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) ► The organization may have to use a copy of this return to satisfy state reporting requirements OMB No 1545 0047 2007

Open to Public Inspection

Α	For	the 2007 calen	dar year,	or tax year beginning	7/01	, 2007	, and o	ending	6/30			, 2008	
В	Check	Check if applicable						D Emp	ployer Identification Number				
	$\Box$	Address change	Please use IRS label	Oakland Small S		Foundation				43	-2014	4630	
	П	Name change	or print or type	P.O. Box 20238						E Tele	phone nu	mber	
	Пı	nitial return	See specific	Oakland, CA 946	20					51	0-53	4-7613	
	П	Termination	instruc- tions.							F Acco	ounting	Cash X	Accrual
	$\prod_{i}$	Amended return									Other (sp	ecify)	_
	Π	Application pending	• Section	on 501(c)(3) organization	ns and 4947	7(aX1) nonexempt	t -	H and I	are not applic	able to se		organizations	
			charit	able trusts must attach	a complete	d Schedule A	i	H (a)	Is this a group	p return fo	or affiliate:	s? Yes	X No
_			<b>V</b> · · ·	1 990 or 990-EZ).				Н (b)	If 'Yes,' enter	number o	of affiliates	s <b>&gt;</b>	
G	wer	site: - Smal	Ischoo	lsfoundation.or	<u>g</u>	<del></del>		H (c)	Are all affiliat			Yes	No.
J		anization type	_	X 501(c) 3 • (	г	٦ ٢	ا ۔۔۔ ا	11.45	(If 'No,' attac				
		ck only one)		<u> </u>	insert no )	4947(a)(1) or	527	H (a)	is this a sepa		-		X No
K				ization is not a 509(a)(3) not more than \$25,000 /				1	Group Exe				V NO
	orga	anization choos	es to file	a return, be sure to file a	a complete	return		M		<del></del>		ation is <b>not</b> requir	ed
$\overline{}$	Gros	s receints. Add	lines 6b 8	b, 9b, and 10b to line 12	▶ 2.12	20,896.		•••			-	0, 990-EZ, or 990-F	
P	irt I			ses, and Changes			Balar	nces	(See the	ınstru	ictions	s.)	
	1			ants, and similar amount									
		a Contributions					1a						
	1	Direct public :	support (r	not included on line 1a)			16		1,785,	734.	i		
	1			(not included on line 1a)	)		10				1		
		d Government	contributio	ons (grants) (not include	d on line 1a	a)	10	1					
	•	Total (add lines 1a through 1d) (ca	sh \$	1,785,734. nor	ncash \$		>				1 e	1,785	,734.
	2	Program serv	ice reven	ue including government	fees and c	ontracts (from Pa	rt VII,	line 9	3)		2	257	,337.
	3 Membership dues and assessments								3		<u>, 653.</u>		
	4 Interest on savings and temporary cash investments								4	9	<u>, 459.</u>		
	5 Dividends and interest from securities 6a Gross rents. 6 b Less rental expenses 6b								5				
	ı			oss) Subtract line 6b fro	m line 6a						6c		
Ŗ	7	Other investm	nent incon	ne (describe		<u> </u>	1	<del>,</del>			7		
REVENU	8 a	Gross amount	t from sale	es of assets other		(A) Securities	┼_	<u> </u>	(B) Other				
Ñ	١.	than inventory			-		8a	+			i 1		
Ě				s and sales expenses			8b						
		Gain or (loss) (at		•	\ and (Q)	<del></del>	8c	<u> </u>					
		•	,	bine line 8c, columns (A vities (attach schedule)		unt is from <b>camin</b>	na che	ack he	ro ▶□	1 J	8d		
				uding \$				SCK TIC		' <u> </u>	.		
	_	reported on lin					9a	1		j			
	t	Less, direct ex	xpenses o	other than fundraising ex	penses		9b						
	c	: Net income or	r (loss) fro	m special events. Subtr	act line 9b	from line 9a		_			9c		
	10 a	Gross sales of	finventor	y, less returns and allow	ances		10a	<u></u>					
	b	Less cost of	goods sole	d	SEACI	VED	10Ь	<u></u>		]			
	c	Gross profit or (lo	ss) from sal	es of inventory (attack schedul	e) < stransfer (	ne 10th from line 10a					10 c		
[	11	Other revenue	(from Pa	irt VII, line 103)		SC				Ĺ	11	23,	713.
	12_			s 1e, 2, 3, 4, 5, 6¢( <del>2)</del> , 80	1,199, v10q, e	ng009 191					12	2,120,	
Ε	13	•		line 44, column (B)	111111 - 0	88-080 SS					13	1,458,	
X	14	-		al (from line 44, dolum <del>n</del>	OGDE					Ļ	14		<u>095.</u>
	15			4, column (D))	UGUE	14, 01				Ļ	15	66,	<u> 105.</u>
E S E S	16	-		attach schedule)							16		
S	17			es 16 and 44, column (A		<del></del>					17	1,609,	
A	18	•		ne year Subtract line 17						ļ	18		218.
N S E E T	19			nces at beginning of yea	-						19	<u>445,</u>	<u>951.</u>
두튀	20	=		sets or fund balances (a						ļ.	20		1.55
S	21_			nces at end of year. Con							21		169.
		Privacy Act as	nd Panen	vark Reduction Act Nati	co coo the	cenarate instruct	IANC		TE	CANIDOL	12/27/07	7 Form <b>990</b>	ついひひ

Oakland Small Schools Foundation Form 990 (2007) 43-2014630 Statement of Functional Expenses All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See instruct) · Do not include amounts reported on line (B) Program (C) Management (A) Total (D) Fundraising 6b, 8b, 9b, 10b, or 16 of Part I services and general 22 a Grants paid from donor advised funds (attach sch) Ŝ (cash non-cash \$ If this amount includes 22 a foreign grants, check here 22 b Other grants and allocations (att sch) See Stm 1208363. (cash Ŝ non-cash If this amount includes 1,208,363 1,208,363 22 b foreign grants, check here Specific assistance to individuals 23 (attach schedule) Benefits paid to or for members 24 (attach schedule) 25a Compensation of current officers, directors, key employees, etc listed in Part V-A 25 a 63,262 31,631 12,652 18,979. b Compensation of former officers, directors, key employees, etc listed 0 in Part V-B 25 b 0. 0. 0. c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 0 0 0. 25 c 0 4958(c)(3)(B) Salaries and wages of employees not included on lines 25a, b, and c 26 181,199 146,223. 15,802 19,174. Pension plan contributions not 27 included on lines 25a, b, and c Employee benefits not included on lines 25a - 27 28 18,845 11,002 3,887 3,956. 21,798 29 13,414. 4,791 3,593. Payroll taxes 29 Professional fundraising fees 30 30 13,528 13,528 31 31 Accounting fees 32 32 Legal fees 18,502 33 11.745 3,862 2,895. 33 Supplies 1,375 Telephone 34 848 303. 224. 34 35 2,509. 1,189. 425. 895. 35 Postage and shipping 36 36 Occupancy 37 Equipment rental and maintenance 37 38 11,317. 4,232. 1,450. 5,635. Printing and publications 38 1,104 239. 685 39 180. 39 Travel 40

40	Conferences, conventions, and meetings	40			<u> </u>	
41	Interest	41				
42	Depreciation, depletion, etc (attach schedule)	42	2,803.	1,726.	615.	462.
43	Other expenses not covered above (itemize)					
	See Statement 2	43 a	65,073.	27,420.	27,541.	10,112.
1	b	43 b				
	·	43 c				
		43 d			• • • • • • • • • • • • • • • • • • • •	
•	·	43 e				
f		43f				
ç		43 g				
44	Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B) - (D), carry these totals to lines 13 - 15)	44	1,609,678.	1,458,478.	85,095.	66,105.
Join	Costs. Check ►X if you are following	SOP 9	98-2			
Are a	any joint costs from a combined education	al can	npaign and fundraising so	licitation reported in (B) Pi	ogram services?	Yes X No
lf 'Ye	s,' enter (i) the aggregate amount of thes	e joint	costs \$	, (ii) the amoι	int allocated to Program	services
\$	, (iii) the amount al	located	to Management and gen	eral \$	, and (iv) the an	nount allocated
lo Fu	indraising \$					
BAA			TEE A0102L 08/0	02/07		Form <b>990</b> (2007)

Part III Statement of Program	Service A	ccomplishments	(See the instructions.

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? See Statement 3  All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of lients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	equired for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, but optional for others)
a See Statement 4	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶	1,458,478.
b	
(Grants and allocations \$ ) If this amount includes foreign grants, check here	· · · · · · · · · · · · · · · · · · ·
c	
(Grants and allocations \$ ) If this amount includes foreign grants, check here	
d	
(Outstand allocations C	
(Grants and allocations \$ ) If this amount includes foreign grants, check here	
e Other program services  (Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ ☐	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	1,458,478.

BAA

Form **990** (2007)

No	ote:	Where required, attached schedules and amounts with column should be for end-of-year amounts only	ın the d	description	(A) Beginning of year		<b>(B)</b> End of year
	45	Cash - non-interest-bearing			184,701	. 45	379,458
	46	Savings and temporary cash investments			76,735	. 46	351,922
	47	a Accounts receivable     b Less allowance for doubtful accounts	47a 47b	104,339.	53, 538	. 47 c	104,339
	48	a Pledges receivable     b Less. allowance for doubtful accounts	48 a			48 c	
	49	Grants receivable			203,000	. 49	166,000
	50	a Receivables from current and former officers, directo employees (attach schedule)	rs, trus	tees, and key		50 a	
A		b Receivables from other disqualified persons (as defined and persons described in section 4958(c)(3)(B) (attack)	ed und	ler section 4958(f)(1)) dule)		50 ь	·
A S S E T S		Other notes and loans receivable (attach schedule)	51 a				
Ś	ļ	<b>b</b> Less allowance for doubtful accounts	51 ь			51 c	
		Inventories for sale or use		1	·· — — · · · · · · · · · · · · · · · ·	52	
		Prepaid expenses and deferred charges	_			53	7,448.
		a Investments — publicly-traded securities		Cost FMV		54 a	
		b Investments — other securities (attach sch) a Investments — land, buildings, & equipment basis	l se al	Cost FMV		54b	
	1	b Less accumulated depreciation	55 a				
	==	(attach schedule)	55 b			55 c	
	I	Investments – other (attach schedule) a Land, buildings, and equipment basis	57a	9,422.	<del></del>	56	
	l	, , ,	3/4	9,422.		1 1	
	58	b Less accumulated depreciation (attach schedule) Statement 5  Other assets, including program-related investments	57 b	2,802.	5,497.	57 c	6,620.
	36	(describe		,		58	
	59	Total assets (must equal line 74) Add lines 45 through	 ih 58	/  -	523,471.	59	1,015,787.
	60	Accounts payable and accrued expenses	,		77,520.	60	58,618.
	61	Grants payable		<u> </u>	,	61	30,010.
L	62	Deferred revenue		<u> </u>		62	******
A B I	63	Loans from officers, directors, trustees, and key employees (attach schedule)				63	
L	64 a	Tax-exempt bond liabilities (attach schedule)				64 a	
T E S	t	Mortgages and other notes payable (attach schedule)				64 b	
5	65	Other liabilities (describe		) [		65	
	66	Total liabilities. Add lines 60 through 65			77,520.	66	58,618.
	Orga		id com	olete lines 67			
N E		through 69 and lines 73 and 74					
	67	Unrestricted			21,200.	67	144,171.
ASSETS	68	Temporarily restricted		ļ	424,751.	68	<u>812,998.</u>
	69	Permanently restricted		<del> </del> -		69	
유	Orga	inizations that do not follow SFAS 117, check here	∐ aı	nd complete lines			
ξĺ	70	70 through 74 Capital stock, trust principal, or current funds				70	
D	70 71	Paid-in or capital surplus, or land, building, and equipr	nect fo	nd -		70 71	
В	71 72	Retained earnings, endowment, accumulated income,		_		72	· · · · · · · · · · · · · · · · · · ·
Ļ				<u> </u>		14	<del></del>
CE S	73	Total net assets or fund balances. Add lines 67 throug 72 (Column (A) must equal line 19 and column (B) mi	ust equ	ial line 21)	445, 951.	73	957,169.
$\perp$	74	Total liabilities and net assets/fund balances. Add line	s ob a	10 /3	523,471.	74	1,015,787.

# Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See the instructions.)

	mandenons.y			
а	Total revenue, gains, and other support per audited financial statements		a	2,152,318.
Ь	Amounts included on line a but not on Part I, line 12	1		
	1 Net unrealized gains on investments	b1		
	2Donated services and use of facilities	<b>b2</b> 31,422.		
	3Recoveries of prior year grants	ь3		
	4Other (specify)			
		b4		
	Add lines <b>b1</b> through <b>b4</b>		b	31,422.
c	Subtract line <b>b</b> from line <b>a</b>		С	2,120,896.
d	Amounts included on Part I, line 12, but not on line a:			
	1 Investment expenses not included on Part I, line 6b	d1		
	2Other (specify)			
		12		
	Add lines d1 and d2		d	•
e	Total revenue (Part I, line 12) Add lines c and d	<b>▶</b>	е	2,120,896.
P	art IV-B Reconciliation of Expenses per Audited Financial Statements	with Expenses per F	₹eti	urn
а	Total expenses and losses per audited financial statements		a	1,641,100.
b	Amounts included on line a but not on Part I, line 17			<u> </u>
	1 Donated services and use of facilities	31,422.		
	2Prior year adjustments reported on Part I, line 20	02		
	3Losses reported on Part I, line 20	3		
	4Other (specify)			
		04		
	Add lines b1 through b4		ь	31,422.
c	Subtract line <b>b</b> from line <b>a</b>		С	1,609,678.
d	Amounts included on Part I, line 17, but not on line a:			
	1 Investment expenses not included on Part I, line 6b	11	- 1	
	2Other (specify)			
		12	- 1	
	Add lines d1 and d2		d	
e	Total expenses (Part I, line 17) Add lines c and d	<u> </u>	е	1,609,678.
Pi	art V-A Current Officers, Directors, Trustees, and Key Employees (Lis	t each person who was an	offi	icer, director, trustee.
	or key employee at any time during the year even if they were not compensati	ed ) (See the instructions	)	, ., .,

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Expense account and other allowances
See Statement 6	_	60,000.	3,262.	0.
	-			
	-			
				· · · · · · · · · · · · · · · · · · ·

Form 990 (2007) Oakland Small Schools			43-20146	30	_	Page (
Part V-A Current Officers, Directors, Tr					Yes	No
75 a Enter the total number of officers, directors, and trustees b Are any officers, directors, trustees, or key er listed in Schedule A, Part I, or highest compe A, Part II-A or II-B, related to each other thro identifies the individuals and explains the relationship.	mployees listed in Form ensated professional an ugh family or business	n 990, Part V-A, or high	est compensated employed	es e 75 b		x
c Do any officers, directors, trustees, or key employees listed in form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of 'related organization'						
If 'Yes,' attach a statement that includes the information described in the instructions						
d Does the organization have a written conflict				75 d		
Part V-B Former Officers, Directors, Tru Benefits (If any former officer, direct during the year, list that person below the instructions)	tor, trustee, or kev emr	lovee received compen	sation or other henefits (de	scribad	helow	) e
(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Ex account a allow		her
None						
				-		
	1					
Part VI Other Information (See the instr	ructions.)	I	<del></del>	T	Yes	No
76 Did the organization make a change in its activity	vities or methods of cor	nducting activities?			-	
If 'Yes,' attach a detailed statement of each ch 77 Were any changes made in the organizing or g	J	it not reported to the IR	15.7	76	+	$\frac{x}{x}$
If 'Yes,' attach a conformed copy of the change		of not reported to the in	.0	1"	$\dashv$	<u> </u>
78a Did the organization have unrelated business g		or more during the year	r covered by this return?	78a		x
b If 'Yes,' has it filed a tax return on Form 990-T			•	78 b	N/I	_
79 Was there a liquidation, dissolution, termination year? If 'Yes,' attach a statement	n, or substantial contra	ction during the		79		x
80a is the organization related (other than by associated membership, governing bodies, trustees, office	ciation with a statewide rs, etc, to any other ex	or nationwide organiza empt or nonexempt org	tion) through common anization?	80 a	T	x
<b>b</b> If 'Yes,' enter the name of the organization		·			$\top$	
			empt or nonexempt			
81 a Enter direct and indirect political expenditures		ns)	81 a 0.	7 1		
b Did the organization file Form 1120-POL for this	s year <sup>7</sup>		·· <u>·</u>	81 b		X ]
BAA				Form 9	<b>9</b> 0 (20	JO/)

Form 990 (2007) Oakland Small Schools Foundation	43-20146	30	F	age
Part VI Other Information (continued)			Yes	No
82 a Did the organization receive donated services or the use of materials, equipment, or facilities substantially less than fair rental value?	es at no charge or at	82a	x	
<b>b</b> If 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	826			
83a Did the organization comply with the public inspection requirements for returns and exempt	ion applications?	83a	Х	
<b>b</b> Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contri	butions?	83b	Х	
84 a Did the organization solicit any contributions or gifts that were not tax deductible?		84a		Х
<b>b</b> If 'Yes,' did the organization include with every solicitation an express statement that such not tax deductible?	contributions or gifts were	84Ь	N,	/A
85 a 501(c)(4), (5), or (6) Were substantially all dues nondeductible by members?		85 a		'A
<b>b</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?		85 b		
If 'Yes' was answered to either 85a or 85b, <b>do not</b> complete 85c through 85h below unless waiver for proxy tax owed for the prior year	the organization received a			
c Dues, assessments, and similar amounts from members	85c N/A			
d Section 162(e) lobbying and political expenditures	85 d N/A	<b>⊣</b> 1		
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e N/A	<b>⊣</b> ।		
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f N/A	- 1 1		:
a Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		85g	N	/ <b>A</b>
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasidues allocable to nondeductible lobbying and political expenditures for the following tax year?	onable estimate of	85h	N.	
<b>86</b> 501(c)(7) organizations Enter <b>a</b> Initiation fees and capital contributions included on		3311	- "1	<u> </u>
line 12	86a N/A		1	
<b>b</b> Gross receipts, included on line 12, for public use of club facilities	86b N/A	- 1		
87 501(c)(12) organizations Enter a Gross income from members or shareholders	87a N/A	-1 1	1	
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b N/A	1		
88 a At any time during the year, did the organization own a 50% or greater interest in a taxable or an entity disregarded as separate from the organization under Regulations sections 301.7 lf 'Yes,' complete Part IX	corporation or partnership.	88 a		х
b At any time during the year, did the organization, directly or indirectly, own a controlled enti- section 512(b)(13)? If 'Yes,' complete Part XI	ty within the meaning of	88 ь		х
89a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year usection 4911 ► 0., section 4912 ► 0., section 4	ınder			
<b>b</b> 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 exce during the year or did it become aware of an excess benefit transaction from a prior year? If explaining each transaction	ss benefit transaction	89 b		х
c Enter Amount of tax imposed on the organization managers or disqualified persons during t year under sections 4912, 4955, and 4958	he ► 0.			
d Enter Amount of tax on line 89c, above, reimbursed by the organization	▶ 0.			
e All organizations. At any time during the tax year, was the organization a party to a prohibite	ed tax shelter transaction?	89 e		X
f All organizations. Did the organization acquire a direct or indirect interest in any applicable in	nsurance contract?	89f		X
g For supporting organizations and sponsoring organizations maintaining donor advised funds organization, or a fund maintained by a sponsoring organization, have excess business hold the year?	Did the supporting ngs at any time during	89 g		x
90a List the states with which a copy of this return is filed > <u>CA</u>	·		 _	<u>~</u>
<b>b</b> Number of employees employed in the pay period that includes March 12, 2007 (See instructions)	[	90 ь		10
91a The books are in care of ► The Organization Telephone null Located at ► P.O. Box 20238 Oakland CA	mber > 510-534-761 ZIP + 4 > 94620			
b At any time during the calendar year, did the organization have an interest in or a signature of	or other authority over a r			No
financial account in a foreign country (such as a bank account, securities account, or other fill if 'Yes,' enter the name of the foreign country		91 b	-	<u>X</u>
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of F Financial Accounts				
BAA		Form 9	90 (20	007)

	(2007) Oakland Small Scho		tion		43-2014		Page 8
	Other Information (continu					Yes	
	ny time during the calendar year, di		n maintain an office	e outside of the	United States?	91 c	X
	es, enter the name of the foreign coun						
	tion 4947(a)(1) nonexempt charitable	_			1	N/A	<b>►</b> □
	enter the amount of tax-exempt inte				▶ 92	<u> </u>	N/A
Part VII	Analysis of Income Produc			<del></del>	. 510 510 511		
N-4 51		Unrelated b	usiness income	Excluded by s	ection 512, 513, or 514	(E)	
otherwise	er gross amounts unless indicated	(A) Business code	( <b>B</b> ) Amount	(C) Exclusion code	( <b>D)</b> Amount	Related or ex- function inco	empt ome
	ogram service revenue					229,	541.
b Fe	ee for service					27,	796.
c		<u> </u>	····				
d			_				
e							
f Me	dicare/Medicaid payments			<u> </u>			
•	s & contracts from government agencies						
	mbership dues and assessments					44,	653.
	rest on savings & temporary cash invmnts		<del></del>	14	9,459.		
	ridends & interest from securities						
	rental income or (loss) from real estate					<del></del>	
	ot-financed property						
	debt-financed property						
	rental income or (loss) from pers prop	<del></del>				-	
<b>99</b> Oth	ner investment income			<del> </del> -			
100 Gar oth	in or (loss) from sales of assets er than inventory					<u> </u>	
101 Net	income or (loss) from special events						
	ss profit or (loss) from sales of inventory						
	ner revenue a		<del></del>			<del></del>	
	scellaneous			1	23,713.		
·.—					···		
		<del></del>					
e	total (add columns (B), (D), and (E))	<del></del>	·		22 172	201	000
	al (add line 104, columns (B), (D), a	and (E))		<u> </u>	33,172.	301, 335,	
	an (aud line 104, columns (B), (D), a 105 plus line 1e, Part I, should equ		line 12 Port I		<u> </u>	335,	162.
	Relationship of Activities to			empt Purpose	es (See the instruc	tions )	
Line No.	Explain how each activity for which of the organization's exempt purpo				· · · · · · · · · · · · · · · · · · ·		nt
^2-							
93a	Revenue received in ex						
93b	Revenue received in ex		coacning pr	incipals i	n giving campa:	igns and	
94	producing marketing ma Revenue received in ex		mombor coru	1000			
Part IX	Information Regarding Taxa				s (See the instruct	ione )	
raitix	(A)	(B)	(C		(D)	(E)	
NI.				ĺ			
part	address, and EIN of corporation, nership, or disregarded entity	Percentage of ownership interes		activities	Total income	End-of-year assets	r ———
N/A		- 9	<del></del>				
			5				
			5				
Do-4 V	Information Describer Trans	efore Accoci		nol Panatit C	entracts (Cas tha	inctrications >	
	Information Regarding Tran						
<b>b</b> Did th	organization, during the year, receive any fun e organization, during the year, pay	premiums, direc	tly or indirectly, on	•		Yes X	
Note: If	'Yes' to (b), file Form 8870 and For	m 4720 (see ins	ructions)		· · · -		
BAA					TEEA0108L 12/27/07	Form 990 (	(2007)

Page 8

Pa	Information Regarding Transfers To an organization is a controlling organization	nd From Controlled E	ntities. Com	plete only if th	ie		-9-
106	Did the reporting organization <b>make</b> any transfers <b>to</b> 'Yes,' complete the schedule below for each controlle	a controlled entity as define			ode? If	Yes	No X
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	Desc tra	(C) ription of ansfer	Amount	D) of tran	sfer
a 							
ь				_			
с							
	Totals						
107	Did the reporting organization <b>receive</b> any transfers <b>fr</b> 'Yes,' complete the schedule below for each controlled	r <b>om</b> a controlled entity as d	lefined in sectio	on 512(b)(13) of th	ne Code? If	Yes	No X
-	(A) Name, address, of each controlled entity	(B) Employer Identification Number	Desci tra	(C) ription of ansfer	(I Amount d	D) of trans	sfer
а							
b							
С		Ī					
	Totals						
108	Did the organization have a binding written contract in annuities described in gyestion 107 above?	effect on August 17, 2006,	, covering the in	nterest, rents, roy	alties, and	Yes	No X
Pleas Sign Here	Under penalties of penuty I declare that have exequined this return true, correct, and complete Declaration of prepare (when than office)  Signature of office  Type of print name and title	EXECUTIVE		and to the best of my knowledge  S/1 //09  Date	owledge and be	hef, it is	
Paid Pre- parei Use	Preparer's signature  Crosby & Kaneda, CPAs temployed).  Crosby & Kaneda, CPAs temployed).  1611 Telegraph Ave Ste	318	111/09	Check if self-employed FGE	eparer's SSN or theral Instruction	PTIN (S	ee
Only BAA	address, and Oakland, CA 94612-2151			Phone no ► (510		953 <b>990</b> (2	007)

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

#### Organization Exempt Under **Section 501(c)(3)**

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Department of the Treasury Internal Revenue Service Name of the organization

Supplementary Information — (See separate instructions.) MUST be completed by the above organizations and attached to their Form 990 or 990-EZ. 2007

Employer identification number

OMB No 1545-0047

Oakland Small Schools Foundation 43-2014630 Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees Part I (See instructions. List each one. If there are none, enter 'None.') (a) Name and address of each (b) Title and average (c) Compensation (d) Contributions (e) Expense to employee benefit plans and deferred compensation employee paid more than \$50,000 hours per week account and other devoted to position allowances Precious Stoud P.O. Box 20238 Oakland, CA 94620 Dir. Operation 40 0. 51,293 0. Total number of other employees paid over \$50,000 Part II - A Compensation of the Five Highest Paid Independent Contractors for Professional Services (See instructions. List each one (whether individuals or firms). If there are none, enter 'None.') (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation Christen Richardson 518 Haddon Rd. Oakland, CA 94606 Tech management 53,717. Total number of others receiving over \$50,000 for professional services Part II - B | Compensation of the Five Highest Paid Independent Contractors for Other Services (List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter 'None.' See instructions.) (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation None Total number of other contractors receiving over \$50,000 for other services BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.

Sch	edule A (Form 990 or 990-EZ) 2007 Oakland Small Schools Foundation 43-201463	30		Page
Pá	rt III Statements About Activities (See Instructions.)		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid or incurred in connection with the lobbying activities		-	
	(Must equal amounts on line 38, Part VI-A, or line i of Part VI-B)	1		Х
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking 'Yes' must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions)			
;	a Sale, exchange, or leasing of property?	2a		х
!	b Lending of money or other extension of credit?	2b		х
	c Furnishing of goods, services, or facilities?	2c		X
	See Form 990, Part V			
(	d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	_ 2d	Х	-
•	Transfer of any part of its income or assets?	2e		Х
3	Did the organization make grants for scholarships, fellowships, student loans, etc? (If 'Yes,' attach an explanation of how the organization determines that recipients qualify to receive payments)	3a		х
ı	Did the organization have a section 403(b) annuity plan for its employees?	3ь		х
(	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' attach a detailed statement	3c		x
	res, attach a detailed statement			<u> </u>
•	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	_3d		Х
4 8	Did the organization maintain any donor advised funds? If 'Yes,' complete lines 4b through 4g. If 'No,' complete lines 4b and 4g.	4a		х
t	Did the organization make any taxable distributions under section 4966?	4b	Ň,	/A
c	: Did the organization make a distribution to a donor, donor advisor, or related person?	4c	N	/A

amounts in such funds or accounts

N/A

N/A

0

d Enter the total number of donor advised funds owned at the end of the tax year

e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year

f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of

g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year

Par	t IV	Reason for	Non-Private	Foundation Status (	See instructions.)			
I ceri	lify that	the organization	is not a private	foundation because it is	(Please check only ONE a	pplicable bo	) x )	
5	A d	church, conventio	on of churches, o	or association of churches	s Section 170(b)(1)(A)(i)			
6	A s	school Section 1	70(b)(1)(A)(ıı) (	(Also complete Part V )				
7	Пан	nospital or a coop	perative hospital	I service organization Se	ction 170(b)(1)(A)(iii)			
8	A f	ederal, state, or	local governmer	nt or governmental unit S	Section 170(b)(1)(A)(v)			
9		,	J	•	n a hospital Section 170(b)	)(1)(A)(III) <b>[</b>	Enter the hosp	oital's name, city,
	and	d state ►						
10	☐ An (Al	organization ope so complete the	erated for the be Support Schedi	enefit of a college or unive ule in Part IV-A.)	ersity owned or operated by	y a governm	nental unit Se	ction 170(b)(1)(A)(iv)
11 a	X An Sec	organization tha ction 170(b)(1)(A	t normally receiv )(vi) (Also com	ves a substantial part of i plete the <b>Support Schedi</b>	ts support from a governm <b>ule</b> in Part IV-A)	ental unit oi	from the gen	eral public
11 b	A c	community trust	Section 170(b)(	1)(A)(vi) (Also complete	the <b>Support Schedule</b> in P	art IV-A.)		
12	An from from from org	organization that in activities relate in gross investme anization after Ji	t normally received to its charitatent income and une 30, 1975. So	ves. (1) more than 33-1/3' ble, etc, functions — subje unrelated business taxab ee section 509(a)(2) (Als	% of its support from contract to certain exceptions, all income (less section 517 o complete the <b>Support Sc</b>	ibutions, me nd <b>(2) no m</b> I tax) from t c <b>hedule</b> in F	embership fees ore than 33-1/ ousinesses acc Part IV-A )	s, and gross receipts <b>3%</b> of its support quired by the
13	An	organization that	t is not controlle	ed by any disqualified per	sons (other than foundation bes the type of supporting	n managers)	and otherwise	
		Туре І	Type II	Type III-Function	onally Integrated	Type II	I-Other	<del></del>
			Provide the	<del></del>	out the supported organiz	T		<del></del>
	N	(a) lame(s) of suppo organization(s	orted )	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	Is the some organization organic organic gove docur	d) upported on listed in oporting zation's erning nents?	(e) Amount of support
					· · · · · · · · · · · · · · · · · · ·	Yes	No	
		<del></del>			<u> </u>			
								<del></del>
								<del></del>
Total				·	<del></del>		<u> </u>	0.
14	☐ An o	organization orga	nized and opera	ated to test for public safe	ety. Section 509(a)(4) (Sec	e instruction	s )	
BAA					·			990 or 990-EZ) 2007

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) Use cash method of accounting. Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting Calendar year (or fiscal year (e) Total beginning in) Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.) 793,612 8,732. 1,302,271. 394,560. 105,367. 2,250 2,250. Membership fees received Gross receipts from admissions, merchandise sold or services performed. or furnishing of facilities in any activity that is related to the organization's 4.378 44.940 49,318. charitable, etc, purpose 18 Gross income from interest, dividends, amts rec'd from payments on securities loans (sec 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less sec. 511 taxes) from businesses acquired by the organization after June 30, 1975 3,233 1,290 212. 4,735. 19 Net income from unrelated business activities not included in line 18 0. Tax revenues levied for the 20 organization's benefit and either paid to it or expended 0. on its behalf The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge. 0. Other income. Attach a schedule Do not include gain or (loss) from sale of capital assets See Stmt. 254 254. 803,727. 440,790 105,579 8,732 1,358,828 Total of lines 15 through 22 799.349 395,850. 105.579 8,732. 24 Line 23 minus line 17 1,309,510 8.037. 4,408. 1,056 87 25 Enter 1% of line 23 26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 26 a 26,190. b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a Do not file this list with your return. Enter the total of all these excess amounts 26 b 454,360. c Total support for section 509(a)(1) test Enter line 24, column (e) 26 c 309,510. d Add Amounts from column (e) for lines 26 d 459,349. 850,161. 26 e e Public support (line 26c minus line 26d total) f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) 26 f 64.92 % Organizations described on line 12: N/A a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person'. Do not file this list with your return. Enter the sum of such amounts for each year \_\_\_\_\_(2005) \_\_\_\_\_\_(2004) \_\_\_\_\_\_(2003) \_\_\_\_\_ bFor any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11b, as well as individuals) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year (2006) \_\_\_\_\_ (2005) \_\_\_\_ (2004) \_\_\_\_ 15 c Add Amounts from column (e) for lines 16 20 27 c d Add Line 27a total and line 27b total 27 d e Public support (line 27c total minus line 27d total) 27 e f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) 27 g ş

h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))

Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. **Do not file this list with your return.** Do not include these grants in line 15

ræ	(To be completed ONLY by schools that checked the box on line 6 in Part IV)	N/A		
		14/ 11	Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?  If 'Yes,' please describe, if 'No,' please explain (If you need more space, attach a separate statement.)	31		
32	Does the organization maintain the following	1		
	a Records indicating the racial composition of the student body, faculty, and administrative staff?	32 a		
	b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32 b		
	c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32 c		<del></del>
	d Copies of all material used by the organization or on its behalf to solicit contributions?	32 d		
	If you answered 'No' to any of the above, please explain (If you need more space, attach a separate statement)			
		] ]		
33	Does the organization discriminate by race in any way with respect to			
;	a Students' rights or privileges?	33a	-	
1	b Admissions policies?	33 ь		
(	c Employment of faculty or administrative staff?	33c		
•	d Scholarships or other financial assistance?	33 d		
•	e Educational policies?	33e		
f	Use of facilities?	33f		
ç	Athletic programs?	33 g	-	
ł	Other extracurricular activities?	33 h		
	If you answered 'Yes' to any of the above, please explain (If you need more space, attach a separate statement)			
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34 a	_	
ь	Has the organization's right to such aid ever been revoked or suspended?	34 ь		
	If you answered 'Yes' to either 34a or b, please explain using an attached statement			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If 'No,' attach an explanation	35		
	Schodule A (Form 90)			

Schedule A (Form 990 or 990-EZ) 2007

## Lobbying Expenditures by Electing Public Charities (See instructions ) (To be completed ONLY by an eligible organization that filed Form 5768)

_		· · · · · · · · · · · · · · · · · · ·						
Che	ck ► a	If the organization belong	s to an affiliated group	Check ► b	П	ıf you checl	ked 'a' and 'limited conti	ol' provisions apply
			obbying Expenditures' means amounts paid of				<b>(a)</b> Affiliated group totals	(b) To be completed for all electing organizations
36	Total lo	obbying expenditures to influen	nce public opinion (grass	sroots lobbying	)	36		
37	Total lo	obbying expenditures to influei	nce a legislative body (di	lirect lobbying).		37		
38	Total lo	obbying expenditures (add line	s 36 and 37)			38	0.	0.
39	Other e	exempt purpose expenditures				39		
40	Total e	xempt purpose expenditures (	add lines 38 and 39)			40	0.	0.
41	Lobbyir	ng nontaxable amount. Enter t	he amount from the follo	owing table -				
	If the a	mount on line 40 is -	The lobbying nont	taxable amoun	t is –	. }		
	Not ove	er \$500,000	20% of the amount	it on line 40	_	7 l		
	Over \$50	0,000 but not over \$1,000,000	\$100,000 plus 15% of ti	the excess over \$500	0,000		_	
	Over \$1,0	000,000 but not over \$1,500,000	\$175,000 plus 10% of ti	the excess over \$1,0	000,000	⊢ <u>41</u>		
	Over \$1,5	500,000 but not over \$17,000,000	\$225,000 plus 5% of the	e excess over \$1,50	000,00			
	Over \$	17,000,000	\$1,000,000		_			
42	Grassro	oots nontaxable amount (enter	25% of line 41)			42	0.	0.
43	Subtrac	ct line 42 from line 36 Enter -	0- if line 42 is more than	n line 36		43	0.	0.
44	Subtrac	ct line 41 from line 38 Enter -	0- if line 41 is more than	n line 38		44	0.	0.
	Caution	n: If there is an amount on eit	her line 43 or line 44, yo	ou must file For	m 47	20		
			A - Vear Averaging F	Pariod Unda	- 6-	otion E01	(h)	

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below See the instructions for lines 45 through 50)

			Lobbying Expend	ditures During 4 -Year	Averaging Period	
	Calendar year (or fiscal year beginning in) ►	<b>(a)</b> 2007	<b>(b)</b> 2006	<b>(c)</b> 2005	<b>(d)</b> 2004	<b>(e)</b> Total
45	Lobbying nontaxable amount					0
46	Lobbying ceiling amount (150% of line 45(e))					0
47	Total lobbying expenditures		·			0
48	Grassroots non- taxable amount.					0
49	Grassroots ceiling amount (150% of line 48(e))					0
50	Grassroots lobbying expenditures					0

Part VI-B

Lobbying Activity by Nonelecting Public Charities
(For reporting only by organizations that did not complete Part VI-A) (See instructions )

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

- a Volunteers
- b Paid staff or management (Include compensation in expenses reported on lines c through h.)
- c Media advertisements.
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- f Grants to other organizations for lobbying purposes
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i Total lobbying expenditures (add lines c through h.)

If 'Yes' to any of the above, also attach a statement giving a detailed description of the lobbying act
---

Yes	No	Amount
		<u> </u>

# Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See instructions)

51 Did the	e reporting organization Code (other than section	directly or n 501(c)(3)	indirectly engage in any of the followi organizations) or in section 527, rela	ing with any other organization described i iting to political organizations?	n secti	on 50	1(c)
			to a noncharitable exempt organizati	- · ·		Yes	No
(i)C	ash			5	1 a (i)		Х
<b>(ii)</b> O	ther assets				a (ii)		X
	transactions				74		
(i)S	ales or exchanges of ass	ets with a i	noncharitable exempt organization	· ·	b (i)	i	Х
(ii)Pi	urchases of assets from	a noncharit	able exempt organization		b (ii)		X
	ental of facilities, equipm		. •		b (iii)	+	X
• •	eimbursement arrangeme				b (iv)		X
• •	oans or loan guarantees				b (v)		X
• •	<del>-</del>	r members	hip or fundraising solicitations		b (vi)		$\frac{x}{x}$
			ists, other assets, or paid employees		c .		X
				lumn (b) should always show the fair mark organization received less than fair marke oods, other assets, or services received		ie of	<u></u>
(a) Line no	(b) Amount involved	l	(c) noncharitable exempt organization	(d) Description of transfers, transactions, and shar			s
N/A							
-							
				,			
	_						
					-		
ĺ							
ĺ					•		
describ	organization directly or in bed in section 501(c) of t complete the following	the Code (o	filiated with, or related to, one or more ther than section 501(c)(3)) or in sec	e tax-exempt organizations tion 527? ►	Yes	X	No
	(a)		_ (b)	(c)			
	Name of organization		Type of organization	Description of relationship	)		
N/A							
				-			
						-	
					-		
		_				_	_
							—
					_		
					<del></del>		—
							—
BAA			··· <u>···</u> ·	Schedule A (Form 990	or 990	-EZ) 2	2007

## Form **8868**

# Application for Extension of Time To File an Exempt Organization Return

(Rev April 2007)	'		Exempt Organ	iization Return			OMB No 15	545 1709
Department of the nternal Revenue	he Treasury e Service		► File a separate appl	ication for each return				
If you are	e filing for an A	utomatic 3-Month	Extension, complete only	Part I and check this box				<b>►</b> X
	-		omatic) 3-Month Extension,		age 2 of this fo	orm)		1.1
Do not comp			ady been granted an autom				rm 8868	
Part I	Automatic :	3-Month Exten	sion of Time. Only su	bmit original (no copi	es needed)			
Section 501( Lonly	c) corporations	required to file Fo	orm 990-T and requesting a	n automatic 6-month extens	sion – check th	nis bo	x and complete	e Part ►
All other corporate tax r	porations (inclu eturns	ıdıng 1120-C filers,	), partnerships, REMICS, ai	nd trusts must use Form 70	04 to request a	an ex	tension of time	to file
(1) you want consolidated	d below (6 mor the additional Form 990-T li	iths for section 501 (not automatic) 3-i nstead, you must s	lectronically file Form 8868 (c) corporations required to month extension or (2) you submit the fully completed a lefile and click on e-file for	o file Form 990-T) However file Forms 990-BL, 6069, or and signed page 2 (Part II)	r, you cannot fi 8870, group r	le Fo eturn	rm 8868 electro s. or a compos	onically if ite or
Type or	Name of Exempt	Organization				Empl	oyer identification r	number
print File by the			Ls Foundation		<del></del>	43-	2014630	
due date for filing your	]		r If a P O box, see instructions					
return See	P.O. Box	20238	ode For a foreign address, see insti	<del></del>				
iiisti detions	ŀ		ode ir or a toreign address, see insti	uctions				
		CA 94620		<del></del>				_
X Form 990 Form 990 Form 990	)  -BL  -EZ	lieu (ille a separat	e application for each return Form 990-T (corporation Form 990-T (section 401 Form 990-T (trust other to 1041-A	) (a) or 408(a) trust)	Form 472 Form 522 Form 606 Form 887	7 9		
Telephone  If the orga  If this is for check this the extension	No ► 510- enization does or a Group Reti box ► sion will cover	not have an office urn, enter the orga If it is for part of th	FAX No or place of business in the inization's four digit Group for group, check this box	Exemption Number (GEN)  I and attach a list with	the names an	d EIN		► ☐ group, ers
until	2/15, ension is for the calendar year 2 ax year beginn	20 <u>09</u> , to file e organization's re	s for a section 501(c) corporting the exempt organization return for, 2007, and ending the check reason Initial limits.	turn for the organization na	med above		in accounting p	period
		Form 990-BL, 990 See instructions	-PF, 990-T, 4720, or 6069,	enter the tentative tax, less	any	3 a	\$	0.
<b>b</b> If this ap made In	plication is for iclude any prior	Form 990-PF or 99 r year overpaymer	90-T, enter any refundable of allowed as a credit	credits and estimated tax p	ayments	3Ь	\$	0.

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

c Balance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions

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

Form 8868 (Rev 4-2007

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3c \$

2007	Federal Statements	Page 1
Client OSSF07	Oakland Small Schools Foundation	43-2014630
5/05/09		10·02AM
Statement 1 Form 990, Part II, Line 22b Other Grants and Allocati	ons	
Cash Grants and Allo	cations	
-	School programs Acorn Woodland 1029 81st Ave.	
	Oakland, CA	\$ 346.
	School programs Alliance 1800 98th Ave.	
	Oakland, CA 94603	8,048.
	School programs Alternative 9736 Lawlor St. Oakland, CA 94605	
	Oakland, CA 34003	2,783.
	School programs ASCEND 3709 E. 12th St.	
	Oakland, CA 94601	38,531.
	School programs Bridges 1323 53rd Ave.	
	Oakland, CA	29,866.
	School programs CBITS 8601 MacArthur Blvd.	į
	Oakland, CA 94621	165,977.
	School programs CCPA 1390 66th Ave.	
	Oakland, CA 94621	138,937.
	School programs Elmhurst 1800 98th Ave.	
	Oakland, CA 94603	15,000.
	School programs Encompass 1025 81st Ave.	
	Oakland, CA 94621	25,485.
	School programs	ľ

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Client OSSF07	Oakland Small Schools Foundation	43-2014630
5/05/09  Statement 1 (continued) Form 990, Part II, Line 22b Other Grants and Allocations		10 02AN
Cash Grants and Allocations		
	Esperanza 10315 E St. Oakland, CA	\$ 3,463.
	School programs EXCEL 2607 Myrtle St. Oakland, CA 94607	4,079.
	School programs Far West	19,940.
	School programs Global Family 6328 E. 17th St. Oakland, CA 94621	6,682.
	School programs ICS 10315 E St. Oakland, CA 94603	80,619.
	School programs Korematsu 6701 International Blvd Oakland, CA 94621	36,894.
	School programs Life Academy 2111 International Blvd. Oakland, CA 94606	70,017.
	School programs Manzanita 2409 E. 27th St. Oakland, CA 94606	9,443.
	School programs Melrose 1325 53rd Ave. Oakland, CA 94601	53,144.
	School programs MetWest 314 E. 10th St. Oakland, CA 94606	

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Client OSSF07	Oakland Small Schools Foundation	43-201463
5/05/09		10 02A
Statement 1 (continued) Form 990, Part II, Line 22b Other Grants and Allocations		
Cash Grants and Allocation	ns	
		\$ 17,058
	School programs New Highland 8521 A St. Oakland, CA 94621	
	02244, 01. 7 1022	5,572
	School programs OIHS 4532 Webster St.	
	Oakland, CA 94609	49,983
	School programs Place @ Prescott 920 Campbell St. Oakland, CA 94607	4,516.
	School programs Robenson 4610 Foothill Blvd. Oakland, CA 94601	24,268.
	School programs Roots	24,200.
	1390 66th Ave. Oakland, CA 94621	8,240.
	School programs Thing College Now 2825 International Blvd.	
	Oakland, CA 94601	307,790.
	School programs United for Success 2101 35th Ave. Oakland, CA 94601	
		10,602.
	School programs Urban Promise 3031 E. 18th St. Oakland, CA 94601	01.256
	School programs West Oakland Middle 1011 Union St. Oakland, CA 94607	21,356.

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Client OSSF07	Oakland Small Schools Foundation		43-2014630
5/05/09			10 44AN
Statement 1 (continued) Form 990, Part II, Line 22b Other Grants and Allocations			
Cash Grants and Allocation	<u>1S</u>		
		\$	1,409.
	School programs Youth Empowerment 8251 Fontaine St.		
	Oakland, CA 94605		48,315.
0	Total Grants and Al	locations \$	1,208,363.

Statement 2 Form 990, Part II, Line 43 Other Expenses

	(A)	(B) Program	(C) Management	(D)
	<u>Total</u>	<u>Services</u>	<u>&amp; General</u>	<u>Fundraising</u>
Bank and payroll fees Contract services Dues and subscriptions	4,825. 45,298. 1,979.	3,146. 17,486.	1,073. 19,058. 1,979.	606. 8,754.
Event Hospitality Insurance	541. 5,149. 3,627. 654.	416. 2,274. 834. 264.	2,542. 2,570.	125. 333. 223.
Staff development Teacher and intern stipends Total	3,000. \$ 65,073.	3,000. \$ 27,420.	319. \$ 27,541.	71. \$ 10,112.

Statement 3 Form 990 , Part III Organization's Primary Exempt Purpose

To promote excellence and sustainability in Oakland's new small public schools.

Statement 4
Form 990, Part III, Line a
Statement of Program Service Accomplishments

Program
Grants and Service
Allocations Expenses

The Oakland Small Schools Foundation (OSSF) is dedicated to promoting excellence in Oakland's public schools so that all our students have the opportunity to achieve. OSSF is the only organization focused on securing and managing resources and providing expert operational and fundraising

2007

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**Client OSSF07** 

#### **Oakland Small Schools Foundation**

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Statement 4 (continued)
Form 990, Part III, Line a
Statement of Program Service Accomplishments

Description

Grants and Service
Allocations Expenses

services for those Oakland small schools that serve primarily low-income students.

Comprehensive After-School Programs
Through collective fundraising and brokering of community
partnerships for the schools, the Small Schools Foundation
helped support school efforts to create, implement, and
expand comprehensive after-school programs that served 2,200
students in academics, arts enrichment, and recreation five
days per week. Bridging the gap in government and start-up
funds for these small schools, OSSF produced two successful
collective grants that supported after-school programs at
participating schools.

Family Resource Centers
The OSSF, through fundraising and a partnership with the
University of California, continued to assist one school in
developing a significant Family Resource Center project with
a particular college-going culture. It also assisted a high
school and a middle school in developing Family Resource
Centers focused on parent outreach, leadership and
engagement in the learning community. OSSF also developed a
parent engagement collaborative with four schools - one K-8
and three elementary schools. Finally, OSSF has brokered a
new three-school family literacy collaborative in
conjunction with other foundations.

Graduate Student Residency Program OSSF partnered with UCBerkeley's Haas School of Business and Goldman School of Public Policy to place six graduate students in two schools and in the OSSF central office to work with principals and OSSF staff on sustainability plans and metrics. This 4-month program culminated with final presentations.

Fund Development and Marketing Small Schools Foundation staff coached principals in successful individual giving campaigns and produced marketing materials for these campaigns. In addition, OSSF developed guidelines for schools' participation in OSSF activities, and designed and hosted fundraising workshops for school staff. OSSF launched individual giving campaigns at 18 schools; 40 schools participated in web-based giving.

Fundraising Impact for Schools
In 2007-08 OSSF raised \$280,000 from more than 500 individual donors for its school members and another \$800,000 from foundations including Wayne & Gladys Valley Foundation, Silver Giving Foundation, S.D. Bechtel, Jr. Foundation, Walter & Elise Haas Fund, and others. OSSF also processed over \$403,000 in organizational contributions for schools and developed grants that earned over \$3,000,000 in government funding for schools.

Unique Rubrics of Excellence

#### **Federal Statements**

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Oakland Small Schools Foundation

43-2014630

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Statement 4 (continued) Form 990, Part III, Line a **Statement of Program Service Accomplishments** 

Description

Grants and Allocations Expenses

Program Service

As OSSF provides services to schools that help them to deliver programs for students and families, OSSF also helps schools build capacity in the areas of Resources Development, Operations, and Marketing. Our Theory of Action hypothesizes that these young schools that become proficient in these areas will have the right conditions for student achievement. OSSF has audited the schools in the network of 32 active schools using the Rubrics of Excellence and has been checking the results through ongoing data analysis through 2007-08.

Includes Foreign Grants:

Organizational Capacity OSSF continued to utilize the pro-bono legal counsel of Orrick, Herrington, and Sutcliffe. OSSF also has developed a three-year strategic plan and implemented sophisticated administrative and accounting systems for managing its funds.

OSSF earned \$29,000 from individual giving, \$154,000 in foundation grants (including Y & H Soda, Evelyn and Walter Haas Fund, and San Francisco Foundation, among others), and \$200,000 in fees-for-services. OSSF also supports its operations through overhead percentages of school-directed grants, organizational contributions, and donations totaling \$91,000.

In 2005-06 OSSF secured office at ASCEND school and OSSF remained in this space in 2007-08 (with plans to move to a new space in 2008-09.) In 2007-08 OSSF had a fulltime Executive Director, Director of Operations and Development, Coordinator of School Campaigns, and Administrative Manager, and 3/4-time Admin Assistant, 3/4-time Grants and Programs Coordinator, and 3/4-time Communications Coordinator.

In 2007-08 the Board had eight members along with two Board fellows from the Haas School of Business. The board met 11 times to discuss progress towards goals, evaluate programs, and set organizational priorities. Each board member is responsible for an annual financial contribution. In addition to board members, leaders and volunteers from across many neighborhoods and sectors of the Oakland community are helping us to develop our services and build our organizational capacity. OSSF is developing an Advisory Board that currently has ten members.

OSSF contracts with a grant writer, two data specialists, a human resources specialist, a bookkeeper, and a data coach in 2007-08. OSSF enlisted an Education Pioneer fellow and two other interns during the year.

Includes Foreign Grants: No

1,458,478.

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Client OSSF07	Oakland Small Schools Foundation			43-2014630	
5/05/09				<del></del>	11·11A
Statement 5 Form 990, Part IV, Line 57 Land, Buildings, and Equipment					
Category		Basis		cum. rec	Book Value
Machinery and Equipment	Total \$	9,4	122. \$ 122. \$	2,802. \$	6,620.
	Total \$	9,4	\$	2,802. \$	6,620.
List of Officers, prectors, fruster	es, and Key Employees  Title and			Contri-	Expense
List of Officers, prectors, fruster		9		Contri-	Fynense
<u>Name and Address</u> Holly Babe Faust	Title and Average Hou <u>Per Week Dev</u> Executive D	rs <u>oted                                    </u>	Compen- sation 60,000.	bution to EBP & DC	Account/ Other
Name and Address	Title and Average Hou <u>Per Week Dev</u> Executive D	ırs <u>oted</u> _	_sation_	bution to EBP & DC	Account/ Other
Name and Address Holly Babe Faust P.O. Box 20238	Title and Average Hou <u>Per Week Dev</u> Executive I 4	oted Oirec \$ 10.00	_sation_	bution to EBP & DC \$ 3,262.	Account/ Other \$ 0.
Name and Address Holly Babe Faust P.O. Box 20238 Oakland, CA 94620  Jonathan Klein P.O. Box 20238	Title and Average Hou Per Week Dev Executive Dev Presi	oted Oirec \$ 10.00	<u>sation</u> 60,000.	bution to EBP & DC \$ 3,262.	Account/ Other \$ 0.
Name and Address Holly Babe Faust P.O. Box 20238 Oakland, CA 94620  Jonathan Klein P.O. Box 20238 Oakland, CA 94620  Robert F. Kidd P.O. Box 20238	Title and Average Hou Per Week Dev Executive I  Presi Treas	oted Oirec \$ 10.00 .dent 1.00 surer	sation 60,000. 0.	bution to EBP & DC \$ 3,262.	Account/ Other \$ 0.
Name and Address  Holly Babe Faust P.O. Box 20238 Oakland, CA 94620  Jonathan Klein P.O. Box 20238 Oakland, CA 94620  Robert F. Kidd P.O. Box 20238 Oakland, CA 94620  Vanessa Coleman P.O. Box 20238	Title and Average Hou Per Week Dev. Executive E Presi Treas Secre	oted Oirec \$ 10.00	sation 60,000. 0.	bution to EBP & DC \$ 3,262.	\$ 0.

Board Member

Board Member

Board Member

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Robyn Gould P.O. Box 20238 Oakland, CA 94620

Brian Rogers P.O. Box 20238 Oakland, CA 94620

Lillian Cordova-Lopez P.O. Box 20238 Oakland, CA 94620

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5/05/09  Statement 6 (continued) Form 990, Part V-A List of Officers, Directors, Tr	ustees, and Key Employees	10 49/	
Name and Addre	Title and Contri- Average Hours Compen- bution to SS Per Week Devoted sation EBP & DC	Account/	
Samir Bolar P.O. Box 20238 Oakland, CA 94620	Board Member \$ 0. \$ 0.	\$ 0	
Jeric Huang P.O. Box 20238 Oakland, CA 94620	Board Member 0. 0.	C	
	Total \$ 60,000. \$ 3,262.	\$ (	
Miscellaneous	Total $\frac{$}{254}$ . $\frac{$}{5}$ 0. $\frac{$}{5}$ 0. $\frac{$}{5}$ 0. $\frac{$}{5}$ 0.	\$ 254 \$ 254	

	3 (Rev 4-2007)	Page <b>2</b>
	are filing for an Additional (not automatic) 3-Month Extension, complete only	
	au complete Part II if you have already been granted an automatic 3-month extension	
	are filing for an Automatic 3-Month Extension, complete only Part I (on page	
Part II	Additional (not automatic) 3-Month Extension of Time. You n	· · · · · · · · · · · · · · · · · · ·
	Name of Exempt Organization	Employer identification number
Type or	Oakland Small Schools Foundation	42 2014620
print	Oakland Small Schools Foundation  Number, street, and room or suite number. If a P.O. box, see instructions	43-2014630 For IRS use only
File by the	Mulliot, Sieet, and footh of Suite number in a F O BOX, See institutions	For IKS use only
extended due date for	P.O. Box 20238	
filing the return See	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
instructions	Oakland, CA 94620	
Check type	e of return to be filed (File a separate application for each return)	<u></u>
X Form 9		Form 1041-A Form 6069
Form 9	<u></u>	Form 4720 Form 8870
Form 9		Form 5227
<del></del>	not complete Part II if you were not already granted an automatic 3-month ex	
	oks are in care of The Organization	New York of the province of the cooperation of the
	one No ► 510-534-7613 FAX No ► 510-879-3	 145
	organization does not have an office or place of business in the United States,	
	s for a Group Return, enter the organization's four digit Group Exemption Num	L
	ip, check this box If it is for part of the group, check this box	· · · · · · · · · · · · · · · · · · ·
members t	he extension is for	
4 I requ	uest an additional 3-month extension of time until $5/15$ , 20 0	9
<b>5</b> For c	alendar year, or other tax year beginning _7/01, 20	07, and ending 6/30 , 20 08
6 If this	s tax year is for less than 12 months, check reason Initial return	Final return Change in accounting period
	in detail why you need the extension	
gat	her information necessary to file a complete and	accurate tax return.
	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tenta	ative tax, less any
	efundable credits. See instructions	8a \$
paym	application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable cients made. Include any prior year overpayment allowed as a credit and any a	redits and estimated tax
	orm 8868	8b \$
c Balar	ce Due. Subtract line 8b from line 8a. Include your payment with this form, or	r, if required, deposit
with f	TD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment	
	Signature and Verification	
correct, and co	s of perjury, I declare that I have examined this form, including accompanying schedules and statements mplete, and that I am authorized to prepare this form	
Signature -	Crushy & Karreda Tile - lettified Public	accountanty Date > 2.12.09
Signature		
	Notice to Applicant. (To be Completed	
	ave approved this application. Please attach this form to the organization's re	
We h	ave not approved this application. However, we have granted a 10-day grace date of the organization's return (including any prior extensions). This grace proof on soften equired to be made on a timely filed return. Please attach this	period from the later of the date shown below or the
electi	ons otherwise required to be made on a timely filed return. Please attach this	form to the organization's return
We h	ave not approved this application. After considering the reasons stated in iten to file. We are not granting a 10-day grace period.	n 7, we cannot grant your request for an extension of
		the of the material factor by the second control of the
Other	annot consider this application because it was filed after the extended due da	·
L Ottlei		
Director	Ву	Date
	Standard Catality and a state of the state o	
address diff	ailing Address. Enter the address if you want the copy of this application for a erent than the one entered above	an additional 3-month extension returned to an
	Name	
	Crosby & Kaneda, CPAs	•
Type or	CTOSDY & KANEGA, CPAS Number and street (include suite, room, or apartment number) or a P.O. box number	
-, . I	1611 Telegraph Ave Ste 318	
- L	City or town, province or state, and country (including postal or ZIP code)	
	Oakland, CA 94612-2151	
BAA	FIFZ0502L 05/01/07	Form <b>8868</b> (Rev 4-2007)
	I II EQUALE QUALITY	· • · · · · · · · · · · · · · · · · · ·