

# Return of Organization Exempt From Income Tax

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

Department of the Treasury  
Internal Revenue Service

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

**A For the 2012 calendar year, or tax year beginning** 07/01, 2012, and ending 06/30, 2013

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C Name of organization</b> REAL SCHOOL GARDENS Doing Business As			<b>D Employer identification number</b> 20-5946552	
	Number and street (or P.O. box if mail is not delivered to street address)		Room/suite	<b>E Telephone number</b> (817) 348-8102	
	1700 UNIVERSITY DRIVE #260 City or town, state or country, and ZIP + 4 FORT WORTH, TX 76107			<b>G Gross receipts \$</b> 1,402,278.	
	<b>F Name and address of principal officer:</b> JEANNE MCCARTY 1700 UNIVERSITY DRIVE #260 FORT WORTH, TX 76107			<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)	
<b>I Tax-exempt status:</b> <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527					
<b>J Website:</b> ▶ WWW.REALSCHOOLGARDENS.ORG				<b>H(c)</b> Group exemption number ▶	
<b>K Form of organization:</b> <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			<b>L Year of formation:</b> 2007		<b>M State of legal domicile:</b> TX

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: WE CREATE LEARNING GARDENS THAT GROW SUCCESSFUL STUDENTS.			
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	<b>3</b>	8.		
	<b>4</b>	7.		
	<b>5</b>	13.		
	<b>6</b>	1,840.		
	<b>7a</b>	0		
	<b>7b</b>	0		
	<b>Revenue</b>	<b>8</b>	<b>Prior Year</b>	<b>Current Year</b>
		Contributions and grants (Part VIII, line 1h)	1,692,892.	1,339,673.
Program service revenue (Part VIII, line 2g)		68,359.	41,253.	
Investment income (Part VIII, column (A), lines 3, 4, and 7d)		-10,838.	-14,897.	
Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,296.	1,882.	
<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,753,709.	1,367,911.	
<b>Expenses</b>		<b>13</b>	0	0
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0	0
		<b>14</b>	714,140.	821,956.
		Benefits paid to or for members (Part IX, column (A), line 4)	714,140.	821,956.
	<b>15</b>	4,017.	0	
Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	4,017.	0		
<b>16a</b>	522,978.	527,650.		
Professional fundraising fees (Part IX, column (A), line 11e)	522,978.	527,650.		
<b>16b</b>	1,241,135.	1,349,606.		
Total fundraising expenses (Part IX, column (D), line 25) ▶ 199,737.	1,241,135.	1,349,606.		
<b>17</b>	512,574.	18,305.		
Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	512,574.	18,305.		
<b>18</b>				
Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)				
<b>19</b>				
Revenue less expenses. Subtract line 18 from line 12				
<b>Net Assets or Fund Balances</b>	<b>20</b>	<b>Beginning of Current Year</b>	<b>End of Year</b>	
	Total assets (Part X, line 16)	1,072,393.	1,101,673.	
	<b>21</b>	31,756.	42,731.	
Total liabilities (Part X, line 26)	31,756.	42,731.		
<b>22</b>	1,040,637.	1,058,942.		
Net assets or fund balances. Subtract line 21 from line 20	1,040,637.	1,058,942.		

**Part II Signature Block**

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

<b>Sign Here</b>	Signature of officer _____ Date _____				
	Type or print name and title _____				
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	Firm's name ▶ BKD, LLP				P01353262
	Firm's address ▶ 14241 DALLAS PARKWAY, SUITE 1100 DALLAS, TX 75254			EIN ▶	Phone no. ▶ 972.702.8262

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

**For Paperwork Reduction Act Notice, see the separate instructions.**

**Part III Statement of Program Service Accomplishments**

Check if Schedule O contains a response to any question in this Part III  Yes  No

1 Briefly describe the organization's mission:

ATTACHMENT 1

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

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

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

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 208,348. including grants of \$ ) (Revenue \$ 2,703. )

SCHOOL GARDEN INSTALLATION AND SUPPORT - SEE SCHEDULE O FOR FURTHER DETAILS

4b (Code: ) (Expenses \$ 411,251. including grants of \$ ) (Revenue \$ 38,550. )

EDUCATOR TRAINING AND RESOURCES - SEE SCHEDULE O FOR FURTHER DETAILS

4c (Code: ) (Expenses \$ 419,871. including grants of \$ ) (Revenue \$ )

COMMUNITY ENGAGEMENT - SEE SCHEDULE O FOR FURTHER DETAILS

4d Other program services (Describe in Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 1,039,470.

Part IV Checklist of Required Schedules

Table with 3 columns: Question Number, Question Text, Yes, No. Rows include questions 1 through 20b regarding organizational requirements and reporting.

**Part IV 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? <i>If "Yes," complete Schedule I, Parts I and II.</i> . . . . .		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? <i>If "Yes," complete Schedule I, Parts I and III.</i> . . . . .		X
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? <i>If "Yes," complete Schedule J.</i> . . . . .		X
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25.</i> . . . . .		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .		
25 a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i> . . . . .		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? <i>If "Yes," complete Schedule L, Part I.</i> . . . . .		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? <i>If "Yes," complete Schedule L, Part II.</i> . . . . .		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? <i>If "Yes," complete Schedule L, Part III.</i> . . . . .		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):		
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i> . . . . .		X
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i> . . . . .		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i> . . . . .		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i> . . . . .		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i> . . . . .		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i> . . . . .		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i> . . . . .		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i> . . . . .		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.</i> . . . . .		X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)? . . . . .		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2.</i> . . . . .		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i> . . . . .		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? <i>If "Yes," complete Schedule R, Part VI.</i> . . . . .		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for question number, description, and Yes/No response. Includes questions 1a through 14b regarding IRS filings, employee reporting, foreign accounts, and charitable contributions.

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. [X]

Section A. Governing Body and Management

Table with 4 columns: Question ID, Question Text, Yes, No. Rows include 1a (8), 1b (7), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

Table with 4 columns: Question ID, Question Text, Yes, No. Rows include 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section 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 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: JEFF CROSS 1700 UNIVERSITY DRIVE #260 FORT WORTH, TX 76107 817-348-8102

**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 employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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.

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

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





**Part VIII Statement of Revenue**

Check if Schedule O contains a response to any question 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
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns . . . . .	<b>1a</b>					
	<b>b</b> Membership dues . . . . .	<b>1b</b>					
	<b>c</b> Fundraising events . . . . .	<b>1c</b>					
	<b>d</b> Related organizations . . . . .	<b>1d</b>					
	<b>e</b> Government grants (contributions) . .	<b>1e</b>					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above .	<b>1f</b>	1,339,673.				
	<b>g</b> Noncash contributions included in lines 1a-1f: \$		12,619.				
	<b>h Total.</b> Add lines 1a-1f . . . . .			1,339,673.			
<b>Program Service Revenue</b>	<b>Business Code</b>						
	<b>2a</b> PROFESSIONAL DEVELOPMENT SERVICES		900099	38,550.	38,550.		
	<b>b</b> GARDEN PROJECTS PROGRAM FEES		900099	2,703.	2,703.		
	<b>c</b> _____						
	<b>d</b> _____						
	<b>e</b> _____						
	<b>f</b> All other program service revenue . . . . .						
	<b>g Total.</b> Add lines 2a-2f . . . . .			41,253.			
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) . . . . .			2,286.			2,286.
	<b>4</b> Income from investment of tax-exempt bond proceeds . . .			0			
	<b>5</b> Royalties . . . . .			0			
	<b>6a</b> Gross rents . . . . .	(i) Real	(ii) Personal				
		<b>b</b> Less: rental expenses . . .					
		<b>c</b> Rental income or (loss) . .					
		<b>d</b> Net rental income or (loss) . . . . .			0		
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		<b>b</b> Less: cost or other basis and sales expenses . . . . .		17,184.			
		<b>c</b> Gain or (loss) . . . . .		34,367.			
		<b>d</b> Net gain or (loss) . . . . .		-17,183.	-17,183.		-17,183.
	<b>8a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 . . . . .	<b>a</b>					
		<b>b</b> Less: direct expenses . . . . .	<b>b</b>				
		<b>c</b> Net income or (loss) from fundraising events . . . . .			0		
	<b>9a</b> Gross income from gaming activities. See Part IV, line 19 . . . . .	<b>a</b>					
		<b>b</b> Less: direct expenses . . . . .	<b>b</b>				
		<b>c</b> Net income or (loss) from gaming activities . . . . .			0		
	<b>10a</b> Gross sales of inventory, less returns and allowances . . . . .	<b>a</b>					
<b>b</b> Less: cost of goods sold . . . . .		<b>b</b>					
<b>c</b> Net income or (loss) from sales of inventory . . . . .				0			
<b>Miscellaneous Revenue</b>			<b>Business Code</b>				
<b>11a</b> _____							
<b>b</b> _____							
<b>c</b> _____							
<b>d</b> All other revenue . . . . .		900099	1,882.	1,882.		1,882.	
<b>e Total.</b> Add lines 11a-11d . . . . .			1,882.				
<b>12 Total revenue.</b> See instructions . . . . .			1,367,911.	41,253.		-13,015.	

**Part IX Statement of Functional Expenses**

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

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

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>	(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 the United States. See Part IV, line 22 . . . . .	0			
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):				
a Management . . . . .	0			
b Legal . . . . .	0			
c Accounting . . . . .	0			
d Lobbying . . . . .	0			
e Professional fundraising services. See Part IV, line 17	0			
f Investment management fees . . . . .	0			
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . . . .	124,817.	97,696.	20,755.	6,366.
12 Advertising and promotion . . . . .	0			
13 Office expenses . . . . .	32,362.	22,342.	5,081.	4,939.
14 Information technology . . . . .	0			
15 Royalties . . . . .	0			
16 Occupancy . . . . .	85,596.	63,309.	11,655.	10,632.
17 Travel . . . . .	27,360.	22,063.	1,620.	3,677.
18 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.)				
a <u>GARDEN MATERIALS</u> . . . . .	167,058.	167,058.		
b <u>EDUCATION PROGRAMMING/TRAINI</u> . . . . .	48,314.	48,314.		
c <u>COMMUNITY OUTREACH</u> . . . . .	9,127.	4,225.	2,438.	2,464.
d _____				
e All other expenses _____	466.	263.	75.	128.
25 <b>Total functional expenses.</b> Add lines 1 through 24e	1,349,606.	1,039,470.	110,399.	199,737.
26 <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) . . . . .	0			

**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
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing	200,455.	<b>1</b>	74,899.
	<b>2</b> Savings and temporary cash investments	456,326.	<b>2</b>	738,577.
	<b>3</b> Pledges and grants receivable, net	300,500.	<b>3</b>	223,217.
	<b>4</b> Accounts receivable, net	21,205.	<b>4</b>	2,000.
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	<b>5</b>	0
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0	<b>6</b>	0
	<b>7</b> Notes and loans receivable, net	0	<b>7</b>	0
	<b>8</b> Inventories for sale or use	349.	<b>8</b>	0
	<b>9</b> Prepaid expenses and deferred charges	11,229.	<b>9</b>	8,295.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	<b>10a</b> 281,707.		
	<b>b</b> Less: accumulated depreciation	<b>10b</b> 227,022.	<b>10c</b>	54,685.
	<b>11</b> Investments - publicly traded securities	0	<b>11</b>	0
	<b>12</b> Investments - other securities. See Part IV, line 11	0	<b>12</b>	0
	<b>13</b> Investments - program-related. See Part IV, line 11	0	<b>13</b>	0
	<b>14</b> Intangible assets	0	<b>14</b>	0
	<b>15</b> Other assets. See Part IV, line 11	0	<b>15</b>	0
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34)	1,072,393.	<b>16</b>	1,101,673.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses	31,756.	<b>17</b>	42,731.
	<b>18</b> Grants payable	0	<b>18</b>	0
	<b>19</b> Deferred revenue	0	<b>19</b>	0
	<b>20</b> Tax-exempt bond liabilities	0	<b>20</b>	0
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D	0	<b>21</b>	0
	<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0	<b>22</b>	0
	<b>23</b> Secured mortgages and notes payable to unrelated third parties	0	<b>23</b>	0
	<b>24</b> Unsecured notes and loans payable to unrelated third parties	0	<b>24</b>	0
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	0	<b>25</b>	0
	<b>26 Total liabilities.</b> Add lines 17 through 25	31,756.	<b>26</b>	42,731.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets	650,637.	<b>27</b>	820,704.
	<b>28</b> Temporarily restricted net assets	390,000.	<b>28</b>	238,238.
	<b>29</b> Permanently restricted net assets	0	<b>29</b>	0
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds		<b>32</b>	
	<b>33</b> Total net assets or fund balances	1,040,637.	<b>33</b>	1,058,942.
	<b>34</b> Total liabilities and net assets/fund balances	1,072,393.	<b>34</b>	1,101,673.

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	1,367,911.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	1,349,606.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	18,305.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	1,040,637.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	0
<b>6</b>	Donated services and use of facilities	<b>6</b>	0
<b>7</b>	Investment expenses	<b>7</b>	0
<b>8</b>	Prior period adjustments	<b>8</b>	0
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	0
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	1,058,942.

**Part XII Financial Statements and Reporting**

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

- 1** Accounting method used to prepare the Form 990:  Cash  Accrual  Other \_\_\_\_\_  
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant? .....  
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant? .....  
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 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? .....
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
<b>2a</b>		X
<b>2b</b>	X	
<b>2c</b>	X	
<b>3a</b>		X
<b>3b</b>		

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

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

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

OMB No. 1545-0047

**2012**

**Open to Public Inspection**

Name of the organization

REAL SCHOOL GARDENS

Employer identification number

20-5946552

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

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

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9  An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.

a  Type I    b  Type II    c  Type III-Functionally integrated    d  Type III-Non-functionally integrated

e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? .....
- (ii) A family member of a person described in (i) above? .....
- (iii) A 35% controlled entity of a person described in (i) or (ii) above? .....

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

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

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

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

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.)

Section A. Public Support

Table with 7 columns: (a) 2008, (b) 2009, (c) 2010, (d) 2011, (e) 2012, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total; 5 The portion of total contributions by each person; 6 Public support.

Section B. Total Support

Table with 7 columns: (a) 2008, (b) 2009, (c) 2010, (d) 2011, (e) 2012, (f) Total. Rows include: 7 Amounts from line 4; 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; 10 Other income; 11 Total support; 12 Gross receipts from related activities; 13 First five years.

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Rows include: 14 Public support percentage for 2012 (36.40%); 15 Public support percentage from 2011 Schedule A, Part II, line 14 (24.14%); 16a 33 1/3% support test - 2012 (checked); 16b 33 1/3% support test - 2011; 17a 10%-facts-and-circumstances test - 2012; 17b 10%-facts-and-circumstances test - 2011; 18 Private foundation.

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

Table with 7 columns: (a) 2008, (b) 2009, (c) 2010, (d) 2011, (e) 2012, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 7c Add lines 7a and 7b; 8 Public support (Subtract line 7c from line 6).

Section B. Total Support

Table with 7 columns: (a) 2008, (b) 2009, (c) 2010, (d) 2011, (e) 2012, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b; 12 Other income. Do not include gain or loss from the sale of capital assets; 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

Table with 3 columns: Description, 2012, 2011. Row 15: Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f)). Row 16: Public support percentage from 2011 Schedule A, Part III, line 15.

Section D. Computation of Investment Income Percentage

Table with 3 columns: Description, 2012, 2011. Row 17: Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f)). Row 18: Investment income percentage from 2011 Schedule A, Part III, line 17.

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.

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

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

**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

DESCRIPTION	2008	2009	2010	2011	2012	TOTAL
OTHER INCOME	803.	521.	18,600.	2,796.	1,882.	24,602.
<b>TOTALS</b>	<u>803.</u>	<u>521.</u>	<u>18,600.</u>	<u>2,796.</u>	<u>1,882.</u>	<u>24,602.</u>



**Schedule of Contributors**

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

**2012**

Name of the organization  
 REAL SCHOOL GARDENS

Employer identification number  
 20-5946552

Organization type (check one):

**Filers of:**

**Section:**

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 33 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 1h, 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 . . . . . ▶ \$ \_\_\_\_\_

**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 **REAL SCHOOL GARDENS**

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
1	----- ----- -----	\$ 35,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	----- ----- -----	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	----- ----- -----	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	----- ----- -----	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5	----- ----- -----	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6	----- ----- -----	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization **REAL SCHOOL GARDENS**

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
7	----- ----- -----	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
8	----- ----- -----	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
9	----- ----- -----	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
10	----- ----- -----	\$ 40,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
11	----- ----- -----	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
12	----- ----- -----	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization **REAL SCHOOL GARDENS**

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
13	----- ----- -----	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
14	----- ----- -----	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
15	----- ----- -----	\$ 34,055.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
16	----- ----- -----	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
17	----- ----- -----	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
18	----- ----- -----	\$ 6,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization **REAL SCHOOL GARDENS**

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
19	----- ----- -----	\$ 300,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
20	----- ----- -----	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
21	----- ----- -----	\$ 176,922.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
22	----- ----- -----	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
23	----- ----- -----	\$ 30,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
24	----- ----- -----	\$ 57,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization REAL SCHOOL GARDENS

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 <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
26	----- ----- -----	\$ 60,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
27	----- ----- -----	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
28	----- ----- -----	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
29	----- ----- -----	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
30	----- ----- -----	\$ 5,850.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization REAL SCHOOL GARDENS

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
31	----- ----- -----	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
32	----- ----- -----	\$ 20,165.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
33	----- ----- -----	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
34	----- ----- -----	\$ 79,307.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
35	----- ----- -----	\$ 6,769.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
---	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization REAL SCHOOL GARDENS

Employer identification number

20-5946552

**Part II** Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(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.	
35	SOFTWARE	\$ 6,769.	



Name of organization REAL SCHOOL GARDENS

Employer identification number  
20-5946552

**Part III** *Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year.* Complete columns (a) through (e) and the following line entry.

For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	-----	-----	-----
	-----	-----	-----
	-----	-----	-----
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
-----		-----	
-----		-----	
-----		-----	
-----	-----	-----	-----
	-----	-----	-----
	-----	-----	-----
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
-----		-----	
-----		-----	
-----		-----	
-----	-----	-----	-----
	-----	-----	-----
	-----	-----	-----
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
-----		-----	
-----		-----	
-----		-----	
-----	-----	-----	-----
	-----	-----	-----
	-----	-----	-----
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
-----		-----	
-----		-----	
-----		-----	

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Name of the organization

REAL SCHOOL GARDENS

Employer identification number

20-5946552

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 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 donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

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

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

Table with 2 columns: \$, \$, \$, \$. Rows include: 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. 1b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1, (ii) Assets included in Form 990, Part X. 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1, b Assets included in Form 990, Part X.

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

Schedule D (Form 990) 2012

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

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

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

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

b If "Yes," explain the arrangement in Part XIII and complete the following table:

Table with columns for Amount and rows for 1c Beginning balance, 1d Additions during the year, 1e Distributions during the year, 1f Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21?

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.

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

Table with columns (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back and rows 1a-1g for various endowment fund metrics

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment, b Permanent endowment, c Temporarily restricted endowment

The percentages in lines 2a, 2b, and 2c should equal 100%.

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

- (i) unrelated organizations, (ii) related organizations

Table with columns Yes, No and rows 3a(i), 3a(ii), 3b

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

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

Table with columns (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value and rows 1a Land, 1b Buildings, 1c Leasehold improvements, 1d Equipment, 1e Other, Total

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

Table with 3 columns: (a) Description of security or category, (b) Book value, (c) Method of valuation. Rows include (1) Financial derivatives, (2) Closely-held equity interests, (3) Other, and sub-rows (A) through (I). Total line at the bottom.

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

Table with 3 columns: (a) Description of investment type, (b) Book value, (c) Method of valuation. Rows numbered (1) through (10). Total line at the bottom.

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

Table with 2 columns: (a) Description, (b) Book value. Rows numbered (1) through (10). Total line at the bottom.

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

Table with 2 columns: (a) Description of liability, (b) Book value. Row 1: (1) Federal income taxes. Rows 2-11 are blank. Total line at the bottom.

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.

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements		<b>1</b>	1,407,594.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
<b>a</b>	Net unrealized gains on investments	<b>2a</b>		
<b>b</b>	Donated services and use of facilities	<b>2b</b>	22,500.	
<b>c</b>	Recoveries of prior year grants	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>	22,500.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>	1,385,094.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	-17,183.	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>	-17,183.
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)		<b>5</b>	1,367,911.

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

<b>1</b>	Total expenses and losses per audited financial statements		<b>1</b>	1,389,289.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
<b>a</b>	Donated services and use of facilities	<b>2a</b>	22,500.	
<b>b</b>	Prior year adjustments	<b>2b</b>		
<b>c</b>	Other losses	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	17,183.	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>	39,683.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>	1,349,606.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>	
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)		<b>5</b>	1,349,606.

**Part XIII Supplemental Information**

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

SEE PAGE 5

**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)**

Department of the Treasury  
Internal Revenue Service

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

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

OMB No. 1545-0047

**2012**

**Open to Public  
Inspection**

Name of the organization

REAL SCHOOL GARDENS

Employer identification number

20-5946552

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  
BODY.

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 REAL SCHOOL GARDENS	Employer identification number 20-5946552
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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.



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

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

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VOLUNTEERS OF EVERY AGE CONTRIBUTE VALUABLE WORK ON TEAM PROJECTS, TRANSFORMING A WASTED SPACE INTO A BEAUTIFUL PLACE IN A SINGLE DAY. NOT 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

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

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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
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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

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

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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.