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Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

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

OMB No 1545-0047

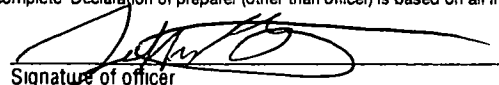
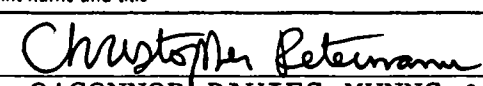
2008Open to Public
Inspection**A For the 2008 calendar year, or tax year beginning** SEP 1, 2008 **and ending** AUG 31, 2009

B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Termination ☐ Amended return ☐ Application pending	Please use IRS label or print or type See Specific Instructions	C Name of organization		D Employer identification number
		EAST HARLEM TUTORIAL PROGRAM, INC.		23-7439789
		Doing Business As		
		Number and street (or P O box if mail is not delivered to street address) Room/suite 2050 SECOND AVENUE		E Telephone number (212) 831-0650
		City or town, state or country, and ZIP + 4 NEW YORK, NY 10029		G Gross receipts \$ 2,346,956.
		F Name and address of principal officer: JEFFREY GINSBURG SAME AS C ABOVE		H(a) Is this a group return for affiliates? ☐ Yes ☒ No
				H(b) Are all affiliates included? ☐ Yes ☐ No
				If "No," attach a list. (see instructions)
				H(c) Group exemption number ▶
I Tax-exempt status. ☒ 501(c) (3) (insert no.) ☐ 4947(a)(1) or ☐ 527				
J Website: WWW.EHTP.ORG				
K Type of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶			L Year of formation 1958 M State of legal domicile NY	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: EAST HARLEM TUTORIAL PROGRAM WORKS WITH CHILDREN FROM EARLY CHILDHOOD THROUGH ADULthood TO ENSURE		
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	20
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	20
	5 Total number of employees (Part V, line 2a)	5	121
	6 Total number of volunteers (estimate if necessary)	6	172
	7a Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0.
b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	2,703,020.	2,281,626.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	130,912.	24,746.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	15,348.	11,016.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,849,280.	2,317,388.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	15,500.	3,990.
	14 Benefits paid to or for members (Part IX, column (A), line 4)		
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	2,173,461.	1,852,688.
	16 Professional fundraising fees (Part IX, column (A), line 11e)	112,000.	
	17 Total fundraising expenses (Part IX, column (D), line 25) ▶ 282,495.		
18 Total expenses - add lines 13-17 (must equal Part IX, column (A), line 25)	1,083,506.	910,857.	
19 Revenue less expenses. Subtract line 18 from line 12	3,384,467.	2,767,535.	
20 Total assets (Part X, line 16)	<535,187.>	<450,147.>	
Net Assets or Fund Balances	21 Total liabilities (Part X, line 26)	Beginning of Year	End of Year
	22 Net assets or fund balances. Subtract line 21 from line 20	6,226,210.	5,684,661.
		121,697.	152,879.
		6,104,513.	5,531,782.

Part II Signature Block

Sign Here	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.		
	Signature of officer:  Date: 7/15/2010 JEFFREY GINSBURG, EXECUTIVE DIRECTOR Type or print name and title		
Preparer's Use Only	Preparer's signature ▶ 	Date 7/15/10	Check if self-employed ☐
	Firm's name (or yours if self-employed), address, and ZIP + 4 O'CONNOR DAVIES MUNNS & DOBBINS, LLP 60 EAST 42ND STREET, 36TH FL NEW YORK, NY 10165-3698		Preparer's identifying number (see instructions) EIN ▶ 13-3385019 Phone no ▶ (212) 286-2600
	May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No		

Part III Statement of Program Service Accomplishments (see instructions)

- 1 Briefly describe the organization's mission: SEE SCHEDULE O FOR CONTINUATION
AS A VITAL EAST HARLEM EDUCATION AND ENRICHMENT CENTER, EAST HARLEM
TUTORIAL PROGRAM (EHTP) WORKS WITH CHILDREN FROM EARLY CHILDHOOD
THROUGH ADULTHOOD TO ENSURE THAT THEY HAVE THE RESOURCES NEEDED TO
ACCESS OPPORTUNITIES FOR ACADEMIC, SOCIAL, AND CAREER ADVANCEMENT
- 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No
 If "Yes", describe these new services on Schedule O.
- 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
 If "Yes", describe these changes on Schedule O.
- 4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

SEE SCHEDULE O FOR CONTINUATION(S)

- 4a (Code:) (Expenses \$ 505,805. including grants of \$) (Revenue \$)
EHTP'S ELEMENTARY PROGRAM SERVES 112 PARTICIPANTS GRADES K-5, PROVIDING
THEM WITH AFTER-SCHOOL ONE-ON-ONE TUTORING SERVICES AND A CURRICULUM
THAT EMPHASIZES LITERACY, MATH, AND ART.

THE WEEKLY PROGRAM SCHEDULE INCLUDES:

- TWO DAYS OF INTENSIVE EDUCATIONAL INSTRUCTION (READING, MATH) FROM PROFESSIONAL EDUCATORS.
- ONE DAY OF ART INSTRUCTION (VISUAL ART, AND/OR MUSIC).
- ONE DAY OF ONE-ON-ONE TUTORING.

THE PROGRAM UTILIZES A PROJECT-BASED CURRICULUM WITH EVEN MORE INDIVIDUALIZED ATTENTION THAN IN PREVIOUS YEARS. THE FOLLOWING KEY

- 4b (Code:) (Expenses \$ 1,452,201. including grants of \$) (Revenue \$)
EAST HARLEM TUTORIAL PROGRAM -- UNIVERSITY PROGRAM (FOR MIDDLE SCHOOL & HIGH SCHOOL)

IN JULY 2007, EHTP REDESIGNED ITS CURRICULUM FOR OLDER STUDENTS GRADES 9-12 BY INTRODUCING THE EAST HARLEM TUTORIAL PROGRAM-UNIVERSITY PROGRAM (EHTP-UP). EHTP-UP IS A DYNAMIC COLLEGE READINESS PROGRAM THAT INCORPORATES ALL ASPECTS OF COLLEGE PREPARATION AND ADMISSIONS - INCLUDING HIGH SCHOOL CREDIT ACCUMULATION TRACKING, ENRICHMENT COURSES, REGENTS AND SAT TEST PREPARATION, COLLEGE APPLICATION ASSISTANCE, FINANCIAL AID, AND COUNSELING. THE PROGRAM SERVES 130 STUDENTS.

BUILDING ON THE SUCCESS OF LAST YEAR'S MODEL, WE HAVE EXPANDED THE

- 4c (Code:) (Expenses \$ 20,283. including grants of \$) (Revenue \$)
ESL/FAMILY LITERACY PROGRAM

EHTP OFFERS AN ENGLISH-AS-A-SECOND-LANGUAGE (ESL)/FAMILY LITERACY PROGRAM THAT MEETS TUESDAYS AND THURSDAYS FROM 12 PM- 2 PM AT EHTP. THE PROGRAM PROVIDES INSTRUCTION BY A TEACHER CERTIFIED WITH A CERTIFICATE IN ENGLISH LANGUAGE TEACHING TO ADULTS (CELTA), WHO USES A PRACTICAL APPROACH TO LEARNING ESSENTIAL ENGLISH. STUDENTS ENROLLED IN THE PROGRAM COMPRISE PARENTS OF EHTP'S AFTER SCHOOL PROGRAMS AS WELL AS OTHER RESIDENTS LIVING IN EAST HARLEM WHO NEED TO LEARN ENGLISH. LESSONS ARE DETERMINED BY BOTH THE INSTRUCTOR AS WELL AS THE STUDENTS, BASED UPON COMMUNICATION THEY FELT MOST CRITICAL TO THEIR DAILY LIVES. AS A RESULT OF THE PROGRAM, THESE ADULTS GAIN THE NECESSARY SKILLS AND

- 4d Other program services. (Describe in Schedule O.)
 (Expenses \$ including grants of \$) (Revenue \$)
- 4e **Total program service expenses** ▶ \$ 1,978,289. (Must equal Part IX, Line 25, column (B).)

Part IV 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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>		
6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	X	
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	X	
13 Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the U.S.?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? <i>If "Yes," complete Schedule F, Part I</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>		X
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? <i>If "Yes," complete Schedule F, Part III</i>		X
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20 Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X
21 Did the organization report more than \$5,000 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 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, questions 3, 4, or 5? <i>If "Yes," complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 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?		
25a Section 501(c)(3) and 501(c)(4) organizations. 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 Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <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, or substantial contributor, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
28* During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i>		X
b Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		X
c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <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, Parts II, III, IV, and V, line 1</i>		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. 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

Form 990 (2008)

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	26	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	121	
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
4b	If "Yes," enter the name of the foreign country: <u>See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.</u>		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a	Did the organization solicit any contributions that were not tax deductible?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	X	
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		X
7h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter: N/A		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter: N/A		
11a	Gross income from members or shareholders		
11b	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?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A		

Form 990 (2008)

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)**Section A. Governing Body and Management**

	Yes	No
For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.		
1a Enter the number of voting members of the governing body	20	
b Enter the number of voting members that are independent	20	
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?		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?		X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	X	
5 Did the organization become aware during the year of a material diversion of the organization's assets?		X
6 Does the organization have members or stockholders?		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9a Does the organization have local chapters, branches, or affiliates?		X
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	X	
11 Is there any officer, director or 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		X

Section B. Policies

	Yes	No
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13 Does the organization have a written whistleblower policy?	X	
14 Does the organization have a written document retention and destruction policy?	X	
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:		
a The organization's CEO, Executive Director, or top management official?	X	
b Other officers or key employees of the organization?		X
Describe the process in Schedule O. (see instructions)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **NY**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
☐ Own website ☒ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization. **LAUREN GOLDSTEIN - (212) 831-0650**
2050 SECOND AVENUE, NEW YORK, NY 10029

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- 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 the organization did not compensate any officer, director, trustee, or key employee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
LAURIE GIDDINS CHAIRMAN	5.00	X		X				0.	0.	0.
LILI LYNTON TREASURER	5.00	X		X				0.	0.	0.
MIKE BROWN VICE CHAIR	5.00	X		X				0.	0.	0.
CARLOS MORALES CO-CHAIR	5.00	X		X				0.	0.	0.
JUDITH GOLD BOARD MEMBER	5.00	X						0.	0.	0.
CANDITA GAUL SECRETARY	5.00	X		X				0.	0.	0.
MILDRED BAEZ BOARD MEMBER	5.00	X						0.	0.	0.
JOHN BLANEY BOARD MEMBER	5.00	X						0.	0.	0.
K. DON CROMWELL BOARD MEMBER	5.00	X						0.	0.	0.
CAROLINA ESQUENAZI BOARD MEMBER	5.00	X						0.	0.	0.
EVE HALL BOARD MEMBER	5.00	X						0.	0.	0.
STEVE HUTENSKY BOARD MEMBER	5.00	X						0.	0.	0.
MIKI KAGAN BOARD MEMBER	5.00	X						0.	0.	0.
MARY W MACINTOSH BOARD MEMBER	5.00	X						0.	0.	0.
TARA MURPHY BOARD MEMBER	5.00	X						0.	0.	0.
STEPHEN RABINOWITZ BOARD MEMBER	5.00	X						0.	0.	0.
WILLIAM RAHM BOARD MEMBER	5.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
MARILYN SIMONS BOARD MEMBER	5.00	X						0.	0.	0.
JOAN SOLTAR BOARD MEMBER	5.00	X						0.	0.	0.
DAVID VAN PELT BOARD MEMBER	5.00	X						0.	0.	0.
DAVID WALKER BOARD MEMBER	5.00	X						0.	0.	0.
TOM WEBBER BOARD MEMBER	5.00	X						0.	0.	0.
JEFF GINSBURG EXECUTIVE DIRECTOR	35.00			X				78,090.	0.	6,800.
JIM MCCAULEY CFO	35.00					X		131,341.	0.	0.
1b Total								209,431.	0.	6,800.

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization

1

- 3** Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4		X
5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. **NONE**

(A) Name and business address	(B) Description of services	(C) Compensation
2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization		0

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a	6,396.				
	b Membership dues	1b					
	c Fundraising events	1c	324,969.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	820,531.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,129,730.				
	g Noncash contributions included in lines 1a-1f \$						
	h Total. Add lines 1a-1f			2281626.			
Program Service Revenue	2 a _____	Business Code _____					
	b _____						
	c _____						
	d _____						
	e _____						
	f All other program service revenue						
	g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			31,408.			31,408.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross Rents	(i) Real	(ii) Personal				
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss)			<6,662.>			<6,662.>
	8 a Gross income from fundraising events (not including \$ 324,969. of contributions reported on line 1c). See Part IV, line 18						
	a			11,040.			
	b Less: direct expenses			11,040.			
	c Net income or (loss) from fundraising events						
	9 a Gross income from gaming activities. See Part IV, line 19						
	a						
	b Less: direct expenses						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances							
a							
b Less: cost of goods sold							
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code				
11 a MISCELLANEOUS INCOME			900099	11,016.			11,016.
b _____							
c _____							
d All other revenue							
e Total. Add lines 11a-11d				11,016.			
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e				2317388.	0.	0.	35,762.

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	3,990.	3,990.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	164,359.	64,912.	49,723.	49,724.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,406,329.	1,098,802.	153,970.	153,557.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	22,235.	18,832.	1,715.	1,688.
9 Other employee benefits	144,372.	113,200.	15,666.	15,506.
10 Payroll taxes	115,393.	85,968.	14,770.	14,655.
11 Fees for services (non-employees):				
a Management				
b Legal	435.		435.	
c Accounting	139,673.		139,673.	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other	82,182.	80,182.		2,000.
12 Advertising and promotion				
13 Office expenses	196,599.	156,037.	20,361.	20,201.
14 Information technology	10,030.	10,030.		
15 Royalties				
16 Occupancy	173,041.	151,099.	11,014.	10,928.
17 Travel	55,667.	55,667.		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	64,959.		64,959.	
23 Insurance	66,662.	49,663.	8,533.	8,466.
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a SPECIAL EVENT	52,268.	52,268.		
b STAFF BOARD DEVELOP.	31,818.	23,704.	4,073.	4,041.
c BAD DEBT	18,706.		18,706.	
d MISCELLANEOUS	15,026.	10,144.	3,153.	1,729.
e STUDENT STIPEND	3,791.	3,791.		
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	2,767,535.	1,978,289.	506,751.	282,495.
26 Joint Costs. Check here ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	172,968.	1	226,971.
	2 Savings and temporary cash investments	50,715.	2	602,957.
	3 Pledges and grants receivable, net	2,558,345.	3	1,740,797.
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	28,015.	9	15,948.
	10a Land, buildings, and equipment: cost basis	2,846,727.		
	b Less: accumulated depreciation. Complete Part VI of Schedule D	818,761.	10c	2,027,966.
	11 Investments - publicly traded securities	1,145,595.	11	876,943.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	193,011.	15	193,079.
16 Total assets. Add lines 1 through 15 (must equal line 34)	6,226,210.	16	5,684,661.	
Liabilities	17 Accounts payable and accrued expenses	121,697.	17	152,879.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable		24	
	25 Other liabilities. Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	121,697.	26	152,879.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	2,650,026.	27	2,227,060.
	28 Temporarily restricted net assets	2,569,988.	28	2,526,988.
	29 Permanently restricted net assets	884,499.	29	777,734.
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	6,104,513.	33	5,531,782.
	34 Total liabilities and net assets/fund balances	6,226,210.	34	5,684,661.

Part XI Financial Statements and Reporting

- 1 Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
- b Were the organization's financial statements audited by an independent accountant?
- c If "Yes" to lines 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?
- 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?

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,859,219.	2,987,262.	5,579,069.	2,703,020.	2,281,626.	15,410,196.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 - 3	1,859,219.	2,987,262.	5,579,069.	2,703,020.	2,281,626.	15,410,196.
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)						
6 Public Support. Subtract line 5 from line 4						15,410,196.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	1,859,219.	2,987,262.	5,579,069.	2,703,020.	2,281,626.	15,410,196.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	59,760.	85,436.	156,478.	116,697.	24,746.	443,117.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)	12,744.		10,366.	15,348.	11,016.	49,474.
11 Total support. Add lines 7 through 10						15,902,787.

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

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	96.90 %
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	97.08 %

16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ☒**b 33 1/3% support test - 2007.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ☐**17a 10% -facts-and-circumstances test - 2008.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ☐**b 10% -facts-and-circumstances test - 2007.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ☐**18 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ☐

Schedule A (Form 990 or 990-EZ) 2008

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.)**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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 - 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a 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						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ ☐						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%

19a 33 1/3% support tests - 2008. 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 ▶ ☐

b 33 1/3% support tests - 2007. 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 explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

MISCELLANEOUS INCOME.

Schedule D
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**▶ Attach to Form 990. To be completed by organizations that
answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047

2008Open to Public
Inspection

Name of the organization

EAST HARLEM TUTORIAL PROGRAM, INC.

Employer identification number

23-7439789

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.

	(a) Donor advised funds	(b) Funds 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 donor advised funds are the organization's property, subject to the organization's exclusive legal control?		☐ Yes ☐ No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?		☐ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (e.g., recreation or pleasure)	☐ Preservation of an historically important land area
☐ Protection of natural habitat	☐ Preservation of certified historic structure
☐ Preservation of open space	

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

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing 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)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

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

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

- a ☐ Public exhibition
 b ☐ Scholarly research
 c ☐ Preservation for future generations

- d ☐ Loan or exchange programs
 e ☐ Other _____

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

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

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

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

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

	Amount
1c	
1d	
1e	
1f	

- c Beginning balance
 d Additions during the year
 e Distributions during the year
 f Ending balance

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	1040138.				
b Contributions					
c Investment earnings or losses	<80,595.>				
d Grants or scholarships					
e Other expenditures for facilities and programs	155,639.				
f Administrative expenses					
g End of year balance	803,904.				

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

- a Board designated or quasi-endowment ▶ 30.00 %
 b Permanent endowment ▶ 97.00 %
 c Term endowment ▶ _____ %

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

	Yes	No
3a(i)		X
3a(ii)		X
3b		

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

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land		1,647,208.		1,647,208.
b Buildings		133,095.	54,576.	78,519.
c Leasehold improvements		519,511.	248,496.	271,015.
d Equipment		546,913.	515,689.	31,224.
e Other				
Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				2,027,966.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other		
Total. (Col (b) should equal Form 990, Part X, col (B) line 12.) ►		

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

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

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

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

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

(a) Description of liability	(b) Amount
Federal income taxes	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25.) ►	

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	2,317,388.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	2,767,535.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	<450,147.>
4	Net unrealized gains (losses) on investments	4	<122,584.>
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net). Add lines 4-8	9	<122,584.>
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	<572,731.>

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

1	Total revenue, gains, and other support per audited financial statements	1	2,203,341.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	<122,584.>
b	Donated services and use of facilities	2b	8,537.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	<114,047.>
3	Subtract line 2e from line 1	3	2,317,388.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5	2,317,388.

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

1	Total expenses and losses per audited financial statements	1	2,776,072.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	8,537.
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	8,537.
3	Subtract line 2e from line 1	3	2,767,535.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	2,767,535.

Part XIV Supplemental Information

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

PART X: MANAGEMENT OF EHTP IS NOT AWARE OF ANY VIOLATION OF

ITS TAX STATUS AS AN ORGANIZATION EXEMPT FROM INCOME TAXES, NOR OF ANY

EXPOSURE TO UNRELATED BUSINESS INCOME TAX. EHTP'S CURRENT ACCOUNTING

POLICY IS TO PROVIDE LIABILITIES FOR UNCERTAIN TAX POSITIONS WHEN A

LIABILITY IS PROBABLE AND ESTIMABLE.

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► **Attach to Form 990 or Form 990-EZ.** Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

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e ☐ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

☐ Yes ☐ No

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

Schedule G (Form 990 or 990-EZ) 2008

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

	(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
	ANNUAL SPRING BENEFIT (event type)	(event type)	NONE (total number)	(Add col. (a) through col. (c))
Revenue				
1 Gross receipts	336,009.			336,009.
2 Less: Charitable contributions	324,969.			324,969.
3 Gross revenue (line 1 minus line 2)	11,040.			11,040.
Direct Expenses				
4 Cash prizes				
5 Non-cash prizes				
6 Rent/facility costs				
7 Other direct expenses	63,308.			63,308.
8 Direct expense summary. Add lines 4 through 7 in column (d)				(63,308.)
9 Net income summary. Combine lines 3 and 8 in column (d)				<52,268.>

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

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

9 Enter the state(s) in which the organization operates gaming activities: _____

a Is the organization licensed to operate gaming activities in each of these states?

b If "No," Explain:

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

b If "Yes," Explain:

11 Does the organization operate gaming activities with nonmembers?

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

	Yes	No
9a		
10a		
11		
12		

13 Indicate the percentage of gaming activity operated in:**a** The organization's facility**13a** %**b** An outside facility**13b** %**14** Provide the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► _____

Address ► _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?**15a****b** If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____.**c** If "Yes," enter name and address:

Name ► _____

Address ► _____

16 Gaming manager information:

Name ► _____

Gaming manager compensation ► \$ _____

Description of services provided ► _____

☐ Director/officer☐ Employee☐ Independent contractor**17** Mandatory distributions:**a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?**17a****b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____

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▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

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FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THAT THEY HAVE THE RESOURCES NEEDED TO ACCESS OPPORTUNITIES FOR
ACADEMIC, SOCIAL AND CAREER ADVANCEMENT WHILE FULLY ENGAGING PARENTS
AND CAREGIVERS IN THEIR CHILDREN'S DEVELOPMENT.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
WHILE FULLY ENGAGING PARENTS AND CAREGIVERS IN THEIR CHILDREN'S
DEVELOPMENT. WE SET HIGH EXPECTATIONS FOR OURSELVES AND OUR
PARTICIPANTS AND CONTINUALLY MEASURE OUR OUTCOMES AND COMMUNITY NEEDS
TO DELIVER THE HIGHEST QUALITY, MOST EFFECTIVE OFFERINGS.

EAST HARLEM TUTORIAL PROGRAM (EHTP) GIVES KIDS THE OPPORTUNITIES THEY
WOULD HAVE IF THEY WERE BORN 20 BLOCKS SOUTH. AND, WE'VE BEEN DOING IT
FOR MORE THAN 50 YEARS. WE TEACH READING AND MATH, PROVIDE ONE-TO-ONE
TUTORING, PREPARE KIDS FOR COLLEGE, HELP THEM GET ACCEPTED, AND BUILD
THE SOCIAL SKILLS THEY'LL NEED TO SUCCEED. WE ALSO GET KIDS THROUGH
COLLEGE AND READY FOR THE REAL WORLD.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS
IMPROVEMENTS ARE BEING IMPLEMENTED TO BETTER SERVE PARTICIPANTS AND
ENSURE THAT EACH CHILD RECEIVES THE MAXIMUM BENEFITS FROM OUR PROGRAMS:

ENROLLMENT POLICY TO OFFER MORE TAILORED, IMPACTFUL SERVICES TO
PARTICIPANTS, EHTP IS IMPLEMENTING A STRICT ENROLLMENT POLICY.

NEW PARTICIPANTS WISHING TO ENROLL ARE PRIORITIZED BASED ON THE

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FOLLOWING CRITERIA; STUDENTS:

- ARE KINDERGARTENERS WHO HAVE SIBLINGS ALREADY ENROLLED IN THE PROGRAM.
- LIVE, ATTEND SCHOOL, OR HAVE A PARENT WORKING IN EAST HARLEM (ZIP CODES 10029 AND 10035).
- ARE ON THE EHTP ROLLING ADMISSIONS LIST.

RETURNING PARTICIPANTS MUST:

- HAVE COMPLETED FY 09 WITH A MINIMUM ATTENDANCE RATE OF 75%.
- LIVE, ATTEND SCHOOL, OR HAVE A PARENT WORKING IN EAST HARLEM (ZIP CODES 10029 AND 10035).

ATTENDANCE POLICY THE PROGRAM PREVIOUSLY ALLOWED STUDENTS TO ATTEND PROGRAM FOR 1-4 DAYS/WEEK. PARTICIPANTS ARE NOW REQUIRED TO TAKE PART IN PROGRAMS FOUR DAYS PER WEEK, ACHIEVING NO LESS THAN AN ANNUAL ATTENDANCE RATE OF 75%. ALL PARTICIPANT FAMILIES MUST SIGN A CONTRACTUAL AGREEMENT DEMONSTRATING THEIR AGREEMENT TO COMPLY WITH THIS POLICY.

INCREASED HOURS OF TIME-ON-TASK AS A RESULT OF THE NEW ATTENDANCE POLICY, PARTICIPANTS ARE GUARANTEED TO RECEIVE MORE HOURS OF PROGRAM, THUS ALLOWING FOR INCREASED RETENTION AND A MORE INTENSIVE LEARNING.

AVERAGE HOURS OF PROGRAM PER PARTICIPANT:

- FY 09 AVERAGE HOURS OF PROGRAM PER PARTICIPANT -- APPROXIMATELY 150
- FY 10 ANTICIPATED AVERAGE HOURS OF PROGRAM PER PARTICIPANT --

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APPROXIMATELY 270

EVERY STUDENT ASSIGNED A PERSONAL TUTOR ONE-ON-ONE TUTORING HAS ALWAYS BEEN A PRIORITY AT EHTP, BUT MORE THAN EVER, THIS ASPECT OF PROGRAMMING WILL BE A DEFINING ELEMENT OF EVERY PARTICIPANT'S EHTP EXPERIENCE. ONE DAY PER WEEK IS DEDICATED TO TUTORING FOR ALL STUDENTS.

RIGOROUS VOLUNTEER TRAINING VOLUNTEERS HAVE ALWAYS UNDERGONE A DETAILED EVALUATION PROCESS. THIS YEAR THE REQUIREMENTS AND EXPECTATIONS OF VOLUNTEERS ARE HIGHER, REFLECTING EHTP'S EFFORT TO PROVIDE PARTICIPANTS WITH SPECIALIZED ATTENTION AND SUPPORT.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS
PROGRAM ONCE AGAIN TO ENCOMPASS OUR MIDDLE SCHOOL PARTICIPANTS. MIDDLE SCHOOL CONTINUES TO BE A CRITICAL TRANSITION POINT FOR YOUNG PEOPLE IN SCHOOL: THEY NO LONGER HAVE THE COMFORT OF A SINGLE CLASS, THEY HAVE TO MANAGE A SCHEDULE, AND THEY ARE USUALLY IN A LARGER ENVIRONMENT. THE NEW EHTP-UP PROGRAM PROVIDES MIDDLE SCHOOL STUDENTS WITH A PARALLEL HIGH SCHOOL READINESS PROGRAM THAT ENSURES THEY GRADUATE ON TIME, ACADEMICALLY AND SOCIALLY PREPARED, AND ADMITTED TO A GOOD HIGH SCHOOL.

HIGH SCHOOL PARTICIPANTS CAN TAKE ADVANTAGE OF OUR RECENT PARTNERSHIP WITH TOURO COLLEGE OF MEDICINE (TOUROCOM) IN WHICH STUDENTS GAIN LAB EXPERIENCE, TAKE BIOLOGY AND ANATOMY CLASSES, AND WORK SIDE-BY-SIDE WITH MEDICAL STUDENTS. AFTER STUDENTS SPEND ONE YEAR AT TOUROCOM, THEY ENTER A PEER EDUCATOR PROGRAM AT BRONX LEBANON HOSPITAL. BECAUSE THIS

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IS THE FIRST YEAR OF THIS ASPECT OF THE PROGRAM, CURRENT STUDENTS ARE WORKING WITH DOCTORS, MEDICAL STUDENTS, AND THE VOLUNTEER DEPARTMENT AT THE HOSPITAL TO CREATE A PROGRAM THAT WILL BOTH BUILD THEIR CAPACITY TO PROVIDE PEER EDUCATION ON A RANGE OF HEALTH ISSUES AND CHANGE BEHAVIORS OF MIDDLE AND HIGH SCHOOL STUDENTS IN UNDER-RESOURCED NEIGHBORHOODS. THE PROGRAM CONSISTS OF THREE COMPONENTS. FIRST, PARTICIPANTS RECEIVE TRAINING ON HOW TO EFFECTIVELY LEAD AND FACILITATE GROUPS AND ON A RANGE OF HEALTH TOPICS; WE ANTICIPATE THAT THESE TOPICS WILL INCLUDE HEALTHY EATING, DIABETES AWARENESS, SEX EDUCATION, AND ASTHMA. NEXT PARTICIPANTS WILL MEET WITH GROUPS OF MIDDLE AND HIGH SCHOOL STUDENTS INCLUDING OUR EHTP STUDENTS AND PROVIDE PEER EDUCATION. THE FINAL PROJECT WILL BE A STUDENT-CREATED HEALTH FAIR PRESENTED IN PARTNERSHIP WITH THE EHTP STUDENTS ENROLLED IN THEIR FIRST YEAR AT TOUROCOM.

STUDENTS ALSO HAVE ACCESS TO OUR EXPANDING ROBOTICS PROGRAM FEATURING RIGOROUS PHYSICS AND ENGINEERING TRAINING FOR WHICH THEY ARE ELIGIBLE TO RECEIVE HIGH SCHOOL SCIENCE CREDIT. MIDDLE SCHOOL PARTICIPANTS CAN CHOOSE TO PARTICIPATE IN LEGO ROBOTICS, AN INTRODUCTION TO THE FIRST ROBOTICS CURRICULUM, OR OUR BRAND NEW MODEL UN PROGRAM. ALL EHTP-UP STUDENTS HAVE ACCESS TO A VARIETY OF ARTS ELECTIVES - VISUAL ARTS, DANCE, MUSIC, FILM AND TV PRODUCTION, AND PHOTOGRAPHY.

IN ADDITION TO THE ACADEMIC YEAR PROGRAMS, EHTP-UP SUMMER INSTITUTE IS A VITAL PROGRAM FOR INCOMING FRESHMEN AND HIGH SCHOOL STUDENTS. THE FIVE-WEEK PROGRAM FOCUSES ON COLLEGE PREPARATION AND OFFERS SPECIFIC, ADVANCED AREAS OF STUDY BASED UPON STUDENTS' INTERESTS. SUMMER

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INSTITUTE PROVIDES PROGRAMS NOT OFFERED AT OUR STUDENTS' SCHOOLS AND CERTAINLY NOT AVAILABLE TO THEM OVER THE SUMMER MONTHS. SUMMER INSTITUTE STUDENTS HAVE LIFE-CHANGING EXPERIENCES THAT INFLUENCE THEIR EDUCATIONAL PATHS AND CAREER GOALS IN POSITIVE WAYS. AS IN PREVIOUS YEARS, THE 2010 SUMMER INSTITUTE WILL INCLUDE TWO FULL WEEKS FOR PARTICIPANTS TO TRAVEL TOGETHER TO UNIVERSITY OF VIRGINIA (UVA), WHERE THEY RESIDE IN CAMPUS DORMS, TAKE CLASSES AND WORK ON GROUP PROJECTS.

THE FOLLOWING ARE SOME HIGHLIGHTS OF OUR INSTITUTION-WIDE ACCOMPLISHMENTS DURING FY 09:

- 100% OF OUR HIGH SCHOOL SENIORS GRADUATED ON TIME.
- 100% OF OUR HIGH SCHOOL GRADUATES WERE ACCEPTED TO 4 YEAR COLLEGES.
- AN EHTP SENIOR RECEIVED A GATES MILLENNIUM SCHOLARSHIP, ONE OF ONLY 1,000 NATION-WIDE, WHICH COVERS ALL COSTS OF HER UNDERGRADUATE AND GRADUATE EDUCATION.
- NBC'S TODAY SHOW FEATURED OUR GATES SCHOLAR AND EXECUTIVE DIRECTOR. THE SEGMENT AIRED IN THE SPRING AND IS AVAILABLE ON OUR WEBSITE: WWW.EHTP.ORG.
- AN EHTP JUNIOR WAS ACCEPTED INTO THE HIGHLY-COMPETITIVE CORNELL UNIVERSITY SUMMER PROGRAM, WHERE SHE HAD THE OPPORTUNITY TO LIVE ON CAMPUS FOR THREE WEEKS, TAKE COURSES AND EARN COLLEGE CREDIT.
- 90% OF OUR 8TH GRADERS WERE ACCEPTED TO ONE OF THEIR CHOICE HIGH SCHOOLS.
- 95% OF OUR ELEMENTARY SCHOOL PARTICIPANTS SUCCESSFULLY ADVANCED TO THEIR NEXT GRADE.

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- VOLUNTEERS PROVIDED MORE THAN 3,600 HOURS OF DIRECT SERVICE TO OUR PARTICIPANTS

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS
CONFIDENCE IN SPEAKING ENGLISH TO SECURE JOBS, ATTEND SCHOOL, AND
CREATE AN OVERALL BETTER QUALITY OF LIFE FOR THEIR FAMILIES AND
THEMSELVES.

FORM 990, PART VI, SECTION A, LINE 4: ARTICLE III:

MISSION- ADDED: IT IS THE POLICY OF THE CORPORATION TO PROVIDE ITS PROGRAMS
AND SERVICES WITHOUT REGARD TO GENDER, SEXUAL ORIENTATION, RACE, COLOR,
CREED, AGE, RELIGION, DISABILITY, VETERAN STATUS, MARITAL STATUS, NATIONAL
ORIGIN, OR ANY OTHER STATUS OR CONDITION PROTECTED BY APPLICABLE LAW. IT
IS THE POLICY OF THE CORPORATION NOT TO DISCRIMINATE AND TO PROVIDE EQUAL
OPPORTUNITY IN THE ADMINISTRATION OF ALL POLICIES AND PROGRAMS ADMINISTERED
BY THE CORPORATION.

ARTICLE IV, BOARD OF TRUSTEES:

SECTION 4.1 NUMBER AND POWERS- CHANGE: THE BUSINESS AND AFFAIRS OF THE
CORPORATION SHALL BE MANAGED BY A GOVERNING BOARD OF DIRECTORS (THE "BOARD
OF TRUSTEES"), WHICH SHALL CONSIST OF SUCH NUMBER OF PERSONS AS THE BOARD
OF TRUSTEES MAY FROM TIME TO TIME DETERMINE, BUT IN NO EVENT FEWER THAN
FIFTEEN (15) DIRECTORS (EACH A "TRUSTEE").

SECTION 4.2 TERM AND ELECTION- ADDED: THE BOARD OF TRUSTEES AGREES TO USE
ITS REASONABLE BEST EFFORTS TO ENSURE THAT RESIDENTS OF THE EAST HARLEM

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COMMUNITY ARE REPRESENTED ON THE BOARD OF TRUSTEES.

SECTION 4.4 MEETINGS- REMOVED: ALL MEETINGS OF THE BOARD OF TRUSTEES MAY BE HELD WITHIN OR WITHOUT THE STATE OF NEW YORK.

SECTION 5.1 OFFICERS GENERALLY; ELECTION- CHANGE: TWO OR MORE OFFICES MAY BE HELD BY THE SAME PERSON; PROVIDED, HOWEVER, THE OFFICES OF CHAIRPERSON, PRESIDENT, SECRETARY AND TREASURER, OR THE OFFICES CORRESPONDING THERETO, MAY NOT BE HELD BY THE SAME PERSON.

FORM 990, PART VI, SECTION A, LINE 10: A DRAFT OF THE FORM 990 IS DISTRIBUTED TO THE AUDIT COMMITTEE FOR REVIEW PRIOR TO BEING SUBMITTED TO THE IRS. THE DRAFT FORM 990 IS DISTRIBUTED EARLY ENOUGH TO PROVIDE EACH COMMITTEE MEMBER WITH A REASONABLE AMOUNT OF TIME FOR REVIEW AND SUBMISSION OF QUESTIONS OR COMMENTS PRIOR TO THE FILING DEADLINE. THE FINAL FORM 990 IS DISTRIBUTED TO EACH BOARD MEMBER PRIOR TO BEING FILED WITH THE IRS. THE DRAFT AND FINAL FORM 990 MAY BE DISTRIBUTED IN PERSON, BY REGULAR MAIL, E-MAIL, OR FAX.

FORM 990, PART VI, SECTION B, LINE 12C: EHTP'S CONFLICT OF INTEREST POLICY IS APPLICABLE TO ALL DIRECTORS, OFFICERS, AND EMPLOYEES OF EHTP. AT THE BEGINNING OF EACH YEAR, ALL DIRECTORS, OFFICERS, AND EMPLOYEES ARE ASKED TO READ (OR RE-READ) THE CONFLICT OF INTEREST POLICY, SIGN AND SUBMIT A FORM ACKNOWLEDGING THAT THEY HAVE READ THE POLICY, AND SIGN AND SUBMIT A STATEMENT DISCLOSING A POTENTIAL CONFLICT OF INTEREST (OR STATING THAT NONE EXISTS). AFTER DISCLOSURE OF THE FINANCIAL INTEREST AND ALL MATERIAL

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FACTS, AND AFTER ANY DISCUSSION WITH THE INTERESTED PERSON, SUCH INDIVIDUAL, AND ANY OTHER INTERESTED PERSON SHALL LEAVE THE BOARD OR COMMITTEE MEETING WHILE THE DETERMINATION OF WHETHER ANY CONFLICT OF INTEREST (ACTUAL OR POTENTIAL) EXISTS IS DISCUSSED AND VOTED UPON. THE REMAINING DISINTERESTED BOARD OR COMMITTEE MEMBERS (REFERRED TO AS THE "INDEPENDENT EVALUATION COMMITTEE" OR "IEC" SHALL DECIDE IF A CONFLICT OF INTEREST EXISTS.

PROCEDURES FOR ADDRESSING THE CONFLICT OF INTEREST

A. IF AN ACTUAL OR POTENTIAL CONFLICT HAS BEEN DETERMINED TO EXIST, AN INTERESTED PERSON MAY STILL MAKE A PRESENTATION AT THE BOARD OR COMMITTEE MEETING, BUT AFTER SUCH PRESENTATION, SUCH INDIVIDUAL SHALL LEAVE THE MEETING DURING THE DISCUSSION OF, AND THE VOTE ON, THE TRANSACTION OR ARRANGEMENT THAT RESULTS IN THE CONFLICT OF INTEREST. ANY BENEFIT RECEIVED BY THE INTERESTED PERSON MUST BE DISCLOSED AT SUCH BOARD OR COMMITTEE MEETING.

B. THE CHAIRPERSON OF THE BOARD OR COMMITTEE SHALL, IF APPROPRIATE, APPOINT A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT.

C. AFTER EXERCISING DUE DILIGENCE, THE IEC SHALL DETERMINE WHETHER THE ORGANIZATION CAN OBTAIN A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT WITH REASONABLE EFFORTS FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST.

D. IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST IS NOT REASONABLY ATTAINABLE UNDER THE CIRCUMSTANCES, THE IEC SHALL DETERMINE BY A MAJORITY VOTE WHETHER THE

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TRANSACTION OR ARRANGEMENT IS IN THE ORGANIZATION'S BEST INTEREST AND FOR ITS OWN BENEFIT AND WHETHER THE TRANSACTION IS FAIR AND REASONABLE TO THE ORGANIZATION AND SHALL MAKE ITS DECISION AS TO WHETHER TO ENTER INTO THE TRANSACTION OR ARRANGEMENT IN CONFORMITY WITH SUCH DETERMINATION.

FORM 990, PART VI, SECTION B, LINE 15: EAST HARLEM TUTORIAL PROGRAM (EHTP) USES A THOROUGH AND WELL ESTABLISHED PROCESS IN DETERMINING EXECUTIVE COMPENSATION. THE PROCESS IS LED BY THE BOARD OF TRUSTEES WITH COORDINATION BY THE BOARD CHAIR, UTILIZING EXTENSIVE EVALUATIONS AND DUE DILIGENCE PROCEDURES.

EVERY YEAR, THE EHTP BOARD CHAIR LEADS A BOARD OF TRUSTEE TASK FORCE TO CONDUCT THE EVALUATION AND COMPENSATION SETTING PROCESS. THE EXECUTIVE DIRECTOR FILLS OUT A COMPREHENSIVE SELF EVALUATION BASED ON ORGANIZATION AND PERSONAL GOALS THAT ARE SET IN COLLABORATION WITH THE BOARD CHAIR PRIOR TO EACH FISCAL YEAR. THE EXECUTIVE DIRECTOR AND BOARD CHAIR DISCUSS THE EVALUATION EXTENSIVELY AND REVIEW GOALS TO UNDERSTAND WHAT GOALS WERE MET AND DETAIL WHY ANY GOALS MAY NOT HAVE BEEN MET. THE TASK FORCE ALSO RESEARCHES EXECUTIVE COMPENSATION AT COMPARABLE ORGANIZATIONS BY GATHERING DATA FROM 990'S AND COMMUNICATION WITH BOARD MEMBERS. ALSO TAKEN INTO CONSIDERATION IN THE PROCESS IS THE ORGANIZATION BUDGET AND SALARIES OF OTHER STAFF. FOLLOWING THE TASK FORCE REVIEW, THE BOARD CHAIR AND THE EXECUTIVE DIRECTOR NEGOTIATE EXECUTIVE COMPENSATION BASED ON THE TASK FORCE FINDINGS. FINAL APPROVAL OF EXECUTIVE COMPENSATION MUST BE APPROVED BY THE BOARD OF TRUSTEES.

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THIS PROCESS WAS LAST DONE JUNE 23, 2010.

FORM 990, PART VI, SECTION C, LINE 19: FORM 990'S ARE MADE AVAILABLE TO THE PUBLIC VIA GUIDESTAR, AND DIRECTLY UPON REQUEST. THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AUDITED FINANCIAL STATEMENTS AND FORM 990 ARE AVAILABLE FOR PUBLIC INSPECTION AND CAN BE OBTAINED BY CONTACTING THE ORGANIZATION DIRECTLY.

FORM 990, PART XI, LINE 2C:

EAST HARLEM TUTORIAL PROGRAM, INC. HAS A COMMITTEE THAT IS RESPONSIBLE FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT. THIS PROCESS HAS NOT CHANGED FROM THE PREVIOUS YEAR.

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► **File a separate application for each return.**

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

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

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

COPY

FEB 16 2010

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

Part I only

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

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on **e-file for Charities & Nonprofits**.

Type or print	Name of Exempt Organization	Employer identification number
	EAST HARLEM TUTORIAL PROGAM, INC.	23-7439789
	Number, street, and room or suite no. If a P.O. box, see instructions.	
	2050 SECOND AVENUE	
File by the due date for filing your return. See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	NEW YORK, NY 10029	

Check type of return to be filed (file a separate application for each return):

- | | | |
|--|---|------------------------------------|
| ☒ Form 990 | ☐ Form 990-T (corporation) | ☐ Form 4720 |
| ☐ Form 990-BL | ☐ Form 990-T (sec. 401(a) or 408(a) trust) | ☐ Form 5227 |
| ☐ Form 990-EZ | ☐ Form 990-T (trust other than above) | ☐ Form 6069 |
| ☐ Form 990-PF | ☐ Form 1041-A | ☐ Form 8870 |

DEV PERSAUD

- The books are in the care of ► **2050 SECOND AVENUE - NEW YORK, NY 10029**

Telephone No. ► **(212) 831-0650**

FAX No. ►

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

- 1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **APRIL 15, 2010**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

► ☐ calendar year _____ or

► ☒ tax year beginning **SEP 1, 2008**, and ending **AUG 31, 2009**.

- 2 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$ N/A

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form **8868** (Rev. 4-2009)

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box ☒ **X**
- Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1).

Part II		Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).	
Type or print File by the extended due date for filing the return. See instructions.	Name of Exempt Organization		Employer identification number
	EAST HARLEM TUTORIAL PROGRAM, INC.		23-7439789
	Number, street, and room or suite no. If a P.O. box, see instructions.		For IRS use only
	2050 SECOND AVENUE		
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.		
	NEW YORK, NY 10029		

Check type of return to be filed (File a separate application for each return):

- ☒ Form 990 ☐ Form 990-EZ ☐ Form 990-T (sec. 401(a) or 408(a) trust) ☐ Form 1041-A ☐ Form 5227 ☐ Form 8870
- ☐ Form 990-BL ☐ Form 990-PF ☐ Form 990-T (trust other than above) ☐ Form 4720 ☐ Form 6069

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

LAUREN GOLDSTEIN

- The books are in the care of **2050 SECOND AVENUE - NEW YORK, NY 10029**
Telephone No. **(212) 831-0650** FAX No. _____
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 4 I request an additional 3-month extension of time until **JULY 15, 2010**
- 5 For calendar year _____, or other tax year beginning **SEP 1, 2008**, and ending **AUG 31, 2009**
- 6 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period
- 7 State in detail why you need the extension
ADDITIONAL TIME IS NEEDED TO COMPILE THE INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.

8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$
c	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$ N/A

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature **▶** *Alanna Colombo* Title **▶** CPA Date **▶** **4/14/10**

Form 8868 (Rev. 4-2009)

**OFFICE
COPY**