

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental information to Form 990 or 990-EZ

OMB No. 1545-0047

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990 or 990-EZ.

Name of the organization
FRIENDS OF SAX-ZIM BGG

Employer identification number
27-4631890

01. Description of other expenses (Part I, line 16)

Description	Amount
MARKETING	610
RESEARCH MATERIALS	421
PETTY CASH	140
WEBSITE	202

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2012)

EEA

Form 990-EZ **Short Form**
Return of Organization Exempt From Income Tax

OMB No. 1545-1150

2012

Open to Public Inspection

Form 990-EZ

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code

▶ Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form. ▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2012 calendar year, or tax year beginning 04-01, 2012, and ending 03-31, 2013

B Check if applicable:
 Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

C Name of organization: **FRIENDS OF SAX-ZIM BGG**
 Number and street (or P.O. box, if mail is not delivered to street address):
 Room/suite:
PO BOX 177
 City or town, state or country, and ZIP + 4:
Wrenshall, MN 55797

D Employer identification number: **27-4631890**

E Telephone number: **(218) 341-3350**

F Group Exemption Number:

G Accounting Method: Cash Accrual Other (specify) ▶

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: ▶ **WWW.SAXZIM.ORG**

J Tax-exempt status (check only one): 501(c)(3) 501(c) 501(c)(29) 4947(a)(1) or 527

K Check if the organization is not a section 509(a)(3) supporting organization or section 527 organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.

L Also lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ.

Total **\$ 82,651**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I

Line	Description	Amount
1	Contributions, gifts, grants, and similar amounts received	79,147
2	Program service revenue including government fees and contracts	3,504
3	Membership dues and assessments	
4	Investment income	
5a	Gross amount from sale of assets other than inventory	
5b	Less: cost or other basis and sales expenses	
5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	
6	Gaming and fundraising events	
a	Gross income from gaming (attach Schedule G if greater than \$15,000)	
b	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	
c	Less: direct expenses from gaming and fundraising events	
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	
7a	Gross sales of inventory, less returns and allowances	
b	Less: cost of goods sold	
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	
8	Other revenue (describe in Schedule O)	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	82,651
10	Grants and similar amounts paid (list in Schedule O)	
11	Benefits paid to or for members	
12	Salaries, other compensation, and employee benefits	
13	Professional fees and other payments to independent contractors	20,281
14	Occupancy, rent, utilities, and maintenance	3,500
15	Printing, publications, postage, and shipping	6,374
16	Other expenses (describe in Schedule O)	1,383
17	Total expenses. Add lines 10 through 16	31,538
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	51,113
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	22,377
20	Other changes in net assets or fund balances (explain in Schedule O)	
21	Net assets or fund balances at end of year. Combine lines 18 through 20	73,490

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2012)

EEA

Part II Balance Sheets (see the instructions for Part II)
 Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	22,377	41,539
23 Land and buildings	0	31,951
24 Other assets (describe in Schedule O)	0	0
25 Total assets	22,377	73,490
26 Total liabilities (describe in Schedule O)	0	0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	22,377	73,490

Part III Statement of Program Service Accomplishments (see the instructions for Part III)
 Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose? **PROMOTE, PROTECT PRESERVE THE SAX-ZIM BOG**

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Program Title	(A) Expenses	(B) Expenses
28 LAND ACQUISITION: PURCHASE OF 49 ACRES OF PRISTINE BLACK SPRUCE/TAMARACK BOG IN THE HEART OF THE SAX-ZIM BOG IMPORTANT BIRD AREA. HUNDREDS OF BIRDS AND PHOTOGRAPHERS	28a 31,453	
29 OMI, WINTER BIRD GASTS: WE PUT IN A PARKING PAD AND FENDER TRAIL THIS YEAR, AND PURCHASED SEVERAL NEW FEEDERS INCLUDING THE CENTERPIECE "MESA-FEDDER". ALSO PUT UP ABOUT	29a 5,581	
30 BIRDBATHING: BIRDS EVENT TO RAISE AWARENESS OF OUR WINTER BIRDS. 25 PARTICIPANTS AND MANY MORE FOLLOWED ONLINE. TENNIS COMPETED TO SEE HOW MANY SPECIES OF BIRDS THEY COULD FIND.	30a 2,514	
31 Other program services (describe in Schedule O)	31a	
32 Total program service expenses (add lines 28a through 31a)	32 39,550	

Part IV List of Officers, Directors, Trustees, and Key Employees List each one even if not compensated (see the instructions for Part IV)
 Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and title	(b) Average hours per week devoted to organization	(c) Reportable compensation (Form W-2) (do not enter 0)	(d) Total compensation (do not enter 0)	(e) Estimated amount of other compensation
KIM FOBERT DIRECTOR	1	0	0	0
DAVID BENSON CHAIR	3	0	0	0
DAVE STEININGER TREASURER	1	0	0	0
LORI WILLIAMS DIRECTOR	1	0	0	0
FATIS NICOLETTI SECRETARY	1	0	0	0

990 Overflow Statement 2012
 PAGE 1
 Name(s) as shown on return: FRIENDS OF SAX-ZIM BOG EIN 27-4631890

Description	Amount
DONATIONS	\$ 25,279
GRANTS	53,366
another donation	500
Total:	\$ 79,147

Description	Amount
PROFESSIONAL FUNDRAISING	\$ 2,985
DIRECTOR	8,895
OTHER SERVICES	8,399
round off error	2
Total:	\$ 20,281

Description	Amount
OFFICE SUPPLIES	\$ 273
RENT UTILITIES	1,052
INSURANCE	1,375
LEASE	800
Total:	\$ 3,500

Description	Amount
PRINTING COPYING	\$ 1,422
POSTAGE	339
EVENT EXPENSES	3,050
TRAVEL	1,563
Total:	\$ 6,374

Description	Amount
CHECKING	\$ 21,530
SAVINGS	20,609
Total:	\$ 41,539

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I. **46** Yes No

Part VI Section 501(c)(3) organizations only
 All Section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.
 Check if the organization used Schedule O to respond to any question in this Part VI

47 Did the organization engage in lobbying activities or have a section 501(b) election in effect during the tax year? If "Yes," complete Schedule C, Part II. **47** Yes No

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E. **48** Yes No

49a Did the organization make any transfers to an exempt non-charitable related organization? **49a** Yes No

b If "Yes," was the related organization a section 527 organization? **49b** Yes No

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee paid more than \$100,000	(b) Average hourly per week derived to calendar	(c) Reportable non-pecuniary (Form W-2-UB/MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
None				

f Total number of other employees paid over \$100,000 **f** _____

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of services	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000 **d** _____

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A. Yes No

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, this true, correct, and complete. Discussion of preparer netting (Form 990-EZ) is based on all information of which preparer has any knowledge.

Sign Here Signature of officer: **DAVID BRINSON** Title: **69-26-2013**
 Signature of preparer: **DAVID BRINSON, PRESIDENT**
 Type of prep. firm and title: _____
 Preparer's name: **THOMAS J CURRAN** Preparer's signature: **THOMAS J CURRAN** Date: **10-07-2013** Check if self-employed EIN: **003057625**

Preparer Use Only Firm's name: **CURRAN TAX SERVICE INC** Firm's address: **210 EAST SUPERIOR STREET DULUTH MN 55802** Phone no.: **218-720-6000**

May the IRS discuss this return with the preparer shown above? See instructions. Yes No
 Form 990-EZ (2012)

Schedule B
 (Form 990, 990-EZ, or 990-PF)
 Department of the Treasury
 Internal Revenue Service

Schedule of Contributors

OMB No. 1545-0047
2012

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

Name of the organization: **FRIENDS OF SAK-ZIM BOG** Employer identification number: **27-4631890**

Organization type (check one):

- Filers of:**
- Form 990 or 990-EZ 501(c)(3) (enter number) organization
 - 4947(a)(1) nonexempt charitable trust not treated as a private foundation
 - 527 political organization
 - Form 990-PF 501(c)(3) exempt private foundation
 - 4947(a)(1) nonexempt charitable trust treated as a private foundation
 - 501(c)(3) taxable private foundation

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

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

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

- Special Rules**
- For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 35-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 11 or (ii) Form 990-EZ, line 1. Complete Parts I and II.
 - For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
 - For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. **S**

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

Name of organization: FRIENDS OF SAK-ZIM BOG; Employer identification number: 27-4631890

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

Table with 4 columns: (a) No., (b) Name, address, and ZIP + 4, (c) Total contributions, (d) Type of contribution. Includes entries for STEVEN C LEUTHOLD FAMILY FOUNDATION and LLOYD K JOHNSON FOUNDATION.

Part V Other information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V.

Form with questions 33-45b regarding organizational activities, financials, and compliance. Includes checkboxes for 'Yes' and 'No' and a 'Schedule O' checkbox.

Part III Support Schedule for Organizations Described in Section 509(a)(2)
 (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.
 If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1. Gifts, grants, contributions, and membership fees received. (Do not include any "pass-through" grants.)						
2. Gross receipts from admissions, merchandise sales or services performed, or facilities rented or any activity that is related to the organization's exempt purpose.						
3. Gross receipts from activities that are not an unrelated trade or business under sec. 513.						
4. Tax-exempt bond proceeds for the organization or its benefit and other paid to or expended on its behalf.						
5. The value of services or facilities furnished by a governmental unit to the organization without charge.						
6. Total. Add lines 1 through 5.						
7a. Amounts included on lines 1, 2, and 3 received from disqualified persons.						
b. Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 6 for the year.						
8. Add lines 7a and 7b.						
9. Public support. (Summarize line 7c from line 8.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9. Amounts from line 8.						
10a. Gross income from interest, dividends, payments received on securities loans, royalties, and income from similar sources.						
b. Unrelated business taxable income (less section 513 "pass-through" amounts) acquired after June 30, 1975.						
c. Add lines 10a and 10b.						
11. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12. Other income. Do not include gain or loss from the sale of capital assets. (Explain in Part IV.)						
13. Total support. (Add lines 9, 10c, 11, and 12.)						
14. First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.						

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

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

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

20. 33 1/3% support tests - 2011. If the organization did not check a box on line 14 or line 19a, and the 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.

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

Application for Extension of Time To File an Exempt Organization Return

Form **8868**

(Rev. January 2012)

Department of the Treasury
Internal Revenue Service

File a separate application for each return.

OMB No. 1545-1706

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check the box
- If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868. If you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time, you can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 990-T. Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension, check this box and complete Part I only.

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or
	FRIENDS OF SAX-2EM BOG	27-4631890
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. if a P.O. box, see instructions.	Social security number (SSN)
	PO BOX 277	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	Wrentham, MA 01977	

Enter the Return code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-1 (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

The books are in the care of DAVID BENSON 427 N 16TH AVE E Duluth, MN 55812

Telephone No. 218-341-3350 FAX No.

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) if this is for the whole group, check this box If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 11-15-2012 to file the exempt organization return for the organization named above. This extension is for the organization's return for: calendar year 20__ or

tax year beginning 04-01-2012, and ending 03-31-2012.

2. If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return

3a. If the application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.

3b. If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.

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

CAUTION: If you are going to make an electronic federal tax payment with this Form 8868, use Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see Instructions. Form 8868 (Rev. 1-2012)

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2012

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

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

Name of the organization

Employer identification number

FRIENDS OF SAK-YIM BOG

27-4632890

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).
- 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 III.)
- 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 III.)
- 8 A common trust described in section 170(b)(1)(A)(vii). (Complete Part III.)
- 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 11a through 11h.
 - a Type I
 - b Type II
 - c Type III-Functionally integrated
 - d Type III-Nonfunctionally integrated

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).

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:

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 supported organization?	1199	Yes	No
(ii) A family member of a person described in (i) above?	1199		
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	1199		

Provide the following information about the supported organization(s).

(A) Name of supported organization	(B) EIN	(C) Type of organization described on lines 1-8 above or 100 (see instructions)	(D) Is the organization a governing instrument?		(E) Is the organization a 501(c)(3) or 501(c)(29) organization?		(F) Is the organization a 501(c)(3) or 501(c)(29) organization in the U.S.?		(G) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									

Total
For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
EFA

Schedule A (Form 990 or 990-EZ) 2012

Schedule A (Form 990 or 990-EZ) 2012

FRIENDS OF SAK-YIM BOG

27-4632890

Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")				28,810	78,547	107,457
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3				28,810	78,547	107,457
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						17,102
6 Public support. Subtract line 5 from line 4						90,355

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4				28,810	78,547	107,457
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets. (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						107,457
12 Gross receipts from related activities, etc. (See instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	84.08	%
15 Public support percentage from 2011 Schedule A, Part II, line 14	15		%
16 33 1/3% support test - 2012. 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.			<input checked="" type="checkbox"/>
33 1/3% support test - 2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.			<input type="checkbox"/>
17a 10%-facts-and-circumstances test - 2012. 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.			<input type="checkbox"/>
b 10%-facts-and-circumstances test - 2011. 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.			<input type="checkbox"/>
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.			<input type="checkbox"/>

EFA

Schedule A (Form 990 or 990-EZ) 2012