ \_\_\_\_\_

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

Yes  No

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

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

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

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

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

(i) Revenues included in Form 990, Part VIII, line 1 .....

▶ \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X .....

▶ \$ \_\_\_\_\_

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

a Revenues included in Form 990, Part VIII, line 1 .....

▶ \$ \_\_\_\_\_

b Assets included in Form 990, Part X .....

▶ \$ \_\_\_\_\_

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

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

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

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

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

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

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

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

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

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

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

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

- a Board designated or quasi-endowment  \_\_\_\_\_ %
- b Permanent endowment  \_\_\_\_\_ %
- c Temporarily restricted endowment  \_\_\_\_\_ %

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

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

- (i) unrelated organizations
- (ii) related organizations

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

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

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		17,928.	7,447.	10,481.
d Equipment				
e Other		463,197.	352,862.	110,335.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				120,816.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		

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

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

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

(a) Description	(b) Book value
(1) 457(F) PLAN ASSETS	107,371.
(2) DEPOSITS	7,850.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.)	115,221.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) 457(F) PLAN PAYABLE	107,371.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.)	107,371.

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

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements	<b>1</b>	4,542,952.
<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>	3,525.
<b>b</b>	Donated services and use of facilities	<b>2b</b>	459,614.
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	463,139.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	4,079,813.
<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 XIII.)	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	0.
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)	<b>5</b>	4,079,813.

**Part XII 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>	4,520,318.
<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>	459,614.
<b>b</b>	Prior year adjustments	<b>2b</b>	
<b>c</b>	Other losses	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	459,614.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	4,060,704.
<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 XIII.)	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	0.
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)	<b>5</b>	4,060,704.

**Part XIII Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

**PART X, LINE 2: THE ORGANIZATION IS EXEMPT FROM FEDERAL INCOME TAXES**

**UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND EXEMPT FROM STATE INCOME TAXES UNDER VARIOUS STATE CODES AND STATUTES OF CALIFORNIA, TEXAS, WASHINGTON, AND OREGON. ACCORDINGLY, NO PROVISION FOR INCOME TAXES HAS BEEN MADE IN THE ACCOMPANYING STATEMENTS. IN ADDITION, THE ORGANIZATION HAS BEEN DETERMINED BY THE INTERNAL REVENUE SERVICE NOT TO BE A PRIVATE FOUNDATION WITHIN THE MEANING OF SECTION 509(A)(1) OF THE INTERNAL REVENUE CODE.**

**Part XIII** Supplemental Information (continued)

THE ORGANIZATION FOLLOWS ASC 740-10 INCOME TAXES TO ACCOUNT FOR UNCERTAIN TAX POSITIONS. MANAGEMENT HAS CONCLUDED THAT THE ORGANIZATION HAS TAKEN NO UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WITH PROVISIONS OF THIS GUIDANCE. WITH FEW EXCEPTIONS, THE ORGANIZATION IS NO LONGER SUBJECT TO INCOME TAX EXAMINATION BY FEDERAL OR STATE TAX AUTHORITIES FOR TAX YEARS BEFORE 2008.



**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

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

OMB No. 1545-0047

**2012**

**Open to Public  
Inspection**

Name of the organization

**THE FAMILY GIVING TREE**

**Employer identification number  
77-0284682**

**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?  **Yes**  **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC 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
SUNNYVALE COMMUNITY SERVICES 725 KIFER ROAD SUNNYVALE, CA 94086	94-1713897	501(C)(3)	0.	94,257.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
CENTRAL VALLEY PROJECT 655 JORDAN AVE TURLOCK, CA 95380	94-3454932	501(C)(3)	0.	81,086.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
EAST PALO ALTO COMMUNITY SERVICE CENTER - 2584 FARRINGTON WAY - EAST PALO ALTO, CA 94303	23-7006613	501(C)(3)	0.	49,923.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
GLIDE - FAMILY YOUTH AND CHILDCARE CENTER - 330 ELLIS ST. - SAN FRANCISCO, CA 94102	94-1156481	501(C)(3)	0.	36,561.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
ECUMENICAL HUNGER PROGRAM (OCTOBER) - 2411 PULGAS AVE. - EAST PALO ALTO, CA 94303	94-2476942	501(C)(3)	0.	35,985.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
SALVATION ARMY - SAN JOSE 359 N 4TH STREET SAN JOSE, CA 95112	94-1170408	501(C)(3)	0.	32,962.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **▶ 118.**
- 3** Enter total number of other organizations listed in the line 1 table **▶ 0.**

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

Schedule I (Form 990) (2012)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARRIBA JUNTOS 1850 MISSION STREET SAN FRANCISCO, CA 94103	94-1663434	501(C)(3)	0.	32,914.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
CITY TEAM MINISTRIES - OAKLAND 722 WASHINGTON ST. OAKLAND, CA 94607	94-1501265	501(C)(3)	0.	28,812.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
COPS THAT CARE (MOUNTAIN VIEW POLICE) - 1000 VILLA ST - MOUNTAIN VIEW, CA 94040	94-6000379	501(C)(3)	0.	27,589.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
CALVARY TEMPLE 1601 COFFEE RD. MODESTO, CA 95355	32-0251500	501(C)(3)	0.	23,990.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
ECUMENICAL HUNGER PROGRAM 2411 PULGAS AVENUE EAST PALO ALTO, CA 94303	94-2476942	501(C)(3)	0.	23,990.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
ST. FRANCIS SAINT VINCENT DE PAUL 1425 BAY RD. EAST PALO ALTO, CA 94303	94-1375833	501(C)(3)	0.	19,792.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
SAN FRANCISCO RESCUE MISSION 230 JONES STREET SAN FRANCISCO, CA 94102	94-3163872	501(C)(3)	0.	17,993.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
SAN FRANCISCO RESCUE MISSION (OCTOBER) - 230 JONES ST. - SAN FRANCISCO, CA 94102	94-3163872	501(C)(3)	0.	17,993.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
SNI - WASHINGTON ELEMENTARY SCHOOL 100 OAK STREET SAN JOSE, CA 95110	77-0427923	501(C)(3)	0.	15,594.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SNI - OLINDER NEIGHBORHOOD ASSOCIATION - 848 EAST WILLIAM ST. - SAN JOSE, CA 95116	77-0427923	501(C)(3)	0.	14,058.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
DORSA ELEMENTARY SCHOOL 1290 BAL HARBOR DRIVE SAN JOSE, CA 95122	77-0016360	ARUSD	0.	13,914.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
CAMPEONAS DE MCKINLEY 651 MACREDES AVE SAN JOSE, CA 95116	97-0539437	501(C)(3)	0.	11,995.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
SUNNYVALE COMMUNITY SERVICES (2) 725 KIFER RD. SUNNYVALE, CA 94086	94-1713897	501(C)(3)	0.	11,995.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
CITY OF SAN PABLO - YOUTH SERVICES 13831 SAN PABLO AVE., BLDG 6 SAN PABLO, CA 94806	94-6000423	CITY OF PALO ALTO	0.	10,796.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
EAST PALO ALTO POLICE DEPARTMENT 141 DEMETER ST. EAST PALO ALTO, CA 94303	94-2911826	CITY OF E. PALO ALTO	0.	9,836.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
MILPITAS FIREFIGHTERS TOY PROGRAM 777 SOUTH MAIN STREET MILPITAS, CA 95035	26-0267135	CITY OF MILPITAS	0.	9,596.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
WORLD IMPACT, INC. 1015 CAMPBELL ST. OAKLAND, CA 94607	95-2681237	501(C)(3)	0.	9,476.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
MISSION NEIGHBORHOOD CENTERS/HEAD START - 362 CAPP STREET - SAN FRANCISCO, CA 94110	94-1408150	501(C)(3)	0.	9,452.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PACKARD CHILDREN'S HOSPITAL 725 WELCH RD. PALO ALTO, CA 94304	77-0465765	501(C)(3)	0.	9,332.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
AMERICAN INDIAN ALLIANCE 5038 HYLAND AVE SAN JOSE, CA 95127	77-0475265	501(C)(3)	0.	9,236.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
SOMOS MAYFAIR 370-B SOUTH KING ROAD SAN JOSE, CA 95116	77-0499813	501(C)(3)	0.	9,188.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
UNITED WAY SILICON VALLEY 1400 PARKMOOR AVE., SUITE 250 SAN JOSE, CA 95126	94-1450153	501(C)(3)	0.	9,188.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
GREENFIELD LION'S CLUB 8 8TH ST. GREENFIELD, CA 93927	77-0324761	501(C)(3)	0.	8,876.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
COPS THAT CARE 1000 VILLA STREET MOUNTAIN VIEW, CA 94040	94-6000379	501(C)(3)	0.	8,397.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
SJB CHILD DEVELOPMENT CENTERS 1400 PARKMOOR AVE., SUITE 220 SAN JOSE, CA 95126	94-1747079	501(C)(3)	0.	8,037.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
CARING FAMILY NETWORK - AUSTIN 1812 CENTRE CREEK DR., SUITE 210 AUSTIN, TX 78754	74-2570960	501(C)(3)	0.	7,197.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
INNVISION SHELTER NETWORK - SAN JOSE - 297 COMMERCIAL ST. - SAN JOSE, CA 95112	77-0033628	501(C)(3)	0.	7,197.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KINSHIP, ADOPTIVE, & FOSTER PARENT ASSOCIATION (KAFPA) - 373 WEST JULIAN ST., 2ND BLDG., 1ST FLOOR - SAN JOSE, CA 95111	77-0044714	501(C)(3)	0.	7,197.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
LOAVES & FISHES FAMILY KITCHEN 777 N. FIRST ST., SUITE 420 SAN JOSE, CA 95112	77-0370874	501(C)(3)	0.	7,197.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
MOMENTUM FOR MENTAL HEALTH 2001 THE ALAMEDA SAN JOSE, CA 95126	94-1496052	501(C)(3)	0.	7,197.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
SANTA CLARA COUNTY PUBLIC HEALTH DEPT REGION 5 - 614 TULLY ROAD - SAN JOSE, CA 95111	94-6000533	COUNTY OF SC	0.	7,197.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
THE CLOTHES CLOSET 80 YALE RD. PALO ALTO, CA 94025	77-0033628	501(C)(3)	0.	7,197.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
COMMUNITY UNITED SAN JOSE - STARBIRD - 1050 BOYNTON AVE - SAN JOSE, CA 95117	20-4367250	501(C)(3)	0.	7,125.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
CATHOLIC CHARTIES OF SCC - WASHINGTON UNITED YOUTH CENTER - 921 SOUTH FIRST STREET, SUITE B - SAN JOSE, CA 95110	94-2762269	501(C)(3)	0.	6,597.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
ALUM ROCK EDUCATIONAL FOUNDATION P.O. BOX 56178 SAN JOSE, CA 95156	77-0523774	501(C)(3)	0.	6,357.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
ESCUELA POPULAR ACCELERATED FAMILY LEARNING CENTER - 467 N. WHITE RD - SAN JOSE, CA 95127	77-0354277	501(C)(3)	0.	6,357.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YOUTH UTILIZING POWER AND PRAISE (YUPP) - 3098 FLORENCE AVE. - SAN JOSE, CA 95127	80-0436789	501(C)(3)	0.	6,237.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
CARITAS FELICES AT CENTRAL APOSTALIC CHURCH - 134 SOUTH 20TH STREET - SAN JOSE, CA 95116	95-4324104	501(C)(3)	0.	5,998.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
CROSSROAD CALVARY CHURCH 990 S. CAPITOL AVE. SAN JOSE, CA 95127	77-0536018	501(C)(3)	0.	5,998.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
EDEN PALMS APARTMENTS - CATALONIA 5398 MONTEREY ROAD SAN JOSE, CA 95111	94-3315887	501(C)(3)	0.	5,998.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
GRAIL FAMILY SERVICES 2005 E. SAN ANTONIO ST. SAN JOSE, CA 95116	77-0397354	501(C)(3)	0.	5,998.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
KONA NEIGHBORHOOD ASSOCIATION 1535 SANTEE DRIVE SAN JOSE, CA 95122	77-0427923	501(C)(3)	0.	5,998.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
PRENATAL ADVANTAGE BLACK INFANT HEALTH - 2415 UNIVERSITY AVENUE, 2ND FLOOR - EAST PALO ALTO, CA 94303	94-6000532	501(C)(3)	0.	5,998.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
SJB CHILD DEVELOPMENT CENTERS (2) 1400 PARKMOOR AVE., SUITE 220 SAN JOSE, CA 95126	94-1747079	501(C)(3)	0.	5,998.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
SNI - SANTEE CAT 1535 SANTEE DR. SAN JOSE, CA 95122	77-0427923	501(C)(3)	0.	5,998.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VALLEY HOUSE CARE CENTER 991 CLYDE AVENUE SANTA CLARA, CA 95054	23-2779765	501(C)(3)	0.	5,878.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
CIRCLE TIME CHILD DEVELOPMENT CENTER - 255 N MARKET STREET SUITE 250 - SAN JOSE, CA 95110	36-4695952	501(C)(3)	0.	5,518.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
CLEAN SLATE TATTOO REMOVAL - CITY OF SAN JOSE - 1694 ADRIAN WAY - SAN JOSE, CA 95122	94-6000419	CITY OF SAN JOSE	0.	5,518.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
FIREHOUSE COMMUNITY DEVELOPMENT CORPORATION - 5655 SILVER CREEK VALLEY RD. #517 - SAN JOSE, CA 95138	65-1293894	501(C)(3)	0.	5,518.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
ALUM ROCK SCHOOL DISTRICT - MIGRANT EDUCATION - 2930 GAY AVENUE - SAN JOSE, CA 95127	77-0016360	ARUSD	0.	5,398.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
NEW BIRTH RECOVERY HOME 95 S. 20TH STREET SAN JOSE, CA 95112	77-0452807	501(C)(3)	0.	5,398.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
HOPE SERVICES 30 LAS COLINAS LANE SAN JOSE, CA 95119	94-1399287	501(C)(3)	0.	5,278.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
EHC LIFE BUILDERS - SOBRATO FAMILY LIVING CENTER - 1509 AGNEW ROAD - SANTA CLARA, CA 95054	94-2684272	501(C)(3)	0.	5,038.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
SAN FRANCISCO SHERIFF'S ASSOCIATION FOUNDATION - 460 BRANNAN ST., SUITE 77650 - SAN FRANCISCO, CA 74107	30-0287554	501(C)(3)	0.	40,160.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VALLEY CHURCHES UNITED MISSIONS 9400 HIGHWAY 9 BEN LOMOND, CA 95005	77-0163322	501(C)(3)	0.	22,506.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
SUNNYVALE COMMUNITY SERVICES 725 KIFER ROAD SUNNYVALE, CA 94086	94-1713897	501(C)(3)	0.	22,056.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
GREENFIELD LION'S CLUB 8 8TH ST. GREENFIELD, CA 93927	77-0324761	501(C)(3)	0.	21,868.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
FREMONT UNIFIED SCHOOL DISTRICT 4210 TECHNOLOGY DRIVE FREMONT, CA 94537	94-1636029	FUSD	0.	20,843.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
DOWNTOWN COLLEGE PREP - SAN JOSE 1460 THE ALAMEDA SAN JOSE, CA 95126	94-6002606	501(C)(3)	0.	19,294.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
LYNHAVEN ELEMENTARY SCHOOL 881 SOUTH CYPRESS SAN JOSE, CA 95123	77-0226428	CUSD	0.	16,966.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
CLYDE FISHER MIDDLE SCHOOL 1720 HOPKINS DR. SAN JOSE, CA 95122	77-0016360	ARUSD	0.	16,575.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
CESAR CHAVEZ ELEMENTARY - SAN JOSE 2000 KAMMERER DR. SAN JOSE, CA 95116	77-0016360	ARUSD	0.	16,113.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
OCALA MIDDLE SCHOOL 2800 OCALA AVE. SAN JOSE, CA 95148	77-0016360	ARUSD	0.	15,296.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN

Schedule I (Form 990)



**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOWELL ELEMENTARY SCHOOL 625 SOUTH SEVENTH STREET SAN JOSE, CA 95112	94-6002606	SJUSD	0.	14,215.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
CAMPBELL MIDDLE SCHOOL 295 CHERRY LANE CAMPBELL, CA 95008	77-0226428	CUSD	0.	14,133.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
BURNETT MIDDLE SCHOOL 850 N. 2ND ST. SAN JOSE, CA 95112	94-6002606	SJUSD	0.	13,947.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
DONALD J. MEYER ELEMENTARY 1824 DAYTONA DR. SAN JOSE, CA 95122	77-0016360	ARUSD	0.	13,506.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
SAN ANTONIO ELEMENTARY SCHOOL 1855 E. SAN ANTONIO ST. SAN JOSE, CA 95116	77-0016360	ARUSD	0.	13,298.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
SYLVIA CASSELL ELEMENTARY 1300 TALLAHASSEE DR. SAN JOSE, CA 95122	77-0016360	ARUSD	0.	13,131.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
BAY AREA AFTER-SCHOOL ALL-STARS 550 VALLEY WAY MILPITAS, CA 95035	77-0441284	501(C)(3)	0.	13,050.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
MONTA LOMA ELEMENTARY SCHOOL 460 THOMPSON AVE. MOUNTAIN VIEW, CA 94043	93-0991812	MVUSD	0.	13,050.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
MARIANO CASTRO ELEMENTARY 505 ESCUELA AVE. MOUNTAIN VIEW, CA 94040	93-0991812	MVUSD	0.	12,955.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BLACKFORD ELEMENTARY SCHOOL 1970 WILLOW STREET SAN JOSE, CA 95125	94-2239786	CUSD	0.	11,736.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
JOHN J. MONTGOMERY ELEMENTARY 2010 DANIEL MALONEY DR. SAN JOSE, CA 95121	77-0225132	EESD	0.	11,448.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
THOMAS P. RYAN ELEMENTARY SCHOOL 1241 MCGINNES AVE. SAN JOSE, CA 95127	77-0016360	ARUSD	0.	10,922.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
HARRY SLONAKER ELEMENTARY SCHOOL 1601 CUNNINGHAM AVE. SAN JOSE, CA 95122	77-0016360	ARUSD	0.	10,463.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
MATHSON MIDDLE SCHOOL 2050 KAMMERER AVE. SAN JOSE, CA 95116	77-0016360	ARUSD	0.	10,460.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
SUNSHINE GARDENS ELEMENTARY SCHOOL 1200 MILLER AVE. SOUTH SAN FRANCISCO, CA 94080	94-3083861	SSFUSD	0.	10,422.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
CLYDE ARBUCKLE ELEMENTARY 1970 CINDERELLA LANE SAN JOSE, CA 95116	77-0016360	ARUSD	0.	10,088.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
ASPIRE EAST PALO ALTO CHARTER 1286 RUNNYMEDE ST. EAST PALO ALTO, CA 94303	94-3311088	501(C)(3)	0.	9,755.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
MCKINLEY ELEMENTARY SCHOOL 651 MACREDES AVE. SAN JOSE, CA 95116	77-0539437	FMSD	0.	9,755.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAN FRANCISCO CITY ACADEMY 230 JONES ST. SAN FRANCISCO, CA 94102	94-3163872	501(C)(3)	0.	9,692.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
INDEPENDENCE HIGH SCHOOL 1776 EDUCATIONAL PARK DRIVE SAN JOSE, CA 95133	94-2864814	ESUHSD	0.	9,298.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
W.C. OVERFELT HIGH SCHOOL 1835 CUNNINGHAM AVE. SAN JOSE, CA 95122	94-2864814	ESUHSD	0.	9,298.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
SAN PABLO YOUTH MENTORING PROGRAM 479 METRO WALK WAY RICHMOND, CA 94801	30-0609534	501(C)(3)	0.	8,401.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
CRITTENDEN MIDDLE SCHOOL 1701 ROCK STREET MOUNTAIN VIEW, CA 94043	93-0991812	MVUSD	0.	8,368.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
KATHERINE R. SMITH ELEMENTARY 2025 CLARICE DRIVE SAN JOSE, CA 95122	77-0225132	EESD	0.	8,337.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
MILDRED GOSS ELEMENTARY SCHOOL 2475 VAN WINKLE LANE SAN JOSE, CA 95116	77-0016360	ARUSD	0.	8,337.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
EAST PALO ALTO COMMUNITY SERVICE CENTER - 2584 FARRINGTON WAY - EAST PALO ALTO, CA 94303	23-7006613	501(C)(3)	0.	7,760.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
DORSA ELEMENTARY SCHOOL 1290 BAL HARBOR DRIVE SAN JOSE, CA 95122	77-0016360	ARUSD	0.	7,504.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KIDANGO 44000 OLD WARM SPRINGS BLVD. FREMONT, CA 94538	94-2581686	501(C)(3)	0.	7,504.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
OS HUBBARD ELEMENTARY SCHOOL 1680 FOLEY AVE. SAN JOSE, CA 95122	77-0016360	ARUSD	0.	7,504.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
ESCUELA POPULAR CHARTER SCHOOL 149 NORTH WHITE ROAD SAN JOSE, CA 95127	94-2864814	501(C)(3)	0.	7,339.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
BOYS & GIRLS CLUB OF SV - EASTSIDE UNIT - 2195 CUNNGINHAM AVENUE - SAN JOSE, CA 95122	94-1294898	501(C)(3)	0.	6,618.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
ALUM ROCK EDUCATIONAL FOUNDATION PO BOX 56178 SAN JOSE, CA 95156	77-0523774	501(C)(3)	0.	6,591.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
COX ACADEMY EDUCATION FOR CHANGE 9860 SUNNYSIDE ST OAKLAND, CA 94603	20-2204424	501(C)(3)	0.	6,573.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
MAJESTIC WAY ELEMENTARY 1855 MAJESTIC WAY SAN JOSE, CA 95132	58-2173450	BUSD	0.	6,420.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
DOVE HILL ELEMENTARY 1460 COLT WAY SAN JOSE, CA 95121	77-0225132	EESD	0.	6,253.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
TRACE ELEMENTARY 651 DANA AVE. SAN JOSE, CA 95126	94-6002606	SJUSD	0.	6,253.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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BURNETT ELEMENTARY SCHOOL 400 FANYON ST. MILPITAS, CA 95035	77-0289955	MUSD	0.	6,243.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
ALEXANDER ROSE ELEMENTARY SCHOOL 250 ROSWELL DR. MILPITAS, CA 95035	77-0289955	MUSD	0.	5,724.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
MARTIN ELEMENTARY SCHOOL 35 SCHOOL STREET SOUTH SAN FRANCISCO, CA 94080	94-3083861	SSFUSD	0.	5,628.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
ROGERS ELEMENTARY SCHOOL 2999 RIDGEMONT AVE. SAN JOSE, CA 95127	77-0016360	MESD	0.	5,628.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
WORLD ACADEMY - EDUCATION FOR CHANGE - 1700 28TH AVENUE - OAKLAND, CA 94601	20-2204424	501(C)(3)	0.	5,628.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
ADELANTE DUAL LANGUAGE ACADEMY 2999 RIDGEMONT DR. SAN JOSE, CA 95127	77-0016360	501(C)(3)	0.	5,570.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
SUNRISE MIDDLE SCHOOL 1149 E. JULIAN ST. BLDG F SAN JOSE, CA 95116	20-0912823	501(C)(3)	0.	5,346.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
E.C. REEMS ACADEMY 8425 MACARTHUR BLVD. OAKLAND, CA 94605	77-0345000	501(C)(3)	0.	5,331.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
SJB CHILD DEVELOPMENT CENTERS 1400 PARKMOOR AVE., SUITE 220 SAN JOSE, CA 95126	94-1747079	501(C)(3)	0.	5,291.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DEPARTMENT OF ALCOHOL & DRUG SERVICES - 976 LENZEN AVE. #10 - SAN JOSE, CA 95126	94-6000533	CITY OF SJ	0.	5,279.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
RENAISSANCE ACADEMY 1720 HOPKINS DR. SAN JOSE, CA 95122	77-0016360	ARUSD	0.	5,161.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
ROCKETSHIP ALMA ACADEMY 198 W. ALMA ST. SAN JOSE, CA 95110	37-1509106	501(C)(3)	0.	5,002.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN
ST. ELIZABETH'S ELEMENTARY SCHOOL 1516 33RD AVE. OAKLAND, CA 94601	94-1156752	501(C)(3)	0.	5,002.	FMV	TOYS & CLOTHING	ASSISTANCE FOR NEEDY CHILDREN

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

**Part IV** **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

SCHEDULE I, PART I, LINE 2: AGENCIES CONTACT FAMILY GIVING TREE WITH  
 REQUESTS FOR PROGRAM RELATED ASSISTANCE. WE REQUEST PROOF OF 501(C)(3)  
 STATUS OR CONFIRMATION OF STATUS AS A PUBLIC SCHOOL.

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2012**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

Name of the organization **THE FAMILY GIVING TREE** Employer identification number **77-0284682**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ ( <u>WISH PROGRAM</u> )	X	51,569	1,499,685.	FMV
26 Other ▶ ( <u>SCHOOL SUPPLI</u> )	X	10,533	739,387.	FMV
27 Other ▶ ( )				
28 Other ▶ ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement ..... **29**

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) (2012)



**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

OMB No. 1545-0047

**2012**

Open to Public  
Inspection

Name of the organization

THE FAMILY GIVING TREE

Employer identification number

77-0284682

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

CHILDREN WHO WOULD OTHERWISE GO WITHOUT HOLIDAY GIFTS. THE ORGANIZATION  
ALSO PROVIDES BACK-TO-SCHOOL BACKPACKS TO MANY CHILDREN. THESE PROGRAMS  
ARE FUNDED BY INDIVIDUALS, CORPORATIONS, AND NONPROFIT FOUNDATIONS.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

VOLUNTEERS IN 120,000 SQUARE FEET OF DONATED WAREHOUSE SPACE IN  
DECEMBER 2012 TO WRAP AND DISTRIBUTE THE CHILDREN'S GIFTS TO THE LOCAL  
AGENCIES. DURING THE YEAR ENDED MARCH 31, 2013, THE ORGANIZATION  
PROVIDED HOLIDAY GIFTS TO APPROXIMATELY 63,500 CHILDREN.

THE ORGANIZATION ALSO SUPPORTED 682 LOW INCOME CHILDREN IN AUSTIN, TX  
THROUGH A SPECIAL OUTREACH INTIATIVE DURING THE MOST RECENT HOLIDAY  
DRIVE.

FORM 990, PART VI, SECTION B, LINE 11: THE FINANCE COMMITTEE REVIEWED THE  
990 PRIOR TO PRESENTATION TO THE BOARD OF DIRECTORS. THE BOARD RECEIVED A  
COPY OF THE 990 VIA E-MAIL PRIOR TO FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C: THE CONFLICT OF INTEREST POLICY IS  
DISTRIBUTED ANNUALLY AT A REGULARLY SCHEDULED BOARD MEETING. COMPLETED  
DISCLOSURES ARE COLLECTED DURING THE MEETING. ANYONE ABSENT IS SENT A COPY  
FOR COMPLETION. DISCLOSURE SHOULD BE MADE TO THE EXECUTIVE DIRECTOR (OR TO  
THE BOARD CHAIR), WHO SHALL DETERMINE WHETHER A CONFLICT EXISTS AND IS  
MATERIAL. DISCLOSURE INVOLVING BOARD MEMBERS SHOULD BE MADE TO THE BOARD  
CHAIR WHO SHALL BRING THE MATTER TO THE BOARD TO DETERMINE WHETHER A

Name of the organization <b>THE FAMILY GIVING TREE</b>	Employer identification number <b>77-0284682</b>
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CONFLICT EXISTS AND IS MATERIAL. IN THE PRESENCE OF AN EXISTING MATERIAL CONFLICT, THE BOARD WILL DETERMINE WHETHER THE CONTEMPLATED TRANSACTION MAY BE AUTHORIZED AS JUST, FAIR, AND REASONABLE TO THE FAMILY GIVING TREE. IT WILL BE UP TO THE BOARD'S SOLE DISCRETION TO DETERMINE THE MATTER, TAKING INTO CONSIDERATION THE WELFARE OF THE ORGANIZATION AND THE ADVANCEMENT OF ITS PURPOSE.

FORM 990, PART VI, SECTION B, LINE 15: THE BOARD OF DIRECTORS REVIEW THE PERFORMANCE AND COMPENSATION PACKAGE OF THE EXECUTIVE DIRECTOR AND CHIEF OPERATING OFFICER ANNUALLY USING COMPENSATION SURVEY INFORMATION PREPARED BY COMPASS POINT. THE CHIEF FINANCIAL OFFICER IS AN OUTSIDE CONSULTANT, AND HIS COMPENSATION PACKAGE IS DETERMINED PERIODICALLY.

FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS, INCLUDING THE CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS, ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST. THE FORM 990 IS POSTED ON THE ORGANIZATION'S WEBSITE.