SCANNED JUN 8 0 201

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)

Department of the Treasury Internal Revenue Service

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

200	8	-	
A Same	9 63. 3 13		ì

OMB No 1545-0047

	For t	ne 2008 calendar year, or tax year beginning // Ul , 2008, and ending	g 6/30		, 2009	
B	Check	if applicable.	D Emplo	yer iden!	tification Number	
	\square_{A}	Idress change Research Oakland Small Schools Foundation	43-	2014	630	
	\vdash	or print or type. P.O. Box 20238	E Teleph	_		
	\vdash	500 Oakland CA 94620				
	Д"	specific Instruc-	310	-534	-7613	
	∘ت∐	ermination tions.				
	A	nended return	G Gross	receipts	\$ 2,073,1	68.
		iplication pending F Name and address of principal officer Holly Babe Faust	H(a) Is this a group retu	rn for aff	filiates? Yes	X No
	<u></u>		H(b) Are all affiliates inc	luded?	Yes	H _{No}
-	T		If 'No,' attach a list	(see ins		
<u></u>		-exempt status X 501(c) (3) < (insert no.) 4947(a)(1) or 527			_	
<u>J</u> _			H(c) Group exemption r	umber		
<u>K</u>		of organization X Corporation Trust Association Other ► L Year of Formati	on 2003 M	State of	legal domicile CA	
2	THE S	Summary				
_	1	Briefly describe the organization's mission or most significant activities: To promot	e excellenc	e ar	nd	
		sustainability in Oakland's new small public schools.				
Ě	İ					
Activities & Governance						
Ş	2	Check this box ► If the organization discontinued its operations or disposed of more	re than 25% of its	255615		
ŏ	3	Number of voting members of the governing body (Part VI, line 1a)	C (11011 20 70 01 1(3	1 3 1	-	10
4 5	4	Number of independent voting members of the governing body (Part VI, line 1b)		4		- 0
ê		Total number of employees (Part V, line 2a)	•	5		11
₹	6	Total number of volunteers (estimate if necessary)		6		15
Ş	7.	Total gross unrelated business revenue from Part VIII, line 12, column (C)		7a		0.
	1	Net unrelated business taxable income from Form 990-T, line 34.		7b	·	0.
		THE CHILDREN DOSINGSS TEXABLE INCOME NOTITY OF STREET, THE ST.				
	ĺ .		Prior Year		Current Yea	
ø	ľ	Contributions and grants (Part VIII, line 1h)	1,762,		1,397,2	
Revenue		Program service revenue (Part VIII, line 2g)	301,		642,8	
ş	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		<u> 159.</u>		<u> 262.</u>
Œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	27,		23,8	
	12	Total revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,101,8	396.	2,073,1	68.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)				
	14	Benefits paid to or for members (Part IX, column (A), line 4)				
		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	263,3	106	734,2	223
8	i					
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)	AT LIVE TYPEN FO	N. 122.00	and the second second	7.15
훘	Ь	Total fundraising expenses (Part IX, column (D), line 25) ► 94,472.		\$ 35		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	1,327,3	372.	1,325,5	.806
	18	Total expenses. Add lines 13-17 (must equal Part IX, cqtumn (A), line 25)	1,590,6		2,059,7	
		Revenue less expenses. Subtract line 18 from line 12.	511,2		13,4	
-,-			7			
bo		4 7 V	Beginning of Y		End of Year	
Net Assets Fund Balanc		Total assets (Part X, line 16)	1,015,7		1,061,4	
\$2	21	Total liabilities (Part X, line 26) MAY 1 7 2010	58,6	18.	90,8	<u> 189.</u>
뀵	22	Net assets or fund balances. Subtract line 21 from line 20	957,1	.69.l	970,6	06.
Pa	dill:					
	********		ments, and to the best of	d my kna	whodos and holist it is	
		Under penalties of perjury, I declare that Layve examined this return, including accompanyon schaffules and state true, correct, and complete Declaration of preparer (other than officer) is based on all information of which prepare	er has any knowledge	/ IIIy AIRO	wieuge and belief, it is	
c:-	_		14/25	zII	•	
Sig	11	Salar State	1 1 4 4 4	2[] .	<u> </u>	
Hei	e	Signature of officer	Date			
		DAN C. QUIGCEY, EXECUTIVE DI	RECTOR			
		Type or print name and title				
		Date	Check if	Pre	eparer's identifying num e instructions)	nber
Pai	d	2/. /	self- employed ▶	☐ \ "	e manuchons)	
Pre		Preparer's rosky & Kaneda 3/31/10	employed	니		
	er's					
Úse		Firm's name (or vours if self-				
Onl		employed). 1611 Telegraph Ave Ste 318	EIN ► 9		<u>43888</u>	
		address, and Oakland, CA 94612-2151	Phone no ▶	(510) 835-2727	
May	the IF	S discuss this return with the preparer shown above? (see instructions)			X Yes	No
		Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.	TEEA0112L	12/22/	08 Form 990 (2	2008)

	n 990 (2008) Oakland Small Schools Foundation	43-2	01463	0		Page 2
Pa	Statement of Program Service Accomplishments (see instructions)					
1	- (v)					
	To promote excellence and sustainability in Oakland's new small p	ublic :	schoo	<u>ls.</u>		
•						
			.			
2	Did the organization undertake any significant program services during the year which were not listed or	the prior			_	
	Form 990 or 990-EZ?			Yes	X	No
•	If 'Yes,' describe these new services on Schedule O.	_			G	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program ser	vices?		Yes	X	No
	If 'Yes,' describe these changes on Schedule O.	. L			01 (-)	~ `
7	Describe the exempt purpose achievements for each of the organization's three largest program services and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants an expenses, and revenue, if any, for each program service reported.	d allocation	ses. Sei ns to oth	ners, ti	he tota	al
4 a	(Code: (Code: \$\) (Expenses \$\) 1,803,216. including grants of \$\)	(Revenue	\$	64	2,84	<u>47.</u>)
	See Schedule O					
					-	
-						
4 b	(Code: Code: (Expenses \$ including grants of \$)	Revenue	\$)
4 C	(Code:) (Expenses \$ including grants of \$) (Revenue	\$)
•						
•						
•						
•						
•						
•						
•						
•						
•				 -		
4d	Other program services. (Describe in Schedule O.)					
					<u> </u>	
4e	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses ▶ \$ 1,803,216. (Must equal Part IX, Line 25, column (B)))				

			Tes	NO
i	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	x	
2		2	Х	
3	to all's thee 2 th West assemble Cohedule Cohedule	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4	<u> </u>	X
5		5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		х
10	Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V.	10		Х
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	Х	
	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
148	a Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Х
I	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If 'Yes,' complete Schedule F, Part I	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III.	16		Х
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		Х
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		X
23	Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J	23		х
24 a	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, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No, 'go to question 25	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		<u>х</u>
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		<u>x</u>
BAA		Form	990 (2	2008)

Form 990 (2008) Oakland Small Schools Foundation
Part IV: Checklist of Required Schedules (continued)

			Tes	NO
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
	a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively			
	with other person(s) listed in Part VII, Section A)? If 'Yes,' complete Schedule L, Part IV	28a		X
	b Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L, Part IV	28b	х	<u> </u>
	c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If 'Yes,' complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M .	29		х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		х
BAA		Form	990	(2008)

Form 990 (2008) Oakland Small Schools Foundation

Part V Statements Regarding Other IRS Filings and Tax Compliance

				Yes	No
1:	a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S Information Returns Enter -0- if not applicable)	100	£
1	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b (i wasii	
•	c Did the organization comply with backup withholding rules for reportable payments to vender (gambling) winnings to prize winners?	ors and reportable gaming	1 c	X	
	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 11	74 4		(a. 3)
21	b If at least one is reported on line 2a, did the organization file all required federal employme	nt tax returns?	2 b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this re	turn. (see instructions)	- 1 × 1 × 1	12 44	# ************************************
3	a Did the organization have unrelated business gross income of \$1,000 or more during the year this return?		3a		х
t	b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule (3b		
4 8	a At any time during the calendar year, did the organization have an interest in, or a signatur financial account in a foreign country (such as a bank account, securities account, or other	e or other authority over, a financial account)? .	4a		х
t	o If 'Yes,' enter the name of the foreign country: •	<u> </u>	, 63.		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report o Financial Accounts	Foreign Bank and			
5 a	a Was the organization a party to a prohibited tax shelter transaction at any time during the ${f t}$	ax year?	5a		Х
t	Did any taxable party notify the organization that it was or is a party to a prohibited tax she	Iter transaction?	5b		Х
C	of the standard of the community of the	npt Entity Regarding	5c		
6 a	Did the organization solicit any contributions that were not tax deductible?		6a		X
ŧ	o If 'Yes,' did the organization include with every solicitation an express statement that such a deductible?	contributions or gifts were no	6b		
7	Organizations that may receive deductible contributions under section 170(c).		- Ar 1	10	the per
a	Did the organization provide goods or services in exchange for any quid pro quo contributio	n of more than \$75?	7a		X
	olf 'Yes,' did the organization notify the donor of the value of the goods or services provided		7ь		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for v. Form 8282?	which it was required to file	7c		х
d	If 'Yes,' indicate the number of Forms 8282 filed during the year	7d	1.23		
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiu benefit contract?	ms on a personal	7e	松型	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal beautiful directly or indirectly, on a personal beautiful directly or indirectly.	nefit contract?	71		X
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as	required?	7 g	Х	
	For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a	•	7h	Х	
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds an supporting organizations. Did the supporting organization, or a fund maintained by a sponsexcess business holdings at any time during the year?	d section 509(a)(3) soring organization, have	8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.				MA
а	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make any distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter.				63
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	1. 3	1	
b	Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10 b	c'N	24	7
11	Section 501(c)(12) organizations. Enter:			3-27	
а	Gross income from other members or shareholders	11 a	10.7		3
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) $. \\$	116	-	3:3:	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of	l 1	12a		
	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b	- 32 / E-4		学院
BAA			Form	990 (2	2008)

Part VI Governance, Management and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

<u>26</u>	ection A. Governing Body and Manager		·		Yes	No
	For each 'Yes' response to lines 2-7b below, an processes, or changes in Schedule O. See instr	nd for a 'No' response to lines 8 or 9b below, ructions.	describe the circumstances,		163	
1	la Enter the number of voting members of the gov	verning body	1a 10		X.	
	b Enter the number of voting members that are in	ndependent	16			(m) 25 {
2	2 Did any officer, director, trustee, or key employed officer, director, trustee or key employee?	ee have a family relationship or a business re See Schedule O	elationship with any other	2	X	
3	3 Did the organization delegate control over mana of officers, directors or trustees, or key employe	agement duties customarily performed by or tees to a management company or other personal compan	under the direct supervision on?	3		х
4	Did the organization make any significant changes since the prior Form 990 was filed?	ges to its organizational documents		4		X
5	'	year of a material diversion of the organization	n's assets?	5		Х
6				6		Х
7	7a Does the organization have members, stockhold governing body?		more members of the	7a		х
	b Are any decisions of the governing body subject	t to approval by members, stockholders, or o	ther persons? .	7 b		X
8	B Did the organization contemporaneously docume the following:	ent the meetings held or written actions unde	ertaken during the year by	100 mg		
	a The governing body?			8a		
	b Each committee with authority to act on behalf of	• • •		8ь	Х	
9	a Does the organization have local chapters, bran-	ches, or affiliates?	•	9a	ļ	<u>X</u>
	b If 'Yes,' does the organization have written police and branches to ensure their operations are con	sistent with those of the organization?		9ь		
10	Was a copy of the Form 990 provided to the org describe in Schedule O the process, if any, the	anization's governing body before it was filed organization uses to review the Form 990 S	i? All organizations must ee Schedule 0	10	He	X
11	organization's mailing address? If 'Yes,' provide	mployee listed in Part VII, Section A, who ca the names and addresses in Schedule O	nnot be reached at the	11		<u>x</u>
Sec	ction B. Policies					
12:	a Does the organization have a written conflict of	interest policy? If 'No,' go to line 13		12a	Yes X	No
1	b Are officers, directors or trustees, and key emple to conflicts?	oyees required to disclose annually interests	that could give rise	12 b	х	
(c Does the organization regularly and consistently Schedule O how this is done	monitor and enforce compliance with the po	licy? If 'Yes,' describe in	12c	х	
13	Does the organization have a written whistleblow	ver policy?		13	Х	
14	Does the organization have a written document in	retention and destruction policy?		14	Х	
15	Did the process for determining compensation or persons, comparability data, and contemporaneous	f the following persons include a review and ous substantiation of the deliberation and dec	approval by independent cision:			
	a The organization's CEO, Executive Director, or to			15 a	Х	
ŧ	b Other officers of key employees of the organizat			15 b	Х	Taber -
	Describe the process in Schedule O (see instruc	•		1		
	a Did the organization invest in, contribute assets entity during the year?			16a	2.79	X
t	b If 'Yes,' has the organization adopted a written p in joint venture arrangements under applicable to status with respect to such arrangements?	policy or procedure requiring the organization ederal tax law, and taken steps to safeguard	to evaluate its participation the organization's exempt	16b		
Sec	ction C. Disclosures		 			
17		0 is required to be filed ► CA				
18	Section 6104 requires an organization to make it inspection. Indicate how you make these availab		nd 990-T (501(c)(3)s only) av	aılable	e for p	ublic
	Own website X Another's website					
19	Describe in Schedule O whether (and if so, how) statements available to the public. See Sci	the organization makes its governing docum hedule 0	ents, conflict of interest poli	cy, an	d finai	ncial
20	State the name, physical address, and telephone Julie Besaha P.O. Box 20238	e number of the person who possesses the bo	ooks and records of the orga			
						

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- 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) or 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.

(A)	(B)			•	c)			(D)	(E)	(F)
Name and Trile	Average hours per week	ndividual trustee or director	institutional trustee	Officer		Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Holly Babe Faust	40			v				70 750		
Executive Direc	40	 	-	Х	┝	-		78,750.	0.	0.
Jonathan Klein President	1	x		X				0.	0.	0.
Robert F. Kidd	 	 				<u> </u>	\vdash	<u> </u>		<u> </u>
Board Member	1	х						0.	0.	0.
Vanessa Coleman										
Vice President] 1	Х		X				0.	0.	0.
Brendan Cullen										<u></u>
Board Member	1	Х						0.	0.	0.
David Montes de Oca										
Board Member	1	Х	Ш				Ш	0.	0.	0.
Robyn Gould	_									
Treasurer	1	Х		X				0.	0.	0.
Lillian Cordova-Lopez	4									
Board Member	1	Х	Ш					0.	0.	0.
Brian Rogers	4 .								_	
Board Member	1_1_	Х		_	_			0.	0.	0.
Samir Bolar	4 .			ļ					_ 1	
Board Member	1	Х	\Box	_	_			0.	0.	0.
Julie Besaha	┩			_					_	
Director of Fin	40		\dashv	Х	4			62,000.	0.	0.
Robert Spencer	┦.	l l			ı		- [_	
Secretary	1	Х		Х				0.	0.	0.
Jose Corona	┨				I		ł		_	_
Board Member	1	_X	-		-		\dashv	0.	0.	0.
Libby Schaaf	-	٠,			ł	- 1				_
Board Member	1	Х	\dashv					0.	0.	0.
Sedrik Tydus	-	, l		- [۱ ر	_	_
Board Member	 1	Х	-+	\dashv	\dashv		\dashv	0.	0.	0.
	1 1					1]		
							1			······

(A)	(B)	∖ey T	En		oye c)	es,	<u>an</u>	(D)	npensated E (E)	<u>.mpı</u> T	
Name and Title	Average	Pos	tion (•	•	lhat a	ppły)	1	Reportable		(F) Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	compensation fr related organizati (W-2/1099-MISC	ons C)	Estimated amount of other compensation from the organization and related organizations
							L		_		
									·		
										\bot	
										\perp	
										\dashv	
1 b Total							•	140,750.		0.	0
2 Total number of individuals (including those in 1a) w organization ► 0	/ho rece	ived	mo	re t	han	\$10	00,00	00 in reportable co	ompensation fro	om th	
 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in For any individual listed on line 1a, is the sum of rep the organization and related organizations greater the individual Did any person listed on line 1a receive or accrue correndered to the organization? If 'Yes,' complete Schedule 	idividual portable nan \$150	com 0,000	i oper 0? I	nsatı f 'Ye	on a	and om	othe plete	er compensation f e Schedule J for s	rom uch	·	3 X 4 X 5 X
Section B. Independent Contractors											
Complete this table for your five highest compensate compensation from the organization	:a indep	end	ent	cont	ract	ors	ınat		an \$100,000 of		
(A) Name and business address								(B) Description of	Services	<u>C</u>	(C) ompensation
		-					\exists				
						_	\dashv				
2 Total number of independent contractors (including the compensation from the organization ► 0	hose in	1) w	ho i	rece	ived	l mo	ore t	than \$100,000 in	4 4		

		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
5 S	1		Federated campaigns		1a					
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS			Membership dues .	•	1Ь					
A S G			Fundraising events		1c					
FA		d	Related organizations		1 d					Burga Free Street
S.E		e	Government grants (contribut	ions) .	1e					# 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Q S		f	All other contributions, gifts.	orants, and						The same of the same
事業		•	All other contributions, gifts, similar amounts not included	above .	11	1,397,243.				事 (基本)
Ĕ		g	Noncash contribns included in	n Ins 1a-1f:	. \$_	36,936.		The state of the		
	1	h	Total. Add lines 1a-1f				1,397,243			
UE						Business Code	53.11 "独立主动	Control of the second	· 位在外外。2014	的一、《文学》(文学)等。
Ã	2	2 a	Contracts		Γ		559,675	559,675		
Ä			Fee for servic	 е	[83,172			†
JČE		c						1		†
Ě		ď							† · · · ·	†
S E		e						 		†
<u>8</u>	ļ	f	All other program servi	ce revenu		·	 	 		
PROGRAM SERVICE REVENUE	1		Total. Add lines 2a-2f		L	_	642,847	M. Targetta Miles	APPLICATION A	Commence in the
_	t	_	Investment income (inc	·luding da	udondo	untorest and	012/01/	15 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A CALLED A CALLED	CONTRACTOR OF A PROPERTY OF A
		•	other similar amounts)	idding div	iuerius		9,262	.		9,262.
	4		Income from investmen	nt of tax-e	xempt	bond proceeds				
	5		Royalties .				•			
			,	(i) R	eal	(II) Personal	马里 或沙克斯	FE CONTROL OF	. हर्ने अध्यातमार	**************************************
	 6	а	Gross Rents.						小龙 "是"	
			Less: rental expenses			1		化二烷 海外	图 1. 2000 公司	
	l		Rental income or (loss)				Market Control	· 1000000000000000000000000000000000000		
			Net rental income or (lo			-		A CONTRACTOR OF THE PARTY OF TH		1 3 m 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	1			(i) Secu	rities	(ii) Other	STATES OF THE STATES	The state of the state of	FERT LANGE W	F 4 5 17 3 45 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
	7		Gross amount from sales of assets other than inventory	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		(4)				
	•		·							新春香港
	1	b	Less: cost or other basis and sales expenses						11 19 19 19	
	l						1 19:13 20 C	11年 12月 12日		
			Gain or (loss).					Herrist Ch. Such		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	1	a 1	Net gain or (loss) .		•		SARAGE PRINCES OF CONTROL	Property and the control of the cont	100 807 87 80 828 8	1 14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
w	8	a	Gross income from fund	draising e	vents		"大大","大大"			
			(not including. \$	d 1 1				是非心理智能	小 。""************************************	
Ě			of contributions reporte	a on line	IC).					基。江东省,城
OTHER REVEN			See Part IV, line 18	•	a					
Ē			Less: direct expenses	٠	b	·	MA TESTA	Mark Control	2 A - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	15 1 P. W. S. S. S. F. F. E.
	(C I	Net income or (loss) fro	ım tundrai	ising e	vents		A CONTRACTOR CONTRACTOR	162 Tel. 1 2 2 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1	Partition to the control to the control
	9	a (Gross income from gam See Part IV, line 19	ning activi	ties.		萨斯·雷纳			
					8					
			ess: direct expenses		. Ь	L	W. 2- 5 (2- 74)	The second second		
	•	c l	Net income or (loss) fro	m gamıng	g activit	ties 🟲		2-05		
	10	а (Gross sales of inventory	, less retu	urns					
		ć	and allowances		a					
-	ı	b L	ess: cost of goods solo	i .	b	L				Latin E. E.
		<u>c 1</u>	Net income or (loss) fro		finven					
			Miscellaneous Revenu	je	\perp	Business Code	也是这种政治的			经验的现在分词
	11 &	в <u>1</u>	Miscellaneous_				23,816.			23,816.
J	t	b _			L					
	c	ַ ב			[
- [c	d /	All other revenue	_						
	e	: T	otal. Add lines 11a-11d	j		. •	23,816.	是理論和確認	CONTRACTO	在建筑区域
	12	Ŧ	otal Revenue. Add line	s 1h 2a	3 4 5	6d 7d 8c 9c				130
	-	i	Oc, and 11e	, <u></u> y, .	J, ¬, J,	, Ju, 7u, Ju, Ju, Ju,	2,073,168.	642,847.	0.1	33,078.

Part IX: Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	· · · · · · · · · · · · · · · · ·				節節が、虚めでは
5	Compensation of current officers, directors, trustees, and key employees	140,750.	85,875.	31,250.	23,625.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	487,850.	421,474.	22,944.	43,432.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	•		•	
9	Other employee benefits	54,981.	37,276.	13,296.	4,409.
10	Payroll taxes	50,642.	38,481.	7,610.	4,551.
11	Fees for services (non-employees)				
ŧ	Management				<u> </u>
1	Legal	3,093.		3,093.	
•	Accounting .	12,529.		12,529.	
•	d Lobbying				
•	Prof fundraising svcs See Part IV, In 17		ENSY TRANSPORT	The state of the state of	
f	Investment management fees				
ç	Other	877,832.	839,658.	28,995.	9,179.
12	Advertising and promotion	1,811.	728.	965.	118.
13	Office expenses	144,543.	118,286.	22,429.	3,828.
14	Information technology				
15	Royalties				
16	Occupancy	28,175.	17,736.	6,972.	3,467.
17	Travel	25,703.	23,895.	1,475.	<u> </u>
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	5,358.	3,520.	1,150.	688.
23	Insurance	1,795.	495.	1,203.	97.
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25				
-	below.) Event	102,840.	102,840.	CONTRACTOR STATE THE TAXABLE	CTZ CONTACT CONTACT
	Subcontracts	43,425.	43,425.		
	Teacher and intern stipends	40,646.	43,425.		
	Miscellaneous	11,411.	9,327.	2 004	
	Staff development	11,411.	10,127.	2,084. 899.	10
		15, 302.			19.
	All other expenses Total functional expenses. Add lines 1 through 24f	2,059,731.	6,335. 1,800,124.	8,241.	726.
	Joint Costs. Check here ► X if following	2,033,131.	1,000,124.	165,135.	94,472.
	SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
BAA					Form 990 (2008)

2 Savings and temporary cash investments 351, 922, 2 250, 3 Piedges and grains receivable, net 4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L 6 Receivables from other disqualified persons (as defined under section 4958(n)(1)) and persons described in section 4958(n)(3) and persons described in section 4958(n)(4) and persons described in se					(A) Beginning of year		End	(B) of year	
3 Piedges and grants receivable, net 165,000, 3 104,339 4 289,	1	Cash - non-interest-bearing			379,458.	1		505,0	11
Secured mortgages and notes for the state of	2	Savings and temporary cash investments			351,922.	2		250, 9	82
Receivables from current and former officers, directors, trustees, key employees or other related parties. Complete Part II of Schedule L Receivables from other disqualified persons (as defined under section 4958(r)(1)) and persons described in section 4958(c)(3)(8) Complete Part II of Schedule L Notes and loans receivable, net Notes and loans receivable part IV of Schedule D Notes and loans receivable, net Notes and loans receivable net assets Notes and loa	3	Pledges and grants receivable, net			166,000.	3			
and persons described in section 4958(c)(3)(8) Complete Part II of Schedule L 7 Notes and loans recevable, net 8 Inventories for sale or use 9 Prepard expenses and deferred charges 10a Land, buildings, and equipment: cost basis b Less: accumulated depreciation. Complete Part V of Schedule D 10b 9, 030. 6, 620. 10c. 13, 11 Investments – publicly-traded securities 12 Investments – publicly-traded securities 13 Investments – program-related. See Part IV, line 11 13 Investments – program-related. See Part IV, line 11 14 Intanglibe assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrude expenses 18 Grants payable 19 Deferred evenue 10 Tax-exempt bond liabilities 21 Escrow account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, furstees, key employees, highest compensated employees, and disqualified persons. Complete Part IV of Schedule D 25 Total liabilities. Add lines 17 through 25 26 Total liabilities. Add lines 17 through 25 27 through 29 and lines 37 through 25 28 Temporarily restricted net assets 29 Permanently restricted net assets 20 Permanently restricted net assets 20 Permanently restricted net assets 21 Life South or capital surplus, or land, building, and equipment fund 30 Retained earnings, endowment, accumulated income, or other funds 31 Pad-in or capital surplus, or land, building, and equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 31 Pad-in or capital surplus, or land, building, and equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total in et assets frou	4	Accounts receivable, net			104,339.	4		289,9	5 0
and persons described in section 4958(c)(3)(8) Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventiories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost basis b Less: accumulated depreciation. Complete Part IV of Schedule D 11 Investments – publicly-traded securities 12 Investments – publicly-traded securities. See Part IV, line 11 13 Investments – proprair-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow account liability. Complete Part IV of Schedule D. 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualinde parties 22 Unsecured notes and loans payable 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable 25 Other liabilities. Add lines 17 through 25 26 Total flabilities. Add lines 17 through 25 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 31 Pad-in or capital surplus, or land, building, and equipment fund 31 Pad-in or capital surplus, or land, building, and equipment fund 31 Pad-in or capital surplus, or land, building, and equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets for fund balances. 34 Total liabilities and net assets/fund balances. 35 Permanently restricted net assets 36 Capital stock or frust principal, or current funds 37 Total net assets or fund balances. 38 Total net assets or fund balances. 39 Principal or compliation of its financial statements compiled or reviewed by an independent accountant? 40 Were the organization's financial statements compiled or reviewed by an independent accountant? 41 Audif Act and OMB Circuit A-133	5	Receivables from current and former officers, directo or other related parties. Complete Part II of Schedule	rs, trus L	stees, key employees,		5			
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Intangible assets 14	12	Investments - other securities. See Part IV, line 11				12			
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Total assets. Add lines 1 through 15 (must equal line 34)	14	Intangible assets				14			
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SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501 (c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

2008

Employer identification number

2000 [][[]]

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

		nools Foundation						43-2	01463	0		
			s (All organizations				s part.) (see	ınstruc	tions)		
			use it is: (Please check of									
1	A church, convention of churches or association of churches described in section 170(b)(1)(A)(i).											
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)											
3	A hospital or coop	hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.)										
4												
	name, city, and s											
5	An organization on 170(b)(1)(A)(iv).	perated for the benefit (Complete Part II.)	of a college or universit	y owner	d or ope	rated by	a gove	rnmenta	al unit de	escribed in	sectio	'n
6		or local government or	governmental unit descr	ibed in :	section	1 70(b) (1	χΑχν).					
	In section 170(b)	(1)(A)(vi). (Complete F	-			overnme	ental un	it or froi	m the ge	neral public	c desc	ribed
8			170(b)(1)(A)(vi). (Comple		-							
9	from activities relat	led to its exempt function	more than 33-1/3 % of its ns — subject to certain exc ess taxable income (less complete Part III.)	entions	and (2)	no more	than 33	-1/3% ი	f its siinn	ort from aro	cc	after
10	An organization o	rganized and operated	exclusively to test for page	ublic sat	fety. Se	sectio	n 509 (a)	(4) . (se	e instruc	ctions)		
11	An organization o more publicly sup describes the type	rganized and operated ported organizations (of supporting organi	l exclusively for the bene described in section 509(zation and complete line	efit of, to (a)(1) or is 11e th	perform section rough 1	n the fui 509(a)(1h.	nctions 2). See	of or ca	arry out t	he nurnose	s of o	ne or x that
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e	By checking this than foundation m 509(a)(2).	oox, I certify that the on nanagers and other that	rganization is not control in one or more publicly s	lled dire	ctly or ir d organ	ndirectly izations	by one describ	or more ed in se	e disquatection 50	ified perso 9(a)(1) or s	ns oth ection	ner
f		received a written de	termination from the IRS	that is	a Type I	, Type I	or Typ	e III sur	porting	organizatio	n,	
9	Since August 17,	2006, has the organiza	ation accepted any gift of	or contrib	oution fr	om any	of the f	ollowing	persons	s?		
	(i) a person wh	o directly or indirectly overning body of the s	controls, either alone or upported organization?.	togethe	r with pe	ersons d	escribe	d ın (ıı)	and (III)	11 g (i)	Yes	No
	-	mber of a person desc	•	_					•	11 g (ii)		
	• • •	· ·	described in (i) or (ii) a	bove?.						11g (iii)		
h	• •	• •	***		การบออด	rts	• • •		•			
	Provide the following information about the organizations the organization supports (i) Name of Supported Organization Organization Organization (ii) EIN (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (iv) Is the organization in col (i) Isted in your governing document? (v) Did you notify the organization in col (i) organization in the organization in the organization in the organization in the organization in col (i) organization in the organization in col (ii) organization in the organization in col (iii) Isted in your governing document?						(vii) Amount of Support					
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Schedule A (Form 990 or 990·EZ) 2008 Oakland Small Schools Foundation 43-2014630 Page 2 Partill 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.) Section A. Public Support Calendar year (or fiscal year (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total beginning in) Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.'). 105,367 394,560 795,862. ,830,369. ,397,243 4,523,401. Tax revenues levied for the 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. Total. Add lines 1-3 105,367 394,560 795 862 830,369 397 243 4,523,401 54. C. The portion of total contributions by each person (other than a governmental Ħ unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 1,198,249. Public support. Subtract line 5 from line 4 3,325,152. Section B. Total Support Calendar year (or fiscal year (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total beginning in) 7 Amounts from line 4 105,367 394,560 795,862 830,369 397,243 4,523,401. Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 212 1,290 3,233 9,459 9,262 similar sources 23,456. Net income form unrelated business activities, whether or not the business is regularly carried on 0. Other income. Do not include gain or loss form the sale of capital assets (Explain in Part IV.) See Part. IV 254 23,713 23,816 47,783. 11 Total support. Add lines 7 through 10 ,594,640. 949,502. 12 Gross receipts from related activities, etc. (see instructions) 12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ | Section C. Computation of Public Support Percentage 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f) 72.4% 64.9% 15 Public support percentage for 2007 Schedule A. Part IV-A. line 26f 15 16a 33-1/3 support test - 2008. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box b 33-1/3 support test - 2007. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. 17 a 10%-facts-and-circumstances test — 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. b 10%-facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.

Private foundation. If the organization did not check a box on line, 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2008 Oakland Small Schools Foundation 43-2014630 Page 3 Partelli Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal yr beginning in)▶ (a) 2004 **(b)** 2005 (c) 2006(d) 2007 (e) 2008 (f) Total Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants') Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1-5 7a Amounts included on lines 1. 2, 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 c Add lines 7a and 7b Public support (Subtract line 7c from line 6.) Section B. Total Support Calendar year (or fiscal yr beginning in) (a) 2004 **(b)** 2005 (c) 2006(d) 2007 (e) 2008 (f) Total 9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, rovalties and income form similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 13 Total support. (edd ins 9, 10c, 11, end 12) 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 15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)). 15 % 16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g 16 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))

18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h

19 a 33-1/3 support tests – 2008. 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 – 2007.** If the organization did not check a box on line 14 or 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 A	(Form 99	0 or 990-l	EZ) 2008	Oakland	Small	Schools	Founda	ation	43-2014630	Page 4
Part IV	Supple Part II,	mental I line 17a	I nforma t or 17b;	t ion. Comp or Part III,	lete this line 12.	part to pro	ovide the	explanat additiona	ion required by Part II, line 10 Il information. (see instruction	D; ns)
•	,									
			. .							
			. .							
								-		
										
	- -									
	-									
										

TEEA0404L 10/07/08

Schedule A (Form 990 or 990-EZ) 2008

BAA

2008	Schedul	e A, Part I'	V - Suppler	mental Info	rmation	Page			
Client OSSF07	Oakland Small Schools Foundation								
3/30/10						03:02			
Part II, Line 10 - Oth	er Income								
Nature and Source	:e	2008	2007	2006	2005	2004			
Miscellaneous	Total <u></u>	23,816. 23,816.	23,713. \$ 23,713.	254. \$ 254.	\$ 0. \$	0.			
									

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990. To be completed by organizations that answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. Employer Identification number

Oa}	cland Small Schools Foundation	ı <u></u>	43-2014630
Pai	tili Organizations Maintaining Dono	r Advised Funds or Other Similar Fur	nds or Accounts Complete if
	the organization answered 'Yes' t	o Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year .		(2)
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 dor funds are the organization's property, subject		onor advised Yes No
6	Did the organization inform all grantees, dono used only for charitable purposes and not for	·	ds may be
n::	impermissible private benefit??	oto if the expenientian enguerod West	Yes No
	t্যার Conservation Easements Comple		to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by		
	Preservation of land for public use (e g , r	- H	of an historically important land area
	Protection of natural habitat	Preservation	of certified historic structure
_	Preservation of open space		
2	Complete lines 2a-2d if the organization held of the tax year.	a qualified conservation contribution in the form	n of a conservation easement on the last day
			Held at the End of the Year
а	Total number of conservation easements		2 a
ь	Total acreage restricted by conservation easer	ments	2b
	Number of conservation easements on a certification		2c
	Number of conservation easements included in	` ,	2d
	Number of conservation easements modified,		
	year ►	were entree, reference, extragalaries, extremine	tion by the organization during the taxable
4	Number of states where property subject to co	inservation easement is located >	_
5	Does the organization have a written policy reenforcement of the conservation easement it		olations, and Yes No
6	Staff or volunteer hours devoted to monitoring	, inspecting, and enforcing easements during t	he year ▶
7	Amount of expenses incurred in monitoring, in	specting, and enforcing easements during the	year ►\$
8	Does each conservation easement reported or $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	n line 2(d) above satisfy the requirements of se	ection Yes No
9	In Part XIV, describe how the organization reports include, if applicable, the text of the footnote t conservation easements.	conservation easements in its revenue and exper o the organization's financial statements that o	nse statement, and balance sheet, and describes the organization's accounting for
Päř	Conservation easements. Conservation easements. Conservation easements.	ctions of Art Historical Treasures or	Other Similar Assets
	Complete if the organization answ	wered 'Yes' to Form 990, Part IV, line	8.
1a	If the organization elected, as permitted under treasures, or other similar assets held for publi the text of the footnote to its financial stateme	ic exhibition, education, or research in furthera	ent and balance sheet works of art, historical ince of public service, provide, in Part XIV,
	If the organization elected, as permitted under treasures, or other similar assets held for publiamounts relating to these items:	SFAS 116, not to report in its revenue statemic exhibition, education, or research in furthera	ent and balance sheet works of art, historical ince of public service, provide the following
	(i) Revenues included in Form 990, Part VIII,	line 1	> \$
	(ii) Assets included in Form 990, Part X		> \$
	If the organization received or held works of ar amounts required to be reported under SFAS 1		or financial gain, provide the following
а	Revenues included in Form 990, Part VIII, line	1	► \$
b	Assets included in Form 990, Part X		- \$

Schedule D (Form 990) 2008 Oakland S					14630	Page 2
Partill® Organizations Maintaining	Collection	s of Art, Histo	rical Treasures, o	or Other Similar As	ssets (con	tinued)
3 Using the organization's accession and that apply): a Public exhibition	other records	_	e following that are a	_	ollection item	is (check ali
b Scholarly research		e Other	or exertating programs	•		
c Preservation for future generations						
4 Provide a description of the organization Part XIV.	n's collections	s and explain how	v they further the orga	inization's exempt purp	ose in	
5 During the year, did the organization so assets to be sold to raise funds rather t	olicit or receive than to be ma	e donations of art	l, historical treasures, of the organization's c	or other similar ollection?	Yes	No
Part IV Trust, Escrow and Custodi IV, line 9, or reported an ar	al Arranger mount on Fo	ments Comple orm 990, Part	ete if organization X, line 21.	answered 'Yes' to	Form 990	, Part
1a Is the organization an agent, trustee, cu included on Form 990, Part X?				ther assets not	Yes	No
b If 'Yes,' explain the arrangement in Par	t XIV and con	nplete the followi	ng table:			
					Amount	
c Beginning balance .	•			1c	·	
d Additions during the year		-	•	1 d		
e Distributions during the year .				1 e		
f Ending balance .		• •		11		
2a Did the organization include an amount	on Form 990,	Part X line 21?		<u> </u>	Yes	No
		,	•		1 € 5	1 1110
b If 'Yes,' explain the arrangement in Par	t XIV.	, . 6.1 %, 21.			☐ 163	
b If 'Yes,' explain the arrangement in Part Mr. Endowment Funds Complete				90, Part IV, line 10		
Part V Endowment Funds Complete		ation answere	ed 'Yes' to Form 9		0.	years back
Part V Endowment Funds Complete	e if organiz		ed 'Yes' to Form 9		0.	
Part V Endowment Funds Complete	e if organiz	ation answere	ed 'Yes' to Form 9 (c) Two years ba		0.	
Part V/ Endowment Funds Complete (a) 1 a Beginning of year balance	e if organiz	ation answere	ed 'Yes' to Form 9 (c) Two years ba		0.	
Part V Endowment Funds Complete (a) 1 a Beginning of year balance b Contributions	e if organiz	ation answere	ed 'Yes' to Form 9 (c) Two years ba	ck (d) Three years bac	0.	
Part V Endowment Funds Complete (a) 1 a Beginning of year balance b Contributions c Investment earnings or losses	e if organiz	ation answere	ed 'Yes' to Form 9 (c) Two years ba	ck (d) Three years bac	0.	
Part V Endowment Funds Complete (a) 1 a Beginning of year balance b Contributions c Investment earnings or losses d Grants or scholarships e Other expenditures for facilities	e if organiz	ation answere	ed 'Yes' to Form 9 (c) Two years ba	ck (d) Three years bac	0.	
Part V Endowment Funds Complete (a) 1 a Beginning of year balance b Contributions c Investment earnings or losses d Grants or scholarships e Other expenditures for facilities and programs	e if organiz	ation answere	ed 'Yes' to Form 9 (c) Two years ba	ck (d) Three years bac	0.	
Part V Endowment Funds Complete (a) 1 a Beginning of year balance b Contributions c Investment earnings or losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses	e if organiz Current year	ation answere (b) Prior year	ed 'Yes' to Form 9 (c) Two years ba	ck (d) Three years bac	0.	
Part V Endowment Funds Complete (a) 1 a Beginning of year balance b Contributions c Investment earnings or losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance	e if organiz Current year	ation answere (b) Prior year	ed 'Yes' to Form 9 (c) Two years ba	ck (d) Three years bac	0.	
Part V Endowment Funds Complete (a) 1 a Beginning of year balance b Contributions c Investment earnings or 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	e if organiz Current year	(b) Prior year	ed 'Yes' to Form 9 (c) Two years ba	ck (d) Three years bac	0.	
Part V Endowment Funds Complete (a) 1 a Beginning of year balance b Contributions c Investment earnings or 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 a Board designated or quasi-endowment	e if organiz Current year	(b) Prior year	ed 'Yes' to Form 9 (c) Two years ba	ck (d) Three years bac	0.	
Part V Endowment Funds Complete (a) 1 a Beginning of year balance b Contributions c Investment earnings or 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 a Board designated or quasi-endowment b Permanent endowment	e if organiz Current year	(b) Prior year (b) Prior year (ance held as:	ed 'Yes' to Form 9 (c) Two years ba	ck (d) Three years bac	O. k (e) Four	years back
Part V Endowment Funds Complete (a) 1 a Beginning of year balance b Contributions c Investment earnings or 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 a Board designated or quasi-endowment b Permanent endowment c Term endowment c Term endowment 3 a Are there endowment funds not in the porganization by:	e if organiz Current year	(b) Prior year (b) Prior year (ance held as:	ed 'Yes' to Form 9 (c) Two years ba	ck (d) Three years bac	O. k (e) Four	years back
Part V Endowment Funds Complete (a) 1 a Beginning of year balance b Contributions c Investment earnings or 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 a Board designated or quasi-endowment b Permanent endowment c Term endowment c Term endowment c Term endowment c Term endowment s 3 a Are there endowment funds not in the porganization by: (i) unrelated organizations	e if organiz Current year	(b) Prior year (b) Prior year ance held as:	ed 'Yes' to Form 9 (c) Two years ba	ck (d) Three years bac). k (e) Four Ye 3a(i)	years back
Part V Endowment Funds Complete (a) 1 a Beginning of year balance b Contributions c Investment earnings or 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 a Board designated or quasi-endowment b Permanent endowment c Term endowment	e if organiz Current year	(b) Prior year (b) Prior year ance held as:	(c) Two years ba	ck (d) Three years bac). k (e) Four 3a(i) 3a(i)	years back
Part V Endowment Funds Complete (a) 1 a Beginning of year balance b Contributions c Investment earnings or 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 a Board designated or quasi-endowment b Permanent endowment c Term endowment c Term endowment c Term endowme	e year end bal	(b) Prior year (b) Prior year ance held as:	(c) Two years ba	ck (d) Three years bac). k (e) Four Ye 3a(i)	years back
Part V Endowment Funds Complete (a) 1 a Beginning of year balance b Contributions c Investment earnings or losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance Provide the estimated percentage of the a Board designated or quasi-endowment b Permanent endowment c Term endowment c Term endowment c Term endowment in the permanent organization by: (i) unrelated organizations (ii) related organizations b If 'Yes' to 3a(ii), are the related organization Describe in Part XIV the intended uses of	e if organiz Current year e year end bal e sossession of ations listed a of the organiz	the organization of strength o	(c) Two years ba (c) Two years ba that are held and adm hedule R? nt funds.	ck (d) Three years bac). k (e) Four 3a(i) 3a(i)	years back
Part V Endowment Funds Complete (a) 1 a Beginning of year balance b Contributions c Investment earnings or 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 a Board designated or quasi-endowment b Permanent endowment c Term endowment c Term endowment c Term endowme	e year end bal e year end bal sossession of the organiz gs, and Eq (a) Cos	the organization of strength o	that are held and adminedule R? nt funds. Form 990, Part X (b) Cost or other	ck (d) Three years bac). k (e) Four 3a(i) 3a(i)	years back
Part V Endowment Funds Complete (a) 1 a Beginning of year balance b Contributions c Investment earnings or 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 a Board designated or quasi-endowment b Permanent endowment c Term endowment c Term endowment c Term endowment b Permanent endowment funds not in the porganization by: (i) unrelated organizations (ii) related organizations b If 'Yes' to 3a(ii), are the related organization by: 4 Describe in Part XIV the intended uses of Part VI; Investments—Land, Buildin	e year end bal e year end bal sossession of the organiz gs, and Eq (a) Cos	the organization is required on Sciation's endowme uipment. See tor other basis	that are held and adminedule R?	ck (d) Three years bac). k (e) Four Ye 3a(i) 3b	years back

c Leasehold improvements 9,030 13,034. 22,064 **d** Equipment e Other

Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) BAA

13,034. Schedule D (Form 990) 2008

In Part XIV, 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.

Total. Column (b) Total (should equal Form 990, Part X, col. (B) line 25)

Schedule D (Form 990) 2008 Oakland Small Schools Four	ndation 4	3-2014630	Page 4
Part XI Reconciliation of Change in Net Assets from Fo	rm 990 to Financial Statements		
1 Total revenue (Form 990, Part VIII, column (A), line 12)		2,0	73,168.
2 Total expenses (Form 990, Part IX, column (A), line 25)			59,731.
3 Excess or (deficit) for the year. Subtract line 2 from line 1			13,437.
4 Net unrealized gains (losses) on investments			
5 Donated services and use of facilities			3,092.
6 Investment expenses			<u> </u>
7 Prior period adjustments			
8 Other (Describe in Part XIV)			
9 Total adjustments (net) Add lines 4-8		· · ·	3,092.
10 Excess or (deficit) for the year per financial statements. Combine I	ines 3 and 9		16,529.
Part XIII Reconciliation of Revenue per Audited Financia			,
1 Total revenue, gains, and other support per audited financial stater			76,260.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		(3,505	
a Net unrealized gains on investments .	. 2a		
b Donated services and use of facilities	2b 3,092		
c Recoveries of prior year grants	2c		
d Other (Describe in Part XIV) .	2d		
e Add lines 2a through 2d	. [20]	2e	3,092.
3 Subtract line 2e from line 1			73,168.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1	. 11	3 2,0	13,100.
a Investments expenses not included on Form 990, Part VIII, line 7b		2 100	
b Other (Describe in Part XIV)	4a 4b		
c Add lines 4a and 4b	. [40]	- 	
5 Total revenue. Add lines 3 and 4c. (This should equal Form 990, P	Nort I. Imp. 12.)	4c 2.07	72 160
Part XIII Reconciliation of Expenses per Audited Financi			73,168.
Total expenses and losses per audited financial statements	ai Statements With Expenses pe		52,823.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25.		2,00	02,023.
a Donated services and use of facilities	2a 3,092		
b Prior year adjustments.	2b 3,092	-	
c Losses reported on Form 990, Part IX, line 25.	2c	- .[3]	
•	2d		
d Other (Describe in Part XIV) e Add lines 2a through 2d.		124.4	3,092.
3 Subtract line 2e from line 1	•	2e 3 2,05	59,731.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1	3 2,00	13, 131.
a Investments expenses not included on Form 990, Part VIII, line 7b	4.0	34 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
b Other (Describe in Part XIV)	. 4a		
c Add lines 4a and 4b	_ 4b	132	
5 Total expenses. Add lines 3 and 4c (This should equal Form 990, F	 Part I. lino 19 \	5 2.05	9,731.
Part XIV Supplemental Information	art i, ime 16.)	3 2,00	13, 131.
Complete this part to provide the descriptions required for Part II, lines 3 line 4, Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, line	, 5, and 9; Part III, lines 1a and 4, Part IV es 2d and 4h	/, lines 1b and 2b, F	Part V,
THE 4, I die X, I die XI, mic o, I die XII, mics 2d die 40, die I die XIII, mic	,5 25 and 45.		
DAA		Cabadala B. C	000) 0000
BAA TEEA3304L	12/23/08	Schedule D (Form	99 0) 2008 -

Schedule D (Form 990) 2008	Page 5
Schedule D (Form 990) 2008 Part XIV: Supplemental Information (continued)	

SCHEDULE L (Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047 2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.
► To be completed by organizations that answered
'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Name of the organization	_			,		Er	nployer	identific	ation nu	ımber		
Oakland Small Schools Foundat	ion					4	3- <u>20</u>	1463	0			
Part Excess Benefit Transaction To be completed by organizations the	s (sect	tion 50 ered 'Ye	1 (c)(3) s' on Forr	and section n 990, Part IV,	501(c) line 25a	(4) organiz or 25b, or For	ation m 990	s only EZ, Pa	y). irt V, I	ine 40	b	
1 (a) Name of disqualified person									(c) Corrected			
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			_		(b) Descript						Yes	No
												
												<u> </u>
2 Enter the amount of tax imposed on the of section 4958.	organiza	tion mai	nagers or	disqualified p	ersons di	uring the year	unde	→ \$			<u>!</u>	l
3 Enter the amount of tax, if any, on line 2,				e organization	<u> </u>			► \$		-		
Raitiिक्षि Loans to and/or From Intere To be completed by organiza Part V, line 38a.	ations	that an	swered	'Yes' on Fo	orm 990), Part IV, I	ine 2	6 or F	orm	990-	EZ,	
(a) Name of interested person and purpose	(b) Loan the orga	to or from inization?		e) Original cipal amount	(d) t	Balance due (e) In defaul		default?	t? (f) Approved by board or committee?		agreement?	
	То	From		·			Yes	No	Yes	No	Yes	No
						· -						
	-		 		-		+	 				
. 							╁					
• • • • • • • • • • • • • • • • • • • •			 				\dagger				,	
				<u> </u>								
Total				. ▶\$					1	£	修品	流游
Partill Grants or Assistance Benefi To be completed by organiza	tting I tions t	nterest hat an	ted Pers	sons. 'Yes' on Fo	rm 990	, Part IV, Ii	ine 27	7.				
(a) Name of interested person	(b) Relation	ship between the organ	n interested person nization	and	(c) A	mount of	grant or	type of	assista	nce	

						ļ						
·						-						
Part/IV// Business Transactions Invol	ving l itions t	nterest hat an	ted Pers	sons. 'Yes' on Fo	rm 990	, Part IV, II	ne 28	Ba, 28	Bb, or	28c		
(a) Name of interested person	interes	lationship i ted person organizatio	and the	(c) Amour transaction		(d) Des	cription (of transa	ction		(e) Sharin organization	
Denda Vlair	1.1.2 E -	- F D			- 700	To a to a					Yes	No
Amanda Klein	wile	of Bo	pard	24	1, 192.	Instruct	. cc	nsul	tin	<u>a</u>		<u>X</u>
				<u> </u>	-					\dashv		
										一十		
											一	
BAA For Privacy Act and Paperwork Reduction	Act No	tice, sec	e the Inst	ructions for F	orm 990.	Sche	edule L	. (Forn	n 990	or 990	0-EZ)	2008

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2008

Open to Public

Employer identification number

43-2014630

Department of the Treasury Internal Revenue Service Name of the organization

Oakland Small Schools Foundation

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Form 990, Part III, Line 4a - Program Service Accomplishments
OSSF served 40 Oakland public schools with communications, operations, and resources
development_services that have helped the schools build their capacity. Services
include_back-office_finance_management,_fiscal_sponsorship,_data_management_and
leadership coaching. OSSF's work impacts 14,000 low- and very low-income students.
OSSF secured \$350,000 from over 800 individual donors and another \$1 million from 20
foundations for its network schools to support needs not funded by traditional
government budgets. OSSF raised an additional \$200,000 in government funds to support
school_programs
OSSF developed four collaborative programs across 25 schools and 9,000 students in
family engagement and resource centers, after-school interventions, gardens and
nutrition, and high school internships.
OSSF schools outpaced the district overall on the California Standardized Test
results. OSSF grew from 5 staff to 10 from 2007-08 to 2008-09 to serve schools
better. The operations budget increased by 30%.
OSSF measures school capacity by a performance evaluation tool called the Rubrics of
Excellence. Those schools who have increasingly progressed on the Rubrics have also
been showing results with students.
OSSF employs a unique program monitoring system for measuring progress and outcomes
for the grants-funded programs. These methods ensure high standards for student
achievement and accountability to funders.

Schedule O (Form 990) 2008	Page 2
Name of the organization Oakland Small Schools Foundation	Employer Identification number 43-2014630
·	143-2014030
Form 990, Part III, Line 4a - Program Service Accomplishments (continue	<u>d)</u>
OSSF hosted a free one-day Summer Institute. The Institute	e trains school leaders in
fundraising, marketing, communications, staffing and organ	nizational development,
accountability, data and outcomes development, and collaboration	pration and partnership
development. 22 schools participated in 2009.	
Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, Di	irectors, Etc.
Jonathan Klein (OSSF Board President) is employed by Roger	rs Family Foundation (for
which Brian Rogers is the Executive Director).	
Form 990, Part VI, Line 10 - Form 990 Review Process	
No review was or will be conducted.	
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available	able
Documents are available in OSSF office for examination dur	ring business hours.

Form **8868** (Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury Internal Revenue Service

File a separate application for each return.

IIILEITIAI NEVERIUS	SOLIVICE			f
If you are	e filing for an Automatic 3-Month	Extension, complete only Part I and chec	k this box	- X
-	-	omatic) 3-Month Extension, complete only		
•	•	dy been granted an automatic 3-month ex	- · · · -	•
		on of Time. Only submit original (
A corporation	n required to file Form 990-T and	requesting an automatic 6-month extension	on – check this box and	complete Part I only.
All other cor		partnerships, REMICS, and trusts must u	use Form 7004 to reques	t an extension of time to file
the additions	al (not automatic) 3.month extens	ectronically file Form 8868 if you want a 3 on required to file Form 990-T). However, yon or (2) you file Forms 990-BL, 6069, or or completed and signed page 2 (Part II) of file for Charities & Nonprofits.	8870 aroun returns or a	composite or consolidated
	Name of Exempt Organization	 		Employer identification number
Type or				
print	Oakland Small School	Foundation		43-2014630
File by the due date for	Number, street, and room or suite number			
filing your	P.O. Box 20238			
return See instructions	City, town or post office, state, and ZIP cod	For a foreign address, see instructions		
	Oakland, CA 94620			
Check type	of return to be filed (file a separat	e application for each return):		
X Form 99	` <u>-</u>	Form 990-T (corporation)	Form 472	20
Form 99	<u> </u>	Form 990-T (section 401(a) or 408(a) tru	—	
Form 99		•	Form 606	==
Form 990	_	Form 990-T (trust other than above) Form 1041-A	Form 887	· -
Telephone If the org If this is to check this the extension	for a Group Return, enter the orga s box ▶ □ . If it is for part of the sion will cover.	FAX No. ► 510-879 or place of business in the United States, nization's four digit Group Exemption Number group, check this box ► and attack	check this box mber (GEN) If h a list with the names a	
until _		s for a corporation required to file Form 9 he exempt organization return for the org	=	
_	calendar year 20 or			
► X	tax year beginning 7/01	, 20 <u>08</u> , and ending <u>6/30</u>	20 09	
	tax year beginning _ 1/01	, 20 _06 _ , and ending 0/30	20 _09	
2 If this to	ax year is for less than 12 months	, check reason: Initial return	Final return C	hange in accounting period
3a If this a nonrefu	pplication is for Form 990-BL, 990 indable credits. See instructions	-PF, 990-T, 4720, or 6069, enter the tenta	ative tax, less any	3a \$ 0.
b If this a made. I	pplication is for Form 990-PF or 9 nclude any prior year overpayme	90-T, enter any refundable credits and esi t allowed as a credit	timated tax payments	3b\$ 0.
deposit	e Due. Subtract line 3b from line 3 with FTD coupon or, if required, tructions	a. Include your payment with this form, or y using EFTPS (Electronic Federal Tax Pa	r, if required, ayment System)	3c\$ 0.
Caution. If you		fund withdrawal with this Form 8868, see	Form 8453-EO and Form	n 8879-EO for
BAA For Priv	vacy Act and Paperwork Reduction	n Act Notice, see instructions.		Form 8868 (Rev. 4-2009)

Form 8868	3 (Rev 4-2009)		Page
• If you	are filing for an Additional (Not Automatic) 3-Month Extension, complete on	ly Part II and check this	box ► X
Note. Only	complete Part II if you have already been granted an automatic 3-month ext	tension on a previously	filed Form 8868
◆ If you	are filing for an Automatic 3-Month Extension, complete only Part I (on page	<u> </u>	
Part II	Additional (Not Automatic) 3-Month Extension of Time. Only	file the original (no	copies needed).
	Name of Exempt Organization	Em	ployer identification number
T	1		
Type or print	Oakland Small Schools Foundation	43	3-2014630
•	Number, street, and room or suite number. If a P.O. box, see instructions	For	IRS use only
File by the extended	Crosby & Kaneda, CPAs		
due date for filing the	1611 Telegraph Ave Ste 318	· 通過一個	
return See	City, town or post office, state, and ZIP code. For a foreign address, see instructions		看其他,對是國際的特別
man octions	Oakland, CA 94612-2151	全套是是是新工	
Check type	e of return to be filed (File a separate application for each return)	75.7 23.43. 23.00.2 21.	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
□Form 9		Form 1041-A	☐ Form 6069
Form 9		Form 4720	Form 8870
X Form 9		Form 5227	1 0/III 8870
	not complete Part II if you were not already granted an automatic 3-month e		ly filed Form 9959
	oks are in care of The Organization	extension on a previous	ly med rorm 8888.
		1115	
-			
	organization does not have an office or place of business in the United States		16.45 6 45 -
	s for a Group Return, enter the organization's four digit Group Exemption Nu	· · · · · · · · · · · · · · · · · · ·	. If this is for the
		and attach a list with the	ne names and EINs of all
	he extension is for.	10	
	uest an additional 3-month extension of time until $\frac{5}{15}$, 20		20 00 00
5 For c	alendar year, or other tax year beginning _ 7/01, 20	08, and ending 6/	30 20_09
	s tax year is for less than 12 months, check reason. Initial return		
	in detail why you need the extension		
gat	her information necessary to file a complete and	accurate tax 1	ceturn.
			
	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tent	ative tax, less any	8a \$
	efundable credits. See instructions		
paym	application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable of ents made. Include any prior year overpayment allowed as a credit and any a Form 8868.	amount paid previously	*
c Balan with F	ice Due. Subtract line 8b from line 8a. Include your payment with this form, of TD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment	or, if required, deposit System). See instrs	8c \$
	Signature and Verification	n	
Under penalties	s of perjury, I declare that I have examined this form, including accompanying schedules and statement mplete, and that I am authorized to prepare this form	s, and to the best of my knowled	dge and belief, it is true,
Signature ►	Crasky + Kaueda Title - CPA		Date > 2.10.10

FIFZ0502L 03/11/09

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Form 8868 (Rev 4-2009)