

Form **990**  
 Department of the Treasury  
 Internal Revenue Service

**Return of Organization Exempt From Income Tax**  
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)  
 The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047  
**2010**  
**Open to Public Inspection**

**A For the 2010 calendar year, or tax year beginning 01-01-2010 and ending 12-31-2010**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization Robin Hood Foundation		<b>D</b> Employer identification number 13-3441066
	Doing Business As		<b>E</b> Telephone number (212) 227-6601
	Number and street (or P O box if mail is not delivered to street address) 826 Broadway	Room/suite	<b>G</b> Gross receipts \$ 166,744,171
	City or town, state or country, and ZIP + 4 new york, NY 10003		
<b>F</b> Name and address of principal officer david saltzman 826 Broadway 9th floor new york, NY 10003		<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) <b>H(c)</b> Group exemption number	
<b>I</b> Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (Insert no ) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
<b>J</b> Website: www.robinhood.org			
<b>K</b> Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other			<b>L</b> Year of formation 1988
			<b>M</b> State of legal domicile NY

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities robin hood changes fates and saves lives in NYC by supporting the most effective poverty-fighting programs in all five boroughs through monetary grants, management expertise & securing donations			
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets			
	<b>3</b>	Number of voting members of the governing body (Part VI, line 1a)	33	
	<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b)	32	
	<b>5</b>	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	122	
	<b>6</b>	Total number of volunteers (estimate if necessary)	200	
	<b>7a</b>	Total unrelated business revenue from Part VIII, column (C), line 12	199,478	
<b>7b</b>	Net unrelated business taxable income from Form 990-T, line 34	0		
<b>Revenue</b>	<b>8</b>	Contributions and grants (Part VIII, line 1h)	167,268,932	147,526,786
	<b>9</b>	Program service revenue (Part VIII, line 2g)	0	0
	<b>10</b>	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	8,740,002	558,257
	<b>11</b>	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-8,358,980	-7,275,023
	<b>12</b>	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	167,649,954	140,810,020
<b>Expenses</b>	<b>13</b>	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	105,878,739	106,068,054
	<b>14</b>	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	<b>15</b>	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	11,793,643	12,125,726
	<b>16a</b>	Professional fundraising fees (Part IX, column (A), line 11e)	110,000	85,000
	<b>b</b>	Total fundraising expenses (Part IX, column (D), line 25) <b>8,576,736</b>		
	<b>17</b>	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	7,534,503	7,224,943
	<b>18</b>	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	125,316,885	125,503,723
<b>19</b>	Revenue less expenses Subtract line 18 from line 12	42,333,069	15,306,297	
<b>Net Assets or Fund Balances</b>	<b>20</b>	Total assets (Part X, line 16)	374,663,258	383,215,937
	<b>21</b>	Total liabilities (Part X, line 26)	84,139,478	70,648,993
	<b>22</b>	Net assets or fund balances Subtract line 21 from line 20	290,523,780	312,566,944
			<b>Beginning of Current Year</b>	<b>End of Year</b>

**Part II Signature Block**

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

<b>Sign Here</b>	***** Signature of officer	2011-11-14 Date			
	DAVID SALTZMAN DIRECTOR, PRESIDENT & CEO Type or print name and title				
<b>Paid Preparer Use Only</b>	Print/Type preparer's name Firm's name GRANT THORNTON LLP	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	Firm's address 666 THIRD AVENUE NEW YORK, NY 100174011				Firm's EIN
					Phone no (212) 542-9609
May the IRS discuss this return with the preparer shown above? (see instructions) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					

**Part III Statement of Program Service Accomplishments**

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

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

ROBIN HOOD HOLDS STEADFAST TO A SINGLE MISSION FIGHT POVERTY IN NEW YORK CITY WE FIND, FUND AND CREATE PROGRAMS AND SCHOOLS THAT GENERATE MEASURABLE RESULTS FOR FAMILIES IN NEW YORK'S POOREST NEIGHBORHOODS THE BOARD PAYS ALL ADMINISTRATIVE, FUNDRAISING AND EVALUATION COSTS, SO 100 PERCENT OF DONATIONS GOES DIRECTLY TO ORGANIZATIONS HELPING NEW YORKERS IN NEED TO BUILD BETTER LIVES

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No

If "Yes," describe these new services on Schedule O

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

If "Yes," describe these changes on Schedule O

**4** Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

**4a** (Code ) (Expenses \$ 107,436,003 including grants of \$ 100,373,642 ) (Revenue \$ 0 )

Core Grant Making Robin Hood made monetary grants for programs and operating support to 202 organizations in four areas of poverty fighting education, early childhood and youth, jobs and economic security, and survival, which is primarily concerned with hunger, homelessness, health and H I V /AIDS Grant making staff assesses program quality to determine grant recommendations Robin Hood funds and arranges for third-party evaluation of grantee organizations' performance to test and corroborate grant making decisions and to provide grantees with data to improve performance

**4b** (Code ) (Expenses \$ 3,007,250 including grants of \$ 2,810,000 ) (Revenue \$ 0 )

Capital Grants Robin Hood made capital grants to 6 organizations to facilitate program expansion through acquisition of new space or renovation of existing facilities Capital projects staff assesses facility needs and organizational readiness to undertake projects and provides technical assistance in assembling a project team, analyzing and securing finances and executing projects on time and within budget

**4c** (Code ) (Expenses \$ 826,584 including grants of \$ 0 ) (Revenue \$ 0 )

Capital Projects Robin Hood funds the direct costs of programs to build libraries in public schools and to build public charter high schools These initiatives may bring together several organizations working on similar issues and can include governmental participation at the city, state or federal level

**4d** Other program services (Describe in Schedule O )  
(Expenses \$ 3,086,886 including grants of \$ 2,884,412 ) (Revenue \$ 0 )

**4e Total program service expenses** \$ 114,356,723

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i>	Yes	
<b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?	Yes	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>		No
<b>4 Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II.</i>	Yes	
<b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III.</i>		
<b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I.</i>		No
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>		No
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i>		No
<b>9</b> Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV.</i>		No
<b>10</b> Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i>		No
<b>11</b> 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		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>	Yes	
<b>b</b> Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i>	Yes	
<b>c</b> Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i>		No
<b>d</b> Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i>		No
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>		No
<b>f</b> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i>	Yes	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i>		No
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.</i>	Yes	
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>		No
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?		No
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	Yes	
<b>15</b> 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 U S? <i>If "Yes," complete Schedule F, Parts II and IV.</i>		No
<b>16</b> 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 U S? <i>If "Yes," complete Schedule F, Parts III and IV.</i>		No
<b>17</b> Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I (see instructions).</i>	Yes	
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i>	Yes	
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>		No
<b>20a</b> Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H.</i>		No
<b>b</b> If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)		

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

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

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

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

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		
<b>1a</b>	102		
<b>1b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
<b>1b</b>	0		
<b>1c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
<b>2a</b>	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return.		
<b>2a</b>	122		
<b>2b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	Yes	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	Yes	
<b>3b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	Yes	
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		No
<b>b</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.		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
<b>5b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
<b>5c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		No
<b>6b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>7a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	Yes	
<b>7b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	Yes	
<b>7c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
<b>7d</b>	If "Yes," indicate the number of Forms 8282 filed during the year.		
<b>7e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
<b>7f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
<b>7g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
<b>7h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>9a</b>	Did the organization make any taxable distributions under section 4966?		
<b>9b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter		
<b>10a</b>	Initiation fees and capital contributions included on Part VIII, line 12.		
<b>10b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter		
<b>11a</b>	Gross income from members or shareholders.		
<b>11b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
<b>12b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>13a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.		
<b>13b</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.		
<b>13c</b>	Enter the amount of reserves on hand.		
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?		No
<b>14b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (33); 1b Enter the number of voting members included in line 1a, above, who are independent (32); 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? (Yes); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? (No); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (No); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (No); 6 Does the organization have members or stockholders? (No); 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? (No); 7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? (No); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a The governing body? (Yes); 8b Each committee with authority to act on behalf of the governing body? (Yes); 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O (No).

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

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

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include: 17 List the States with which a copy of this Form 990 is required to be filed (AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, TX, UT, VA, WA, WV, WI); 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply: [ ] Own website, [ ] Another's website, [X] Upon request; 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table; 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: BETH ZOLKIND, 826 BROADWAY 9TH FLOOR, new york, NY 10003, (212) 227-6601.



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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										
<b>1b Sub-Total</b>										
<b>c Total from continuation sheets to Part VII, Section A</b>										
<b>d Total (add lines 1b and 1c)</b>							3,273,469	0	544,560	

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **32**

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
Alex Coletti Productions 60 Pineapple Street Apt 6G BROOKLYN, NY 11201	Production Services	315,735
Creative Artist Agency Wonder Prod Inc f/s/o Stevie Wond LOS ANGELES, CA 90067	EVENT TALENT	500,000
Hatch Design 402 Jackson Street SAN FRANCISCO, CA 94111	Design Services	287,916
Performance Environment Design Grou 6904 Colonial Road Suite 180 BROOKLYN, NY 11209	Production Services	270,348
Peter Tripp 278 West 86 Street 3B NEW YORK, NY 10024	Technology Consult	243,128

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **8**

**Part VIII Statement of Revenue**

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
<b>Contributions, gifts, grants and other similar amounts</b>	<b>1a</b>	Federated campaigns . . . . . <b>1a</b>					
	<b>b</b>	Membership dues . . . . . <b>1b</b>					
	<b>c</b>	Fundraising events . . . . . <b>1c</b>	84,291,058				
	<b>d</b>	Related organizations . . . . . <b>1d</b>					
	<b>e</b>	Government grants (contributions) . . . . . <b>1e</b>					
	<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above . . . . . <b>1f</b>	63,235,728				
	<b>g</b>	Noncash contributions included in lines 1a-1f \$ . . . . .	8,706,835				
	<b>h</b>	<b>Total.</b> Add lines 1a-1f . . . . .	147,526,786				
<b>Program Service Revenue</b>	<b>2a</b>	_____ Business Code _____					
	<b>b</b>	_____					
	<b>c</b>	_____					
	<b>d</b>	_____					
	<b>e</b>	_____					
	<b>f</b>	All other program service revenue . . . . .					
	<b>g</b>	<b>Total.</b> Add lines 2a-2f . . . . .	0				
<b>Other Revenue</b>	<b>3</b>	Investment income (including dividends, interest and other similar amounts) . . . . .	1,016,830		199,478	817,352	
	<b>4</b>	Income from investment of tax-exempt bond proceeds . . . . .	0				
	<b>5</b>	Royalties . . . . .	0				
	<b>6a</b>	Gross Rents	(i) Real	27,123			
			(ii) Personal				
			<b>b</b> Less rental expenses	33,206			
			<b>c</b> Rental income or (loss)	-6,083			
	<b>d</b>	Net rental income or (loss) . . . . .	-6,083			-6,083	
	<b>7a</b>	Gross amount from sales of assets other than inventory	(i) Securities	16,842,405			
			(ii) Other				
			<b>b</b> Less cost or other basis and sales expenses	17,300,978			
			<b>c</b> Gain or (loss)	-458,573			
	<b>d</b>	Net gain or (loss) . . . . .	-458,573			-458,573	
	<b>8a</b>	Gross income from fundraising events (not including \$ 84,291,058 of contributions reported on line 1c) See Part IV, line 18 . . . . . <b>a</b>	1,327,258				
	<b>b</b>	Less direct expenses . . . . . <b>b</b>	8,599,967				
<b>c</b>	Net income or (loss) from fundraising events . . . . .	-7,272,709			-7,272,709		
<b>9a</b>	Gross income from gaming activities See Part IV, line 19 . . . . . <b>a</b>						
<b>b</b>	Less direct expenses . . . . . <b>b</b>						
<b>c</b>	Net income or (loss) from gaming activities . . . . .	0					
<b>10a</b>	Gross sales of inventory, less returns and allowances . . . . . <b>a</b>						
<b>b</b>	Less cost of goods sold . . . . . <b>b</b>						
<b>c</b>	Net income or (loss) from sales of inventory . . . . .	0					
	Miscellaneous Revenue	Business Code					
<b>11a</b>	MISCELLANEOUS INCOME	900099	3,769			3,769	
<b>b</b>	_____						
<b>c</b>	_____						
<b>d</b>	All other revenue . . . . .						
<b>e</b>	<b>Total.</b> Add lines 11a-11d . . . . .		3,769				
<b>12</b>	<b>Total revenue.</b> See Instructions . . . . .		140,810,020		199,478	-6,916,244	

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b>	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	106,068,054	106,068,054		
<b>2</b>	Grants and other assistance to individuals in the U S See Part IV, line 22	0			
<b>3</b>	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	0			
<b>4</b>	Benefits paid to or for members	0			
<b>5</b>	Compensation of current officers, directors, trustees, and key employees . . . . .	2,541,005	1,026,362	827,755	686,888
<b>6</b>	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .	87,294	87,294		
<b>7</b>	Other salaries and wages	7,237,768	3,267,891	586,631	3,383,246
<b>8</b>	Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .	799,566	381,442	77,499	340,625
<b>9</b>	Other employee benefits . . . . .	827,507	359,211	97,050	371,246
<b>10</b>	Payroll taxes . . . . .	632,586	262,768	120,920	248,898
<b>a</b>	Fees for services (non-employees)				
	Management . . . . .	0			
<b>b</b>	Legal . . . . .	50,010	3,374	43,102	3,534
<b>c</b>	Accounting . . . . .	84,775		84,775	
<b>d</b>	Lobbying . . . . .	0			
<b>e</b>	Professional fundraising services See Part IV, line 17 . . . . .	85,000			85,000
<b>f</b>	Investment management fees . . . . .	0			
<b>g</b>	Other . . . . .	1,055,325	275,293	286,103	493,929
<b>12</b>	Advertising and promotion . . . . .	0			
<b>13</b>	Office expenses . . . . .	752,192	245,217	118,047	388,928
<b>14</b>	Information technology . . . . .	235,264	75,200	28,203	131,861
<b>15</b>	Royalties . . . . .	0			
<b>16</b>	Occupancy . . . . .	981,222	435,472	142,622	403,128
<b>17</b>	Travel . . . . .	61,251	21,339	9,501	30,411
<b>18</b>	Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .	0			
<b>19</b>	Conferences, conventions, and meetings . . . . .	115,798	27,625	41,938	46,235
<b>20</b>	Interest . . . . .	0			
<b>21</b>	Payments to affiliates . . . . .	0			
<b>22</b>	Depreciation, depletion, and amortization . . . . .	823,230	345,757	115,252	362,221
<b>23</b>	Insurance . . . . .	126,528	53,142	17,714	55,672
<b>24</b>	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O )				
<b>a</b>	INDIRECT EVENT EXPENSES	911,841			911,841
<b>b</b>	PROGRAM INITIATIVES	772,367	772,367		
<b>c</b>	MARKETING & COMMUNICATIONS	633,073			633,073
<b>d</b>	EVALUATION FEES	425,292	425,292		
<b>e</b>	CONTRACTED MANAGEMENT ASST	223,622	223,622		
<b>f</b>	All other expenses	-26,847	1	-26,848	
<b>25</b>	<b>Total functional expenses.</b> Add lines 1 through 24f	125,503,723	114,356,723	2,570,264	8,576,736
<b>26</b>	<b>Joint costs.</b> Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

**Part X Balance Sheet**

		(A)		(B)
		Beginning of year		End of year
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .		<b>1</b>	
	<b>2</b> Savings and temporary cash investments . . . . .	121,554,078	<b>2</b>	157,478,267
	<b>3</b> Pledges and grants receivable, net . . . . .	65,597,610	<b>3</b>	41,053,260
	<b>4</b> Accounts receivable, net . . . . .		<b>4</b>	
	<b>5</b> Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .		<b>5</b>	
	<b>6</b> Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Schedule L . . . . .		<b>6</b>	
	<b>7</b> Notes and loans receivable, net . . . . .	51,600,000	<b>7</b>	51,600,000
	<b>8</b> Inventories for sale or use . . . . .		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges . . . . .	179,935	<b>9</b>	172,715
	<b>10a</b> Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D . . . . .	7,949,896		
	<b>10b</b> Less accumulated depreciation . . . . .	3,824,939		
	<b>10c</b>	4,601,998	<b>10c</b>	4,124,957
	<b>11</b> Investments—publicly traded securities . . . . .		<b>11</b>	
	<b>12</b> Investments—other securities. See Part IV, line 11 . . . . .	113,155,208	<b>12</b>	116,493,543
	<b>13</b> Investments—program-related. See Part IV, line 11 . . . . .		<b>13</b>	
	<b>14</b> Intangible assets . . . . .		<b>14</b>	
<b>15</b> Other assets. See Part IV, line 11 . . . . .	17,974,429	<b>15</b>	12,293,195	
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	374,663,258	<b>16</b>	383,215,937	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	4,670,671	<b>17</b>	5,364,021
	<b>18</b> Grants payable . . . . .	79,121,720	<b>18</b>	64,970,972
	<b>19</b> Deferred revenue . . . . .	347,087	<b>19</b>	314,000
	<b>20</b> Tax-exempt bond liabilities . . . . .		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .		<b>21</b>	
	<b>22</b> Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .		<b>24</b>	
	<b>25</b> Other liabilities. Complete Part X of Schedule D . . . . .		<b>25</b>	
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 . . . . .	84,139,478	<b>26</b>	70,648,993
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets . . . . .	215,558,072	<b>27</b>	246,563,856
	<b>28</b> Temporarily restricted net assets . . . . .	74,965,708	<b>28</b>	66,003,088
	<b>29</b> Permanently restricted net assets . . . . .		<b>29</b>	
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds . . . . .		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building or equipment fund . . . . .		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>32</b>	
<b>33</b> Total net assets or fund balances . . . . .	290,523,780	<b>33</b>	312,566,944	
<b>34</b> Total liabilities and net assets/fund balances . . . . .	374,663,258	<b>34</b>	383,215,937	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	140,810,020
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	125,503,723
<b>3</b>	Revenue less expenses Subtract line 2 from line 1	<b>3</b>	15,306,297
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	290,523,780
<b>5</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>5</b>	6,736,867
<b>6</b>	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	<b>6</b>	312,566,944

**Part XII Financial Statements and Reporting**

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

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
<b>b</b>	Were the organization's financial statements audited by an independent accountant?	Yes	
<b>c</b>	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
<b>d</b>	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
<b>3a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
<b>b</b>	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

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

**Public Charity Status and Public Support**

**2010**

**Open to Public Inspection**

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

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

Department of the Treasury  
Internal Revenue Service

Name of the organization  
Robin Hood Foundation

Employer identification number

13-3441066

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box )

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

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
<b>Total</b>									

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	133,415,265	153,760,584	147,428,689	167,268,932	147,526,786	749,400,256
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4 Total.</b> Add lines 1 through 3	133,415,265	153,760,584	147,428,689	167,268,932	147,526,786	749,400,256
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						179,298,276
<b>6 Public Support.</b> Subtract line 5 from line 4						570,101,980

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
<b>7</b> Amounts from line 4	133,415,265	153,760,584	147,428,689	167,268,932	147,526,786	749,400,256
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,544,593	5,198,290	2,577,393	2,777,022	844,475	13,941,773
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on	140,852	46,357	0	0	199,478	386,687
<b>10</b> Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	2,585,289	1,302,097	1,420,687	676,100	1,331,027	7,315,200
<b>11 Total support</b> (Add lines 7 through 10)						771,043,916

**12** Gross receipts from related activities, etc (See instructions) **12****13 First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** **Section C. Computation of Public Support Percentage**

<b>14</b> Public Support Percentage for 2010 (line 6 column (f) divided by line 11 column (f))	<b>14</b>	73.939%
<b>15</b> Public Support Percentage for 2009 Schedule A, Part II, line 14	<b>15</b>	78.698%

**16a 33 1/3% support test—2010.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization **b 33 1/3% support test—2009.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization **17a 10%-facts-and-circumstances test—2010.** If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization **b 10%-facts-and-circumstances test—2009.** If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization **18 Private Foundation** If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) 	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
<b>8 Public Support</b> (Subtract line 7c from line 6)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) 	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
<b>13 Total support</b> (Add lines 9, 10c, 11 and 12)						
<b>14 First Five Years</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> 						

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

<b>15</b> Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	<b>15</b>	
<b>16</b> Public support percentage from 2009 Schedule A, Part III, line 15	<b>16</b>	

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

<b>17</b> Investment income percentage for <b>2010</b> (line 10c column (f) divided by line 13 column (f))	<b>17</b>	
<b>18</b> Investment income percentage from <b>2009</b> Schedule A, Part III, line 17	<b>18</b>	
<b>19a 33 1/3% support tests—2010.</b> If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization 		
<b>b 33 1/3% support tests—2009.</b> 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 <b>stop here</b> . The organization qualifies as a publicly supported organization 		
<b>20 Private Foundation</b> If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions 		

**Part IV** **Supplemental Information.** Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

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<b>Facts And Circumstances Test</b>
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SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2010

Open to Public Inspection

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. See separate instructions.

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 35a (Proxy Tax), then

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

Table with 2 columns: Name of the organization (Robin Hood Foundation) and Employer identification number (13-3441066)

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

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

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

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

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

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities \$
2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$
3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b \$
4 Did the filing organization file Form 1120-POL for this year? Yes No
5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments

Table with 5 columns: (a) Name, (b) Address, (c) EIN, (d) Amount paid from filing organization's funds, (e) Amount of political contributions received

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

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

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)	(a) Filing Organization's Totals	(b) Affiliated Group Totals												
<b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying)	0													
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying)	0													
<b>c</b> Total lobbying expenditures (add lines 1a and 1b)	0													
<b>d</b> Other exempt purpose expenditures	125,739,714													
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d)	125,739,714													
<b>f</b> Lobbying nontaxable amount Enter the amount from the following table in both columns	1,000,000													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 35%; text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 65%; text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </tbody> </table>			If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000													
Over \$17,000,000	\$1,000,000													
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f)	250,000													
<b>h</b> Subtract line 1g from line 1a If zero or less, enter -0-														
<b>i</b> Subtract line 1f from line 1c If zero or less, enter -0-														
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

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

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
<b>2a</b> Lobbying non-taxable amount	0	0	0	0	0
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					0
<b>c</b> Total lobbying expenditures	0	0	0	0	0
<b>d</b> Grassroots non-taxable amount	0	0	0	0	0
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					0
<b>f</b> Grassroots lobbying expenditures	0	0	0	0	0

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

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

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

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

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

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

**Part IV Supplemental Information**

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

Identifier	Return Reference	Explanation

SCHEDULE D (Form 990)

OMB No 1545-0047

Supplemental Financial Statements

2010

Open to Public Inspection

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

Department of the Treasury Internal Revenue Service

Name of the organization Robin Hood Foundation

Employer identification number 13-3441066

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4: Total number at end of year, Aggregate contributions to (during year), Aggregate grants from (during year), Aggregate value at end of year.

- 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

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

- 1 Purpose(s) of conservation easements held by the organization (check all that apply): Preservation of land for public use, Protection of natural habitat, Preservation of open space, Preservation of an historically important land area, Preservation of a certified historic structure.

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

- a Total number of conservation easements
b Total acreage restricted by conservation easements
c Number of conservation easements on a certified historic structure included in (a)
d Number of conservation easements included in (c) acquired after 8/17/06

Table with 2 columns: Held at the End of the Year. Rows 2a, 2b, 2c, 2d.

- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year
4 Number of states where property subject to conservation easement is located
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year
7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?
9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1; (ii) Assets included in Form 990, Part X
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: a Revenues included in Form 990, Part VIII, line 1; b Assets included in Form 990, Part X

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

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

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

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

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

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

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

**b** If "Yes," explain the arrangement in Part XIV and complete the following table

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

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

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

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

	(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
<b>1a</b> Beginning of year balance . . . . .					
<b>b</b> Contributions . . . . .					
<b>c</b> Investment earnings or losses . . . . .					
<b>d</b> Grants or scholarships . . . . .					
<b>e</b> Other expenditures for facilities and programs . . . . .					
<b>f</b> Administrative expenses . . . . .					
<b>g</b> End of year balance . . . . .					

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

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

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

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

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

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

Description of investment	(a) Cost or other basis (Investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land . . . . .				
<b>b</b> Buildings . . . . .				
<b>c</b> Leasehold improvements . . . . .		5,166,482	2,570,932	2,595,550
<b>d</b> Equipment . . . . .		897,464	549,669	347,795
<b>e</b> Other . . . . .		1,885,950	704,338	1,181,612
<b>Total.</b> Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				4,124,957

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other (A) INVESTMENTS IN LIMITED	116,493,543	F
<b>Total.</b> (Column (b) should equal Form 990, Part X, col (B) line 12 )	116,493,543	

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

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
<b>Total.</b> (Column (b) should equal Form 990, Part X, col (B) line 13 )		

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

(a) Description	(b) Book value
<b>Total.</b> (Column (b) should equal Form 990, Part X, col.(B) line 15.)	

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

1 (a) Description of Liability	(b) Amount
Federal Income Taxes	0
<b>Total.</b> (Column (b) should equal Form 990, Part X, col (B) line 25 )	0

2. Fin 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

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

<b>1</b>	Total revenue (Form 990, Part VIII, column (A), line 12)	<b>1</b>	140,810,020
<b>2</b>	Total expenses (Form 990, Part IX, column (A), line 25)	<b>2</b>	125,503,723
<b>3</b>	Excess or (deficit) for the year Subtract line 2 from line 1	<b>3</b>	15,306,297
<b>4</b>	Net unrealized gains (losses) on investments	<b>4</b>	6,972,858
<b>5</b>	Donated services and use of facilities	<b>5</b>	-235,991
<b>6</b>	Investment expenses	<b>6</b>	
<b>7</b>	Prior period adjustments	<b>7</b>	
<b>8</b>	Other (Describe in Part XIV)	<b>8</b>	
<b>9</b>	Total adjustments (net) Add lines 4 - 8	<b>9</b>	6,736,867
<b>10</b>	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	<b>10</b>	22,043,164

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>1</b>	148,080,892
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
<b>a</b>	Net unrealized gains on investments . . . . .	<b>2a</b>	6,972,858
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>	264,808
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIV) . . . . .	<b>2d</b>	33,206
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	7,270,872
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	140,810,020
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIV) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	
<b>5</b>	Total Revenue Add lines <b>3</b> and <b>4c</b> . (This should equal Form 990, Part I, line 12 ) . . . . .	<b>5</b>	140,810,020

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

<b>1</b>	Total expenses and losses per audited financial statements . . . . .	<b>1</b>	126,037,728
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25		
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>	500,799
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>	
<b>c</b>	Other losses . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIV) . . . . .	<b>2d</b>	33,206
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	534,005
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	125,503,723
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIV) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	
<b>5</b>	Total expenses Add lines <b>3</b> and <b>4c</b> . (This should equal Form 990, Part I, line 18 ) . . . . .	<b>5</b>	125,503,723

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
Reconciliation of Revenue	Part XII, Line 2d & part XIII, line 2d	Rental Expenses Reclassified to Offset Rental Income 33,206
fin 48	Part x, Line 2	robin hood follows the accounting guidance for uncertainties in income tax positions which require that a tax position be recognized or derecognized based on a "more likely than not" threshold this applies to positions taken or expected to be taken in a tax return robin hood does not believe its activities result in any uncertain tax positions that would be material to the consolidated financial statements taken as a whole Further, Robin Hood has processes in place to ensure the maintenance of its tax-exempt status, to identify and report unrelated income, determine its filing and tax obligations in jurisdictions for which it has nexus, and to assess other matters that may be considered tax positions accordingly, a loss contingency is recognized when it is probable that a liability has been incurred as of the date of the consolidated financial statements and the amount of the loss can be reasonably estimated Management believes that no such loss contingencies exist







**Part IV Foreign Forms**

- 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)*  Yes  No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*  Yes  No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)*  Yes  No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)*  Yes  No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)*  Yes  No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).*  Yes  No



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

**Supplemental Information Regarding  
Fundraising or Gaming Activities**

OMB No 1545-0047

**2010**

**Open to Public  
Inspection**

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

Department of the Treasury  
Internal Revenue Service

Name of the organization  
Robin Hood Foundation

**Employer identification number**

13-3441066

**Part I Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

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

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

**2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  **Yes**  **No**

**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. Form 990-EZ filers are not required to complete this table.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
event associates	fundraising dinner	Yes		84,038,198	85,000	83,953,198
<b>Total</b>				84,038,198	85,000	83,953,198

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

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

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

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		<u>benefit dinner</u> (event type)	<u>rock concert</u> (event type)	<u>4</u> (total number)	(Add col (a) through col (c))
<b>Revenue</b>	<b>1</b> Gross receipts . . . . .	83,791,215	246,983	1,580,118	85,618,316
	<b>2</b> Less Charitable contributions . . . . .	82,628,315	194,723	1,468,020	84,291,058
	<b>3</b> Gross income (line 1 minus line 2) . . . . .	1,162,900	52,260	112,098	1,327,258
<b>Direct Expenses</b>	<b>4</b> Cash prizes . . . . .				
	<b>5</b> Non-cash prizes . . . . .				
	<b>6</b> Rent/facility costs . . . . .	4,901,256	68,680	5,628	4,975,564
	<b>7</b> Food and beverages . . . . .				
	<b>8</b> Entertainment . . . . .	2,993,130	105,712	525,560	3,624,402
	<b>9</b> Other direct expenses . . . . .				
	<b>10</b> Direct expense summary Add lines 4 through 9 in column (d) . . . . . ▶				8,599,966
<b>11</b> Net income summary Combine lines 3 and 10 in column (d) . . . . . ▶				-7,272,708	

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

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

**9** Enter the state(s) in which the organization operates gaming activities \_\_\_\_\_

**a** Is the organization licensed to operate gaming activities in each of these states? . . . . .  Yes  No

**b** If "No," Explain \_\_\_\_\_

**10a** Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . . .  Yes  No

**b** If "Yes," Explain \_\_\_\_\_

**11** Does the organization operate gaming activities with nonmembers?  Yes  No

**12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No

**13** Indicate the percentage of gaming activity operated in

<b>a</b> The organization's facility	<b>13a</b>
<b>b</b> An outside facility	<b>13b</b>

**14** Provide the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶

Address ▶

**15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No

**b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ▶ \$ \_\_\_\_\_

**c** If "Yes," enter name and address

Name ▶

Address ▶

**16** Gaming manager information

Name ▶

Gaming manager compensation ▶ \$ \_\_\_\_\_

Description of services provided ▶ \_\_\_\_\_

Director/officer       Employee       Independent contractor

**17** Mandatory distributions

**a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No

**b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ \_\_\_\_\_

**Part IV** Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
Schedule G, Part I, Column b(III)		Custody arrangement with event associates with regard to funds raised in connection with robin hood's annual benefit Event associates ("EA") handles the ticketing for robin hood's ("RH") annual benefit rh develops the guest list and mails the invitations when donors buy tickets (either cash or pledges) EA releases the tickets to the donor every week (or more frequently at the busiest times) funds are remitted to RH and a summary report is prepared by EA and given to RH reporting pledges and payments to date RH records this activity in the financial records RH reconciles this report weekly to the financial records and also updates the invitation lists for all changes a full accounting is prepared at the end of the event and reconciled with RH records EA and RH work together on follow up on outstanding pledges
Schedule G, Part II		For purposes of reporting the expenditures related to the Robin Hood Foundation's special events, all food and beverages costs are included with in the rent/facility costs (Line 6) as the Foundation generally contracts for all such services with the facility providing the event

Schedule I (Form 990)

OMB No 1545-0047

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

2010

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization Robin Hood Foundation

Employer identification number

13-3441066

Part I General Information on Grants and Assistance

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

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

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

2 Enter total number of section 501(c)(3) and government organizations 192
3 Enter total number of other organizations 0

**Part III Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Use Schedule I-1 (Form 990) if additional space is needed.

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

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

Identifier	Return Reference	Explanation
Grants Within the US	Part I, Line 2	Robin Hood enters into a contractual agreement with each grant recipient. The contract specifies the purpose of the grant and prohibits the grantee from using any of Robin Hood's funds for a non-exempt purpose. Robin Hood releases grant funds in installments and requires a grantee to demonstrate that it has met certain benchmarks specified in the grant contract before an installment is released. During the term of the grant, a Robin Hood program staff member will typically schedule at least two visits with a grantee to discuss the progress of the grant. In addition, program officers may make unscheduled visits to observe the grantee's operations. At the end of the contract period, the grantee is required to submit a detailed final report on the grantee's use of Robin Hood's funds. In addition, Robin Hood contracts for third-party evaluation of grantee outcomes separate from its grant funding.

**Software ID:**  
**Software Version:**  
**EIN:** 13-3441066  
**Name:** Robin Hood Foundation

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
1199 SEIU Home Industry 330 West 42nd Street New York, NY 10036	71-1028611	501(c)(3)	575,000				General
Abyssinian Development Corp 4 West 125th Street New York, NY 10027	13-3552154	501(c)(3)	350,000				General
Accion New York 115 East 23rd Street 7th Floor New York, NY 10010	11-3317234	501(c)(3)	110,000	1,172	FMV	Donated Goods	General
Achievement First 1137 Herkimer Street Brooklyn, NY 11233	65-1203744	501(c)(3)	2,325,350	5,479	FMV	Donated Goods	General
Advocates for Children of NY 151 West 30th Street 5th Floor New York, NY 10001	11-2247307	501(c)(3)	1,077,001				General
After Hours Project Inc 1232 Broadway Brooklyn, NY 11221	33-1007278	501(c)(3)	300,000				General
Aid for AIDS 120 Wall Street New York, NY 10005	13-3954568	501(c)(3)	175,000	517	FMV	Donated Goods	General
Aids Center of Queens County 97-45 Queens Blvd Queens, NY 11374	11-2837894	501(c)(3)	175,000				General
AIDS Service Center of Lower Manhattan 80 5th Ave New York, NY 10011	13-3562071	501(c)(3)	300,000	3,103	FMV	Donated Goods	General
Albert Einstein College of Medicine 1165 Morris Park Avenue Rousso Bld Bronx, NY 10461	13-1624225	501(c)(3)	465,000	1,724	FMV	Donated Goods	General
Andrew Glover Youth Program 100 Centre 1541 New York, NY 10013	13-3267496	501(c)(3)	360,000	345	FMV	Donated Goods	General
Argus Community Inc 760 East 160th Street Bronx, NY 10456	23-7359002	501(c)(3)	150,000				General

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Association to Benefit Children 419 East 86th Street New York, NY 10128	13-3303089	501(c)(3)	550,000	776	FMV	Donated Goods	General
Astor Services for Children and Families 6339 Mill Street PO Box 5005 Rhinebeck, NY 12572	53-0196617	501(c)(3)	200,000				General
Audubon Family Planning Center 525 East 68th St Box 156 New York, NY 10021	13-3160356	501(c)(3)	675,000				General
Bank Street College of Education Liberty Leads 610 W 112th St New York, NY 10025	13-5562167	501(c)(3)	190,000	466	FMV	Donated Goods	General
Beginning with Children Foundation 575 Lexington Avenue New York, NY 10022	11-3588704	501(c)(3)	175,000	2,069	FMV	Donated Goods	General
Bellvue NYU Program for Survivors of Torture (NYU) 726 Broadway 2nd Floor Room 238 New York, NY 10003	13-5562308	501(c)(3)	264,750	147	FMV	Donated Goods	General
Bloomingdale Family Program 125 West 109th Street New York, NY 10025	13-2638566	501(c)(3)	300,000				General
Bowery Residents' Committee Inc 3254 Lafayette St 8th Floor New York, NY 10012	13-2736659	501(c)(3)	500,000	862	FMV	Donated Goods	General
Broadway Housing Communities 583 Riverside Drive New York, NY 10031	13-3212867	501(c)(3)	131,743				General
Bronx Educational Opportunity Center (CUNY) 1666 Bathgate Avenue Bronx, NY 10457	13-3696471	501(c)(3)	755,000				General
Bronx Laboratory High School 800 East Gun Hill Road 4th Floor New York, NY 10467	80-0158339	501(c)(3)	200,000	1,207	FMV	Donated Goods	General
Bronx Preparatory Charter School 3872 Third Avenue Bronx, NY 10457	16-1571685	501(c)(3)	300,000	2,216	FMV	Donated Goods	General

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRONXWORKS2054 Morris Ave Bronx, NY 10453	13-3254484	501(c)(3)	639,609	2,009	FMV	Donated Goods	General
Brookdale Hospital Healthy Families New York1 Brookdale Plaza Brooklyn, NY 11212	11-1631746	501(c)(3)	360,000	560	FMV	Donated Goods	General
Brookdale Hospital Live Live Right1 Brookdale Plaza Brooklyn, NY 11212	11-1631746	501(c)(3)	380,000	431	FMV	Donated Goods	General
Brooklyn Community Services285 Schermerhorn Street Brooklyn, NY 11217	11-1630780	501(c)(3)	120,000	2,155	FMV	Donated Goods	General
Brooklyn Educational Opportunity Center (SUNY) 1666 Bathgate Avenue Bronx, NY 10457	13-3696471	501(c)(3)	120,000	216	FMV	Donated Goods	General
Brooklyn Kindergarten Society1360 Fulton Street New York, NY 11216	11-2555446	501(c)(3)	215,000	1,422	FMV	Donated Goods	General
Center for Alternative Sentencing and Employment 346 Broadway 3rd Floor West New York, NY 10013	13-2668080	501(c)(3)	150,000	1,310	FMV	Donated Goods	General
Center for Court Innovation (Fund for the City of) 520 Eighth Avenue New York, NY 10018	13-2612524	501(c)(3)	200,000	1,724	FMV	Donated Goods	General
Center for Employment Opportunities32 Broadway New York, NY 10004	13-3843322	501(c)(3)	300,000				General
Center for Environment Economy & Society (Columbi) 110 Low Memorial Library New York, NY 10027	13-5598093	501(c)(3)	992,000				General
Center for Urban Community Services198 East 121st Street New York, NY 10035	13-3687891	501(c)(3)	800,000	54,172	FMV	Donated Goods	General
Charles B Wang Community 125 Walker St New York, NY 10013	13-2739694	501(c)(3)	350,000				General

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

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Children's Aid Society 350 East 88th Street New York, NY 10128	13-5562191	501(c)(3)	4,500,000	862	FMV	Donated Goods	General
Children's Defense Fund 15 Maiden Lane New York, NY 10038	52-0895622	501(c)(3)	800,000				General
Children's Health Fund 215 West 125th Street New York, NY 10027	13-3468427	501(c)(3)	600,000	603	FMV	Donated Goods	General
Children's Storefront School 70 East 129th Street New York, NY 10035	13-2940671	501(c)(3)	250,000	1,724	FMV	Donated Goods	General
Children's Trauma Institute (NYU School of Medicine) 726 Broadway 2nd Floor Room 238 New York, NY 10003	13-5562308	501(c)(3)	400,000				General
City Harvest 575 8th Avenue 4th Floor New York, NY 10018	13-3170676	501(c)(3)	400,000	2,371	FMV	Donated Goods	General
Classroom Inc 245 Fifth Avenue New York, NY 10016	13-3666846	501(c)(3)	100,000				General
Coalition for Hispanic Family Services 315 Wyckoff Avenue Brooklyn, NY 11237	13-3546023	501(c)(3)	445,000				General
Coalition for Homeless 129 Fulton Street New York, NY 10038	13-3072967	501(c)(3)	501,425	690	FMV	Donated Goods	General
College & Community Fellowship 365 Fifth Avenue New York, NY 10016	31-1720017	501(c)(3)	432,379				General
College of Staten Island Office of Continuing Education 33 West 42nd St New York, NY 10036	13-1988190	501(c)(3)	100,000				General
Common Ground 505 8th Avenue New York, NY 10018	11-3048002	501(c)(3)	900,000	50,233	FMV	Donated Goods	General

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Community Access2 Washington 9th Floor New York, NY 10004	23-7399839	501(c)(3)	501,425				General
Comprehensive Development Inc240 Second Avenue New York, NY 10003	13-3861648	501(c)(3)	250,000	905	FMV	Donated Goods	General
Credit Where Credit is Due 4211 Broadway New York, NY 10033	13-3849263	501(c)(3)	1,041,081				General
Cristo Rey New York High School112 East 106th Street New York, NY 10029	03-0495750	501(c)(3)	85,000	58,519	FMV	Donated Goods	General
Cypress Hills Local Development Corp625 Jamaica Avenue Brooklyn, NY 11208	11-2683663	501(c)(3)	350,000	1,552	FMV	Donated Goods	General
Democracy Preparatory Charter School207 West 133rd Street New York, NY 10030	20-3683193	501(c)(3)	290,000	2,586	FMV	Donated Goods	General
Dominican Sisters Family Health Service279 Alexander Avenue Bronx, NY 10454	13-1740242	501(c)(3)	315,000				General
Dream Charter School333 East 100th Street Ground Floor New York, NY 10029	26-1841386	501(c)(3)	200,000				General
East River Development Alliance12-11 40th Avenue Long Island City, NY 11101	86-1096987	501(c)(3)	130,000				General
East Side Settlement House 337 Alexander Avenue Bronx, NY 10454	13-1623989	501(c)(3)	340,000	80,551	FMV	Donated Goods	General
Edith and Marks Jewish Community House of Bensonhu7802 Bay Parkway Bensonhurst, NY 11214	11-1633484	501(c)(3)	265,000				General
Education Reform Now928 Broadway 505 New York, NY 10011	20-3687838	501(c)(3)	1,900,000				General

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

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Educators for Excellence (Education Equality Project) 333 West 39th St Suite 703 New York, NY 10018	26-3252725	501(c)(3)	75,000				General
Episcopal Social Services 305 Seventh Avenue New York, NY 10001	13-3709095	501(c)(3)	250,000	3,224	FMV	Donated Goods	General
Exalt 150 Court Street Brooklyn, NY 11201	22-5540955	501(c)(3)	120,000	129	FMV	Donated Goods	General
FAN4KIDS 1026 Washington St Hoboken, NJ 07030	26-0092086	501(c)(3)	70,000				General
Federal Employment and Guidance Service 315 Houson Street New York, NY 10013	13-1624000	501(c)(3)	1,075,000	7,543	FMV	Donated Goods	General
Fifth Avenue Committee 621 DeGraw Street Brooklyn, NY 11217	11-2475743	501(c)(3)	1,701,788				General
Food Bank for New York City 39 Broadway New York, NY 10006	13-3179546	501(c)(3)	1,150,000				General
Friends of the Children 218 West 113th Street New York, NY 10026	06-1597902	501(c)(3)	275,000	103	FMV	Donated Goods	General
Fund for Public Schools for School of One 52 Chambers Street Room 320 New York, NY 10007	13-2612524	501(c)(3)	750,000				General
Fund for Public Schools 52 Chambers Street Room 305 New York, NY 10007	11-2656137	501(c)(3)	850,000	26,103	FMV	Donated Goods	General
Future Leaders Institute 134 West 122nd Street New York, NY 10027	20-2633976	501(c)(3)	175,000	862	FMV	Donated Goods	General
Future Now at Bronx Community College (CUNY) West 181 Street University Avenue Bronx, NY 10453	13-1988190	501(c)(3)	320,000	256,200	FMV	Donated Goods	General

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Global Kids Inc 137 East 25th Street New York, NY 10010	13-3629485	501(c)(3)	300,000				General
Goddard Riverside Community Ctr 593 Columbia Avenue New York, NY 10024	13-1893908	501(c)(3)	620,000	259	FMV	Donated Goods	General
Good Shepherd Services 305 7th Avenue 9th Floor New York, NY 10001	13-5598710	501(c)(3)	2,270,000	1,293	FMV	Donated Goods	General
Good Shepherd Services Lifelink 305 7th Avenue 9th Floor New York, NY 10001	13-5598710	501(c)(3)	425,000				General
Grace Institute 1233 Second Avenue New York, NY 10065	13-1641069	501(c)(3)	150,000				General
Graham Windham 33 Irving Place New York, NY 10003	13-2926426	501(c)(3)	380,000				General
Grameen America 500 W Cummings Park Ste 5200 Woburn, MA 01801	20-8497991	501(c)(3)	300,000				General
Grand Street Settlement 80 Pitt Street New York, NY 10002	13-5562230	501(c)(3)	300,000	1,724	FMV	Donated Goods	General
Greenhope Services for Women Inc 448 East 119th Street New York, NY 10035	13-2813350	501(c)(3)	120,000	1,293	FMV	Donated Goods	General
Groundwork Inc 595 Sutter Avenue Brooklyn, NY 11207	73-1625176	501(c)(3)	113,000	647	FMV	Donated Goods	General
Harlem Children's Zone 35 East 125th Street New York, NY 10035	23-7112974	501(c)(3)	2,135,000	202,148	FMV	Donated Goods	General
Harlem Children's Zone Asthma Initiative (Fund for 121 Ave of the America New York, NY 10013	13-2612524	501(c)(3)	750,000	103	FMV	Donated Goods	General

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Harlem Health Promotion (Columbia University)110 Low Memorial Library New York, NY 10027	13-5598093	501(c)(3)	400,000				General
Harlem RBI Inc333 East 100th Street New York, NY 10029	13-4025290	501(c)(3)	400,000	39,400	FMV	Donated Goods	General
Harlem United Community AIDS Center Inc306 Lenox 2nd Floor New York, NY 10027	13-3461695	501(c)(3)	1,400,000	3,017	FMV	Donated Goods	General
Harlem Village Academies 401 7th Ave 18th Floor New York, NY 10001	13-4186070	501(c)(3)	475,000	2,759	FMV	Donated Goods	General
HELPSI Inc1401 University Avenue Bronx, NY 10452	13-3464470	501(c)(3)	187,500	172	FMV	Donated Goods	General
Henry Street Settlement265 Henry Street New York, NY 10002	13-1562242	501(c)(3)	525,000	655	FMV	Donated Goods	General
Hetrick-Martin Institute2 Astor Place New York, NY 10003	13-3104537	501(c)(3)	365,000				General
Highbridge Community Life Center979 Ogdon Avenue Bronx, NY 10452	13-3015539	501(c)(3)	450,000				General
HIV Law Project15 Maiden Lane New York, NY 10038	13-3730564	501(c)(3)	376,748				General
Housing Works57 Willoughby Street New York, NY 11201	13-3584089	501(c)(3)	550,000	690	FMV	Donated Goods	General
iMentor40 Exchange Place New York, NY 10021	30-0105507	501(c)(3)	400,000	431	FMV	Donated Goods	General
Institute for Family Health16 East 16th Street New York, NY 10003	13-3273402	501(c)(3)	1,660,000				General

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Inwood House 320 East 82nd Street New York, NY 10028	13-5562254	501(c)(3)	280,000	1,379	FMV	Donated Goods	General
Iris House 2348 AC Powell New York, NY 10030	13-3699201	501(c)(3)	350,000	603	FMV	Donated Goods	General
Jane Barker Brooklyn Child Advocacy (Safe Horizon) 320 Schermerhorn Brooklyn, NY 11201	13-2946970	501(c)(3)	200,000				General
Jericho Project 306 W 94th St Room 1W New York, NY 10025	13-3213525	501(c)(3)	575,771	59,950	FMV	Donated Goods	General
Jewish Child Care Association 120 Wall Street New York, NY 10016	13-1624060	501(c)(3)	775,000	1,293	FMV	Donated Goods	General
Kingsborough Community College 2001 Oriental Blvd Brooklyn, NY 11235	13-1988190	501(c)(3)	355,000				General
Kingsbridge Heights Community Center 3101 Kinsbridge Terrace Bronx, NY 10463	13-2813809	501(c)(3)	70,000				General
KIPP Foundation 909 3rd Ave New York, NY 10022	20-3971209	501(c)(3)	250,000				General
KIPP New York City Inc 625 West 133rd Street New York, NY 10027	20-3971209	501(c)(3)	2,212,800	6,379	FMV	Donated Goods	General
Lawyers for Children 110 Lafayette Street New York, NY 10013	13-3202043	501(c)(3)	400,000	1,207	FMV	Donated Goods	General
League Treatment Center 30 Washington Street Brooklyn, NY 11201	11-2867436	501(c)(3)	500,000	1,207	FMV	Donated Goods	General
Legal Services of New York City 350 Broadway New York, NY 10013	13-2600199	501(c)(3)	300,000				General

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Little Sisters of the Assumption 333 East 115th Street New York, NY 10029	13-2867881	501(c)(3)	325,000	474	FMV	Donated Goods	General
Lower East Side Harm Reduction Center 25 Allen Street New York, NY 10002	13-3570544	501(c)(3)	400,000				General
Make the Road New York 301 Grove Street Brooklyn, NY 11237	11-3344389	501(c)(3)	300,000	431	FMV	Donated Goods	General
Mayor's Fund to Advance New York City 1 Centre Street 23rd Fl New York, NY 10007	13-3783906	501(c)(3)	1,825,000				General
MDRC 16 East 34th Street New York, NY 10016	23-7379473	501(c)(3)	875,000				General
Metropolitan Council on Jewish Poverty 80 Maiden Lane New York, NY 10038	13-2738818	501(c)(3)	390,000	276	FMV	Donated Goods	General
MINKWON 136-19 41st Avenue 3rd Floor Flushing, NY 11355	11-2710506	501(c)(3)	8,530	302	FMV	Donated Goods	General
Mount Sinai Hospital 312-320 East 94th Street New York, NY 10128	13-6171197	501(c)(3)	550,000	776	FMV	Donated Goods	General
Nativity Mission Center 204 Forsyth Street New York, NY 10002	13-1968980	501(c)(3)	80,000				General
Neighborhood Economic Development Advocacy Project 299 Broadway Suite 706 New York, NY 10007	13-3842270	501(c)(3)	150,000	103	FMV	Donated Goods	General
Neighbors Together 2094 Fulton Street Brooklyn, NY 11233	11-2632109	501(c)(3)	150,000	259	FMV	Donated Goods	General
New Alternatives for Children 37 West 26th Street New York, NY 10010	13-3149298	501(c)(3)	150,000				General

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New Profit Inc 2 Canal Park Cambridge, MA 02141	04-3396766	501(c)(3)	100,000				General
New Settlement Apartments 1512 Townsend Avenue Bronx, NY 10452	14-1719016	501(c)(3)	475,000	1,095	FMV	Donated Goods	General
New York City Center for Charter School Excellence 111 Broadway New York, NY 10006	20-0759687	501(c)(3)	200,000				General
New York City District Council of Carpenters 395 Hudson Street New York, NY 10014	13-6227443	501(c)(3)	505,000				General
New York City College Of Technology (CUNY) 300 Jay Street Howard Building 4t Brooklyn, NY 11201	13-1988190	501(c)(3)	390,000	172	FMV	Donated Goods	General
New York Harm Reduction Educators Inc 953 Southern Blvd Bronx, NY 10459	13-3272001	501(c)(3)	302,000				General
New York Legal Assistance Group 7 Hanover Sq 18th Floor New York, NY 10004	13-3505428	501(c)(3)	75,000	1,336	FMV	Donated Goods	General
New York Presbyterian Hospital Columbia-Presbyterian Medical Center New York, NY 10032	13-3957095	501(c)(3)	650,000				General
Nontraditional Employment for Women 243 West 20th Street New York, NY 10011	13-3254769	501(c)(3)	1,100,000	1,293	FMV	Donated Goods	General
Northside Center for Child Development 1301 Fifth Avenue New York, NY 10029	13-1656679	501(c)(3)	825,000	2,948	FMV	Donated Goods	General
Opportunities for a Better Tomorrow 783 Fourth Avenue Brooklyn, NY 11232	11-2934620	501(c)(3)	700,000	113,582	FMV	Donated Goods	General
Outreach Project Inc 117-11 Mytle Avenue Richmond Hill, NY 11418	11-2621537	501(c)(3)	270,000	5,172	FMV	Donated Goods	General

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Part of the Solution2763 Webster Avenue Bronx, NY 10458	13-3425071	501(c)(3)	270,000	157,606	FMV	Donated Goods	General
Partnership with Children299 Broadway New York, NY 10007	13-5596751	501(c)(3)	1,208,100	776	FMV	Donated Goods	General
Per Scholas1231 Lafayette Avenue Bronx, NY 10474	04-3252955	501(c)(3)	631,408	86	FMV	Donated Goods	General
PHI349 East 149th Street Bronx, NY 10451	13-3575492	501(c)(3)	1,175,000	828	FMV	Donated Goods	General
Phipps Community Development Corporation 902 Broadway 13th Floor New York, NY 10010	13-2707665	501(c)(3)	250,000				General
Project Hospitality100 Park Avenue Staten Island, NY 10302	13-3234441	501(c)(3)	300,000				General
Project Renewal200 Varick Street New York, NY 10014	13-2802882	501(c)(3)	250,000	259	FMV	Donated Goods	General
Providence House703 Lexington Avenue Brooklyn, NY 11221	11-2594653	501(c)(3)	300,000	517	FMV	Donated Goods	General
Queens Community House 108-25 62nd Drive Forest Hills, NY 11375	11-2375583	501(c)(3)	300,000				General
Race to the Top Schools (Small Grants)		501(c)(3)	50,000				General
Ralph Lauren Center for Cancer Care and Prevention 1919 Madison Avenue New York, NY 10035	02-0597827	501(c)(3)	370,000				General
Resource Training Center Inc482 39th Street Brooklyn, NY 11232	11-3411856	501(c)(3)	145,000	414	FMV	Donated Goods	General

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Safe Horizon 2 Lafayette Street New York, NY 10007	13-2946970	501(c)(3)	400,000	1,103	FMV	Donated Goods	General
Sanctuary For Families PO Box 1406 New York, NY 10268	13-3193119	501(c)(3)	400,000	6,800	FMV	Donated Goods	General
SCO Family of Services 1 Alexander Glen Cove, NY 11542	11-2777066	501(c)(3)	2,550,000	862	FMV	Donated Goods	General
SelfHelp Community Service Inc 520 Eighth Avenue New York, NY 10018	13-1624178	501(c)(3)	283,750				General
Single Stop USA 1825 Park Avenue New York, NY 10035	20-8837690	501(c)(3)	13,435,000				General
Southwest Brooklyn Industrial Development Corp 241 41st Street Brooklyn, NY 11232	11-2508370	501(c)(3)	70,000				General
St John's Bread & Life Program 795 Lexington Avenue Brooklyn, NY 11221	11-3174514	501(c)(3)	350,000	431	FMV	Donated Goods	General
St Nick's Alliance 11 Catherine Street Brooklyn, NY 11211	51-0192170	501(c)(3)	600,306	862	FMV	Donated Goods	General
Stanley M Isaacs Neighborhood 415 East 93rd Street New York, NY 10128	13-2572034	501(c)(3)	275,000	61,712	FMV	Donated Goods	General
Staten Island Mental Health Society 669 Castleton Avenue Staten Island, NY 10301	13-5623279	501(c)(3)	250,000				General
Success Charter Network 34 West 118th Street New York, NY 10026	20-5298861	501(c)(3)	300,000	5,259	FMV	Donated Goods	General
Sustainable South Bronx 890 Garrison Avenue 4th Floor Bronx, NY 10474	02-0535999	501(c)(3)	303,800				General

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Teach For America Inc 315 West 36th Street 6th Fl New York, NY 10018	13-3541913	501(c)(3)	650,000				General
The Bridge Fund of New York 420 Lexington Ave Suite 300 New York, NY 10170	13-3824852	501(c)(3)	230,000				General
The Center for Attention and Learning Disorders at 381 Park Ave South New York, NY 10016	13-1624070	501(c)(3)	125,000				General
The Child Center of New York 6002 Queens Blvd Woodside, NY 11377	11-1733454	501(c)(3)	170,000				General
The Cooper Union for the Advancement of Science & Art 30 Cooper Square New York, NY 10003	13-5562985	501(c)(3)	200,000				General
The Doe Fund 232 East 84th Street New York, NY 10028	13-3412540	501(c)(3)	550,000	6,800	FMV	Donated Goods	General
The Door-A Center of Alternatives Inc 121 Ave of the Americas New York, NY 10013	13-6127348	501(c)(3)	375,000	1,293	FMV	Donated Goods	General
The Eagle Academy 137 Fifth Avenue New York, NY 10010	20-1532382	501(c)(3)	155,000	86	FMV	Donated Goods	General
The Family Center 315 West 36th St 4th Floor New York, NY 10018	13-3910716	501(c)(3)	400,000	41,603	FMV	Donated Goods	General
The Fortune Society 29-76 Northern Long Island City, NY 11101	13-2645436	501(c)(3)	465,000	603	FMV	Donated Goods	General
The Go Project 86 Fourth Avenue New York, NY 10003	13-5562327	501(c)(3)	409,400	328	FMV	Donated Goods	General
The Hope Program 1 Smith Street Brooklyn, NY 11201	13-3268539	501(c)(3)	506,000				General

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The Legal Aid Society 199 Water Street New York, NY 10038	13-5562265	501(c)(3)	200,000				General
The Restaurant Opportunities Center of New York 275 Seventh Avenue New York, NY 10001	03-0522321	501(c)(3)	133,528	129	FMV	Donated Goods	General
The Way to Work 353 Park Ave S New York, NY 11553	13-1878246	501(c)(3)	325,000	32,797	FMV	Donated Goods	General
Turnaround for Children 25 West 45th Street New York, NY 10036	06-1495529	501(c)(3)	500,000	1,207	FMV	Donated Goods	General
Turning Point 5220 Fourth Avenue Brooklyn, NY 11220	11-2837985	501(c)(3)	175,000	4,310	FMV	Donated Goods	General
Uncommon Knowledge and Achievement Inc (Relay Sch) 40 West 20th Street 6th Floor New York, NY 10011	27-5316628	501(c)(3)	44,355				General
Uncommon Schools Inc 826 Broadway Fl 9 New York, NY 10003	31-1488698	501(c)(3)	2,240,000	500,991	FMV	Donated Goods	General
University Settlement Society of New York Inc 14 Eldridge Street New York, NY 10002	13-5562374	501(c)(3)	330,000				General
Upwardly Global 401 Broadway New York, NY 10013	94-3346127	501(c)(3)	485,336	190	FMV	Donated Goods	General
Urban Arts Partnership 414 Broadway 6th Floor New York, NY 10013	13-3554734	501(c)(3)	189,500	862	FMV	Donated Goods	General
Urban Assembly Academy of Arts & Letters 225 Adelphi Street Brooklyn, NY 11205	11-0332039	501(c)(3)	100,000				General
Urban Assembly School for Law & Justice Adam Stre 283 Adams Street Brooklyn, NY 11201	90-0394877	501(c)(3)	300,000	431	FMV	Donated Goods	General

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Urban Health Plan 1065 Southern Blvd Bronx, NY 10459	23-7360305	501(c)(3)	250,000				General
Urban Pathways 575 Eighth Avenue New York, NY 10018	13-2933675	501(c)(3)	200,000	1,922	FMV	Donated Goods	General
Visiting Nurse Service of New York 107 East 70th Street New York, NY 10021	13-3189926	501(c)(3)	800,000	2,414	FMV	Donated Goods	General
Volunteers of Legal Service 54 Greene Street New York, NY 10013	13-3234630	501(c)(3)	175,000				General
West Side Campaign Against Hunger 263 West 86th Street New York, NY 10024	36-2167731	501(c)(3)	300,000	259	FMV	Donated Goods	General
Women In Need 115 West 31st Street New York, NY 10001	13-3164477	501(c)(3)	550,000	70,862	FMV	Donated Goods	General
Year Up 55 Exchange Place New York, NY 10005	04-3534407	501(c)(3)	225,000	169,974	FMV	Donated Goods	General
Yorkville Common Pantry 8 East 109th Street New York, NY 10029	13-3127972	501(c)(3)	500,600	328	FMV	Donated Goods	General
Young Women's Leadership Fdtn 322 Eighth Avenue New York, NY 10001	06-1517218	501(c)(3)	510,000				General

**Schedule J**  
**(Form 990)**

**Compensation Information**

OMB No 1545-0047

**2010**

**Open to Public Inspection**

**For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

**▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.**

**▶ Attach to Form 990. ▶ See separate instructions.**

Department of the Treasury  
Internal Revenue Service

**Name of the organization**  
Robin Hood Foundation

**Employer identification number**

13-3441066

**Part I Questions Regarding Compensation**

- 1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.
- |  |  |
|--|--|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees   |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

**b** If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

**3** Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- |   |   |
|---|---|
| <input type="checkbox"/> Compensation committee                         | <input type="checkbox"/> Written employment contract                                |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input checked="" type="checkbox"/> Form 990 of other organizations     | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment from the organization or a related organization?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

**Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.**

**5** For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?

If "Yes," to line 5a or 5b, describe in Part III

**6** For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?

If "Yes," to line 6a or 6b, describe in Part III

**7** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

**8** Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III

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

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

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

**Note.** The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) David Saltzman	(i)	464,079	60,534	9,611	48,400	25,421	608,045	0
	(ii)	0	0	0	0	0	0	0
(2) Michael Park	(i)	282,710	18,753	0	34,648	15,161	351,272	0
	(ii)	0	0	0	0	0	0	0
(3) Beth Zolkind	(i)	202,969	18,386	0	27,000	6,664	255,019	0
	(ii)	0	0	0	0	0	0	0
(4) Mark Bezos	(i)	264,240	17,473	0	32,454	22,374	336,541	0
	(ii)	0	0	0	0	0	0	0
(5) Susan Sack	(i)	261,562	17,797	0	33,009	9,279	321,647	0
	(ii)	0	0	0	0	0	0	0
(6) Michael Weinstein	(i)	382,407	26,594	4,512	43,500	20,262	477,275	0
	(ii)	0	0	0	0	0	0	0
(7) Laurence Jahns	(i)	283,786	18,974	0	35,027	17,377	355,164	0
	(ii)	0	0	0	0	0	0	0
(8) James Samalis	(i)	256,510	25,500	0	33,100	14,263	329,373	0
	(ii)	0	0	0	0	0	0	0
(9) Emary Aronson	(i)	224,044	19,478	0	31,900	9,159	284,581	0
	(ii)	0	0	0	0	0	0	0
(10) Susan Epstein	(i)	201,812	17,826	0	27,000	24,668	271,306	0
	(ii)	0	0	0	0	0	0	0
(11) Kristine Sudano	(i)	180,226	13,686	0	25,866	8,028	227,806	0
	(ii)	0	0	0	0	0	0	0
( 12 )								
( 13 )								
( 14 )								
( 15 )								
( 16 )								

**Part III Supplemental Information**

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

Identifier	Return Reference	Explanation
Schedule J, Part I, Line 7		Robin Hood's compensation program includes, for all employees, a variable bonus in addition to base salary, which may or may not be paid, depending upon the overall financial condition of the organization and the individual performance of each staff member. In 2010, the Executive Committee of the board reviewed and approved bonus awards, for staff officers and key employees, which were judged reasonable.

Schedule L (Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2010

Open to Public Inspection

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

Department of the Treasury Internal Revenue Service

Name of the organization Robin Hood Foundation

Employer identification number 13-3441066

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

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

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

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

Part II Loans to and/or From Interested Persons.

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

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

Part III Grants or Assistance Benefitting Interested Persons.

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

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

**Part IV Business Transactions Involving Interested Persons.**

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) jennifer schwartz	family member of director	87,294	employment		No

**Part V Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier	Return Reference	Explanation
Schedule L, Part IV Disclosure		The Robin Hood Foundation employs an individual, Jennifer Schwartz, who has a family relationship with a Board of Directors Member. By virtue of this employment relationship, the Robin Hood Foundation is disclosing one board member as not being independent for purposes of Part VI, Line 1(b). The amount reported, \$87,294, represents both salary and benefits provided to Ms. Schwartz.

SCHEDULE M (Form 990)

NonCash Contributions

OMB No 1545-0047

2010

Open to Public Inspection

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

Department of the Treasury Internal Revenue Service

Name of the organization Robin Hood Foundation

Employer identification number

13-3441066

Part I Types of Property

Table with 4 columns: (a) Check if applicable, (b) Number of Contributions or items contributed, (c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g, (d) Method of determining oncash contribution amounts. Rows include Art, Books, Cars, Securities, etc.

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

29

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

**Part II**

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

Identifier	Return Reference	Explanation
Schedule M, Line 32		The Robin Hood FOUndation receives numerous non-cash contributions in the form of securities throughout the year. These securities are immediately sold by the organization by its third-party investment brokers.

**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.**

OMB No 1545-0047

**2010**

**Open to Public  
Inspection**

**Name of the organization**  
Robin Hood Foundation

**Employer identification number**

13-3441066

Identifier	Return Reference	Explanation
Program Service Accomplishments	Part III, Line 4d	Management Assistance Robin Hood made monetary grants to build management capacity to 34 organizations receiving core grants Management assistance staff assesses the managerial capabilities of grantees and recommends consulting interventions to strengthen these organizations Consulting is arranged via donated professional services or monetary grants or provided by Robin Hood staff In-Kind Grants Robin Hood obtains donations of goods needed by organizations receiving its core grants These goods are then awarded to organizations receiving core grants and distributed to them free of charge

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, Line 2		Board of Directors Members Atim Barber, Tom Brokaw , Jeffrey Immelt, Brian Williams, and Jeff Zucker have a Business relationship Board of Directors Members Glenn Dubin and Bob Pittman have a Business relationship Board of Directors Members Julius Gaudio and Max Stone have a Business relationship Board of Directors Members Dan Och and David Solomon have a Business relationship Board of Directors Members John Sykes and Bob Pittman have a Business relationship Executive Director and President, David Saltzman, and Board of Directors Member, Paul Tudor Jones have a business relationship

<b>Identifier</b>	<b>Return Reference</b>	<b>Explanation</b>
Form 990, Part VI, Section B, Line 11		Robin Hood's board of directors has delegated to the audit committee the authority to review Robin Hood's Form 990 prior to filing Pursuant to that authority, after review by Robin Hood's tax and legal advisors, a draft of the Form 990 was sent to the full audit committee for the committee's review and comment A copy of Robin Hood's Form 990 was provided to each member of the board prior to filing

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, Line 12		<p>Robin Hood's conflict of interest policy, which is incorporated into Robin Hood's By-Laws, places an affirmative obligation on each officer, director and staff member to disclose any contract or transaction in which he or she has an interest at the time that the contract or transaction is considered by the board or committee authorizing the contract or transaction. The policy also requires each officer, director and staff member to furnish an annual conflict of interest disclosure statement. The disclosure statement includes an affirmation by the individual signing the statement that he or she has read Robin Hood's conflict of interest policy and agrees to abide by it. The disclosure data is reviewed by Robin Hood's general counsel, who maintains a list of relationships that could give rise to a conflict of interest. Prior to board or committee meetings where contracts are to be voted on, the general counsel reviews the agenda and identifies any potential or actual conflicts of interest. If a potential or actual conflict of interest is identified, it is disclosed to the board or committee. If the individual with the potential or actual conflict of interest is present at the meeting, he or she may participate in the information-gathering stage of the board's or committee's discussion but must leave the room for the final deliberation and vote.</p>

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, Line 15		Robin Hood's Executive Committee has the authority to make decisions relating to the compensation of its top management official and key employees (Note Robin Hood does not compensate its directors or non-staff officers ) The committee is assisted in this process by an outside compensation consultant, legal counsel and Robin Hood's Audit Committee Compensation decisions are made with reference to comparability data for similarly qualified persons in functionally comparable roles at similarly situated organizations presented by the outside compensation consultant Robin Hood complies with the "rebuttable presumption" procedures for determining that compensation is reasonable under Internal Revenue Code Section 4958 Deliberations and decisions regarding compensation arrangements are contemporaneously documented in meeting minutes

Identifier	Return Reference	Explanation
Form 990, Part VI, Section C, Line 19		Robin Hood's Certificate of Incorporation, By-Laws (which include Robin Hood's conflict of interest policy) and audited financial statements are made available to the public on request. A summary of Robin Hood's audited financial statements (also approved by Robin Hood's auditors) is posted on Robin Hood's website. A copy of Robin Hood's Form 990 is posted on <a href="http://www.guidestar.org">www.guidestar.org</a> and is available upon request at the organization's principal place of business.

**SCHEDULE R  
(Form 990)**

**Related Organizations and Unrelated Partnerships**

OMB No 1545-0047

**2010**

**Open to Public Inspection**

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

Department of the Treasury  
Internal Revenue Service

**Name of the organization**  
Robin Hood Foundation

**Employer identification number**  
13-3441066

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

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) RH Bronx Rider LLC 826 broadway 9th floor new york, NY 10003 13-3441066	real estate	DE	0	0	na
(2) rh parks llc 826 broadway 9th floor new york, NY 10003 13-3441066	real estate	DE	0	0	na
(3) robin hood holdings 826 broadway 9th floor new york, NY 10003 13-3441066	real estate	DE	0	0	na

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization	
						Yes	No

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

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

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

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

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

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

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

- a** Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties **(iv)** rent from a controlled entity
- b** Gift, grant, or capital contribution to other organization(s)
- c** Gift, grant, or capital contribution from other organization(s)
- d** Loans or loan guarantees to or for other organization(s)
- e** Loans or loan guarantees by other organization(s)

- f** Sale of assets to other organization(s)
- g** Purchase of assets from other organization(s)
- h** Exchange of assets
- i** Lease of facilities, equipment, or other assets to other organization(s)

- j** Lease of facilities, equipment, or other assets from other organization(s)
- k** Performance of services or membership or fundraising solicitations for other organization(s)
- l** Performance of services or membership or fundraising solicitations by other organization(s)
- m** Sharing of facilities, equipment, mailing lists, or other assets
- n** Sharing of paid employees

- o** Reimbursement paid to other organization for expenses
- p** Reimbursement paid by other organization for expenses

- q** Other transfer of cash or property to other organization(s)
- r** Other transfer of cash or property from other organization(s)

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

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

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			



**Part VII Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

<b>Identifier</b>	<b>Return Reference</b>	<b>Explanation</b>
Schedule R, Part I		On January 29th, 2010, Robin Hood transferred its interests in RH Parks, LLC to an uncontrolled not-for-profit entity. Accordingly, for purposes of Schedule R, Part I, Robin Hood has no share of RH Parks, LLC's income or total assets at year end.

**Additional Data**

**Software ID:**  
**Software Version:**  
**EIN:** 13-3441066  
**Name:** Robin Hood Foundation

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Alan D Schwartz Chair	3 0	X		X				0	0	0
Lee Ainslie III Vice-Chair	3 0	X		X				0	0	0
Tom Brokaw Vice-Chair (thru July 2010)	1 5	X		X				0	0	0
Daniel S O ch Vice-Chair	3 0	X		X				0	0	0
Peter F Borish Secretary and Treasurer	3 0	X		X				0	0	0
Victoria Bjorklund Director	2 0	X						0	0	0
Scott Bommer Director	1 0	X						0	0	0
Geoffrey Canada Director	1 0	X						0	0	0
Maurice Chessa Director	1 0	X						0	0	0
Steven A Cohen Director	1 0	X						0	0	0
Glenn R Dubin Director	2 0	X						0	0	0
Marian Wright Edelman Director	1 0	X						0	0	0
David Einhorn Director	1 0	X						0	0	0
Julius Gaudio Director	2 0	X						0	0	0
Doug Haynes Director	2 0	X						0	0	0
Jeffrey R Immelt Director	5	X						0	0	0
Paul Tudor Jones II Director	3 0	X						0	0	0
Peter D Kiernan III Director	3 0	X						0	0	0
Kenneth G Langone Director	5	X						0	0	0
Mary McCormick Director	5	X						0	0	0
Doug Morris Director	5	X						0	0	0
Gwyneth Paltrow Director	5	X						0	0	0
Robert Pittman Director	1 0	X						0	0	0
David Puth Director	3 0	X						0	0	0
Larry Robbins Director	2 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
David Solomon Director	5	X						0	0	0
Jes Staley Director	5	X						0	0	0
Barry Sternlicht Director	5	X						0	0	0
Max Stone Director	2 0	X						0	0	0
John Sykes Director	1 0	X						0	0	0
Harvey Weinstein Director	5	X						0	0	0
Brian Williams Director	1 0	X						0	0	0
Jeff Zucker Director	1 0	X						0	0	0
Atim Barber Director	1 0	X						0	0	0
David Saltzman Executive Director & President	65 0			X				534,224	0	73,821
Michael Park SVP, Finance & Administration	60 0			X				301,463	0	49,809
Beth Zolkind Controller	60 0			X				221,355	0	33,664
Mark Bezos SVP, Development	60 0				X			281,713	0	54,828
Susan Sack MD, Real Estate	60 0				X			279,359	0	42,288
Michael Weinstein SVP, Programs	60 0				X			413,513	0	63,762
Laurence Jahns SVP, Advancement	60 0					X		302,760	0	52,404
James Samalis MD, Events	60 0					X		282,010	0	47,363
Emary Aronson MD, Relief Fund & Education	60 0					X		243,522	0	41,059
Susan Epstein MD, Jobs & Economic Security	60 0					X		219,638	0	51,668
Kristine Sudano MD, Development	60 0					X		193,912	0	33,894