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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

Open to Public Inspection

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_	Check if a		Please use IRS	C Name of		n Right	to the City A	Alliance, I	nc					ication number	er
==	Address	- 1	label or		siness As							<u>94-346218</u>			
==	Name ch	•	print or type.			or PO box if m		ed to street	address)	Ro	om/suite	E Telephon	e numbe	ır	
図	Initial reti	um	See			ue, 19th Flo						(646) 360-	5803		
Ц	Terminat	ed	Specific Instruc-	1 1	wn, state o	r country, and Z	IP + 4								
Ц	Amende	d return	tions	New York		<u> </u>		NY	100	01		G Gross red	eipts \$		690,031
Ш	Application	on pending	.F N	ame and add	dress of p	orincipal office	r				H(a) Is t	his a group ret	um for a	ffiliates?	Yes X No
			Rachel	La Forest,	330 Sev	venth Avenu	e, 19th Floor	, New Yo	ork, NY 1	10001	H(b) Are	all affiliates in	duded?	Γ	Yes No
1	Tax-exe	mpt status	X 50)1(c) (3) ∢ (ır	nsert no)	4947(a)(1) or	527		If *	No,* attach a li	st (see	instructions)	
<u>J</u>	Website	: Þ						· •	=!		H(c) Gro	oup exemption	number	•	
		rganization	X c _o	proration	Trust	Associatio	Other		Τ.		of forma			State of legal d	Installe ADI
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79/						e drastic fisc									
Activities & Governance	2	Check th	nis box	► it tu	e organı	ization disco	ntinued its o	perations	or dispo	sed o	of more	than 25% o	1 - 1	et assets	
න් ග	3	Number	or voting	j members	or the g	overning boo	y (Part VI, II	ne 1a).	DE	~=			3		8
퇉	4	Number	or maep	endent voti	ing mem	ibers of the (governing bo	ogy (Paπ	VI, lineriji	シト	IVE		4		8
Ę	5	Total au			/	line 2a)	\	100	f · · ·			-iol	5		3
•	7a	Total are	nibei oi	lated busin	(esumar	e if necessa nue from Pa	ıy) u+t\/III.colum		1SIPR	7 0	2044	· \visi ·	6 7a		
) 'a	Not upro	vated by	icinoce tove	blo moo	me from Fo	000 T lin	. 24 l	16 12 11	- 0	2011	191	7a 7b		0
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	8	Contribu	itions and	d grants (P	art VIII 1	line 1h)			<u>UG</u> D)EN	Firstlive	ear of opera	tion	Ourie	689,931
Đ,						line 2g).					1 1100 110	- I	ILIOI1		000,001
Revenue	10					n (A), lines :				· I					0
å	11), lines 5, 6d									100
	12					must equal Pa			-	•			0		690,031
	13					art IX, colum									0
	14					rt IX, column									
	15					oyee benefit									140,644
Expenses	16a					X, column (A				. 1			Ì		0
φ	b					column (D)				,366	100	学是经验	NEW S		经国际
ŭΪ	17	Other ex	penses	(Part IX, co	lumn (A), lines 11a-	11d, 11f–24	f)							372,869
	18					iust equal Pa		n (A), line	e 25) . .	. [0		513,513
	19	Revenue	e less ex	<u>penses. Su</u>	<u>ıbtract lır</u>	ne 18 from li	ne 12		<u></u>	·		_	0		176,518
ets or											Beginn	ing of Curren		End o	of Year
				rt X, line 16						.			0		203,273
Ref As	21			Part X, line 2						.			0		26,755
		_			. Subtra	ct line 21 fro	m line 20 .	<u> </u>	· · · · ·	.			0		<u>176,518</u>
	rt II		nature									······			
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Usè	Önly	ıf self-	employed)).		OOBRYAN, O		40440				EIN P			
			ss, and ZIF			X 389, NEW						Phone no. 🕨	(646	<u>) 522-6071</u>	
Ma	the IR	S discus	s this ret	urn with the	e prepar	er shown ab	ove? (see in	struction	s)		<u></u>		<u></u>	Y	es X No
		_	_												

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. (HTA)

Form 990 (2009)

4d	Other program services. (Describe in Schedule O) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)	
		
4c	(Code:) (Expenses \$0 including grants of \$0) (Revenue \$0)	
4:	(Code)	
		••••
4b	(Code) (Expenses \$0 including grants of \$0) (Revenue \$0)	
	social policy changes imposed on cities across the country.	
	people of color from their historic neighborhood, and the drastic fiscal and	
Tu	The Organization is working against gentrification, displacement of low-income	
	(Code:) (Expenses \$ 422,985 including grants of \$ 0) (Revenue \$ 0)	
	allocations to others, the total expenses, and revenue, if any, for each program service reported.	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and	
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses	
	If "Yes," describe these changes on Schedule O.	
	services? Yes 🔀 !	No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	the prior Form 990 or 990-EZ?	No
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	M-
	changes imposed on cities across the country	
	the displacement of low-income people of color from their historic neighborhoods, and the drastic fiscal and social policy	
	justice, human rights and democracy RTTC emerged in January 2007 in response to a call for a united response to gentrificat	
	The Organization is a national alliance of urban base-building organizations and allies committed to building a movement of urban base-building organizations and allies committed to building a movement of urban base-building organizations.	ban
	·	
1	Briefly describe the organization's mission	

Part IV

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
_	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C,			
_		4		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? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have)	
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes,"	<u> </u>		
•	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part	۳		
•	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If</i> "Yes," complete Schedule D, Part V	10		Х
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	11	Х	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that			
	addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII.	12	Х	
12A	Was the organization included in consolidated, independent audited financial statements for the tax Yes No			
	year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		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? If "Yes," complete Schedule F, Part II	15		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? If "Yes," complete Schedule F, Part III	16		_X_
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Χ
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on]		
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		Χ
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Χ

Form 990 (2009) Right to the City Alliance, Inc. 94-3462187 Checklist of Required Schedules (continued) Part IV No 21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II . . 21 Х Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Х Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25 24a **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction 25a 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 25b Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 Χ 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? 27 Х 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? If "Yes," complete Schedule L, Part IV Х **b** A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete* Schedule L, Part IV . 28b Х c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 Х Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes." complete Schedule N. 31 Х 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Х Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, 34 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete 35 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 36 Х 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part

19? Note. All Form 990 filers are required to complete Schedule O

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and

Х

37

Form 9	90 (2009) Right to the City Alliance, Inc	94-3462187	Page 5
Par	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	1) i ;:
	U.S Information Returns Enter -0- if not applicable	6	10
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	11
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable		
	gaming (gambling) winnings to prize winners?	1c	Х
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		ï
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	3	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	_2b	Х
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see		ŧ.
_	instructions)		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by		
	this return?	<u>3a</u>	X
_	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		X
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)?		
h	account)?	. 4a	X
b			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts		
5a			
b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a	— ×
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	5b	X
C	Prohibited Tax Shelter Transaction?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	. <u>5c</u>	
va	organization solicit any contributions that were not tax deductible?	6a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	Ga	- ^
	gifts were not tax deductible?	. 6b	
7	Organizations that may receive deductible contributions under section 170(c).	. 60	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	į	
u	and services provided to the payor?	7a	×
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	 ^
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		
_	required to file Form 8282?	7c	×
d	If "Yes," indicate the number of Forms 8282 filed during the year		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	1	1
	benefit contract?	7e	Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	. 7f	X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	. 7g	A) /A
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as		, ~ (, , , , , , , , , , , , , , , , , ,
	required?	. 7h	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	1	
	organization, have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
а	Did the organization make any taxable distributions under section 4966?	. 9a	Х
b	Did the organization make a distribution to a donor, donor advisor, or related person?	. 9b	X
10	Section 501(c)(7) organizations. Enter:	, , ,	Ţ
а	Initiation fees and capital contributions included on Part VIII, line 12	i i	i. 11
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b N/A		
11	Section 501(c)(12) organizations. Enter:		
а	Gross income from members or shareholders		
b	Gross income from other sources (Do not net amounts due or paid to other sources		1
	against amounts due or received from them)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	. 12a	
b_	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . 12b N/A		

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.

Sect	ion A. Governing Body and Management				Τ.	
1a	Enter the number of voting members of the governing body	1 12	•	Q And And	Yes	No
b	Enter the number of voting members of the governing body Enter the number of voting members that are independent	1a 1b		8	1	-
2	Did any officer, director, trustee, or key employee have a family relationship or a business re		hin with	ď	1	
-	and other officer desertes to the control of the co		•	2	-	Х
3	Did the organization delegate control over management duties customarily performed by or u			_ 	1	 ^
•	supervision of officers, directors or trustees, or key employees to a management company or			3		x
4	Did the organization make any significant changes to its organizational documents since the prior Form 9		•	4		X
5	Did the organization become aware during the year of a material diversion of the organization			5		Х
6	Does the organization have members or stockholders?			6		Х
7a	Does the organization have members, stockholders, or other persons who may elect one or	more n	nembers			
	of the governing body?			7a		Х
b	Are any decisions of the governing body subject to approval by members, stockholders, or of			7b		Х
8	Did the organization contemporaneously document the meetings held or written actions under	ertaker	during			
	the year by the following:				1	*
а	The governing body?			8a	X	ļ
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot					ļ
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedul			9a		X
	tion B. Policies (This Section B requests information about policies not required by the	e Inte	rnal			
Reve	enue Code.)				1	г
100	Does the organization have local chapters, branches, or affiliates?			40-	Yes	No
b	If "Yes," does the organization have written policies and procedures governing the activities of	of accel		10a	 	X
D	affiliates, and branches to ensure their operations are consistent with those of the organization			10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body to			105		
••	form?	CIOIC	ming the	. 11	x	
11A)				
12a	Does the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>			12a	Х	<u> </u>
b	Are officers, directors or trustees, and key employees required to disclose annually interests	that co	ould give			
	rise to conflicts?			12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the po	licy? II	"Yes,"			
	describe in Schedule O how this is done			12c	X	
13	Does the organization have a written whistleblower policy?			. 13		Χ
14	Does the organization have a written document retention and destruction policy?			14	<u> </u>	Х
15	Did the process for determining compensation of the following persons include a review and				31	1/5
	independent persons, comparability data, and contemporaneous substantiation of the deliber	ration a	and decision?			
а				15a	X	
b	Other officers or key employees of the organization			15b	X	
4.0	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)				Ä	Ì
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar a		ement	40		, V
L.	with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization		-14-	16a		Х
b	its participation in joint venture arrangements under applicable federal tax law, and taken ste					6
	the organization's exempt status with respect to such arrangements?			16b		
Sect	tion C. Disclosure		-: - : 	100	1	
<u>3601</u> 17	List the states with which a copy of this Form 990 is required to be filed NY			<u>, </u>		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a	nd aar)-T (501(c)(3)	s only)		
. •	available for public inspection. Indicate how you make these available. Check all that apply			. O. II y /		
	Own website X Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents of the organization organization documents of the organization org	ments	conflict of int	erest		
	policy, and financial statements available to the public		33	 -		
20	State the name, physical address, and telephone number of the person who possesses the b	ooks	and records o	f the		
	organization: ► Right to the City Alliance, Inc					
	330 Seventh Avenue, 19th Floor, New York, NY 10001					• • • • •

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. Report compensation for the calendar year ending with or within the organization's tax year. 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. 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 the organization did not compensate any current officer, director, or trustee (A) (B) (C) (D) (E) (F) Position (check all that apply) Name and Title Average Reportable Reportable Estimated hours per week compensation compensation amount of Individual trustee Institutional employee Key employee Highest compensated director from from related other compensation organizations the organization (W-2/1099-MISC) from the (W-2/1099-MISC) organization l trustee and related organizations Alicia Garza Chair person 0 Х 0 0 0 Gıhan Perera Vice Chair 0 Х 0 0 Anita Sinha Secretary 0 Х 0 0 0 Jon Liss Treasurer Х 0. 0 0 0 Kalıla Barnett Board member Х 0 0 0 0 Eileen Ma Board member 0 Х 0 0 0 Yvette Thierry Board member 0 Х 0 0 0 Leonardo Vilchis Board member 0 Х 0

	90 (2009)	Right to the City Alliance, Inc									94-3462	
Part	VII	Section A. Officers, Directors, Tru	ustees, Key En	nploy	ees	, and	Hi _e	ghes	t Co	mpensated Em	ployees (contin	ued)
		(A)	(B)	1			C)			(D)	(E)	(F)
	•	Name and title	Average hours per week	ndividual trustee or director		(chec Officer	Key employee	Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
								<u> </u>				
							-	-				
			.,					ļ				
				-			_	ļ				
						 			_			
						<u> </u>						
				<u> </u>								
<u>1b</u>	Total_	<u> </u>		·					•	0	0	<u> </u> c
		umber of individuals (including but no ble compensation from the organizat		se list	ted a	bove 0	e) w	ho re	ceiv	ed more than \$1	100,000 in	
3	Did the employ	organization list any former officer, ee on line 1a? If "Yes," complete Sci individual listed on line 1a, is the su	director or trust hedule J for suc	ch ına	lıvidı	mplo ual	•					Yes No
1		anization and related organizations o	greater than \$15								uch	4 X
		y person listed on line 1a receive or a s rendered to the organization? If "Y										5 X
		ndependent Contractors										
		ete this table for your five highest cornsation from the organization	npensated inde	pend	ent o	contr	acto	ors th	at re	ceived more tha	n \$100,000 of	
		(A) Name and business a	address				_		L.	(B) Description of ser	vices Co	(C) empensation
	<u>N</u>	one							-			
									1			(
									Ļ			
		umber of independent contractors (in nan \$100,000 in compensation from t			ed to	thos	se li:	sted a 0		e) who received		

d

All other revenue . . .

Total. Add lines 11a-11d

Total revenue. See instructions .

0

0 100

100

690,031

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).

	All other organizations must complete column	(A) but are not req	uired to complete	columns (B), (C), and	d (D).
	not include amounts reported on lines 6b, 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			30.00.00.00	
	organizations in the U.S. See Part IV, line 21	0			
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	0			_
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S 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	48,879	43,991		4,888
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	o			
7	Other salaries and wages	62,643	47,126	11,084	4,433
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	o			
9	Other employee benefits	17,983	14,693	1,787	1,503
10	Payroll taxes	11,139	9,101	1,107	931
11	Fees for services (non-employees):	,	, - 1		
а	Management	o			
b	Legal	0			
С	Accounting	14,000		14,000	
d	Lobbying	0			
е	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			·
g	Other	82,344	38,614	12,119	31,611
12	Advertising and promotion	0		,	
13	Office expenses	4,947	4,452	495	
14	Information technology	5,160	4,644	516	
15	Royalties	0			
16	Occupancy	23,400	21,060	2,340	
17	Travel	6,794	6,794		· · · · · · · · · · · · · · · · · · ·
18	Payments of travel or entertainment expenses				_
	for any federal, state, or local public officials	o	1		
19	Conferences, conventions, and meetings	0			· · · · · · · · · · · · · · · · · · ·
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	264	132	132	0
23	Insurance	0			
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)			j	
а	National Convening	85,821	85,821		
b	Working Groups	64,184	64,184		
c	Civio Engagoment	75,713	75,713		
d	Special project and steering committee	4,489	4,489		
e	Incurance	2,385	7,700	2,385	
	All other expenses Others	3,368	2,171	1,197	
25	Total functional expenses. Add lines 1 through 24f	513,513	422,985	47,162	43,366
26	Joint costs. Check here ▶ If following	313,313	722,000	77,102	45,500
20	SOP 98-2 Complete this line only if the organization				
	•				
	reported in column (B) joint costs from a combined		ļ		
	educational campaign and fundraising				
	solicitation				F 000
					Form 990 (2009)

Part X **Balance Sheet** (A) (B) Beginning of year End of year Cash—non-interest-bearing 1 1 First year of operation 182,964 2 2 Savings and temporary cash investments . . 3 Pledges and grants receivable, net 0 3 15,000 4 Accounts receivable, net . . . 0 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of • 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 0 Inventories for sale or use 8 9 Prepaid expenses and deferred charges . . . 9 1.440 10a 10a Land, buildings, and equipment: cost or 2,632 other basis Complete Part VI of Schedule D **b** Less accumulated depreciation. 10b 0 10c 2,369 11 Investments—publicly traded securities 0 11 0 12 Investments—other securities. See Part IV, line 11 12 0 Investments—program-related. See Part IV, line 11 13 ol 13 0 14 Intangible assets Ol 14 0 15 Other assets. See Part IV, line 11 ol 15 1,500 16 ol Total assets. Add lines 1 through 15 (must equal line 34) 16 203,273 Accounts payable and accrued expenses 17 17 26,755 18 18 19 Deferred revenue . . . 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial 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 22 23 Secured mortgages and notes payable to unrelated third parties 0 23 0 24 Unsecured notes and loans payable to unrelated third parties ol 24 0 Other liabilities Complete Part X of Schedule D 0 25 25 0 26 **Total liabilities.** Add lines 17 through 25 Ol 26 26,755 Organizations that follow SFAS 117, check here ► X and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets. 27 14,750 28 Temporarily restricted net assets. 28 161,768 29 29 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 Total net assets or fund balances . . . 33 33 176.518 Total liabilities and net assets/fund balances ol 34 203.273

Form 990 (2009)

Financial Statements and Reporting Yes No X Accrual Accounting method used to prepare the Form 990: Cash 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? 2a Х Were the organization's financial statements audited by an independent accountant? 2b 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? 2¢ If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both X | Separate basis Consolidated basis Both consolidated and separate basis 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? 3a 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 3b

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990 or Form 990-EZ.

► See separate instructions.

Open to Public Inspection

Name	of the	organization							Employe	r ıdentificat	ion numb	er	
		ne City Alliand							<u> </u>		462187		
Par				narity Status (All org						<u>nstructio</u>	ns		
1 ne d	orgar		•	ation because it is (Force) from the control of th		•		•	•	; \			
2	H			on 170(b)(1)(A)(ii). (At			eu III sec	tion 170(י), י),רא),וי	·) ·			
3	Ħ			nospital service organi		-	section	170/b\/1\	(A)(iii)				
4	Ħ	•	•	ition operated in conju						/h\/1\/Δ\	(iii) Ent	or the	
•	_	hospital's na	me, city, and sta	ate.									
5	\Box			the benefit of a colleg (Complete Part II)	ge or univ	ersity owi	ned or op	erated by	a govern	mental ur	nit descr	ıbed	
6		A federal, sta	ate, or local gov	ernment or governme	ntal unit d	escribed	ın sectio ı	n 170(b)(ʻ	1)(A)(v).				
7	X			y receives a substanti (1)(A)(vi). (Complete I		its suppo	rt from a ç	governme	ntal unit o	or from th	e genera	al publi	ic
8		A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)											
9				y receives. (1) more th				om contri	butions, r	members	hip fees,	and g	ross
		•		ed to its exempt function									s
				ent income and unrelate after June 30, 1975						tax) from	busines	ses	
10		An organizat	tion organized a	nd operated exclusive	ly to test	for public	safety. S	ee sectio	n 509(a)(4).			
11		_	•	nd operated exclusive	•		•				-		
			·	olicly supported organ at describes the type o					-			section	on
		a Type	_	Type II c		ing organ e III–Fund		-	te iiies i	`	ype III-	Other	
е				y that the organization			•	-	hy one or		• •		
•	LI			on managers and othe			-		-		-		on
		•	section 509(a)(2	_			,		-				
f				a written determinatıor	n from the	IRS that	it is a Typ	oe I, Type	II, or Typ	e III supp	orting		
~		-	, check this box	the organization acce	 ntod anv	auff or con	stribution :	from any	of the				
g		following per		the organization acce	pieu any i	giit or cor	ILIIDULIOII	noni any	oi tile				
				or indirectly controls,	either aloi	ne or toge	ether with	persons (described	l ın (ıı)		Yes	No
		-		erning body of the su		•					11g(i)		
			•	person described in (i)							11g(ii)		
h				y of a person describe ation about the suppor							11g(iii)		
	Name	of supported	(II) EIN	(iii) Type of organization	(IV) Is the c	organization	(v) Did y	ou notify	•	Is the		Amount	of
(7		anization	(.,,	(described on lines 1–9 above or IRC section		sted in your document?		nization in of your		tion in col zed in the		support	
				(see instructions))				port?	U	S ?	-		
					Yes	No	Yes	No	Yes	No	-		
													0
													0
													0
		- <u></u>											0
													0
T-4-			!							1	į		^

	ule A (Form 990 or 990-EZ) 2009 Right to the Cit	y Alliance, Inc				94-346218	7Page 2
Par		zations Desc	ribed in Sec	tions 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)			
	ion A. Public Support	Y					
Cale	ndar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual grants ")				First year	689,931	689,931
2	Tax revenues levied for the organization's						
	benefit and either paid to or expended on its behalf						0
3	The value of services or facilities						
	furnished by a governmental unit to the					i	
	organization without charge						0
4	Total. Add lines 1 through 3	0	o	0	O	689,931	689,931
5	The portion of total contributions by each						<u>, </u>
	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)					ļ	
6	Public support. Subtract line 5 from line 4.						209,900
	ion B. Total Support	<u> </u>					480,031
	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	0	0	0			689,931
8	Gross income from interest, dividends,	 				009,931	009,931
•	payments received on securities loans,						
	rents, royalties and income from similar						
	sources					1	0
9	Net income from unrelated business						
	activities, whether or not the business is						
40	regularly carried on						0
10	Other income. Do not include gain or loss from the sale of capital assets						
	(Explain in Part IV)					100	100
11	Total support. Add lines 7 through 10.				-	100	<u>100</u> 690,031
12	Gross receipts from related activities, etc. (s	see instructions			L	12	100
13	First five years. If the Form 990 is for the or			d fourth or fif	th tay vear as :		
	organization, check this box and stop here				· · · ·	3 3000011 301(0)	▶ 🗓
Sect	ion C. Computation of Public Support						
14	Public support percentage for 2009 (line 6, o		ed by line 11	column (fl)		14	0 00%
15	Public support percentage from 2008 Sched			```		15	0 00%
16a	33 1/3% support test-2009. If the organiza			line 13, and fir	ne 14 is 33 1/39		-
	and stop here. The organization qualifies as						
b	33 1/3% support test-2008. If the organiza						
	box and stop here. The organization qualified						
17a	10%-facts-and-circumstances test-2009.						
	or more, and if the organization meets the "f	•				•	
	the organization meets the "facts-and-circum						
b	10%-facts-and-circumstances test-2008.						
	or more, and if the organization meets the "f	facts-and-circur	nstances" test	, check this bo	x and <mark>stop he</mark> i	e. Explain in P	art IV how
	the organization meets the "facts-and-circum	nstances" test.	The organizati	on qualifies as	a publicly sup	ported organiza	ition 🕨 🔲
18	Private foundation. If the organization did not ch	eck a box on line	13, 16a, 16b, 1	7a ,or 17b, chec	k this box and se	e instructions	▶ □

Page 3 Support Schedule for Organizations Described in Section 509(a)(2) Part III (Complete only if you checked the box on line 9 of Part I) **Public Support** Section A. Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . 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 0 Gross receipts from activities that are not an unrelated trade or business under section 513 0 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. 0 The value of services or facilities furnished by a governmental unit to the organization without charge . . . Total. Add lines 1 through 5. . . 0 0 0 0 ٥ 0 7a Amounts included on lines 1, 2, and 3 received from disqualified persons . . . 0 **b** Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year. 0 0 ol Add lines 7a and 7b ol 0 0 Public support (Subtract line 7c from 0 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (f) Total (c) 2007 (d) 2008 (e) 2009 0 0 Amounts from line 6 0 0 0 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 0 **b** Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . 0 c Add lines 10a and 10b 0 0 0 0 0 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on . 0 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, 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 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 0 00% 16 Public support percentage from 2008 Schedule A, Part III, line 15. 16 0.00% Section D. Computation of Investment Income Percentage Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 17 0.00% Investment income percentage from 2008 Schedule A, Part III, line 17 0.00% 19a 33 1/3% support tests-2009. 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-2008. 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

Schedule A (Form 9	990 or 990-EZ) 2009	Right to the City A	Iliance, Inc				94-3462187	Page 4
Part IV	Supplemental	Information. Com	nplete this	part to provid	de the explana	ations required	by Part II, line 10);
•	Part II, line 17a	or 17b, and Part I	II, line 12	Provide any	other addition	al information	See instructions	
		<u> </u>						
								
								
			• • • • • • • • • • • • • • • • • • • •					

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions. OMB No. 1545-0047 Open to Public

Inspection

Name of the organization Employer identification number Right to the City Alliance, Inc. 94-3462187 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 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? No Yes 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? Yes No Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 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 a certified historic structure Preservation of open space 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 Held at the End of the Tax Year а 2a 2b b Number of conservation easements on a certified historic structure included in (a) . . . 2c C Number of conservation easements included in (c) acquired after 8/17/06 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 7 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)? 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 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: 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

Part	Organizations Maintaining C	Collections of	Art, His	torical	<u>Freasures, c</u>	or Oth	er Similar A	ssets (c	ontinu	ıed)
3 .	Using the organization's acquisition, a		ther reco	rds, ched	ck any of the	followi	ng that are a	significan	t	
	use of its collection items (check all the	at apply):		1						
а	Public exhibition		d	Loan	or exchange	progra	ms			
b	Scholarly research		е	Other						
С	Preservation for future generation	ons								
4	Provide a description of the organization Part XIV.	on's collections	and expl	ain how t	hey further th	ne orga	inization's exe	empt purp	ose in	1
5	During the year, did the organization s							ar	_	
	assets to be sold to raise funds rather	than to be mair	ntained a	s part of t	he organizat	ion's c	ollection?.	Y	es 🔃	No
Part	IV Escrow and Custodial Arra IV, line 9, or reported an amo					nswer	ed "Yes" to I	Form 99	0, Par	t
1a	Is the organization an agent, trustee, of	custodian or oth	er interm	ediary for	r contribution	s or ot	her assets no	t		
	included on Form 990, Part X? .			·					es 🗌	No
b	If "Yes," explain the arrangement in Pa	art XIV and com	plete the	following	table					
			•	•	•			Amount		•
С	Beginning balance					1c				
d	Additions during the year					1d		•		
е						. 1e				
f	Ending balance					1f	†			0
20	•					L	J			
2a	Did the organization include an amoun		Paπ X, II	ne Z17		•	•	Y	es 🛚 X	No
b Dozt	If "Yes," explain the arrangement in Pa		.i		- UVU 4- F	0	20 Dart N. I	40		
Part										
		(a) Current year	(b) Pri	or year	(c) Two years	back	(d) Three years ba	ick (e) Fo	ur years	back
1a	Beginning of year balance	<u> </u>					 			
b	Contributions									
С	Net investment earnings, gains,					- 1				
	and losses	· · · · · · · · · · · · · · · · · · ·								
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs					1				
f	Administrative expenses			-						
g	End of year balance .	0		0						
2	Provide the estimated percentage of the	ne vear end bal	ance held	l as.					•	
а	Board designated or quasi-endowmen	•	%							
b	Permanent endowment	%								
C	Term endowment ▶ %									
3a	Are there endowment funds not in the	_	he organ	zation th	at are held a	nd adn	ninistered for t	he		
	organization by:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0.90		a. a. oo.o a			.	Yes	No
	(i) unrelated organizations							3a(i)		-110
	111							3a(ii)		
b	If "Yes" to 3a(ii), are the related organi			 don Sobe	odulo P2			3b		
4	Describe in Part XIV the intended uses					•		30		
Part		nge and Equ	inmont	Soc For	m 000 Bod	V lin	- 10	 -		
rait		1					I			
	Description of investment	(a) Cost or ot (investm		, ,	st or other (other)		ccumulated preciation	(d) Bo	ok value	e
1a	Land		0		0					0
b	Buildings		0		0		0			0
С	Leasehold improvements		0		0		0			0
d	Equipment		0		2,632		263			2,369
е	Other		0		0		0			0
Total	. Add lines 1a through 1e (Column (d)	must equal For	m 990, P	art X, col	umn (B), line	10(c).)▶			2,369

organization's liability for uncertain tax positions under FIN 48.

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0	_	^	^	

Part VII Investments—Other Securities	s. See Form 990, Part X,	line 12.	rage U
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valu Cost or end-of-year ma	
Financial derivatives	0		
Closely-held equity interests	0		•
Other	0	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
	0		
	0		
	0	· · · · · · · · · · · · · · · · · · ·	
	0		
	0		
	0		*
	0		
	0		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	0		
Part VIII Investments—Program Relate	d. See Form 990, Part X,	line 13	·
(a) Description of investment type	(b) Book value	(c) Method of valu	
		Cost or end-of-year ma	arket value
	0	*···	
	0		
<u> </u>	0		• • •
	0		· · · · · · · · · · · · · · · · · · ·
	0		
	0		
	0		
	0		
	0		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13)	0 d V line 45	<u> </u>	
Part IX Other Assets. See Form 990, P	an A, line 15 a) Description		(b) Book value
	a) Description		(b) Book value
			0
			0
			0
			0
			0
			0
			0
			0
Total. (Column (b) must equal Form 990, Part X,	col (R) line 15.)	•	0
Part X Other Liabilities. See Form 990		<u> </u>	<u> </u>
1. (a) Description of liability	(b) Amount		
Federal income taxes		0	
		0	
		0	
		0	
		0.	
		0	
		0	
		0	
		0	
		0	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)		0	
2. FIN 48 Footnote. In Part XIV, provide the text of	the footnote to the organiz		reports the

	lule D (Form 990) 2009		Page 4
Par	t XI' Reconciliation of Change in Net Assets from Form 990 to Audited Financia	I Sta	tements
1,	Total revenue (Form 990, Part VIII, column (A), line 12)	1	690,031
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	513,513
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3_	176,518
4	Net unrealized gains (losses) on investments	4	
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 through 8	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	176,518
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue	per	
1	Total revenue, gains, and other support per audited financial statements		1 690,031
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV.)		
е	Add lines 2a through 2d	12	2e 0
3	Subtract line 2e from line 1		3 690,031
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV.)		
С	Add lines 4a and 4b	_	4c 0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5 690,031
Par	t XIII Reconciliation of Expenses per Audited Financial Statements With Expens	es pe	
1	Total expenses and losses per audited financial statements	_	<u>1</u> 513,513
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	_	
b	Prior year adjustments	_	
С	Other losses		
d	Other (Describe in Part XIV.)		
е	Add lines 2a through 2d		2e 0
3	Subtract line 2e from line 1		3 513,513
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV.)		
С	Add lines 4a and 4b		4c0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5 513,513
Par	t XIV Supplemental Information		
and	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 2b, Part V, line 4, Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and part to provide any additional information	14b /	
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	Right to the City Alliance, Inc		94-3462187	
Schedule D (Form 9				Page 5
Part XIV	Supplemental Information (contil	nuea)		
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SCHEDULE O (Form 990)

Supplemental Information to Form 990

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

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990.

Inspection Employer identification number

Right to the City Alliance, Inc	94-3462187
Form 990 Part VI Section B Line 11a The governing board reviews and approves the Form 9	990 before it
is filed with the Internal Revenue Service	
Form 990 Part VI Section B Line 12c The policy is reviewed frequently by all board members	s during
board meetings	
Form 990 Part VI Section B Line 15b The governing board reviews and approves the compe	nsation of key
employees using current salary guidelines and other relevant information	
Form 990 Part VI Section C Line 19 All governing documents are available upon request	
•••••••••••••••••••••••••••••••••••••••	

Form	8868 (Rev	4-2009)							Pag	ge 2
Note	Only c	iling for an Additional (No implete Part II if you have a iling for an Automatic 3-N	ready been granted an	automatic 3-mor	nth exten	ision on a pre			► 88	Z
Par		Additional (Not Automa					(no copies	neede	d)	
Type	or	Name of Exempt Organization Right to the City					Employer is 94	dentificati 3462	on num	nec
	deo ate for	Number, street, and room o 81 Willoughby Street, S	uite 701				For IRS use	only		TATE
filing t return instruc	See ctions	City town or post office, state, Brooklyn, NY 11201								6 . c
□ F	ck type form 990 form 990 form 990	-BL Form 9		08(a) trust)	☐ Fo	orm 1041-A orm 4720 orm 5227		Form 60 Form 88		
		t complete Part II if you w	<u>·</u>			····	n a previou	sly filed l	Form 88	668
Tel If the lifth the lift	ephone he orgai his is foi ne whole	are in the care of ► Righ No ► (718)	office or place of busi corganization's four d □ If it is fi	ligit Group Exempler or part of the gro	ption Nu	umber (GEN) eck this box	> [If t	this is ach a	<u></u>
4 5 6 7	For cale If this to	t an additional 3-month ex ndar year 2009, or other x year is for less than 12 detail why you need the cal al statements and the reti	tax year beginning months, check reasor extension Need extra		mber 15 , 20 rn	, and ending Final return [•	n accour	, 20 nting pe	:10C
8a		pplication is for Form 990 nonrefundable credits. Se		4720, or 6069, e	nter the	tentative tax	8a	\$		
b	estimat	oplication is for Form 990- ed tax payments made Inc paid previously with Form	lude any prior year ov					\$		
С		Due. Subtract line 8b from li coupon or, if required, by usin						\$		
			Signature	and Verification	on					

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 belied is true, correct, and complete, and that I am authorized to prepare this form.

Signature >

} (M) (Ulm Title ► Accountant

Form 8868 (Rev. 4 2009)