## Form 990

Department of the Treasury

**Return of Organization Exempt From Income Tax** 

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

2012

OMB No 1545-0047

Open to Public

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

		2012!		- 10 01 2012	20 2012			Inspection
			C Name of organization	g 10-01-2012 , 2012, and ending 09-	30-2013	D Empl	over ide	ntification number
		applicable	Save The Bay			D Empi	oyer ide	ntilication number
_	dress cl	-	Doing Business As			94-6	07842	0
l Na	me cha	ange						
Inr	ial retu	ım		all is not delivered to street address) Room/s	suite	E Telepi	none num	ıber
<b>Г</b> Те	mınate	ed	1330 Broadway			· ·		
┌ Am	ended	return	City or town, state or country, and 2	MP + 4		(510	)463-6	5850
┌ <sub>Ap</sub>	olicatio	n pending	Oakland, CA 94612			<b>G</b> Gross	receints	\$ 3,862,428
			<b>F</b> Name and address of prir	icipal officer	H(a)	Is this a grou		
			David Lewis			affiliates?	preturn	⊤Yes <b>√</b> No
			1330 Broadway 1800 Oakland, CA 94612					
			oukland, CA 57012					ıded?
Ta	x-exen	npt status	▼ 501(c)(3)	insert no )		ir "No," attac	n a list	(see instructions)
	abait	- <b>-</b>	w savesfbay org		H(c)	Group exemp	tion nu	mber ►
					<u></u>			
			Corporation Trust Associatio	n	<b>L</b> Yea	r of formation 1	964 <b>M</b>	State of legal domicile CA
Pa	rt I	Sum	mary					
Activities & Governance		Save Th		Francisco Bay for people and wildlife r qualify, and building an effective coi				preventing
₹	2	Check th	nis box দ if the organization dis	scontinued its operations or disposed	of more t	han 25% of it	s net as	ssets
ŭ			,					
<b>න්</b> ග්	3	Number	of voting members of the govern	ing body (Part VI, line 1a)			3	12
Ë	4	Number	of independent voting members	of the governing body (Part VI, line 1	o) <b></b>		4	12
춫	I			calendar year 2012 (Part V, line 2a)			5	4.4
ď	I		·	ecessary)			6	6,500
				art VIII, column (C), line 12			7a	С
	Ь	Net unre	lated business taxable income fi	rom Form 990-T, line 34	<u></u>		7b	
						Prior Year		Current Year
a)	8			ne 1h)		3,288		3,724,908
en.	9	_		ne 2g)			200	100
Revenue	10		· · ·	(A), lines 3, 4, and 7d)	·		,607	16,741
_	11			lines 5, 6d, 8c, 9c, 10c, and 11e) (must equal Part VIII, column (A), li		-12	,342	87,097
	12					3,295	,533	3,828,846
	13			IX, column (A), lines 1-3)		4	,500	4,500
	14	Benefi	ts paid to or for members (Part I	X, column (A), line 4)				0
	15	Saları	es, other compensation, employe	e benefits (Part IX, column (A), lines				
8		5-10)				2,020		2,407,688
Expenses	16a			column (A), line 11e)	• —	76	,697	215,272
ठ	b		ındraısıng expenses (Part IX, column (D					
	17			ınes 11a–11d, 11f–24e)		1,247		1,323,979
	18			st equal Part IX, column (A), line 25)		3,349		3,951,439
	19	Reven	ue less expenses Subtract line	18 from line 12			,732	-122,593
Net Assets or Fund Balances					Beg	inning of Curr Year	ent	<b>End of Year</b>
10 Kg	20	Total	assets (Part X, line 16)			3,217	,745	3,185,229
4.A	21					-	,740	319,204
žž	22		ssets or fund balances Subtract			2,993		2,866,025
Pa	ŧΠ		ature Block					, ,
my k	nowle arer ha	dge and as any ki	belief, it is true, correct, and comnowledge  ** ature of officer d Lewis Executive Director	amined this return, including accompanded in the property of t				
		Туре	or print name and title					
			Print/Type preparer's name Douglas W Regalia	Preparer's signature	Date	Check If	PTIN P0018	6280
Pai	d	_	Firm's name 🕩 Regalia & Associates C			self-employed	1 500180	COCO
Pre	pare		5 harris - P. Regulia & Associates C			I IIII S LIIV P		
Hec	On	Jan E	rırm's address 🟲 103 Town Country Dr S	ite K		Phone no (92	5) 314-0	390

Danville, CA 94526

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

✓ Yes ☐ No

Part		Statement of Progra Check if Schedule O conta		-		Part III .		
1		describe the organization's	•	, 4				
We er		nore than 40,000 supporter ducating thousands of stud	•		teers to prote	ct the Bay, a	nd inspire the next generation	on of environmental
2	Did the	e organization undertake an or Form 990 or 990-EZ?	y sıgnıfıcant • • • •	program se	ervices during • • •	the year whi	ch were not listed on	┌ Yes ┌ No
	If "Yes	," describe these new servi	ces on Sched	dule O				
3		e organization cease conduces?						「Yes ▼ No
	If "Yes	," describe these changes	on Schedule (	)				
4	expens		501(c)(4) or	ganızatıon	s are required	to report the	largest program services, as amount of grants and alloca	
4a	(Code	) (Expens	ses \$	1,088,828	ıncludıng grant	s of \$	) (Revenue \$	)
	missior informa presend	n, through mail and email commu ation about the Bay on our enhar ce in the regional news media rei	inications, social iced web site, ai mains high, with	networking, nd we introdi i significant p	educational ever uced many individ rint, radio and tel	ts and volunted uals and busing evision coverag	ged the general public and our me er opportunities Thousands of peo esses to the Bay through our expa je of our work on many issues, an n 50,000 members and supporters	ple accessed educational nded calendar of events Oui d on our education and
4b	(Code	) (Expens	ses \$	1,080,777	ıncludıng grant	s of \$	4,500 ) (Revenue \$	)
	funding strong of shor in Hayv	g for wetland restoration. We wor science-based program, enlisting reline parcels to improve vital we	ked to re-estable volunteers to re land habitat for	lish 100,000 a e-vegetate ke endangered	acres of restored by sites Our Com species and to ac	tidal marsh hat munity-based l apt to climate	isco Bay Restoration Authority, a re bitat around San Francisco Bay thro Restoration Program assists federa change, including ecotone transitio nts engage in hands-on wetland re	ough policy measures and a il, state and local landowners in areas at former salt ponds
	(Code	) (Expens	ses \$	363,541	ıncludıng grant	s of \$	) (Revenue \$	)
	Bay Pro adopt p of the I entering restora	otection- Save The Bays Clean Ba pollution prevention best practice: largest components of trash ente g the Bay through storm water S	y Project helped s We assisted a ring the bay thro ave The Bay pro and on diked his	d to reduce B growing nun bugh runoff ovided inform storic Bayland	lay pollution from nber of municipal We are monitorin ation to local and s in Newark We	cities and neig ties to enact re g cities progress regional reside	hborhoods encouraging municipalit istrictions on plastic bags and polys is complying with new regulatory re ents about threats to fill in more of nation to state and federal agencie	styrene food packaging, two equirements to reduce trash the bay development on
		<b>,</b> -		- `				
4d		· program services (Describ nses \$		e O ) ng grants o	f\$		) (Revenue \$	)
		program service expenses l		2.533.146	,		'	·

Part IV	Checklist of	Required	<b>Schedules</b>

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

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line $1?$ If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If</i> "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part  IV		1	
		28a		No
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section $512(b)(13)$ ?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

	Check if Schedule O contains a response to any question in this Part V	<u> </u>	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   22		163	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  1b	4		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	1		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	<b>3</b> L	V	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		N
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		N
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		N
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	-		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a	Yes	
	organization solicit any contributions that were not tax deductible as charitable contributions?			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes	
7	Organizations that may receive deductible contributions under section 170(c).	OB	163	
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			١,,
ч	file Form 8282?	7c		N
u	These, indicate the number of forms 5252 filed during the year	ή		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
£	contract?	7e 7f		N N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			IN
y	required?	7g		N
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		N
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		l <sub>N</sub>
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		N
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		N
LO	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1		
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders	_		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )	-		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		N
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	Is the organization licensed to issue qualified health plans in more than one state?	12=		١.
	Note. See the instructions for additional information the organization must report on Schedule O	13a		N
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	1		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		l I n
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		<del>ٔ ``</del>

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

36	ection A. Governing Body and Management						
			Yes	No			
<b>1</b> a	Enter the number of voting members of the governing body at the end of the tax year						
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O						
b	Enter the number of voting members included in line 1a, above, who are independent						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No			
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.	3		No			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No			
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No			
6	Did the organization have members or stockholders?	6		No			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following						
а	a The governing body?						
b	Each committee with authority to act on behalf of the governing body?	8b	Yes				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No			
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ue Cod	e.)			
			Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?	10a		<b>No</b> No			
	Did the organization have local chapters, branches, or affiliates?	10a 10b					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10b					
b 11a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	10b	Yes				
b 11a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	Yes				
b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990	10b	Yes				
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a	Yes Yes				
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	10b 11a 12a 12b	Yes Yes Yes				
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10b 11a 12a 12b 12c	Yes Yes Yes Yes				
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes				
b 11a b 12a b c 13 14	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes				
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes				
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes				
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes				
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10b 11a 12a 12b 12c 13 14 15a	Yes Yes Yes Yes Yes Yes Yes	No			

#### Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed ►CA
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
- Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of
- interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶Robin Erickson 1330 Broadway 1800 Oakland, CA (510) 463-6850

### Part VIII 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 Report compensation for the calendar year ending with or within the organization's tax year

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

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

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

(A) Name and Title	(B) Average	Pos	ition	<b>(C</b> )		chec	k	<b>(D)</b> Reportable	<b>(E)</b> Reportable	<b>(F)</b> Estimated
Name and Title	hours per week (list any hours	more pers	than on is	one bot	box h an or/tr	, unle offic ustee	ess er e)	compensation from the organization	compensation from related organizations	amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officel	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) Sinclair White	1 00	×						0	0	0
Director (2) Stephen Thompson	0 00									
Director	1 00	×						0	0	0
(3) Paul Stone	1 00									
Director	0 00	×						0	0	0
(4) Christoper Richard	1 00	,,								
Director	0 00	X						0	0	0
(5) Samuel Luoma	1 00	×						0	0	0
Director	0 00	_ ^						U	O	0
(6) Lisa Hoyos	1 00	x						0	0	0
Director	0 00							Ů	0	
(7) Ron Gonzales	1 00	×						0	0	0
Director	0 00									
(8) Maureen Reilly	2 00	l x		×				0	0	0
Ext Affairs	0 00				_					
(9) Sandy Linder	1 00	×						0	0	0
Director	0 00									
(10) Michael Katz	2 00	×		x				0	0	0
Int Affairs	0 00									
(11) Donnie Fowler	2 00	x		x				0	0	0
Governance	0 00									
(12) Mıchael Gallagher	4 00	×		х				0	0	0
Chairman (13) Payed Lawre	0 00									
(13) David Lewis	40 00			х				137,435	0	8,253
Exec Director (14) Robin Erickson	0 00									
. ,	35 00			х				82,272	0	5,459
CFO (15) Catherine Fox	0 00					-				
	40 00					х		102,280	0	11,911
Dir of Major Gifts (16) Njambi Good	0 00			_	$\vdash$					
						x		99,372	0	4,600
Chief Strategy (17) Janine Kraus	0 00					-				
` '						x		99,260	0	5,781
Chief Development	0 00			<u> </u>						Form <b>990</b> (2012)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

		1									Τ				
	(A) Name and Title A verage hours per week (list any hours for related			han o n is	ne l both	box, an d r/trus	heck unless officer stee)	<b>;</b>	Repor comper from organiza	table isation the tion (W-	(E) Reportable compensation from related organizations (W	, <u> </u>			
		for related organizations below dotted line)	Individual trustie or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)		rganizati relate organiza	ed	
-															
												+			
												+			
												-			
1b	Sub-Total				•			<b>F</b>							
C	Total from continuation sheet	-		١.	•	•	•			520,619				36,004	
d 	Total (add lines 1b and 1c).  Total number of individuals (in			to the	150	liste.	d abov	- A ) M	ho receive		l			30,004	
_	\$100,000 of reportable compe						a abov	C) W	no receive	u more en	lan				
													Yes	No	
3	Did the organization list any fo								, or highes	t compen	sated employee				
_	on line 1a? If "Yes," complete S									• •		3		No	
4	For any individual listed on line organization and related organ individual											4		No	
5	Did any person listed on line 1										or individual for	•			
	services rendered to the organ	ization? <i>If</i> "Yes	," compl	ete S	chea	lule J	for su	ch pe	erson .			5		N o	
Se	ction B. Independent Co														
1	Complete this table for your five compensation from the organization												tax vear		
	-	(A) ame and business	-								(B) cription of services	Ť	(C	<del></del>	
Mal W	n arwick 2550 Ninth Street Suite 103 Ber		auuress							consulting :			Comper	402,527	
												$\blacksquare$			
												$\dashv$			

2 Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization 1-1

Part V	4##1	Statement of Revenue		n this Dort VIII			
		Check if Schedule O contains a respons	se to any question i	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514
v	1a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership dues 1b					
Gra mo	c	Fundraising events 1c					
ffs, r A	d	Related organizations 1d					
Gi ila		Government grants (contributions) 1e	468,084				
ıns, Sin	e			ļ			
utic ler	f	All other contributions, gifts, grants, and similar amounts not included above	3,256,824				
d ja	g	Noncash contributions included in lines 1a-1f \$	96,767	j	į		
no. nd	h	Total. Add lines 1a-1f		3,724,908			
			Business Code				
nue	2a	Fees for service	Business code	100	100		
еле	ь			100	100		
e H	c						
¥. ₩.	d						
ž E	e						
Program Serwoe Revenue	f	All other program service revenue					
<u>چ</u>	g	Total. Add lines 2a-2f	►	100			
	3	Investment income (including dividend	s, interest,				45.71
	_	and other similar amounts) Income from investment of tax-exempt bond p		16,741			16,741
	4   5	Royalties	roceeds	0			
		(ı) Real	(II) Personal				
	6a	Gross rents	,				
	ь	Less rental expenses					
	С	Rental income					
	d	or (loss)  Net rental income or (loss)		0			
		(ı) Securities	(II) Other				
	7a	Gross amount from sales of					
		assets other than inventory					
	ь	Less cost or other basis and					
		sales expenses					
	d	Gain or (loss)  Net gain or (loss)		0			
		Gross income from fundraising	· · · · · · · · · · · · · · · · · · ·				
ne		events (not including					
E .		\$ of contributions reported on line 1c)					
Э́е		See Part IV, line 18					
Other Revenue	 	loss direct expenses	116,835				
Oth Oth	C D	Less direct expenses <b>b</b> Net income or (loss) from fundraising e	33,582 vents	83,253			
		Gross income from gaming activities					
		See Part IV, line 19					
	ь	Less direct expenses b					
	c	Net income or (loss) from gaming activ	ities	0			
	10a	Gross sales of inventory, less					
		returns and allowances .					
	ь	Less cost of goods sold <b>b</b>					
	l	Net income or (loss) from sales of inve	ntory 🛌	О			
		Miscellaneous Revenue	Business Code				
	11a	O ther		3,844	3,844		
	ь						
	С						
	d	All other revenue					
	e	<b>Total.</b> Add lines 11a-11d	· · · •	3,844			
	12	<b>Total revenue.</b> See Instructions	🖊	3,828,846	3,944		16,741

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response to any question in this Part IX (D) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising 7b. 8b. 9b. and 10b of Part VIII. Total expenses expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 4,500 4,500 Grants and other assistance to individuals in the United States See Part IV, line 22 0 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 0 Benefits paid to or for members 0 Compensation of current officers, directors, trustees, and 233,419 111,459 91,567 30,393 key employees . Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . Other salaries and wages 1,795,737 1,238,195 203,532 354,010 Pension plan accruals and contributions (include section 401(k) 17,469 12,047 2,713 2,709 and 403(b) employer contributions) . . . . 193,847 Other employee benefits . . . . 132,605 29,980 31,262 10 167,216 111,088 24,481 31,647 11 Fees for services (non-employees) O Management . . . . 20,467 20,324 72 Legal . . . . . . . . 71 36,775 Accounting . . . . . . . . . . . . 36,775 0 Professional fundraising services See Part IV, line 17 215,272 215,272 Investment management fees . . . . . 0 Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on 279,860 261,038 18,822 Schedule O) . . . . . . . Advertising and promotion . . 15,228 5,090 12 10,138 13 Office expenses . . . . . . 45,976 36,668 4,402 4,906 220,770 28,189 14 Information technology . . . 284,156 35,197 15 0 Royalties . 156,648 107,950 24,098 24,600 16 Occupancy . . . . . . **17** 33,789 31,425 681 1,683 18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . . 0 19 Conferences, conventions, and meetings . 13,074 8,827 2,293 1,954 20 Interest . . . . . . . . . . . . 0 Payments to affiliates . . . . . . 0 21 22 Depreciation, depletion, and amortization . 31,755 2,713 26,384 2,658 23 15,442 10,415 3.764 1,263 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) a Dues, licenses, service fees 4,029 32,736 22,626 6,081 In-kind professional services 91,742 45,000 46,742 Printing and Publications 102,669 47,338 4,045 51,286 d Postage and Shipping 103,280 47,720 3,518 52,042 60,382 e All other expenses 31,677 17,794 10,911 Total functional expenses. Add lines 1 through 24e 25 3,951,439 2,533,146 503,413 914,880 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► 🔽 if following SOP 98-2 (ASC 958-720) 15,188 461.980 184,274 262,518

Part X Balance Sheet

FGI	τx	Check if Schedule O contains a response to any question in this Pa	art X			
				(A) Beginning of year		<b>(B)</b> End of year
	1	Cash—non-interest-bearing		313,553	1	271,028
	2	Savings and temporary cash investments		747,318	2	690,265
	3	Pledges and grants receivable, net		136,000	3	543,000
	4	Accounts receivable, net		190,332	4	178,799
	5	Loans and other receivables from current and former officers, dire employees, and highest compensated employees Complete Part Schedule L	II of		5	0
Assets	6	Loans and other receivables from other disqualified persons (as d $4958(f)(1)$ ), persons described in section $4958(c)(3)(B)$ , and con and sponsoring organizations of section $501(c)(9)$ voluntary emplorganizations (see instructions) Complete Part II of Schedule L	tributing employers		6	0
χ. Θ	7	Notes and loans receivable, net			7	0
4	8	Inventories for sale or use			8	
	9			20,287	9	27,121
	10a	Prepaid expenses and deferred charges	10a 262,807	,	9	21,121
	ь	Late VI of Belleville B	10b 132,880	4	100	129,927
		Investments—publicly traded securities	,	112,913	11	129,927
	11		1,679,448	12	1,326,595	
	12	Investments—other securities See Part IV, line 11	1,679,446		1,326,393	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets		17.004	14	0
	15	Other assets See Part IV, line 11		17,894	15	18,494
	16	Total assets. Add lines 1 through 15 (must equal line 34)		3,217,745		3,185,229
	17	Accounts payable and accrued expenses		82,817	17	143,957
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
8	21	Escrow or custodial account liability Complete Part IV of Schedu			21	
Liabilitie	22	Loans and other payables to current and former officers, directors key employees, highest compensated employees, and disqualified				
<u>ia</u>		persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties $oldsymbol{\cdot}$			24	
	25	Other liabilities (including federal income tax, payables to related and other liabilities not included on lines 17-24) Complete Part >	of Schedule	444.000		475.047
		D		141,923		175,247
	26	Total liabilities. Add lines 17 through 25		224,740	26	319,204
ces		Organizations that follow SFAS 117 (ASC 958), check here ► 🔽 a lines 27 through 29, and lines 33 and 34.	and complete			
<u>an</u>	27	Unrestricted net assets		2,701,911	27	2,415,525
е С	28	Temporarily restricted net assets		291,094	28	450,500
됟	29	Permanently restricted net assets			29	
r Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34.	►  and			
9	30	Capital stock or trust principal, or current funds			30	
Ą.	31	Paid-in or capital surplus, or land, building or equipment fund.			31	
Assets	32	Retained earnings, endowment, accumulated income, or other fund			32	
	33	Total net assets or fund balances		2,993,005	33	2,866,025
Net	34	Total liabilities and net assets/fund balances		3,217,745	34	3,185,229
	J-4	i otal navnities and net assets/juliu valances		3,217,745	<b>34</b>	3, 100,229

Pai	t XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI	<u> </u>			<u>୮</u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3,8	328,846
2	Total expenses (must equal Part IX, column (A), line 25)	2		3,9	51,439
3	Revenue less expenses Subtract line 2 from line 1	3		-1	. 22,593
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		2,9	93,005
5	Net unrealized gains (losses) on investments	5			-4,387
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		2,8	366,025
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	▼ Separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	n			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

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As Filed Data -

DLN: 93493226045154

**Employer identification number** 

94-6078420

OMB No 1545-0047

#### **SCHEDULE A**

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

Save The Bay

### **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

Open to Public Inspection

Pai	t I	Reas	on for Pu	blic Charity Stat	<b>tus</b> (All org	ganızatıon	is must com	plete this	part.) See	ınstructıo	ns.			
The o	rganı	zatıon ıs	not a privat	e foundation becaus	eıtıs (Forl	ınes 1 thro	ugh 11, chec	k only one	box )					
1	$\sqcap$	A chur	ch, conventi	on of churches, or as	sociation of	churches	described in :	section 170	(b)(1)(A)(i).	•				
2	$\sqcap$	A scho	ol described	in <b>section 170(b)(1</b>	)( <b>A)(ii).</b> (At	tach Sched	dule E )							
3	$\sqcap$	A hosp	ital or a coo	perative hospital se	rvice organiz	ation desc	rıbed ın <b>secti</b>	on 170(b)(	1)(A)(iii).					
4	$\sqcap$	A medi	cal researcl	n organization operat	ed ın conjun	ction with a	a hospital des	scribed in <b>s</b>	ection 170(b)	(1)(A)(iii)	.Enter t	he		
_	_			ty, and state									_	
5	ı	_	•	erated for the benefit	_	or univers	ity owned or	operated by	a governme	ntal unit de	scribed	ın		
	_			<b>A)(iv).</b> (Complete P	•									
6	<u>_</u>			local government or	=									
7	굣	_		at normally receives			s support fron	n a governn	nental unit or	from the g	eneral pi	ublic		
8	Г			on 170(b)(1)(A)(vi). described in <b>section</b>	•	•	mplete Part 1	ΙΙ )						
9	,		-	at normally receives			-	-	ubutions mer	mbership fe	es and	aross	5	
_	•	_		ities related to its ex	• •		• •		•	•		-	_	
		•		oss investment inco	•	=		-						
		•		janızatıon after June				•		,				
10	Г			, ganızed and operated										
11	Ē	An ora	anızatıon ord	ganized and operated	I exclusively	for the bei	nefit of, to pe	rform the fu	nctions of, or	to carry o	ut the pu	irpos	es of	
	·			ly supported organiz										
				bes the type of supp										
	_			b										
е	ı			ox, I certify that the on managers and oth										
			n 509(a)(2)	on managers and ou	ier chan one	or more pu	iblicity Suppor	ted organiz	ations descri	Dea III Sect	1011 505	(4)(1	, 01	
f		If the c	rganization	received a written de	etermination	from the I	RS that it is a	Type I, Ty	pe II, or Typ	e III suppo	orting or	ganız	ation,	
			this box					_					Г	
g			August 1 / , 2 ng persons?	2006, has the organi	zation accep	ited any gif	tt or contribut	ion from an	y of the					
				rectly or indirectly o	ontrols, eith	er alone or	together with	n persons d	escribed in (i	1)	Г	/es	No	
				governing body of th	•		5		(	· —	.1g(i)			
		•		er of a person descri		_					1g(ii)			
				lled entity of a perso			above?			<u> </u>	1g(iii)			
h				ng information about							_5()			
						<b>.</b>	,							
(i	) Nan	ne of	(ii) EIN	(iii) Type of	(iv) Is t	:he	(v) Did yo	u notify	(vi) Is	s the	(vii	) A m	ount of	
	uppo			organızatıon	organızatı		the organ		organiza			monetary		
or	ganiz	ation		(described on	col (i) list		ın col (i)	•	col (i) or	_		support		
				lines 1- 9 above or IRC section	your gove docume	-	suppo	ort ?	in the I	057				
				(see	aocume	iic.								
				instructions))	Yes	No	Yes	No	Yes	No				
					1 62	INO	162	INO	162	140	_			
								+		+	_			
Total														

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

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

S	ection A. Public Support	•	•				
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	2,456,103	3,487,267	2,885,903	3,025,301	3,724,908	15,579,482
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit						0
4	to the organization without charge <b>Total.</b> Add lines 1 through 3	2,456,103	3,487,267	2,885,903	3,025,301	3,724,908	15,579,482
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the						170,640
	amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						15,408,842
	ection B. Total Support						
Cale	endar year (or fiscal year beginning in) 🟲	<b>(a)</b> 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	(d) 2011	(e) 2012	<b>(f)</b> Total
7	A mounts from line 4	2,456,103	3,487,267	2,885,903	3,025,301	3,724,908	15,579,482
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	35,196	14,908	12,043	19,607	16,672	98,426
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	-10,994	56,612	1,950	4,703	3,844	56,115
11	Total support (Add lines 7 through 10)						15,734,023
12	Gross receipts from related activiti	es, etc (see ınstı	ructions)	•	•	12	
13	First five years. If the Form 990 is this box and stop here					501(c)(3) organi	zation, check
	ection C. Computation of Pul						
14	Public support percentage for 2012	? (line 6 , column (	f) divided by line	11, column (f))		14	97 930 %
15	Public support percentage for 2011	. Schedule A, Par	t II, line 14			15	92 470 %
16a	<b>33</b> 1/3% <b>support test—2012.</b> If the and <b>stop here.</b> The organization qua				ne 14 is 33 1/3%	or more, check th	nis box <b>►</b> ✓
	33 1/3% support test—2011. If the box and stop here. The organization 10%-facts-and-circumstances test-is 10% or more, and if the organization Part IV how the organization meeorganization	organization did r n qualifies as a pu — <b>2012.</b> If the orga tion meets the "fa	not check a box o ablicly supported anization did not c acts-and-circums	n line 13 or 16a, organization :heck a box on lin tances" test, che	ne 13, 16a, or 16 eck this box and <b>s</b>	b, and line 14 s <b>top here.</b> Explain	eck this ▶
b 18	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ Explain in Part IV how the organiza supported organization Private foundation. If the organizationstructions	nization meets the tion meets the "fa	e "facts-and-cırcı acts-and-cırcums	ımstances" test, tances" test The	check this box are e organization qua	nd <b>stop here.</b> alifies as a public	ly ▶⊏

Schedule A (Form 990 or 990-EZ) 2012 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt

	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
	business under section 513			-			
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
	Amounts included on lines 1, 2,						
<i>7</i> a	and 3 received from disqualified						
	persons						
b	Amounts included on lines 2 and 3						
_	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6 )						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	<b>(b)</b> 2009	(c) 2010	( <b>d)</b> 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	Unrelated business taxable income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated						
11	business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support. (Add lines 9, 10c,						
	11, and 12)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					
	ction C. Computation of Public			12		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,		
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization 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 990 or 990-EZ) 2012

DLN: 93493226045154

#### OMB No 1545-0047

Inspection

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

Department of the Treasury Internal Revenue Service

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

Political Campaign and Lobbying Activities

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

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

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

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

• Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** Save The Bay 94-6078420 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes 3 ✓ No Was a correction made? ☐ Yes If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 4 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV **(c)** EIN (e) A mount of political (a) Name (b) Address (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

section 4911 tax for this year?

┌ Yes ┌ No

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

- A Check ► If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B Check ► If the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing organization's totals	<b>(b)</b> Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)	8,580	
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)	5,545	
c	Total lobbying expenditures (add lines 1a and 1b	o)	14,125	
d	Other exempt purpose expenditures		3,937,314	
е	Total exempt purpose expenditures (add lines 1	3,951,439		
f	Lobbying nontaxable amount Enter the amount f	347,572		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of lin	e 1f)	86,893	
h	Subtract line 1g from line 1a If zero or less, ent	er -0-		
i	Subtract line 1f from line 1c If zero or less, ente	r - 0 -		
j	If there is an amount other than zero on either lir	ne 1h or line 1i, did the organization file Form 47.	20 reporting	□ Ves □ No

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

	Lobbying Expen	ditures During 4	1-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	<b>(c)</b> 2011	( <b>d)</b> 2012	(e) Total
2a	Lobbying nontaxable amount	267,097	264,365	281,527	347,572	1,160,561
b	Lobbying ceiling amount (150% of line 2a, column(e))					1,740,842
c	Total lobbying expenditures	9,059	10,052	2,270	14,125	35,506
_d	Grassroots nontaxable amount	66,774	66,091	70,382	86,893	290,140
e 	Grassroots ceiling amount (150% of line 2d, column (e))					435,210
f	Grassroots lobbying expenditures	1,915	2,904	346		13,745

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has Notice filed Form 5768 (election under section 501(h)).	ОТ			7 0	ge <b>S</b>
	Week Week was a second to be a second to be a second to be a second to be a second to the second to	( 6	a)	(b)		
activ	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying vity.	Yes	No	1	Amoun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	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 similar means?					
i	O ther activities?					
j	Total Add lines 1c through 1:					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 505(c)(6).	01(c	)(5), (	or s		
_			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			3		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?					
Pa	t III-B Complete if the organization is exempt under section 501(c)(4), section 505(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
	Current year	2a				
b	Carryover from last year	2b				
C	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Identifier Return Reference Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493226045154

OMB No 1545-0047

**SCHEDULE D** (Form 990)

Department of the Treasury

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

**Supplemental Financial Statements** 

Open to Public

mai Revenue Service	Attach to For	m 990. ► See separate instructions.			Inspect	IOII
<b>lame of the organi</b> ave The Bay	zation			loyer identifica	ntion numbe	r
	izations Maintaining Donor Adv			6078420 or Accounts	. Complet	e if the
organiz	zation answered "Yes" to Form 990	(a) Donor advised funds	Τ	(b) Funds and	other accou	nts
Total number a	t end of year	(a) Bollot advised fallas	+	(b) I alias alia	other accou	1103
	tributions to (during year)					
	nts from (during year)					
	e at end of year					
Dıd the organız	zation inform all donors and donor advisor grganization's property, subject to the or	<u> </u>	nor advi	ısed	┌ Yes	┌ No
used only for c	zation inform all grantees, donors, and do haritable purposes and not for the benef ermissible private benefit?				┌ Yes	⊏ No
	rvation Easements. Complete if	the organization answered "Yes" t	n Forn	n 990 Part IV		,
Purpose(s) of c Preservation Protection Preservation	conservation easements held by the orgon of land for public use (e g , recreation of natural habitat on of open space	anization (check all that apply) or education)	n histor certifie	ically importan d historic struc	t land area ture	
	he last day of the tax year					
				Held at the	End of the	Year
	of conservation easements		2a			
	restricted by conservation easements		2b			
	servation easements on a certified histo	. ,	2c			
historic structi	servation easements included in (c) acquire listed in the National Register		2d			
the tax year	servation easements modified, transferr	ed, released, extinguisned, or terminate	ea by tr	ne organization	auring	
Number of stat	es where property subject to conservati	ion eacement is located be				
Does the organ	nization have a written policy regarding to f the conservation easements it holds?			violations, and	☐ Yes	┌ No
Staff and volun	teer hours devoted to monitoring, inspe	cting, and enforcing conservation easer	ments c	during the year		
A mount of expe	enses incurred in monitoring, inspecting	, and enforcing conservation easement	s during	g the year		
	servation easement reported on line 2(o	d) above satisfy the requirements of sec	ction 17	70(h)(4)(B)(ı)	☐ Yes	┌ No
balance sheet, the organizatio	escribe how the organization reports cor and include, if applicable, the text of the n's accounting for conservation easeme	e footnote to the organization's financia ents	l stater	ments that desc	cribes	
	izations Maintaining Collection etc. If the organization answered "Y		or Otl	her Similar	Assets.	
works of art, hi	tion elected, as permitted under SFAS 1 storical treasures, or other similar asse le, in Part XIII, the text of the footnote t	ts held for public exhibition, education,	or rese	arch in further		
If the organizat works of art, hi	tion elected, as permitted under SFAS 1 storical treasures, or other similar asse le the following amounts relating to thes	16 (ASC 958), to report in its revenue ts held for public exhibition, education,	statem	ent and balanc		ıc
(i) Revenues II	ncluded in Form 990, Part VIII, line 1			<b>►</b> \$		
(ii) Assets incl	luded in Form 990, Part X					
If the organizat	tion received or held works of art, histor nts required to be reported under SFAS			• •		
Revenues inclu	uded in Form 990, Part VIII, line 1			<b>►</b> \$		
	ed in Form 990, Part X			<u></u>		
Assets illeliand	a mironii 220, Fait A			<b>-</b> →		

Part	••• Organizations Maintaining Co	llections of Art	<u>, His</u>	tori	<u>cal Tr</u>	<u>easu</u>	res, or O	<u>the</u>	<u>r Similar As</u> :	sets (co	ontinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	ds, cł	neck	any of t	he follo	wing that a	re a	significant use	of its	
а	Public exhibition		d	Γ	Loan	or exch	ange progr	ams			
b	Scholarly research		e	Γ	Other	=					
c	Preservation for future generations										
4	Provide a description of the organization's co Part XIII	ollections and expla	ın hov	w the	y furthe	er the o	rganızatıon	's ex	empt purpose II	n	
5	During the year, did the organization solicit of	or receive donations	ofar	t, his	torıcal	treasui	res or other	sım			
	assets to be sold to raise funds rather than t								<u> </u>	Yes	☐ No
Par	Part IV, line 9, or reported an an	nount on Form 99	0, Pa	art X	, line	21.				90,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	lian or other interme	ediary	forc	ontribu	tions o	r other ass	ets r		_ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follov	wing t	able		_				
							F		Am	ount	
C	Beginning balance						-	1c			
d	Additions during the year						<u> </u>	1d			
e	Distributions during the year						<b>⊢</b>	1e			
f	Ending balance							1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	e 21?	•					Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	anatı	on has l	oeen pr	ovided in P	art >	(111		Γ
Pai	rt V Endowment Funds. Complete										
	D	(a)Current year	(b	<b>)</b> Prior	year	<b>b (c)</b> Tw	o years back	(d)	Three years back	<b>(e)</b> Four y	ears back
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curi	rent year end baland	ce (lır	ne 1g	, colum	n (a)) h	eld as				
а	Board designated or quasi-endowment 🕨										
ь	Permanent endowment -										
С	Temporarily restricted endowment ►										
	The percentages in lines 2a, 2b, and 2c show	uld equal 100%									
За	Are there endowment funds not in the posses organization by	ssion of the organiza	atıon	that	are held	d and a	dmınıstered	for	the	Yes	No
	(i) unrelated organizations								3a(		1.10
	(ii) related organizations								3a(i	_	
b	If "Yes" to 3a(II), are the related organizatio	ns listed as required	d on S	Sched	lule R?				3b	,	<del>i                                     </del>
4	Describe in Part XIII the intended uses of th	ne organization's en	dowm	ent f	unds						
Par	t VI Land, Buildings, and Equipme	ent. See Form 99	0, Pa	_			(I-) Ct		(-) 4	143.0	
	Description of property				a) Cost o sıs (ınve:		( <b>b)</b> Cost or o basis (othe		(c) Accumulated depreciation	(a) B	ook value
1a	and		•								
b I	Buildings			L			99	,633			99,633
c i	_easehold improvements										
d I	Equipment						163	,174			163,174
	Other								132,88	30	-132,880
Tota	<b>l.</b> Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part	X, colu	ımn (	B), line	10(c).)			🕨		129,927

Part VIII Investments—Other Securities. See	Form 990, Part X, line 12		<del></del>
(a) Description of security or category	(b)Book value	(c) Method of valuation	
(including name of security)		Cost or end-of-year market value	
(1)Financial derivatives			
(2)Closely-held equity interests Other			
Other			
	1,326,595		
Part VIII Investments—Program Related. Se  (a) Description of investment type	(b) Book value	(c) Method of valuation	
(a) Description of Investment type	(b) book value	Cost or end-of-year market value	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )			
Part IX Other Assets. See Form 990, Part X, II		(h) Paali valua	
(a) Descri	ption	(b) Book value	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15	5.)		
Part X Other Liabilities. See Form 990, Part X			
1 (a) Description of liability	(b) Book value		
Federal income taxes			
Accrued payroll liabilities	175,247		
		-	
		1	
		1	
	1		
		1	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	175,247		

Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue	per R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	3,824,459
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII ) 2d		
e	Add lines <b>2a</b> through <b>2d</b>	2e	-4,387
3	Subtract line <b>2e</b> from line <b>1</b>	3	3,828,846
4	A mounts included on Form 990, Part VIII, line 12, but not on line $oldsymbol{1}$		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII )		
С	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12)	5	3,828,846
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expense	s per	Return
1	Total expenses and losses per audited financial statements	1	3,951,439
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities	]	
b	Prior year adjustments	1	
C	Other losses	]	
d	Other (Describe in Part XIII )	]	
e	Add lines <b>2a</b> through <b>2d</b>	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	3	3,951,439
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	]	
b	Other (Describe in Part XIII )	]	
С	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	3,951,439
Part	Supplemental Information		

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

I dentıfıer	Return Reference	Explanation
ert X	Part X FIN48 Footnote	Income TaxesFinancial statement presentation follows the recommendations of ASC 740, Income Taxes Under ASC 740 the Organization is required to report information regarding its exposure to various tax positions taken by the Organization an requires a two-step process that separates recognition from measurement The first step is determining whether a tax position has met the recognition threshold, the second step is measuring a tax position that meets the recognition threshold Management believes that the Organization has adequately evaluated its current tax positions and has concluded that as a September 30, 2013 the Organization does not have any uncertain tax positions for which a reserve or an accrual for a tax liability would be necessary The Organization has received notification from the Internal Revenue Service and the State of California that it qualifies for tax-exempt status under Section 501(c)(3) of the Internal Revenue Code and Section 23701d of the California Revenue and Taxation Code This exemption is subject to periodic review by the federal and state taxing authorities and management is confident that the Organization continues to satisfy all federal and state statutes in order to qualify for continued tax exemption status. The Organization may periodically receive unrelated business income (such as sublease rental income, advertising revenue, or other unrelated revenue streams) requiring the Organization to file separate tax returns under federal and state statutes. If such conditions every exist, the Organization will be obligated to accrue and remit the applicable taxes.

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OMB No 1545-0047

**SCHEDULE G** (Form 990 or 990-EZ) **Supplemental Information Regarding** 

Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.

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

Inspection

Name of the organization
Save The Bav

Chapman Cubine

Department of the Treasury

Internal Revenue Service

Employer identification number

94-6078420

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Indicate whether the organization raised funds through any of the following activities Check all that apply Mail solicitations e Solicitation of non-government grants ▼ Internet and email solicitations Solicitation of government grants ✓ Special fundraising events ✓ Phone solicitations ✓ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? **b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of (iii) Dıd (iv) Gross receipts (v) A mount paid to (vi) A mount paid to (ii) Activity fundraiser have (or retained by) (or retained by) ındıvıdual from activity fundraiser listed in or entity (fundraiser) custody or organization col (i) control of contributions? Yes No Event planning Peridot Events 232 Bay Vista Νo 116,835 6.519 110,316 Sausalito, CA 94965 Website Design Stelter 10435 New York Νo 12,122 Des Moines, IA 50322

Carol Enters Co 9663 C Main Str Nο 18,530 Fairfax, VA 22032 Direct Mail

2000 15th St N 637,803 234,760 403,043 Arlington, VA 22201

754,638 271,931 513,359 Total.

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

Lıst Broker

Pai	rt II	Fundraising Events. Commore than \$15,000 of fundraevents with gross receipts g	aising event contribut			
		3 . 3	(a) Event #1  Special Events	<b>(b)</b> Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))
			(event type)	(event type)	(total number)	
IKLE	1	Gross receipts	116,83	5		116,835
Reveilue	2	Less Contributions				
	3	Gross income (line 1 minus line 2)	116,83	5		116,835
	4	Cash prizes				
မှာ	5	Noncash prizes	85	5		855
e L	6	Rent/facility costs	4,00	o		4,000
Expenses	7	Food and beverages .	27,92	7		27,927
Direct I	8	Entertainment	80	0		800
돌	9	Other direct expenses .				
	10	Direct expense summary Add lin	es 4 through 9 in column	n (d)		(33,582)
	11	Net income summary Combine li	_			83,253
Par	t III		rganization answered	"Yes" to Form 990, Pa	rt IV, line 19, or repo	
	I	\$15,000 on Form 990-EZ, lii		Γ		
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u>~</u>	1	Gross revenue				
Ses	2	Cash prizes				
Expenses	3	Non-cash prizes				
	4	Rent/facility costs				
Direct	5	Other direct expenses				
			┌ Yes	┌ Yes	┌ Yes	<b>'</b>
	6	Volunteer labor	□ No	┌ No	Γ No	_
	7	Direct expense summary Add line	s 2 through 5 in column	(d)		
	8	Net gaming income summary Com	bine lines 1 and 7 in col	umn (d)	🛌	
9	Ente	er the state(s) in which the organiza	ation operates gaming ac	tivities		
а	Two Ty					
b	If"N	No," explain				
10a	Wer	e any of the organization's gaming				
b	If"Y	es," explain				

70ES	the organization operate gaining	activities with nonlinelinders		· · I Yes I No				
.2		neficiary or trustee of a trust or a men						
	formed to administer charitable o	gaming?		· · · · Fyes F No				
.3	Indicate the percentage of gamir	ng activity operated in						
а	The organization's facility			13a				
b	An outside facility			13b				
.4	Enter the name and address of th	ne person who prepares the organizati	on's gaming/special events books	and records				
	Name 🟲							
	Address 🟲							
	revenue?	ntract with a third party from whom the						
	amount of gaming revenue retain	ed by the third party 🟲 \$						
С	If "Yes," enter name and address	s of the third party						
	Name 🕨							
	Address ▶							
<b>.</b> 6	Gaming manager information							
	Name ▶							
	Gaming manager compensation 🟲 \$							
	Description of services provided	<b>&gt;</b>						
	☐ Director/officer	Employee	Independent contractor					
.7	Mandatory distributions							
а	Is the organization required unde	er state law to make charitable distrib	utions from the gaming proceeds to					
	retain the state gaming license?			$\Gamma_{Yes} \Gamma_{No}$				
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent							
	<u> </u>	activities during the tax year 🟲 🖇						
Par	columns (III) and (v), a	<b>mation.</b> Complete this part to pi and Part III, lines 9, 9b, 10b, 15b ditional information (see instruct	, 15c, 16, and 17b, as applical					
	Identifier	Return Reference	Explana	tion				

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OMB No 1545-0047

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#### **SCHEDULE M** (Form 990)

Department of the Treasury

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

**Noncash Contributions** 

► Attach to Form 990. Internal Revenue Service

Name of the organization **Employer identification number** Save The Bay 94-6078420 Part I Types of Property

		(a) Check If	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on	(d)  Method of det  noncash contribut		nts
		applicable		Form 990, Part VIII, line 1g			
1	Art—Works of art			19			
	Art—Historical treasures .						
3	Art—Fractional interests						
4	Books and publications						
5	Clothing and household						
	goods						
	Cars and other vehicles						
	Boats and planes						
	Intellectual property						
	Securities—Publicly traded .	X	1	21,930	FMV 		
	Securities—Closely held stock .						
	Securities—Partnership, LLC, or trust interests						
	Securities—Miscellaneous						
13	Qualified conservation contribution—Historic structures						
14	Qualified conservation contribution—Other						
15	Real estate—Residential .						
16	Real estate—Commercial						
17	Real estate—Other						
18	Collectibles						
19	Food inventory						
20	Drugs and medical supplies .						
	Taxidermy						
	Historical artifacts						
	Scientific specimens						
	Archeological artifacts						
25	Other ► ( Advertising )	X	1	45,000	FMV 		
26	Car Other ► ( donations )	Х	5	5,025	FMV		
	Auction						
	Other ► (Items)	X	100	42,468			
	Other ► ( Beverages )	X		4,274	I I		
29	Number of Forms 8283 received for which the organization comple				29		
	Tot which the organization comple	icca i oiiii o	203, ruit IV, Bonec Ackin	owicagement i i i [		Yes	No
30a	During the year, did the organiza	ition receiv	e by contribution any prope	erty reported in Part I, lines	1-28 that it ☐		+
	must hold for at least three year						
	for exempt purposes for the enti					30a	No
b	If "Yes," describe the arrangeme				ļ ·	304	$\top$
31	Does the organization have a gif	t acceptano	ce policy that requires the i	review of any non-standard	contributions?	<b>31</b> Yes	<del> </del>
32a	Does the organization hire or us contributions?	e third parti	es or related organizations	to solicit, process, or sell		<b>32a</b> Yes	
b	If "Yes," describe in Part II						
33	If the organization did not report describe in Part II	: an amount	ın column (c) for a type of	property for which column (	a) is checked,		
				0 1 11 54227			(2242)

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
Part I, Line 32, Hire and Use of Third Parties		Vehicle DonationsSave The Bay is a participant in a vehicle donation program operated by a third-party agency which physically collects and subsequently sells donated vehicles and shares the proceeds with Save the Bay Vendor is Car Donation Services, Inc 4971 Pacheco Blvd Martinez, CA 94553925-229-5444

Schedule M (Form 990) (2012)

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

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

▶ Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Name of the organization Save The Bay	Employer identifi	cation number
	94-6078420	

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 19	Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	ALL OF THE ORGANIZATION'S GOVERNING DOCUMENTS, FINANCIAL STATEMENTS AND OTHER LEGALFILINGS ARE MAINTAINED IN A SECURE ENVIRONMENT AND HELD AVAILABLE FOR INSPECTION BY TAX AUTHORITIES AND THE GENERAL PUBLIC TAX RETURNS ARE POSTED ANNUALLY TOWWW GUIDESTAR ORG (WHERE IT IS AVAILABLE FOR VIEWING AS AN ELECTRONIC COPY) AND ARE ALSO AVAILABLE AT THE ORGANIZATION'S OFFICE IN OAKLAND, CALIFORNIA (FOR A PHY SICAL INSPECTION)

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 15b	Compensation Review and Approval Process for	COMPENSATION OF OTHER PERSONNEL AND KEY EMPLOYEES IS REVIEWED AT LEAST ANNUALLY BY MEMBERS OF MANAGEMENT (Generally by the Executive Director) EFFORTS ARE MADE TO SECURE COMPENSATION DATA FROM INDUSTRY SOURCES IN ORDER TO DETERMINE COMPETITIVENESS AND APPROPRIATENESS OF SALARIES AND ALL RELATED BENEFITS ALL DECISIONS ARE THEN reviewed and approved by the Board of Directors and DOCUMENTation is placed IN PERSONNEL FILES

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 15a	Form 990, Part VI, Line 15a Compensation Review & Approval Process - CEO, Top Management	MEMBERS OF THE BOARD OF DIRECTORS REVIEW THE COMPENSATION OF ALL HIGH-LEVEL PERSONNEL ANNUALLY IN ACCORDANCE WITH IRS RULES AND REGULATIONS EFFORTS ARE MADE TO SECURE COMPENSATION DATA FROM INDUSTRY SOURCES IN ORDER TO DETERMINE COMPETITIVENESS AND APPROPRIATENESS OF SALARIES EVERY EFFORT IS MADE TO ENSURE THAT THE PROCESS IS THOROUGH AND TRANSPARENT IN ACCORDANCE WITH IRS GUIDELINES AND THE ORGANIZATION'S POLICIES AND PROCEDURES

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 12c	Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	MEMBERS OF THE BOARD OF DIRECTORS REVIEW ALL POTENTIAL CONFLICTS OF INTEREST AT LEAST ANNUALLY THE EXECUTIVE DIRECTOR AND ALL BOARD MEMBERS ARE REQUIRED TO DISCLOSE (IN WRITING) POTENTIAL CONFLICTS AND ANY RELATED PARTY AFFILIATIONS LOANS BETWEEN THE ORGANIZATION AND MEMBERS OF MANAGEMENT AND THE BOARD ARE STRICTLY PROHIBITED THE ORGANIZATION SEEKS FULL TRANSPARENCY ON ALL RELATIONSHIPS ANY POTENTIAL CONFLICTS (IN FACT OR APPEARANCE) ARE DISCUSSED OPENLY AND RESOLVED IN ACCORDANCE WITH THE ORGANIZATION'S POLICIES AND PROCEDURES

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 11b	Line 11b Form 990 Review	FORM 990 IS PREPARED BY AN OUTSIDE TAX PROFESSIONAL THE FORM IS REVIEWED BYTHE ORGANIZATION'S MANAGEMENT, A MEMBER OF THE BOARD OF DIRECTORS, AND THE EXECUTIVEDIRECTOR THIS GROUP OF INDIVIDUALS DISCUSSES THE CONTENTS OF THE RETURN WITHTHE OUTSIDE TAX PROFESSIONAL After a full review (with modifications where necessary), the final version of the tax return is provided to all members of the organization's voting body. A representative of management authorizes the final return which is then e-filed with the Internal Revenue Service.

ldentifier	Return Reference	Explanation
Form 990, Part III, Line 4d	Form 990, Part III, Line 4d Other Program Services Description	OTHER PROGRAM SERVICES 4 Education and Outreach (continued) continue to upgrade our technology to improve the effectiveness and efficiency of our data management and customer relations, external communications, cultivation of supporters and development of resources OTHER PROGRAM SERVICES 5 Restoration Campaigns (continued) activities at these shoreline restoration sites. This year they grew 35,000 plants in our two native plant nurseries, planted them in priority restoration sites, and removed invasive plants and trash. We enlisted 6,000 volunteers in these activities, including more than 1,500 middle and high school students and teachers and thousands of adults from community groups, businesses, and the general public Save. The Bay conducted educational Bay shoreline stew ardship experiences and classroom preparation for students and teachers, including many from low-income households. We pioneered new program options to encourage repeat exposure and deeper science learning by participants, and continued to make our Watershed Education Curriculum available free to teachers on-line. We refined and improved these strong and popular programs though ongoing evaluation of program effectiveness and impact.