Return of Organization Exempt From Income Tax

OMB No. 1545-0047

06/30, 20 13

Department of the Treasury Internal Revenue Service

A For the 2012 calendar year, or tax year beginning

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.

07/01, 2012, and ending

р.			C Name of	organization									D Employer ic	lentific	ation num	ber				
D C	neck if ap		REAL	SCHOOL C	SARDENS															
	Addre chang		Doing Bu	siness As		20-5946552 E Telephone number														
	Name	change	Number	and street (or F	O. box if ma	il is not deli	vered to street	addres	s)	Room/s	uite		E Telephone r	number	•					
	Initial	l return	1700	UNIVERSI	TY DRI	VE #26	0						(817) 348-8102							
	Termi	inated	City or to	own, state or cou	intry, and ZIF) + 4														
	Amen	nded	FORT	WORTH, I	x 7610	7							G Gross receipts \$ 1,402							
	Applic	cation		and address			EANNE MO	CART	ГҮ				H(a) Is this a group return for Yes							
	_ pendi	ing		UNIVERSI						6107			affiliates? H(b) Are all affili	Yes	X No No					
ī -	Tax-ex	empt st			501(c)				4947(a)(1)		527		If "No," attach a list. (see instructions)							
				ALSCHOOL(. ,	, ,	(moort no.	,	1017(4)(1)	0.	1021		H(c) Group exen	nntion nu	ımher 🕨	,				
				Corporation	Trust	Associ	ation	ther >	•	1.5	/ear of	format	tion: 2007 M	-		micile.	TX			
	rt I		mmary	Corporation	Hust	7,33001	ation O	uici p			cai oi	Torritat	1011. 2007 III	Otato	or regar do	miciic.				
Ιά																				
	1	Briefly	/ describe i	the organizati	on's missio) משכום מ	n or most	Significant a	ctivities	S:	ישרווייים										
8		WE CREATE LEARNING GARDENS THAT GROW SUCCESSFUL STUDENTS.																		
nar																				
Ver	•		. 41-1																	
Activities & Governance	2		this box		-				•				of its net asse				0			
∞ ర	3	Numb	er of voting	g members of	tne govern	ing body (Part VI, line	1a)						3			$\frac{8}{7}$.			
ij	4	Numb	er of indep	endent voting	members	of the gov	erning body	(Part	VI, line 1b)					4						
듩	5	Total	number of	individuals en	nployed in (calendar y	ear 2012 (Pa	art V, II	ne 2a)					5		1	13.			
ĕ	6	Total	number of	volunteers (es	timate if neo	cessary)								6			,840.			
																	0			
	b	Net ur	nrelated bu	siness taxable	e income fro	om Form 9	990-T, line 34	4			• • •			. 7b		4.34	0			
	_	Contributions and grants (Part VIII, line 1h)									-		Prior Year			ent Ye				
ne	8	Contri	ibutions an	d grants (Part	VIII, line 1h)		[COPY	Y FOR	╗		1,692,8	_	1,		,673.			
Revenue	9	Progra	am service	revenue (Part	VIII, line 2g)			PUBLIC IN	ISPECTI	_{ОМ}		68,3	_			,253.			
Re	10	IIIVESI	illelli illooi	ne (Fait Viii,	column (A),	111165 3, 4,	, and ru)						-10,8	_			<u>,897.</u>			
				Part VIII, colur									3,2				<u>,882.</u>			
				add lines 8 thr									1,753,7		1,	367	<u>,911.</u>			
	13	Grant	s and simil	ar amounts pa	id (Part IX,	column (A	a), lines 1-3)							0			0			
	14	Benefits paid to or for members (Part IX, column (A), line 4)												0			0			
es				ompensation,									714,1		821	,956.				
Expenses	16 a	Profes	ssional fun	draising fees (Part IX, colu	ımn (A), li	ne 11e)						4,0			0				
ă X	b	Total 1	fundraising	expenses (Pa	ırt IX, colum	ın (D), line	e 25) >		<u> 199,73</u>	7										
	17	Other	expenses	(Part IX, colun	nn (A), lines	11a-11d,	11f-24f)						522,9		527	<u>,650.</u>				
				Add lines 13-									1,241,1				<u>,606.</u>			
	19	Rever	nue less ex	penses. Subtr	act line 18 f	rom line 1	2						512,5	74.		18	,305.			
Net Assets or Fund Balances												Begin	ning of Current	Year	Enc	of Yea	ar			
set	20	Total	assets (Par	t X, line 16)									1,072,3	93.	1,	101	<u>,673.</u>			
d As	21	Total I	liabilities (F	Part X, line 26)									31,7	56.		42	,731.			
S.F.	22	Net as	ssets or fur	nd balances. S	Subtract line	21 from l	line 20						1,040,6	37.	1,	058	,942.			
Pa	rt II	Siç	gnature B	lock																
				eclare that I have ation of prepare									o the best of my	knowle	dge and be	elief, it i	s true,			
		T	pioto: Boolan	ation of proparo	(other than	011100171015		omane	лг от и тпотг р	Toparor no	ao any		Jugo.							
S	ign																			
Н	ere		Signature of	f officer									Date							
			Type or prin	t name and title																
_		Print/	Type prepar	er's name		Prepa	rer's signature)		Date)		Check if		PTIN					
Paid													self- employed	• [7 P013	3532	62			
	oarer	Firm's	s name 🕨	BKD,	LLP	1				<u> </u>			EIN ►							
Use	Only		address >			WAV CIT	TE 1100 DA	T.T.A.C	TY 75251					972	.702.8	262				
Mav	the II			eturn with the											X Y		No			
				Act Notice s				5. 70	,								(2012)			

Page 2 Form 990 (2012)

Pa		atement of Program Service Accomplishments eck if Schedule O contains a response to any question in this Part III	X
1		cribe the organization's mission:	
2	prior Form 9	ganization undertake any significant program services during the year which were not listed on the 990 or 990-EZ?	Yes X No
3		scribe these new services on Schedule O. rganization cease conducting, or make significant changes in how it conducts, any program	
	services? If "Yes," des	scribe these changes on Schedule O.	Yes X No
4	expenses. S	ne organization's program service accomplishments for each of its three largest program services, Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocated and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$) (Revenue \$) (Revenue \$)	2,703.
	SCHOOL GA	GARDEN INSTALLATION AND SUPPORT - SEE SCHEDULE O FOR	
) (Expenses \$ 411,251. including grants of \$) (Revenue \$ 12 TRAINING AND RESOURCES - SEE SCHEDULE O FOR FURTHER	38,550.)
	DETAILS		
4c	(Code:) (Expenses \$) (Expenses \$) (Revenue \$) Y ENGAGEMENT - SEE SCHEDULE O FOR FURTHER DETAILS)
	-		
4d		ram services (Describe in Schedule O.)	
_	(Expenses \$,,	
4e	Total progra	ram service expenses ► 1,039,470.	

Form 990 (2012)
Page 3

-ar	Checklist of Required Schedules		· ·	
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	_		
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	_		
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	_		
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	_		3.5
_	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	_		v
_	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		Х
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II			Λ_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	8		Х
^	complete Schedule D, Part III	0		Λ
9	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
. •	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			37
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"	120	Х	
L	complete Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	12a	Λ	
b	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section $170(b)(1)(A)(ii)$? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	40		37
20 -	If "Yes," complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a 20b		X
<u> </u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	ZUD		

Form 990 (2012) Page 4

Part	V Checklist of Required Schedules (continued)			
	·		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
24 a	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
		24a		Х
	through 24d and complete Schedule K. If "No," go to line 25	24b		21
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	0.4=		
_	to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	(/ (/ (/ C			3.7
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
•	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
-	complete Schedule N, Part II.	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
J 4	or IV, and Part V, line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	334		
D	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
26		330		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	26		v
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			37
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		٠,,	
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	

Form 990 (2012) Page 5

Par				
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. 1a 19 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.			
	Effect the number of Forms W-20 included in line 1a. Effect-0- in not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	10		
20	reportable gaming (gambling) winnings to prize winners?	1c		
Za	Statements, filed for the calendar year ending with or within the year covered by this return 13			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
D	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		Х
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.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
h	and services provided to the payor? If "Yes," did the organization notify the donor of the value of the goods or services provided?	7 b		21
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
٠	required to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990. Part VIII, line 12, for public use of club facilities 10b			
р 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
~	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
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			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

81599

Form **990** (2012) PAGE 6 Form 990 (2012) REAL SCHOOL GARDENS 20-5946552 Page 6

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 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......... 5

Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	,	X
secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	Coae		NI -
		4.0	Yes	No X
	Did the organization have local chapters, branches, or affiliates?	10a		Λ.
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	401		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	40-	Х	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	426	Х	
	rise to conflicts?	12b	21	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12c	Х	
40	describe in Schedule O how this was done	13	X	
13	Did the organization have a written whistleblower policy?	14	X	
14 15	Did the organization have a written document retention and destruction policy?	14		
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
a b	Other officers or key employees of the organization	15b	X	
D	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	. 55	•	
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
IVa	with a taxable entity during the year?	16a		Х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 5			าly)
	available for public inspection. Indicate how you made these available. Check all that apply.	. , ,		
	Own website			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict o	f inter	est p	olicy,
	and financial statements available to the public during the tax year.		·	•
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ne		
	organization: ▶JEFF CROSS 1700 UNIVERSITY DRIVE #260 FORT WORTH, TX 76107 817-348-8102			

JSA

Form 990 (2012) REAL SCHOOL GARDENS 20-5946552 Page **7**

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

				((C)					
(A)	(B)				ition			(D)	(E)	(F)
Name and Title	Average	(do r	(do not check more than one					Reportable	Reportable	Estimated
	hours per	hours per box, unless person is both an comp			compensation	compensation from	amount of			
	, ,	office	er and	d a d	irect	or/trust	tee)	from	related	other compensation
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations
(1) JEANNE MCCARTY	40.00									
EXECUTIVE DIRECTOR		Х		Х				121,943.	0	4,664.
(2) FRED THOMPSON	5.00									
BOARD CHAIR		Х		Х				0	0	0
(3) DELAINE EASTIN	2.00									
VICE CHAIRMAN		Х		Х				0	0	0
(4) ROBERT MENZI	2.00									
TREASURER		Х		Х				0	0	0
(5) KELLY GARRETT	2.00									
BOARD MEMBER		Х		Х				0	0	0
(6) KAREN DIELMAN	2.00									
BOARD MEMBER		Х						0	0	0
(7) CAROLINA M. MATA-TOVAR	2.00									
BOARD MEMBER		Х						0	0	0
(8) JULIE NEIMAT	2.00									
BOARD MEMBER		Х						0	0	0
(9) JEFF CROSS DIR OF FINANCE/OPERATIONS	40.00			Х				77,142.	0	7,864.
(10)										
(11)										
(12)										
(13)										
(14)										

Form **990** (2012)

JSA

	990 (2012)													age 8
Pai	t VII Section A. Officers, Directors, Tru	ustees, Ke	y En	plo	ye	es,	and F	ligl	hest Compensat	ed Emplo	yees (co	ontinue	ed)	
	(A)	(B)			(0	C)			(D)	(E)			(F)	
	Name and title	Average				sition			Reportable	Reporta	able		timated	
		hours per week (list any	,	ot check more than one nless person is both ar				compensation	compensati relate			ount of other		
		hours for	s for officer and a direct						from the	organiza			pensatio	on
		related	Individual trustee or director	Inst	Officer	ξ _e y	Hig	Former	organization	(W-2/1099	I .		om the	
		organizations below dotted	vidu	ituti	cer	em	hest	mer	(W-2/1099-MISC)			_	anizatior d related	
		line)	of all tr	onal		Key employee	con						nization	
			uste	Institutional trust		ee	Highest compensated employee							
			Ф	tee			ısate							
							ğ							
			_											
			_											
			-											
			-											
			-											
			-											
			-											
		 												
			-											
	Cult total							_	199,085.		0		12,5	28
10	Sub-total								199,083.		0		14,5	<u> </u>
	Total from continuation sheets to Part VII, S	-			• •	• •			199,085.		0		12,5	28
	Total (add lines 1b and 1c)) ro		\$100,000			12,5	20.
	reportable compensation from the organization			L	u ai	DOV	s) wiic	<i>J</i> 10	scerved more man	φ100,000	OI .			
													Yes	No
2	Did the examination list any former office	or directo		40.	ıoto	•	kov. o	. m n	lovos or highest		otod		103	110
	Did the organization list any former offic employee on line 1a? If "Yes," complete Sched											3		X
	• •											3		
	For any individual listed on line 1a, is the													
	organization and related organizations gro individual							i, (complete Scriedu	ie J ioi	Sucri	4		X
	Did any person listed on line 1a receive or							• •	rolated arganization		امرياء:	7		21
	for services rendered to the organization? <i>If "You have be a receive or the organization? If "You have be a receive or the organization? If "You have been a receive or the organization? If "You have been a receive or the organization? If "You have been a receive or the organization?" If "You have been a receive or the organization?" If "You have been a receive or the organization?" If "You have been a receive or the organization?" If "You have been a receive or the organization?" If "You have been a receive or the organization?" If "You have been a receive or the organization?" If "You have been a receive or the organization or the organization or the organization of the organization or the organ</i>											5		X
	tion B. Independent Contractors	oo, oompie	.5 501	·out	0	01	34011	p01						
	Complete this table for your five highest com	pensated i	ndene	ende	ent i	COn	tracto	rs t	hat received more	than \$100	0.000 of	:		
	compensation from the organization. Report of													
	year.						,		-	3				
	(A)								(B)			(C)		
	Name and business add	Iress							Description of se	rvices	Co	ompens	ation	
								_						

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 ▶

Form 990 (2012) REAL SCHOOL GARDENS 20-5946552 Page **9**

Part VIII Statement of Revenue

		Check if Schedule O contains a re	sponse to any quest	ion in this Part VIII			
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, gifts, grants,	la				
	h	Total. Add lines 1a-1f		1,339,673.			
eun			Business Code				
Program Service Revenue	2a b c d	PROFESSIONAL DEVELOPMENT SERVICES GARDEN PROJECTS PROGRAM FEES	900099	38,550. 2,703.	38,550. 2,703.		
Program	e f g	All other program service revenue Total. Add lines 2a-2f		41,253.			
	3 4 5	Investment income (including dividends, other similar amounts)	interest, and	2,286.			2,286.
	6a b c	Gross rents	(ii) Personal				
	d			0			
	7a	Gross amount from sales of assets other than inventory (i) Securit	es (ii) Other				
	b	Less: cost or other basis and sales expenses Gain or (loss)	34,367. -17,183.				
	d	Net gain or (loss)	▶	-17,183.			-17,183.
Other Revenue	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18					
the	b	Less: direct expenses					
0	9a	Net income or (loss) from fundraising eve Gross income from gaming activities. See Part IV, line 19		0			
	b c	Less: direct expenses Net income or (loss) from gaming activitie	. b	0			
		Gross sales of inventory, less returns and allowances					
	b	Less: cost of goods sold Net income or (loss) from sales of invento	. b				
		Miscellaneous Revenue	Business Code	0			
	11a						
	b	<u>-</u>					
	С	All other severe		1 000			1 000
	d e	All other revenue		1,882. 1,882.			1,882.
	12	Total revenue. See instructions		1,367,911.	41,253.		-13,015.

REAL SCHOOL GARDENS 20-5946552 Page **10**

Part IX Statement of Functional Expenses

Form 990 (2012)

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

_	Check if Schedule O contains a response				
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	0			
2	Grants and other assistance to individuals in	0			
•	the United States. See Part IV, line 22	Ŭ.			
3	Grants and other assistance to governments, organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				
·	trustees, and key employees	237,285.	144,918.	56,677.	35,690.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	479,357.	371,360.		107,997.
8	Pension plan accruals and contributions (include section				
	401(k) and 403(b) employer contributions)	14,065.	10,451.	88.	3,526.
9	Other employee benefits	48,832.	31,393.	6,387.	11,052.
10	Payroll taxes	42,417.	32,921.	391.	9,105.
11	Fees for services (non-employees):				
а	Management	0			
	Legal	0			
c	Accounting	0			
d	Lobbying	0			
е	Professional fundraising services. See Part IV, line 17	0			
1	Investment management fees	0			
9	Other. (If line 11g amount exceeds 10% of line 25, column	104 017	07.606	00 755	6 266
	(A) amount, list line 11g expenses on Schedule O.)	124,817.	97,696.	20,755.	6,366.
12	Advertising and promotion	32,362.	22,342.	5,081.	4,939.
13	Office expenses	32,302.	22,342.	5,061.	4,333.
14 15	Information technology	0			
15 16	Royalties	85,596.	63,309.	11,655.	10,632.
17	Occupancy	27,360.	22,063.	1,620.	3,677.
18	Travel	2773001	22,005.	1,020.	3,077.
. 5	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	26,611.	21,225.	1,225.	4,161.
23	Insurance	5,939.	1,932.	4,007.	
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
	GARDEN MATERIALS	167,058.	167,058.		
	EDUCATION PROGRAMMING/TRAINI	48,314.	48,314.		
c	COMMUNITY OUTREACH	9,127.	4,225.	2,438.	2,464.
	·				
	All other expenses	466.	263.	75.	128.
2 <u>5</u> 26	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	1,349,606.	1,039,470.	110,399.	199,737.
20	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here ► if following SOP 98-2 (ASC 958-720)	0			
	· /*****	OI.	1	1	

JSA 2E1052 1.000

Form 990 (2012) Page **11**

Part X Balance Sheet

	Check if Schedule O contains a response to any question in this Part X											
		·			(A) Beginning of year		(B) End of year					
	1	Cash - non-interest-bearing			200,455.	1	74,899.					
	2	Savings and temporary cash investments			456,326.	2	738,577.					
	3	Pledges and grants receivable, net			300,500.	3	223,217.					
	4	Accounts receivable, net			21,205.	4	2,000.					
	5	Loans and other receivables from current and	forme	r officers, directors,								
		trustees, key employees, and highest co	-									
10	6	Complete Part II of Schedule L Loans and other receivables from other disqualified pers 4958(f)(1)), persons described in section 4958(c)(3)(B) and sponsoring organizations of section 501(c)(9) volu organizations (see instructions). Complete Part II of Sche	contributing employers employees' beneficiary	0	6	0						
šets	7	Notes and loans receivable, net			0	7	0					
Assets	8	Inventories for sale or use			349.	8	0					
_	9	Prepaid expenses and deferred charges			11,229.	9	8,295.					
	10 a	Land, buildings, and equipment: cost or										
				281,707.								
	b	Less: accumulated depreciation			82,329.		54,685.					
	11	Investments - publicly traded securities			0	11	0					
	12	Investments - other securities. See Part IV, line 11			0	12	0					
	13	Investments - program-related. See Part IV, line 11			0	13	0					
	14	Intangible assets			14	0						
	15	Other assets. See Part IV, line 11			15	0						
_	16	Total assets. Add lines 1 through 15 (must equal		1,072,393.		1,101,673.						
	17	Accounts payable and accrued expenses		31,756.	17 18	42,731.						
	18 19	Grants payable			19	0						
	20	Deferred revenue			20	0						
"	21	Tax-exempt bond liabilities Escrow or custodial account liability. Complete Pa	art IV/	of Schodulo D		21	0					
Liabilities	22	Loans and other payables to current and for				21	U					
iiq		trustees, key employees, highest compen										
Lia		disqualified persons. Complete Part II of Schedule			0	22	0					
	23	Secured mortgages and notes payable to unrelate			0	23	0					
	24	Unsecured notes and loans payable to unrelated			0	24	0					
	25	Other liabilities (including federal income tax,										
		parties, and other liabilities not included on lines										
		of Schedule D			0	25	0					
	26	Total liabilities. Add lines 17 through 25			31,756.	26	42,731.					
ses		Organizations that follow SFAS 117 (ASC 958), complete lines 27 through 29, and lines 33 and	checl 34.	chere ► X and								
anc	27	Unrestricted net assets			650,637.	27	820,704.					
Bal	28	Temporarily restricted net assets			390,000.	28	238,238.					
Fund Balances	29	Permanently restricted net assets		<u></u>	0	29	0					
or Fu		Organizations that do not follow SFAS 117 (ASC 958) complete lines 30 through 34.	, chec	k here 🕨 🔃 and								
şts	30	Capital stock or trust principal, or current funds				30						
SSE	31	Paid-in or capital surplus, or land, building, or equ	iipmer	nt fund		31						
Net Assets or	32	Retained earnings, endowment, accumulated income	ome,	or other funds		32						
Š	33	Total net assets or fund balances			1,040,637.	33	1,058,942.					
_	34	Total liabilities and net assets/fund balances			1,072,393.	34	1,101,673.					

Form 990 (2012) Page **12**

Part	XI Reconciliation of Net Assets									
	Check if Schedule O contains a response to any question in this Part XI									
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,3	67,9	911.				
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,3	49,6	506.				
3	Revenue less expenses. Subtract line 2 from line 1	3			18,3	305.				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,0	40,6	537.				
5	Net unrealized gains (losses) on investments	5	(
6	6 Donated services and use of facilities									
7	<u> </u>									
8	Prior period adjustments	8				0				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line									
	33, column (B))	10		1,0	58,9	942.				
Part										
	Check if Schedule O contains a response to any question in this Part XII									
					Yes	No				
1	Accounting method used to prepare the Form 990: Cash X Accrual Other									
	If the organization changed its method of accounting from a prior year or checked "Other," e.	xpıaır	ı ın							
2-	Schedule O.			•		37				
Za	Were the organization's financial statements compiled or reviewed by an independent accountant?	ا امالا ما		2a		X				
	If "Yes," check a box below to indicate whether the financial statements for the year were comreviewed on a separate basis, consolidated basis, or both:	ipiied	1 01							
_	Separate basis Consolidated basis Both consolidated and separate basis			2b	Х					
b	Were the organization's financial statements audited by an independent accountant?			20						
	If "Yes," check a box below to indicate whether the financial statements for the year were audit separate basis, consolidated basis, or both:	ed o	n a							
	X Separate basis Consolidated basis Both consolidated and separate basis									
_	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for overs	iaht								
C	of the audit, review, or compilation of its financial statements and selection of an independent accour	-	,	2c	Х					
	If the organization changed either its oversight process or selection process during the tax year, e									
	" ""									
Schedule O. 3a 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?										
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	erao	the							
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au		0	3b						

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

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

Name of the organization

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

Employer identification number

REA	AL S	CHOOL	GARDENS								20-	-594	6552		
Pa	rt I	Reaso	n for Pub	lic Charity Status	s (All organizations mu	st con	nplete	this pa	art.) Se	e instr	uctions	i.			
The	orga	ınization i	is not a priv	ate foundation bed	cause it is: (For lines 1 th	rough	11, che	eck only	one box	x.)					
1		A churc	h, convention	on of churches, or	association of churches of	describ	ed in s	ection	170(b)(1)(A)(i)					
2	Щ				(1)(A)(ii). (Attach Schedul	-									
3		A hospit	tal or a coo	perative hospital s	ervice organization descri	bed in	sectio	n 170(k)(1)(A)	(iii).					
4		A medi	cal researc	h organization op	erated in conjunction wi	th a h	ospita	l descr	ibed in	sectio	n 170(k	o)(1)(<i>A</i>	۸)(iii).	Enter	the
		-		y, and state:											
5		An orga	anization op	erated for the be	nefit of a college or univer	ersity	owned	l or ope	erated b	y a go	vernme	ntal u	nit des	scribe	d in
				A)(iv). (Complete F	•										
6	Щ			-	or governmental unit des										
7	X	_		-	es a substantial part of its	s supp	ort fro	m a go	vernme	ental un	it or fro	om the	e gene	ral pu	ıblic
					(Complete Part II.)										
8			-		on 170(b)(1)(A)(vi). (Com	-									
9		_		-	es: (1) more than 331/3%									_	
	receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 331/3% of its														
	support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses														
4.0		-			ne 30, 1975. See section			-							
10	Н	•	_		ted exclusively to test for		•				•				41
11		_		-	rated exclusively for the			-							
					pported organizations de es the type of supporting					-				e sec	tion
			Type I		c Type III-Function	_					I-Non-fu	-		tearst	ha
е			• •		the organization is not	•	•			• •			•	_	
·	. Ш	-	_	=	gers and other than one			-		-	-			-	
		-		n 509(a)(2).	gere and earler man ene	00	. о р а		PP0.100	. o.ga				000	
f		. , .	•	. , . ,	n determination from the	e IRS	that it	is a T	vpe I. T	vpe II.	or Type	e III s	upport	ina	
			ation, check						,	,	- 71		- 1 1	٦	
g	ı	_			nization accepted any gift	or cor	ntributi	on from	any of	the					
			g persons?						•						
		(i) A p	person who	directly or indire	ectly controls, either alor	e or t	ogethe	er with	person	s desc	ribed in	ı (ii)		Yes	No
		and	d (iii) below,	the governing boo	dy of the supported organ	ization	?						11g(i)		
		(ii) A fa	amily memb	per of a person des	scribed in (i) above?								11g(ii)		
		(iii) A 3	5% control	led entity of a pers	on described in (i) or (ii) a	bove?							11g(iii)		
h)	Provide	the following	ng information abo	ut the supported organiza	ation(s)									
		ame of su		(ii) EIN	(iii) Type of organization	(iv)	ls the zation in		ou notify		s the	(vii) A	mount o		etary
		organizati	ION		(described on lines 1-9 above or IRC section	col. (i)	listed in		anization . (i) of		zation in rganized		suppo	σπ	
					(see instructions))	docui			upport?	in the					
						Yes	No	Yes	No	Yes	No				
(A)															
(B)															
(C)															
(D)															
(E)															
Tota	al														

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

Schedule A (Form 990 or 990-EZ) 2012

Schedule A (Form 990 or 990-EZ) 2012

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.)

Sec	tion A. Public Support						
Cale	ndar 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.")	1,209,077.	1,087,934.	1,198,804.	1,692,892.	1,339,673.	6,528,380.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0
4	Total. Add lines 1 through 3	1,209,077.	1,087,934.	1,198,804.	1,692,892.	1,339,673.	6,528,380.
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)						4,092,554.
6	Public support. Subtract line 5 from line 4.						2,435,826.
_	tion B. Total Support						2,433,020.
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	1,209,077.	1,087,934.	1,198,804.	1,692,892.	1,339,673.	6,528,380.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	55,571.	46,992.	31,846.	2,936.	2,286.	139,631.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . ATCH. 1	803.	348.	18,600.	2,796.	1,882.	24,429.
11	Total support. Add lines 7 through 10						6,692,440.
12	Gross receipts from related activities, etc. (s	,				12	148,272.
13	First five years. If the Form 990 is f organization, check this box and stop here	<u> </u>					
	tion C. Computation of Public Sup	•	•				26 40
14	Public support percentage for 2012 (li		-			14	36.40%
15	Public support percentage from 2011					15	24.14%
16a	331/3% support test - 2012. If the o	_					
	this box and stop here. The organization						
D	331/3% support test - 2011. If the co						
170	check this box and stop here . The organism 10%-facts-and-circumstances test - 2						
11a	10% or more, and if the organization						
	Part IV how the organization meets t					-	-
	organization			_			
h	10%-facts-and-circumstances test - 2						
D	15 is 10% or more, and if the organic	•					
	Explain in Part IV how the organizati						-
	supported organization				=	•	► □
18	Private foundation. If the organization						🗀
	instructions						•
		<u> </u>					<u></u>

Schedule A (Form 990 or 990-EZ) 2012 Page **3**

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.)

Sec	tion A. Public Support	,		,,		,	
Cale	ndar 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.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
	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 13 for the year						
_	Add lines 7a and 7b						
	Public support (Subtract line 7c from						
	line 6.)						
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6						
10 a	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	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	n's first, second,	third, fourth, or	fifth tax year a	s a section 501(c)(3)
	organization, check this box and stop here .	<u></u>	<u></u> .		<u></u> .	<u> </u>	▶ 🔲
Sec	tion C. Computation of Public Sup						
15	Public support percentage for 2012 (line 8,	column (f) divide	ed by line 13, colur	nn (f))		15	%
16	Public support percentage from 2011 Sche	dule A, Part III, lir	ne 15			16	%
Sec	tion D. Computation of Investmen	t Income Per	centage				
17	Investment income percentage for 2012 (lin					17	%
18	Investment income percentage from 2011	Schedule A, Part	III, line 17			18	%
19 a	331/3% support tests - 2012. If the org					e than 331/3%, a	and line
	17 is not more than 331/3%, check thi	s box and stor	here. The org	anization qualifies	s as a publicly	supported organi	zation 🕨 🗌
b	331/3% support tests - 2011. If the orga	nization did not	check a box on	line 14 or line 19	a, and line 16 is	s more than 331/3	3 %, and
	line 18 is not more than 331/3 %, check						
20	Private foundation. If the organization of	did not check	a box on line	14, 19a, or 19b	, check this bo	x and see instru	uctions ►

JSA 2E1221 1.000 Schedule A (Form 990 or 990-EZ) 2012 Page **4**

Part IV 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).

					ATTACHMENT 1	
SCHEDULE A, PART II -	OTHER INCOME	1				
DESCRIPTION	2008	2009	2010	2011	2012	TOTAL
OTHER INCOME	803.	521.	18,600.	2,796.	1,882.	24,602.
TOTALS	803	521	18,600	2,796.	1,882	24,602.

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2012

Name of the organization	Employer identification number	
REAL SCHOOL GARDENS		20-5946552
Organization type (check or	ne):	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private for	undation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private found	ation
	501(c)(3) taxable private foundation	
_	n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 one contributor. Complete Parts I and II.	or more (in money or
Special Rules		
under sections 50	(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support 9(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during t \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 11.	he year, a contribution of
during the year, to	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from tal contributions of more than \$1,000 for use <i>exclusively</i> for religious, charit poses, or the prevention of cruelty to children or animals. Complete Parts I, I	able, scientific, literary,
during the year, content to tall to more to year for an exclusion applies to this org	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from ontributions for use <i>exclusively</i> for religious, charitable, etc., purposes, but the han \$1,000. If this box is checked, enter here the total contributions that we wely religious, charitable, etc., purpose. Do not complete any of the parts unleanization because it received nonexclusively religious, charitable, etc., contributions	nese contributions did re received during the ess the General Rule ributions of \$5,000 or
990-EZ, or 990-PF), but it m	at is not covered by the General Rule and/or the Special Rules does not file sust answer "No" on Part IV, line 2 of its Form 990; or check the box on line -PF, to certify that it does not meet the filing requirements of Schedule B (Form 990).	H of its Form 990-EZ or on

JSA

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Part I	Contributors ((see instructions)	. Use du	plicate cop	oies of F	Part I if	additional	space is	needed.
--------	----------------	--------------------	----------	-------------	-----------	-----------	------------	----------	---------

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1 _		\$35,000.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2_		\$10,000.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3 _		\$50,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4 _		\$10,000.	Person X Payroll Noncash
			(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	
			a noncash contribution.) (d)
No.		Total contributions	a noncash contribution.) (d) Type of contribution Person Payroll Noncash (Complete Part II if there is

Part I	Contributors ((see instructions)	. Use du	plicate cop	oies of F	Part I if	additional	space is	needed.
--------	----------------	--------------------	----------	-------------	-----------	-----------	------------	----------	---------

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7 _		\$50,000.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8 _		\$25,000.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9 _		\$10,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_ 10 _		\$40,000.	Person X Payroll
		Ψ	Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(Complete Part II if there is
1	(b)	(c)	(Complete Part II if there is a noncash contribution.)
No.	(b)	(c) Total contributions	(Complete Part II if there is a noncash contribution.) (d) Type of contribution Person Payroll Noncash (Complete Part II if there is

Part I	Contributors	(see instructions).	. Use duplicate co	pies of Part I if a	dditional space is needed.
--------	---------------------	---------------------	--------------------	---------------------	----------------------------

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_ 13 _		\$10,000.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_ 14 _		\$50,000.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_ 15 _		\$34,055.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_ 16 _		\$10,000.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_ 17 _		\$15,000.	Person X Payroll Noncash
			(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	

Part I	Contributors ((see instructions)	. Use du	plicate cop	oies of F	Part I if	additional	space is	needed.
--------	----------------	--------------------	----------	-------------	-----------	-----------	------------	----------	---------

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
_ 19 _		\$300,000.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
_ 20 _		\$10,000.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
_ 21 _		\$176,922.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
_ 22 _		\$15,000.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
_ 23 _		\$30,000.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)		
(a) No.	(b)	(c)	(d)		
	Name, address, and ZIP + 4	Total contributions	Type of contribution		

Employer identification number 20-5946552

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
_ 25 _		\$15,000.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
_ 26 _		\$60,000.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
_ 27 _		\$15,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)		
I					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
I	(b) Name, address, and ZIP + 4	(c) Total contributions \$15,000.	(d) Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution.)		
No.		Total contributions	Person X Payroll Noncash (Complete Part II if there is		
No28 (a)	Name, address, and ZIP + 4	\$15,000.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)		
No28 (a) No.	Name, address, and ZIP + 4	\$15,000. (c) Total contributions	Person Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) Type of contribution Person Payroll Noncash (Complete Part II if there is		

Part I	Contributors	(see instructions).	. Use duplicate co	pies of Part I if add	itional space is needed.
--------	---------------------	---------------------	--------------------	-----------------------	--------------------------

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
_ 31 _		\$15,000.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
_ 32 _		\$20,165.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
_ 33 _		\$10,000.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
No.	Name, address, and ZIP + 4	Total contributions	Person X Payroll Noncash (Complete Part II if there is		
No34 (a)	Name, address, and ZIP + 4	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)		
No. 34 (a) No.	Name, address, and ZIP + 4	\$	Person X		

Employer identification number

20-5946552

Part II	Noncash Prop	erty (sec	e instructions) Use du	plicate co	nies of Pai	rt II if additio	nal space is needed.
	110110aoii i 10p	O. L.J. (OO.		,. 	phoate co	pico oi i ai	it ii ii aaaiilo	nai opaco io necaca:

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
30	FOOD, DRINKS	 \$ 5,850.	
		\$5,850.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
35_	SOFTWARE		
		 \$ <u>6,769.</u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Employer identification number

20-5946552

Fo	at total more than \$1,000 for the year or organizations completing Part III, e ntributions of \$1,000 or less for the	nter the total of exclusive	elv religious, c	haritable, etc.,
	e duplicate copies of Part III if addition			, · · · ·
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
-		(e) Transfer of g		
	Transferee's name, address, an			nship of transferor to transferee
-				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
- - -				
		(e) Transfer of g	jift	
	Transferee's name, address, an	d ZIP + 4	Relatio	nship of transferor to transferee
-				
a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
		(e) Transfer of g	jift	
	Transferee's name, address, an	d ZIP + 4	Relatio	nship of transferor to transferee
-				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
-		jift		
	Transferee's name, address, an			nship of transferor to transferee
-				
_				

Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

Open to F

Department of the Treasury
Internal Revenue Service
Name of the organization

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

► Attach to Form 990. ► See separate instructions.

Inspection
Employer identification number

REA	AL SCHOOL GARDENS	20-5946552
	rt I Organizations Maintaining Donor Advised Funds or Other Similar Funds or A	
ıa	organization answered "Yes" to Form 990, Part IV, line 6.	counts. Complete ii the
	(a) Donor advised funds	(b) Funds and other accounts
		(b) I ulius and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in do	onor 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	
-	only for charitable purposes and not for the benefit of the donor or donor advisor, or for any of	
Pa	conferring impermissible private benefit?	m 000 Part IV line 7
1 a	Purpose(s) of conservation easements held by the organization (check all that apply).	11 990, 1 art IV, line 1.
•		
		an historically important land area
		a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the	ne form of a conservation
	easement on the last day of the tax year.	
		Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
С		2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a	
-		2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminate	
3	tax year ►	sa by the organization during the
4	Number of states where property subject to conservation easement is located ▶	
4		
5	Does the organization have a written policy regarding the periodic monitoring, inspection, hand	-
_	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easen	nents 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	
	(i) and section 170(h)(4)(B)(ii)?	Yes No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and e	xpense 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.	
Pa	rt III Organizations Maintaining Collections of Art, Historical Treasures, or Other S	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 (ASC 958), not to report in its rev	venue statement and balance sheet
	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its reversely of art, historical treasures, or other similar assets held for public exhibition, educate public service, provide, in Part XIII, the text of the footnote to its financial statements that described to the footnote to its financial statements.	tion, or research in furtherance of
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its reve	
	works of art, historical treasures, or other similar assets held for public exhibition, educa	tion, 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 ass	sets for financial gain, provide the
	following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1	
b	Assets included in Form 990, Part X	> \$

Schedule D (Form 990) 2012 Page **2**

Par	t III Organizations Maintaining Col	lections of	Art,	Histo	rical	Treasu	res,	or Ot	her Similar	Asset	s (cor	ntinu	ed)
3	Using the organization's acquisition, access	ssion, and otl	her re	ecords	, check	c any o	f the	follow	ring that are	a signif	icant u	se o	of its
	collection items (check all that apply):												
a	Public exhibition		d			or excha							
b	Scholarly research		е		Other								
С	Preservation for future generations												
4	Provide a description of the organization's	s collections	and e	xplain	how t	ney fur	ther	the or	ganization's e	xempt	purpos	e in	Part
_	XIII.	ar rassina da			wt blot				- th a r a im ila r				
5	During the year, did the organization solicit assets to be sold to raise funds rather than										Yes		No
Par	t IV Escrow and Custodial Arrange											Dart	
ıaı	line 9, or reported an amount on					garnzat	1011 6	ai iovici	ca ics to	1 01111	550,	art	١٧,
	mio o, or reperiou air airreant or		1 011	, , , , , , ,									
1a	Is the organization an agent, trustee, custoo	dian or other i	nterm	ediar	v for co	ntributi	ons c	or other	assets not				
	included on Form 990, Part X?										Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complet	te the	follow	ing tab	le:							
		·			•				Amo	unt			
С	Beginning balance						1c						
d	Additions during the year						1d						
е	Distributions during the year						1e						
f	Ending balance												
	Did the organization include an amount on										Yes		No
	If "Yes," explain the arrangement in Part XIII												
Par													
4.		urrent year	(b)	Prior ye	ear	(c) Tw	o year	s back	(d) Three years	back	(e) Four	years	back
	Beginning of year balance												
	Contributions												
C	and losses												
Ч	Grants or scholarships												
	Other expenditures for facilities												
	and programs												
f	Administrative expenses												
g	End of year balance												
2	Provide the estimated percentage of the cu	rrent vear en	d bala	ınce (I	ine 1a.	column	(a))	held as	•				
а	Board designated or quasi-endowment ▶_				- 3,		(//						
b	Permanent endowment ► %												
С	Temporarily restricted endowment ▶	%											
	The percentages in lines 2a, 2b, and 2c sho	ould equal 100	0%.										
3a	Are there endowment funds not in the poss	session of the	orga	nizatio	on that	are hel	d and	d admir	istered for the		_		
	organization by:										\	'es	No
	(i) unrelated organizations										3a(i)		
_	(ii) related organizations										3a(ii)		
	If "Yes" to 3a(ii), are the related organization		-								3b		
4	Describe in Part XIII the intended uses of the												
Par	t VI Land, Buildings, and Equipment												
	Description of property	(a) Cost or ot (investm		is (1		or other ba ther)	asis		cumulated eciation	(d)	Book valu	ıe	
1a	Land	(- /	+		,		2001					
	Buildings			+									
	Leasehold improvements			+									
d	Equipment			+		238,81	19.	2	07,125.		3	1.6	594.
	Other			+		42,88			19,897.				91.
	I. Add lines 1a through 1e. (Column (d) mus	t equal Form	990, F	Part X,	columr								85.

Schedule D (Form 990) 2012 Page 3

Part VII	investments - Other Securities. See	orm 990, Part X, line	9 12.	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuat Cost or end-of-year mark	
(1) Financi	al derivatives			
	-held equity interests			
(3) Other_				
<u>(A)</u>				
(B)				
<u>(C)</u>		_		
<u>(D)</u>		_		
(E) (F)				
(G)				
(H)				
(I)				
	n (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments - Program Related. See	Form 990, Part X, line	e 13.	
	(a) Description of investment type	(b) Book value	(c) Method of valuat Cost or end-of-year mark	
(1)				
(2)				
(3)				
(4)				
(5)				
<u>(6)</u> (7)				
(8)				
(9)				
(10)				
	n (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets. See Form 990, Part X,	line 15.		
	(a	a) Description		(b) Book value
(1)				
(2)				
(3)				
<u>(4)</u>				
(5)				
(7)				
(8)				
(9)				
(10)				
	umn (b) must 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) Book value		
_(1) Fede	ral income taxes			
_(2)				
(3)				
(4)				
(5)				
(6)				
<u>(7)</u> (8)				
(9)				
(10)				
(11)				
	nn (b) must equal Form 990, Part X, col. (B) line 25.	.) ▶		
	ASC 740) Footnote. In Part XIII, provide the text		ganization's financial statements that re	eports the organization's

2. FIN 48 (ASC 740) Footnote. In Part XIII, 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). Check here if the text of the footnote has been provided in Part XIII.

JSA 2E1270 1.000 REAL SCHOOL GARDENS

Schedule D (Form 990) 2012 Page **4**

Dow	With December of December of Audited Financial Statements With December of Dec		1 agc -
Part 2			1 405 504
1	Total revenue, gains, and other support per audited financial statements	1	1,407,594.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments 2a		
b	Donated services and use of facilities 22,500.		
С	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	22,500.
3	Subtract line 2e from line 1	3	1,385,094.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.) 4b -17,183.		
С	Add lines 4a and 4b	4c	-17,183.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,367,911.
Part 2		ırn	
1	Total expenses and losses per audited financial statements	1	1,389,289.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	-	<u> </u>
a	Denated convices and use of facilities		
	Prior year adjustments 2b		
C	Other losses 2c		
d	Other (Describe in Part XIII.) 2d 17,183.		
	Add lines 2a through 2d	20	39,683.
_	Subtract line 2e from line 1	2e	
3	Amounts included on Form 990, Part IX, line 25, but not on line 1:	3	1,349,606.
4			
	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,349,606.
Part			
	ete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I' line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to pro		
informa		viue a	iny additional
SE	E PAGE 5		

Schedule D (Form 990) 2012

Part XIII Supplemental Information (continued)

EXPENSE INCLUDED IN EXPENSES PER AUDIT, INCLUDED IN REVENUE PER RETURN FORM 990, SCHEDULE D, PART XI, LINE 4B

LOSS ON SALE OF FIXED ASSETS -\$17,183

EXPENSE INCLUDED IN EXPENSES PER AUDIT, INCLUDED IN REVENUE PER RETURN FORM 990, SCHEDULE D, PART XII, LINE 2D

LOSS ON SALE OF FIXED ASSETS \$17,183

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2012
Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

BODY.

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.

Employer identification number

20-5946552

Name of the organization

REAL SCHOOL GARDENS

AUTHORITY TO ACT ON BEHALF OF GOVERNING BODY

FORM 990, PART VI, SECTION A, LINE 8B

THERE ARE NO COMMITTEES WITH AUTHORITY TO ACT ON BEHALF OF THE GOVERNING

REVIEW OF FORM 990

FORM 990, PART VI, SECTION B, LINE 11B

THE FORM 990 IS INITIALLY REVIEWED BY THE DIRECTOR OF FINANCE AND

OPERATION AND THE EXECUTIVE DIRECTOR. THE DOCUMENT IS REFINED, IF

NECESSARY, AND THEN PROVIDED TO THE BOARD OF DIRECTORS - FINANCE CHAIR

FOR REVIEW AND COMMENT. THE DOCUMENT IS REFINED, IF NECESSARY, AND THEN

DISTRIBUTED TO THE FULL BOARD OF DIRECTORS FOR REVIEW AND COMMENT. THE

FORM 990 IS THEN FINALIZED AND SUBMITTED TO THE INTERNAL REVENUE SERVICE.

CONFLICT OF INTEREST

FORM 990, PART VI, SECTION B, LINE 12C

ALL NEW EMPLOYEES ARE BRIEFED ABOUT THE CONFLICT OF INTEREST POLICY AS PART OF AN ORIENTATION ABOUT STANDARDS OF PROFESSIONAL CONDUCT FOR THE ORGANIZATION. THE CONFLICT OF INTEREST POLICY IS REVIEWED WITH ALL EMPLOYEES AND THE BOARD OF DIRECTORS EACH JUNE, AS THE ORGANIZATION PREPARES TO KICK-OFF A NEW FISCAL YEAR. AT THIS TIME, EACH DIRECTOR, OFFICER, AND EMPLOYEE IS ASKED TO ACKNOWLEDGE IN WRITING THEIR UNDERSTANDING OF THE POLICY. IN ADDITION, EACH DIRECTOR, OFFICER AND

EMPLOYEE IS ASKED TO COMPLETE A DISCLOSURE FORM THAT IDENTIFIES ANY

Name of the organization Employer identification number REAL SCHOOL GARDENS 20-5946552

RELATIONSHIPS, POSITIONS, OR CIRCUMSTANCES THAT MIGHT REPRESENT A

CONFLICT OF INTEREST. THE DIRECTOR OF FINANCE AND OPERATIONS SERVES AS

THE COMPLIANCE OFFICER FOR THE ORGANIZATION, INVESTIGATING ANY REPORTED

VIOLATIONS TO THE CONFLICT OF INTEREST POLICY. FINDINGS ARE PRESENTED TO

THE BOARD OF DIRECTORS, INCLUDING THE EXECUTIVE DIRECTOR, AND APPROPRIATE

CORRECTIVE ACTIONS ARE DETERMINED.

REVIEW OF COMPENSATION

FORM 990, PART VI, SECTION B, LINE 15A & 15B THE BOARD OF DIRECTORS, LED BY THE BOARD CHAIRMAN, ESTABLISHES COMPENSATION AND BENEFITS FOR THE EXECUTIVE DIRECTOR AND DIRECTOR OF FINANCE AND OPERATIONS AT REAL SCHOOL GARDENS. A COMPENSATION SURVEY OR STUDY IS USED DURING THIS PROCESS (I.E., PHILANTHROPY ROUNDTABLE'S COMPENSATION REPORT) TO DETERMINE A MARKET RANGE, AS IN BENCHMARKING WITH SELECT NON-PROFITS, INCLUDING THOSE WITH AN OUTDOOR LEARNING MISSION FOCUS. COMPENSATION IS FINALIZED WITHIN THE MARKET RATE RANGE BASED ON EXPERIENCE, EARNINGS HISTORY, AND RESULTS THE SELECTED CANDIDATE DEMONSTRATED IN RECENT ROLES. THE BOARD OF DIRECTORS APPROVES THE COMPENSATION AND BENEFITS PACKAGE FOR THE EXECUTIVE DIRECTOR AND DIRECTOR OF FINANCE AND OPERATIONS. THE EXECUTIVE DIRECTOR AND DIRECTOR OF FINANCE AND OPERATIONS ESTABLISHES COMPENSATION AND BENEFITS FOR OTHER KEY EMPLOYEES IN THE ORGANIZATION, BASED ON MARKET RATE RANGE, EXPERIENCE, EARNINGS HISTORY, AND RESULTS DEMONSTRATED BY THE CANDIDATE. THE EXECUTIVE DIRECTOR PRESENTS EMPLOYEE PROMOTION AND COMPENSATION RECOMMENDATIONS TO THE BOARD OF DIRECTORS FOR APPROVAL.

AVAILABILITY OF DOCUMENTS

FORM 990, PART VI, SECTION C, LINE 19

THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND

FINANCIAL POLICY ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST. THESE

DOCUMENTS ARE PROVIDED EITHER ELECTRONICALLY OR VIA US MAIL, BASED ON THE

PREFERENCE OF THE REQUESTOR.

OVERSIGHT COMMITTEE

FORM 990, PART XII, LINE 2C

THE BOARD OF DIRECTORS ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT AND SELECTION OF THE INDEPENDENT ACCOUNTANT. THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

PROGRAM SERVICE DESCRIPTIONS

FORM 990, PART III - PROGRAM SERVICE, LINES 4A-4C

PROGRAM OVERVIEW

WE CREATE LEARNING GARDENS THAT GROW SUCCESSFUL STUDENTS. REAL SCHOOL
GARDENS PARTNERS WITH COMMUNITIES TO BUILD LEARNING GARDENS IN LOW-INCOME
ELEMENTARY SCHOOLS AND ESTABLISH AN OUTDOOR CURRICULUM THAT PRODUCES
PROVEN ACADEMIC AND HEALTH BENEFITS. REAL SCHOOL GARDENS BEGAN WITHIN
THE DALLAS AND FORT WORTH, TX SCHOOL DISTRICTS, AND NOW HAS GARDENS IN 88
SCHOOLS, TRAINS 2,700 TEACHERS, AND ENSURES THAT MORE THAN 49,000
STUDENTS ARE RECEIVING OUTDOOR LEARNING TIME AND ROBUST HANDS-ON
INSTRUCTION TO HELP THEM SUCCEED ACADEMICALLY AND PERSONALLY.

COMMUNITY DESIGN

REAL SCHOOL GARDEN DESIGN EXPERTS WORK WITH SCHOOL STAFF, PARENTS,

COMMUNITY MEMBERS, OUR CORPORATE FUNDING PARTNERS AND MOST IMPORTANTLY

THE KIDS THEMSELVES TO DESIGN A LEARNING GARDEN THAT'S FUNCTIONAL,

BEAUTIFUL, AND TAILORED TO EACH SCHOOL'S SPECIFIC NEEDS. CHILDREN DESIGN

THEIR DREAM GARDENS BY MEASURING OUT THE SPACE, PLOTTING THEIR DESIGNS

OUT TO SCALE ON GRAPH PAPER, OR EVEN MAKING 3D MODELS. AFTER THE CHILDREN

VOTE ON THEIR FAVORITES, OUR GARDEN EXPERT WORKS WITH ALL OUR PROJECT

PARTNERS TO MAKE SURE THAT EACH GARDEN IS UNIQUELY TAILORED TO THE

TEACHERS' NEEDS. BY INVOLVING EVERYONE WHO WILL BE USING AND CARING FOR

THE GARDEN EARLY ON, THIS INCLUSIVE DESIGN PROCESS GENERATES A SENSE OF

OWNERSHIP AND PRIDE. EVERYONE INVOLVED HAS A STAKE IN THE SUCCESS OF THE

GARDEN, AND BECOMES INVESTED IN ITS USE, CARE AND MAINTENANCE. A

THOUSAND PEOPLE PARTICIPATED IN OUR DESIGN PROCESS THIS YEAR!

THE BIG DIG!

AFTER OUR PARTNER SCHOOLS HAVE DESIGNED THEIR LEARNING GARDENS, IT'S TIME TO BUILD THEM DURING OUR BIG DIG! ON THE DAY OF THE BIG DIG, BETWEEN 200-300 VOLUNTEERS INCLUDING FUNDING PARTNERS, KIDS, THEIR PARENTS AND TEACHERS GET TO WORK, INSTALLING THE LEARNING GARDEN IN JUST ONE DAY.

OUR BIG DIGS PROVIDE A TURNKEY DAY OF COMMUNITY SERVICE FOR OUR CORPORATE PARTNERS, AND REAL SCHOOL GARDENS TAKES CARE OF ALL THE PREPARATIONS, LAYING OUT THE PLANS AND MATERIALS AND PROVIDING THE EXPERTISE TO ENSURE THE BIG DIG GOES SMOOTHLY AND THE GARDEN IS BUILT TO LAST FOR YEARS TO COME. IN ADDITION TO PLANTING VEGETABLES AND PERENNIALS, TEAMS INSTALL SHADE STRUCTURES, SEATING AREAS, PATHWAYS, AND RAIN COLLECTION SYSTEMS.

VOLUNTEERS OF EVERY AGE CONTRIBUTE VALUABLE WORK ON TEAM PROJECTS, TRANSFORMING A WASTED SPACE INTO A BEAUTIFUL PLACE IN A SINGLE DAY. ONLY IS THE BIG DIG A FULFILLING DAY OF VOLUNTEERISM, BUT THE LEARNING GARDENS CREATED PRODUCE REAL LONG-TERM RESULTS FOR LOW-INCOME SCHOOLS. REAL SCHOOL GARDENS HELD BIG DIGS IN SEVEN SCHOOLS LAST YEAR, WITH ALMOST 2,000 PLANTING HUNDREDS OF VEGETABLES, HERBS, PERENNIALS, AND TREES, AND BRINGING IN MORE THAN 120 YARDS OF SOIL, AND ALMOST 200 SEATING BOULDERS. OUR VOLUNTEERS CAN MOVE MOUNTAINS, ONE BOULDER AT A TIME.

TEACHER TRAINING

OUR ACCREDITED THREE YEAR TEACHER TRAINING PROGRAM PROVIDES CONTINUING EDUCATION TO TEACHERS IN OUR ON-SITE, HANDS-ON DEMONSTRATION SESSIONS IN A STANDARDS-BASED CURRICULUM DESIGNED TO ENGAGE STUDENTS IN SCIENCE, MATH, READING AND LANGUAGE ARTS. BEFORE THE GARDEN IS INSTALLED, TEACHERS RECEIVE LESSON PLANS ALIGNED WITH ACADEMIC STANDARDS, SO THEY'RE READY TO START USING THE GARDEN ON DAY ONE. REAL SCHOOL GARDENS THEN SENDS OUR CERTIFIED TEACHER-TRAINERS OUT TO THE SCHOOLS TO DEMONSTRATE LESSONS LINKED TO THEIR CORE CURRICULUM. 90% OF TEACHERS SAY THAT REAL SCHOOL GARDEN TRAININGS ARE DIRECTLY ALIGNED WITH CURRENT ACADEMIC STANDARDS AND OUR LESSONS ARE EASY TO IMPLEMENT WITH STUDENTS. SCHOOLS THAT ALREADY HAVE A LEARNING GARDEN MAY ALSO BENEFIT FROM OUR CURRICULUM AND OUR PROVEN TEACHER TRAINING SERVICES. REAL SCHOOL GARDENS TRAINED ALMOST 700 TEACHERS THIS YEAR. IN ADDITION TO OUR ON-SITE LESSON DEMONSTRATIONS, WE ALSO HELD 17 OFF-SITE TRAINING SESSIONS FOR TEACHERS

FROM MULTIPLE SCHOOLS.

LEARNING GARDEN USEAGE

LIKE ALL GOOD EDUCATORS, WE KNOW THAT ATTENDANCE IS CRITICAL FOR SUCCESS, SO WE CAREFULLY TRACK HOW MANY TEACHERS AND STUDENTS USE THE GARDENS WE HELP CREATE. OUR MOST RECENT GROUP OF SCHOOLS IN THE REAL SCHOOL GARDEN PROGRAM SAW 58% OF THEIR TEACHERS USING THE GARDENS TO TEACH. AND 97% OF OUR GARDENS ARE WELL-USED AND WELL-MAINTAINED. IN FACT, GARDENS THAT HAVE BEEN IN OUR NETWORK FOR 10 YEARS ARE STILL GROWING STRONG.

EVERGREEN SUPPORT

REAL SCHOOL GARDENS PRODUCES LIFE-LONG LEARNING RESULTS BECAUSE WE INVEST HEAVILY IN LONG-TERM LEARNING GARDEN SUPPORT AND TEACHER TRAINING. EACH OF OUR 88 SCHOOLS WITH A REAL SCHOOL GARDEN ELECTS ONE "GARDEN COORDINATOR" AS THE SCHOOL'S POINT PERSON AND LEADER OF THE OUTDOOR LEARNING PROGRAM. AND AFTER ALL THE OTHER TEACHERS FINISH OUR RIGOROUS THREE-YEAR TRAINING PROGRAM, IT'S THE GARDEN COORDINATOR'S JOB TO ENSURE THE GARDEN IS IN TIP-TOP SHAPE, IS WELL-USED, AND CONTINUES TO THRIVE. THEY RECEIVE NEW PLANTS AND GARDEN SUPPLIES, PARTICIPATE IN CONTINUING EDUCATION SESSIONS, MEET WITH EXPERTS AND MENTORS, CONNECT WITH A NETWORK OF PEERS, APPLY FOR GARDEN ENHANCEMENT PROJECTS AND HOST CORPORATE VOLUNTEERS. REAL SCHOOL GARDENS EVEN HOSTS SEVERAL CELEBRATIONS EVERY YEAR TO HONOR ALL OUR DEDICATED PARTNERS.

ADDITIONAL PROGRAMMING

IN ADDITION TO BUILDING LEARNING GARDENS AND TRAINING TEACHERS, WE ALSO
OFFER OUR PARTNERS SEVERAL COMMUNITY PROJECTS TO FURTHER ENRICH STUDENTS'
LEARNING EXPERIENCE. THESE INCLUDE:

SCHOOLYARD HARVEST -- ELEMENTARY SCHOOLS PLANT AND GROW VEGETABLES AND HERBS, THEN PROFESSIONAL CHEFS SHOW KIDS HOW TO COOK EVERYTHING FOR A BIG COMMUNITY DINNER. THIS SEED TO TABLE PROCESS CONNECTS CHILDREN TO THE FOOD THEY EAT, ENCOURAGING THEM TO COOK THEIR OWN MEALS AND EVEN GROW THEIR OWN NUTRITIOUS AND DELICIOUS FOOD. CHILDREN WHO NEVER DREAMED OF EATING TURNIPS, GREEN BEANS, AND LETTUCE TAKE PRIDE IN PREPARING THEIR VEGGIES FOR A FUN COMMUNITY DINNER.

SMART POTATOES - REAL SCHOOL GARDENS PARTNERS WITH SCHOOLS AND THE BOTANICAL RESEARCH INSTITUTE OF TEXAS TO HAVE CHILDREN SPEND 100 DAYS GROWING POTATOES TO DONATE TO LOCAL FOOD PANTRIES. THIRTY SCHOOLS PARTICIPATED THIS YEAR, AND REAL SCHOOL GARDENS EQUIPPED TEACHERS WITH A WIDE RANGE OF LESSON PLANS SPECIFIC TO POTATOES. IN THE END, ALMOST 3,000 KIDS GREW 621 POUNDS OF SPUDS TO DONATE, AND IN ADDITION TO THEIR ACADEMIC LESSONS, THEY LEARNED THAT FEELS GREAT TO GIVE TO THOSE IN NEED.

REAL SCHOOL GARDENS, REAL RESULTS

AT REAL SCHOOL GARDENS, OUR VISION IS TO ENRICH EVERY CHILD'S EDUCATION
THROUGH LEARNING GARDENS. TO ACHIEVE THIS, WE BUILD LEARNING GARDENS IN

Name of the organization

REAL SCHOOL GARDENS

Employer identification number

20-5946552

LOW-INCOME SCHOOLS AND TRAIN TEACHERS HOW TO USE THEM SO THAT STUDENTS BECOME SMARTER, HEALTHIER, AND MORE ENVIRONMENTALLY AWARE.

SMARTER

AFTER GIVING CHILDREN HANDS-ON OUTDOOR LESSONS IN SCIENCE, MATH AND LANGUAGE ARTS, REAL SCHOOL GARDENS TEACHERS HAVE SEEN A MARKED INCREASE IN STUDENT ENGAGEMENT, A KEY INDICATOR IN LONG-TERM ACADEMIC SUCCESS.

STUDIES SHOW THAT REAL SCHOOL GARDENS INCREASE STUDENT TEST SCORES, A PRIORITY FOR LOW-INCOME SCHOOLS. CHILD-EDUCATION EXPERTS HAVE DESIGNED OUR CURRICULUM TO EFFECTIVELY ENGAGE STUDENTS SO THAT THEY UNDERSTAND THEIR LESSONS MORE FULLY. OUTDOOR LEARNING SPARKS CHILDREN'S NATURAL CURIOSITY, BRINGING BACK THE JOY OF DISCOVERY THEY CRAVE.

HEALTHIER

IN ADDITION TO THE ACADEMIC BENEFITS OF LEARNING OUTDOORS, REAL SCHOOL GARDENS ALLOW CHILDREN TO GROW THEIR OWN PRODUCE. STUDIES SHOW THAT CHILDREN WHO GROW THEIR OWN FOOD ARE MORE LIKELY TO EAT MORE FRUITS AND VEGETABLES, SHOW HIGHER LEVELS OF KNOWLEDGE ABOUT NUTRITION AND ARE MORE LIKELY TO CONTINUE HEALTHY EATING HABITS THROUGHOUT THEIR LIVES. AND SIMPLY SPENDING TIME OUTSIDE WORKING IN THE GARDEN INCREASES STUDENTS' VITAMIN D LEVELS, REDUCES SYMPTOMS OF ADD AND ADHD, REDUCES STRESS, AND IMPROVES STUDENT BEHAVIOR AND SOCIAL INTERACTIONS.

ENVIRONMENTALLY AWARE

EVERY REAL SCHOOL GARDEN IS DESIGNED TO IMPROVE THE SCHOOL'S

ENVIRONMENTAL IMPACT BY COLLECTING RAINWATER, PREVENTING RUNOFF AND EROSION, CREATING COMPOST AND SUPPORTING NATIVE PLANTS AND WILDLIFE. IN ADDITION TO IMPACT OF EACH PROJECT, EVERY REAL SCHOOL GARDEN STUDENT WILL BE IMMERSED IN AN ENGAGING CURRICULUM THAT PROMOTES ENVIRONMENTAL STEWARDSHIP FOR YEARS TO COME. CHILDREN IN LOW-INCOME SCHOOLS OFTEN HAVE LITTLE ACCESS TO A GREEN ENVIRONMENT, AND KNOW LITTLE ABOUT THEIR ROLE IN KEEPING THEIR ENVIRONMENT GREEN AND HEALTHY. THEIR REAL SCHOOL GARDEN GIVES THEM A SENSE OF THEIR PLACE IN THE WORLD, AND A SENSE OF PRIDE IN TAKING CARE OF IT.

ATTACHMENT 1

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

WE CREATE LEARNING GARDENS THAT GROW SUCCESSFUL STUDENTS. REAL SCHOOL GARDENS PARTNERS WITH COMMUNITIES TO BUILD LEARNING GARDENS IN LOW-INCOME ELEMENTARY SCHOOLS AND ESTABLISH AN OUTDOOR CURRICULUM THAT PRODUCES PROVEN ACADEMIC AND HEALTH BENEFITS. REAL SCHOOL GARDENS BEGAN WITHIN THE DALLAS AND FORT WORTH, TX SCHOOL DISTRICTS, AND NOW HAS GARDENS IN 88 SCHOOLS, TRAINS 2,700 TEACHERS, AND ENSURES THAT MORE THAN 49,000 STUDENTS ARE RECEIVING OUTDOOR LEARNING TIME AND ROBUST HANDS-ON INSTRUCTION TO HELP THEM SUCCEED ACADEMICALLY AND PERSONALLY.