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Form 990

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)

OMB No 1545 0047 2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

	For the 20	010 calend	ar year, or tax year beginning , 2010, and ending			<u> </u>
3 (Check if app	licable		D Employ	er Identii	lication Number
	Address	change	COMMUNITY ALLIANCE OF TENANTS	31-1	1571	929
	Name o	-	2710 NE 14TH AVENUE	E Telepho		
	Initial re	_	PORTLAND, OR 97212	503-	-460-	-9702
	Termina					<u> </u>
	H	ed return		G Gross re	scointe \$	339,819
	\vdash		F Name and address of principal officer	I(a) Is this a group return		
	Applica	tion pending	The state of the s	I(b) Are all affiliates incli		Yes A
_	T	-1 -1-1		If 'No,' attach a list	(see ins	
	Tax-exem	<u>:</u>	X 501(c)(3)			
	Website			(c) Group exemption nu		
22		rganization Summai	X Corporation Trust Association Other ► L Year of Formation	n 1996 Ms	tate of le	egal domicile OR
			be the organization's mission or most significant activities. TO EDUCAT	E TENANTS O	N TH	EIR RIGHTS
		,				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Activities & Governance						
Ę						
	2 Che	ck this bo	x If the organization discontinued its operations or disposed of more	than 25% of its ne	et asse	ets.
2	3 Nur	nber of vo	ting members of the governing body (Part VI, line 1a)		3	
	4 Nur	nber of in	dependent voting members of the governing body (Part VI, line 1b)		4	
			of individuals employed in calendar year 2010 (Part V, line 2a)		5	
5			of volunteers (estimate if necessary)		6	· · · · · · · · · · · · · · · · · · ·
י ו			d business revenue from Part VIII, column (C), line 12 .	•	7a	0
4	b Net	unrelated	business taxable income from Form 990-T, line 34	T	7 b	0
				Prior Year	1 -	Current Year
			and grants (Part VIII, line 1h)	155,5	15.	339,819
			ice revenue (Part VIII, line 2g)			
l			come (Part VIII, column (A), lines 3, 4, and 7d)		1.	
			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,2		220 010
4			- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	157,7	41.	339,819
١			mital amounts baid (Part 1) column (A), lines 1-3)			
			to or for-members (Part Xnoblumn (A), line 4)			
	15 Sal	arıes,∛o tb i	er compensation, employee-penefits (Part IX, column (A), lines 5-10)	218,7	71.	213,683
	16a Pro	fessional)	undraising fees (Part IX, column (A), line 11e)			<u></u>
e per loca		11 050	ng expenses (Part tX, Epium) (D), line 25) ► 17,045.		7- 745	,其心是即於
ÍΙ			es (Mart IX) column (A) Innes 11a-11d, 11f-24f)	75,9		64,046
				294,7		277,729
-			Add Tines 13-17 (must equal Part IX, column (A), line 25)	-137,0		62,090
↲	19 Rev	enue less	expenses. Subtract line 18 from line 12			
Dellances	00 -	_1	David V. June 16	Beginning of Curren		End of Year
			Part X, line 16)	217, 2		277,989
ا <u>چ</u>			s (Part X, line 26)	26,7		25,454
<u>1</u>		_	fund balances. Subtract line 21 from line 20	190,4	45.	252,535
			re Block			
nde	er penalties plete Declai	of perjury, I or ration of prep	eclare that I have examined this return, including accompanying schedules and statements, and to arer (other than officer) is based on all information of which preparer has any knowledge	the best of my knowled	ge and b	eliet, it is true, correct, and
			6 Hame			
		ľ	e of officer	Date		
	ın	Signati	le of officer		1	9-12
Sig	jn re	Signati		?	ール	1 1 /
ig	in re	· E1	is a Husrigan Executive Director	3	-7	116
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Form	990 (2010) COMMUNITY ALLIANCE OF TENANTS	31-157192	9 Page 2
Par	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		
1	y		
	TO EDUCATE TENANTS ON THEIR RIGHTS		
			
			
_			
2	Did the organization undertake any significant program services during the year which were not listed on	the prior	v 🔽 u.
	Form 990 or 990-EZ?		Yes X No
3	If 'Yes,' describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services.	uoos2	Yes X No
3	If 'Yes,' describe these changes on Schedule O	ices:	res 🔼 No
4	Describe the exempt purpose achievements for each of the organization's three largest program services	by expenses. Se	ection 501(c)(3)
	and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and expenses, and revenue, if any, for each program service reported.	allocations to oth	ners, the total
4a	(Code. (Expenses \$ 114,433. including grants of \$) (F	Revenue \$	· · · · · · · · · · · · · · · · · · ·
70	Housing Justice Program: Successfully advocated for additional fr	· <u> </u>	the City
	of Portland Neighborhood Inspections Program. Over 400 tenant he		circ of the
	participated in advocacy activities to support the inspections p	<i></i> _	rticipated
	in the Analysis of Impediments to Fair Housing for Multnomah and		
	Advocated for the successful passing of the City of Portland's		
	Plan.		
			
		. 	
		. 	
	(Code. (C	of Beaverto	
		. .	
40	(Code: 9,667. including grants of \$)(F Preservation: Provided outreach and education to over 200 very 1 throughout the state of Oregon at risk of losing their housing s		ouseholds
			-
		_	
			
			
	Other program converse (Decombs in Sahadida O.)		
40	Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$		`
	(Expenses \$ including grants of \$) (Revenue \$ 10 Total program service expenses ► 220,318.		
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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)? If 'Yes,' complete Schedule A.	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	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, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II.	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, 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? If 'Yes,' 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 X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10	1244.9	X
11	If the organization's answer to any of the following questions is 'Yes',-then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a		х
b	Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11b		х
C	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	11 c		х
c	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	11 d		х
e	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
f	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 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		Х
12a	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a	_	Х
t	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a	L	X
ŧ	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, Parts I and IV	14Ь		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15_		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV.	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18_		х
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		Х
20 :	a Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H.	20		Х
t	of 'Yes' to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20 b		

Form 990 (2010) COMMUNITY ALLIANCE OF TENANTS

Part IV Checklist of Required Schedules (continued)

			Yes	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		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		<u>X</u>
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		Х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and 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		х
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 to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	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? If 'Yes,' complete Schedule L, Part I	25a		X
t	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	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):			
а	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV.	28c		Х
	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		X
	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		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? If 'Yes,' complete Schedule R, Part I	33		<u>x</u>
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		_x_
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 X No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	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 VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38		Х
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Form 990 (2010) COMMUNITY ALLIANCE OF TENANTS

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V							
		Yes	No				
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	1					
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .	1b	0					
c Did the organization comply with backup withholding rules for reportable payments to vendo (gambling) winnings to prize winners?	ors and reportable gaming	1c	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	2a	5					
b If at least one is reported on line 2a, did the organization file all required federal employme	nt tax returns?	2b X					
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see	nstructions)	<u> </u>					
3a Did the organization have unrelated business gross income of \$1,000 or more during the year	ear?	3a	X				
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule C), ,	3b					
4a At any time during the calendar year, did the organization have an interest in, or a signatur financial account in a foreign country (such as a bank account, securities account, or other	e or other authority over, a financial account)?	4a	Х				
b If 'Yes,' enter the name of the foreign country. ▶							
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and							
5a Was the organization a party to a prohibited tax shelter transaction at any time during the to	ax year?	5a	<u> </u>				
b Did any taxable party notify the organization that it was or is a party to a prohibited tax she	Iter transaction?	5b	X				
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5c					
6a Does the organization have annual gross receipts that are normally greater than \$100,000, solicit any contributions that were not tax deductible?	and did the organization	6a	х				
b If 'Yes,' did the organization include with every solicitation an express statement that such not tax deductible?	contributions or gifts were	6Ь					
7 Organizations that may receive deductible contributions under section 170(c).							
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?							
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided	? .	7Ь					
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for Form 8282?	which it was required to file	7c	Х				
d If 'Yes,' indicate the number of Forms 8282 filed during the year			-				
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal		7e	X				
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal be	enefit contract? .	. 7f	X				
g If the organization received a contribution of qualified intellectual property, did the organiza as required?	tion file Form 8899	7g					
h if the organization received a contribution of cars, boats, airplanes, or other vehicles, did to Form 1098-C?	ne organization file a ·	7h					
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization, or a donor advised fund maintained by a sponsoring organization, holdings at any time during the year?	ng organizations. Did the have excess business	8					
9 Sponsoring organizations maintaining donor advised funds.			4.				
a Did the organization make any taxable distributions under section 4966?		9a					
b Did the organization make a distribution to a donor, donor advisor, or related person?		9 b					
10 Section 501(c)(7) organizations. Enter.							
a Initiation fees and capital contributions included on Part VIII, line 12	10a						
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b						
11 Section 501(c)(12) organizations. Enter.							
a Gross income from members or shareholders	11a						
b Gross income from other sources (Do not net amounts due or paid to other sources							
against amounts due or received from them.)	11 b		4				
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu		12a					
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12Ь						
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			4				
a is the organization licensed to issue qualified health plans in more than one state?	• • •	13a					
Note. See the instructions for additional information the organization must report on Sched	ule O.						
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	. 13ь						
c Enter the amount of reserves on hand	13c						
14a Did the organization receive any payments for indoor tanning services during the tax year?	• • •	14a	<u> </u>				
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in	Schedule Q	14b					

Form 990 (2010) COMMUNITY ALLIANCE OF TENANTS 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. X Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 1 b **b** Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 4 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 X Does the organization have members or stockholders? 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the 7a Х governing body? 7b X b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following. 8a a The governing body? Х 8Ь **b** Each committee with authority to act on behalf of the governing body? Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the X q organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code., Yes No 10a Х 10a Does the organization have local chapters, branches, or affiliates? b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with those of the organization? X 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. X 12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise 12b to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in 12c Schedule O how this is done X 13 13 Does the organization have a written whistleblower policy? Х 14 14 Does the organization have a written document retention and destruction policy? 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 15a X 15b X b Other officers of key employees of the organization If 'Yes' to line 15a or 15b, 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 16a X taxable entity during the year? 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 16b organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ OR 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 |X| Upon request

	_		_			
19	Describe in Schedule (O whether (and if so	, how) the organization makes	its governing documents,	conflict of interest poli	icy, and financial

statements available to the public. See Schedule O

20	State th	ne nam	ie, phy:	sical ad	dress,	and telephone	number	of the p	person who	possesses	the book	s and i	records	of the	organia	zation
•	2710	NE	14TH	AVEN	UE :	PORTLAND	OR			_						

Form 990 (2010)

Form 990 (2010)

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (C) (F) (A) (B) (D) (E) Position (check all that apply) Reportable compensation from Reportable compensation from Estimated amount of other Name and title Average hours per week (describe Individual Institutional Key employee employee elated organizations (W 2/1099-MISC) Highest compensated the organization (W-2/1099 MISC) compensation director from the organization hours for related and related organiza-tions in Schedule O) organizations trustee (1) KIMBERLY AULT 0. 0 0 0. Director (2) MICHELLE LASLEY 0 0 0. 0. Secretary (3) STEPHEN MORAN 0 0. 0 0. Director (4) TED DORONILA 0 0 0 0. Director (5) STEVE WEISS 0. 0 0. 0. President & CEO (6) CARMEN GUTIERREZ 0 0. 0 Director 0. (7) APRIL KUSTERS 0. 0 0. 0. Director (8) JOSUE LOZANO 0 0. 0. 0. Director (9) LISA GRAHAM Director 0 0. 0. 0. (10) ARI RAPKIN CO EXECUTIVE DIRECTOR 0. 36 X 31,339. 5,413. (11) ELISA AGUILERA CO EXECUTIVE DIRECTOR 40 X 37,156. 0. 5,413. (12)(13) (14) (15) (16) (17)

BAA

(A)	(B) (c) Average Position (check all that apply)							(D)	(E)	(F)
Name and title		Individual trustee or director		Officer		Highest compensated employee	Former	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
(18)										
(19)					-	- · -				
(20)										
(21)										
(22)									-	
(23)						-				
[24]										-
(25)							_			
(26)			Ì							
27)										
(28)								-		
(29)										
1 b Sub-total				٠		<u> </u>	>	68,495.		10,826
c Total from continuation sheets to Part VII, Section							•	0.	0.	10.936
d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited from the organization → 0			ted	abo	ve)	who	rec	68,495. eived more than S		10,826 ble compensation
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in 4 For any individual listed on line 1a, is the sum of rethe organization and related organizations greater the such individual. 5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,' or services.	oortable nan \$15 ompens	/ con 0,00 atioi	nper 0?	nsati f 'Ye	on es' d	and comp	othe	er compensation for Schedule J for	rom	3 X 4 X 5 X
Section B. Independent Contractors									an \$100 000 of	
Complete this table for your five highest compensate compensation from the organization	eu muel	Jenic		COIT	uac	1012	uial	T		
(A) Name and business addres	ss							Description	of services	(C) Compensation
·						-				
							-			
2 Total number of independent contractors (including \$100,000 in compensation from the organization ▶	_	lımıt	ed t	o th	ose	liste	ed al	bove) who receive	ed more than	

ran	VI	II) Statement of Revenue		(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
					revenue		512, 513, or 514
7 S		Federated campaigns 1a					
Z S	b	Membership dues 1b		1			
S S	С	Fundraising events . 1c		i			
١	d	Related organizations . 1d					
S,G	е	Government grants (contributions) 1e 111, 8	00.				
<u>8</u> 0							_
뛆	1	All other contributions, gifts, grants, and similar amounts not included above 1 f 228, 0	19.				
₽ 0	~	Noncash contributions included in lns 1a-1f: \$					
Š Š	_	Total. Add lines 1a-1f		339,819.			
_		Business Co	<u> </u>	337,017.			
N.	2.			-	·		
2	2a			-			
ű,	b						
≨	С						
S	d						
₹ I	e						
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	f	All other program service revenue .					
- 2	g	Total. Add lines 2a-2f	. ▶	_			
	3	Investment income (including dividends, interest and					
		other similar amounts)					
	4	Income from investment of tax-exempt bond proceed	is 🏲				
	5	Royalties			<u> </u>		
		(i) Real (ii) Person	nal				
	6a	Gross Rents					
ļ	b	Less. rental expenses					
	С	Rental income or (loss)					
	d	Net rental income or (loss)					
ľ	7 2	Gross amount from sales of (i) Securities (ii) Other	r				
	, a	assets other than inventory					
	L	Less: cost or other basis					
	U	and sales expenses					
	С	Gain or (loss)					
		Net gain or (loss)	•				
1		Gross income from fundraising events					
필	-	(not including \$,			ŀ
OTHER REVEN		of contributions reported on line 1c).					
ž		See Part IV, line 18 a					
	ь	Less. direct expenses. b					
5		Net income or (loss) from fundraising events	▶				
							·- ·- · · · · · · · · · · · · · · · · ·
	Эα	Gross income from gaming activities. See Part IV, line 19					
		Less. direct expenses b					
		Net income or (loss) from gaming activities					
١.							
	ıva	Gross sales of inventory, less returns and allowances a					
	ь	Less. cost of goods sold b					
		Net income or (loss) from sales of inventory					
		Miscellaneous Revenue Business Co	de				
1	11 a						
]	b					=	
	_				-		
	ن	All other revenue					
	ч						
	۵	Total. Add lines 11a-11d					

Part IX | Statement of Functional Expenses

Form 990 (2010) .

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 1 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	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	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	68,495.	34,645.	22,008.	11,842.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	97,776.	97,776.		
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits.	31,506.	25,092.	4,170.	2,244.
10	Payroll taxes	15,906.	12,683.	2,092.	1,131.
11	Fees for services (non-employees):				
ě	n Management				
	Legal .	6,000.	6,000.		
	: Accounting	8,194.	1,154.	6,937.	103.
	Lobbying				
	Professional fundraising services See Part IV, line 17 .				
	Investment management fees				100
	Other	7,150.	6,637.	17.	496.
	Advertising and promotion	0.506	0.006	120	7.0
13	Office expenses	2,536.	2,336.	130.	
14	Information technology			-	
15	Royalties	F 200	4 671	344.	185.
16	Occupancy	5,200. 3,557.	4,671. 3,426.	35.	96.
17	Travel	3,337.	3,420.	33.	<u> </u>
16	Payments of travel or entertainment expenses for any federal, state, or local public officials				
	Conferences, conventions, and meetings .	510.	510.		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization			0.056	
23 24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)	2,856.		2,856.	
ä	ACADEMIC PARTNER	7,226.	7,226.		
	TELEPHONE & UTILITIES	5,560.	4,587.	734.	239.
	Printing and Publications	4,304.	4,068.	185.	51.
	COUNTY SUBCONTRACTOR	4,017.	4,017.		
•	Postage and Shipping	2,932.	2,655.	109.	168
f	All other expenses	4,004.	2,835.	749.	420
25	Total functional expenses. Add lines 1 through 24f	277,729.	220,318.	40,366.	17,045
26	Joint costs. Check here ☐ If following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	5,352.	1	580.
	2	Savings and temporary cash investments .	310.	2	
	3	Pledges and grants receivable, net	22,416.	3	29,920.
	4	Accounts receivable, net	185,162.	4	243,713.
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
S	7	Notes and loans receivable, net		7	
ASSETS	8	Inventories for sale or use		8	
T S	9	Prepaid expenses and deferred charges	3,934.	9	3,776.
	10a	Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D 10,163.			
	1	Less. accumulated depreciation 10b 10,163.	69.	10 c	
	11	Investments – publicly traded securities		11	
	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		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	217,243.	16	277,989.
	17	Accounts payable and accrued expenses	20,798.	17	19,454.
	18	Grants payable .	•	18	
	19	Deferred revenue .	•	19	
Ļ	20	Tax-exempt bond liabilities		20	
À	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
L	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II			
ı		of Schedule L	6,000.	22	6,000.
E S	23	Secured mortgages and notes payable to unrelated third parties		23	
	24			24	
	25	Other liabilities. Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	26,798.	26	25,454.
NE.		Organizations that follow SFAS 117, check here ► X and complete lines	1 1		
_		27 through 29 and lines 33 and 34.			
ASSETS	27	Unrestricted net assets	-9,938.	27	-5,182.
Ĕ	28	Temporarily restricted net assets	200,383.	28	257,717.
	29	Permanently restricted net assets		29	
R		Organizations that do not follow SFAS 117, check here ▶ and complete			
FUZD		lines 30 through 34.		, i,	
	30	Capital stock or trust principal, or current funds		30	
B	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ā	32	Retained earnings, endowment, accumulated income, or other funds		32	_
BALAZOWS	33	Total net assets or fund balances	190,445.	33	252,535.
5	34	Total liabilities and net assets/fund balances.	217,243.	34	277,989.

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Form **990** (2010)

Form 990 (2010) COMMUNITY ALLIANCE OF TENANTS	31-1571929	Page	12
Part XI Reconciliation of Net Assets		_	
Check if Schedule O contains a response to any question in this Part XI			
1 Total revenue (must equal Part VIII, column (A), line 12)	1	339,819	<u>}.</u>
2 Total expenses (must equal Part IX, column (A), line 25)	2	277,729	<u>}.</u>
3 Revenue less expenses. Subtract line 2 from line 1	3	62,090	<u>).</u>
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	190,445	<u>5.</u>
5 Other changes in net assets or fund balances (explain in Schedule O) .	5	(<u>).</u>
6 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)).	6	252,535	<u>5.</u>
Part XII Financial Statements and Reporting		_	
Check if Schedule O contains a response to any question in this Part XII			\Box
1 Accounting method used to prepare the Form 990. X Cash Accrual Other If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.		Yes N	0
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a >	<u> </u>
b Were the organization's financial statements audited by an independent accountant?			- -
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for overs review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain	•	2c	di
ın Schedule O.			
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year w separate basis, consolidated basis, or both.	ere issued on a		
Separate basis Consolidated basis Both consolidated and separate basis			ئين
3a As a result of a federal award, was the organization required to undergo an audit or audits as set fort Audit Act and OMB Circular A-133?	th in the Single	3a 2	X_
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	the required audit	3ь	
BAA		Form 990 (20	10)

TEEA0112L 12/21/10

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

Public Charity Status and Public Support

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

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

2010

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Name of th	ne organization							Employer	ıdentıficat	ion number		
COMMU	COMMUNITY ALLIANCE OF TENANTS 31-1571929											
Paill	Reason for Publ	ic Charity Status	(All organizations	must	comple	ete thi	s part.) See	instruc	tions.	•	
The orga	anization is not a privat	e foundation because	it is. (For lines 1 through	gh 11, cl	neck onl	y one b	ox.)					
1	A church, convention of churches or association of churches described in section 170(b)(1)(A)(i).											
2	H											
3	,											
4		•	•					ьх1хАх	iii). Ente	er the hosp	ıtal's	
· L_	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state.											
5		ated for the benefit of	a college or university	owned o	r opera	led by a	govern	mental (init desc	ribed in se	ction	
6 X		normally receives a si	vernmental unit describ abstantial part of its sup II.)					or from t	he gene	ral public o	lescrib	ed
8 [A community trust de	scribed in section 170)(b)(1)(A)(vi). (Complete									
9	☐ from activities related	l to its exempt function nd unrelated business	more than 33-1/3% of and a subject to certain taxable income (less supplete Part III.)	exception	ns, and	(2) no r	nore tha	an 33-1/3	3% of its	support fr	om gro	SS
10	An organization organ	nized and operated ex	clusively to test for put	olic safet	y. See :	section !	509(a)(4).				
11	more publicly support	ted organizations desc	cclusively for the benefic cribed in section 509(a) on and complete lines	(1) or se	ction 50	19(a)(2).	tions of, See se	or carr ction 50	y out the 9(a)(3).	purposes Check the	of one box th	or at
	a ∏Type I	b Type II	<u>`</u>	l — Fund	-		ed		d \square	Type III -	- Other	•
e [By checking this box, other than foundation	I certify that the orga	inization is not controlle than one or more publi	d direct	y or ind orted or	irectly b ganizati	y one oi ons des	r more o	lisqualifi n section	ed persons 1 509(a)(1)	or	
f	section 509(a)(2).	ceived a written deteri	mination from the IRS t	hat is a	Type I.	Type II o	or Type	III supp	ortina or	ganization.		
•	check this box	•	•			-			-	,		Ш
g	Since August 17, 200	6, has the organization	on accepted any gift or	contribu	ition froi	n any o	f the foll	owing p	ersons?		<u> </u>	
	(i) A person who d	irectly or indirectly co	ntrols, either alone or t	oaether	with per	sons de	scribed	ın (ıı) aı	nd (III)		Yes	No
	below, the gove	erning body of the sup	ported organization?		• •			• • •		11 g (i)		. —.
	• •	er of a person describ	••	•					•	11 g (ii)		
	(iii) A 35% controlle	d entity of a person d	lescribed in (i) or (ii) ab	ove?						11 g (iii)		
h	Provide the following	information about the	supported organization	n(s).								
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1 9 above or IRC section (see instructions))	organiz column (your go	s the ation in	the organ	ou notify lization in n (i) of ipport?	organız colur	s the ation in in in (i) ed in the S?	(vii) Amou	nt of sup	port
				Yes	No	Yes	No	Yes	No			
(A)												
(D)												
(B)						-						
(C)												
(D)					,							
(E)												

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support								
Cale: begi:	ndar year (or fiscal year nning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total		
1	Gifts, grants, contributions, and membership fees received (Do not include 'unusual grants.')	249,352.	228,002.	454,979.	155,516.	339,819.	1,427,668.		
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.		
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.		
4	Total. Add lines 1 through 3	249,352.	228,002.	454,979.	155,516.	339,819.	1,427,668.		
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)						0.		
6	Public support. Subtract line 5 from line 4						1,427,668.		
Sec	tion B. Total Support								
Cale: begii	ndar year (or fiscal year nning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total		
7	Amounts from line 4	249,352.	228,002.	454,979.	155,516.	339,819.	<u>1,427,668.</u>		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	16.	12.	4.	1.		33.		
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.		
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						0.		
11	Total support. Add lines 7 through 10	;					1,427,701.		
12	Gross receipts from related activ	ities, etc (see inst	ructions)			12	0.		
	First five years. If the Form 990 organization, check this box and	stop here		d, third, fourth, or	fifth tax year as a	section 501(c)(3)	▶ □		
	tion C. Computation of Pu						100.0		
	Public support percentage for 20	•	•	e 11, column (f))		14	100.0%		
	15 Public support percentage from 2009 Schedule A, Part II, line 14								
16a 33-1/3% support test − 2010. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization . X									
t	b 33-1/3% support test — 2009. 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								
17 a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	meets the 'facts-a	nd-circumstances	' test, check this l	box and stop here	. Explain in Part l'	V how		
	o 10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances'	nd-circumstances test. The organiza	' test, check this lation qualifies as a	box and stop here a publicly supporte	. Explain in Part l' ed organization	V how the		
18 RAA	Private foundation. If the organiz	zation did not ched	ck a box on line 1	3, 16a, 16b, 17a,			990 or 990-FZ) 2010		

Partill Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support		•						
	dar year (or fiscal yr beginning in)►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 201	0	(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								
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. The value of services or								
J	facilities furnished by a governmental unit to the organization without charge								
	Total. Add lines 1 through 5 a Amounts included on lines 1, 2, and 3 received from disqualified persons							·	
ı	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year								
•	Add lines 7a and 7b .								
	Public support (Subtract line 7c from line 6.)								
Sec	tion B. Total Support								
	dar year (or fiscal yr beginning in)►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 201	0	(f) Total	
10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975			···					
	Add lines 10a and 10b 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 Ins 9, 10c, 11, and 12)								
14	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								
	tion C. Computation of Pu								
	Public support percentage for 20			13, column (f))			15	क्ष	
	Public support percentage from 2			<u>.</u>			16	9	
Sec	tion D. Computation of Inv	estment Inco	me Percentag	е					
17	Investment income percentage for	or 2010 (line 10c,	column (f) divided	by line 13, colur	mn (f))		17	ક	
18	Investment income percentage fr	om 2009 Schedul	e A, Part III, line	17 .			18	%	
	33-1/3% support tests — 2010. If not more than 33-1/3%, check	this box and stop	here. The organiz	zation qualifies as	s a publicly suppor	ted organiza	ation	. ▶ 📗	
	33-1/3% support tests — 2009. If line 18 is not more than 33-1/3%,	, check this box a	nd stop here. The	organization qua	alifies as a publicly	supported of	organizat	%, and lion . ►	
20	Private foundation. If the organiz	ation did not ched	k a box on line 14	l, 19a, or 19b, ch	eck this box and s	ee instruction	ons	<u>▶ </u>	

Schedule A	(Form 9	990 or 9	90-EZ)	2010	COMM	IUNTT	X ATI	LTANC	E OF	TENA	NTS_			31-1	<u> 5/192</u>	9	Pag	<u>je 4</u>
Parl IV	Suppl Part II (See i	emen , line nstruc	t al Inf o 17a ou tions)	ormat 17b;	ion. C and F	omple Part III	te thi , line	is part 12. Al	to pro	ovide t mplete	the exp e this p	olanati part fo	ons re r any a	quired iddition	by Par al info	rt II, line rmation	: 10;	
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SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below.

Complete if the organization is described below.

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

2010

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f the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then
Control FOI(a)(2) assessment and Complete Dayle I A and D. Do not complete Dayle I C

Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations. Complete Part I-A only.

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-A.

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), the
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• 9	Section 501(c)(4), (5), or (6) or	ganızatıons. Complete Part III.			
Name	of organization			Employer identifica	tion number
	MUNITY ALLIANCE OF			31-157192	
Par	Complete if the o	rganization is exempt under secti	on 501(c) or is a	section 527 organ	ization.
1	Provide a description of the o	organization's direct and indirect political ca	mpaign activities in P	art IV.	
2	Political expenditures			. ►\$	
	Volunteer hours				
Par	Complete if the o	rganization is exempt under secti	on 501(c)(3).		
1	Enter the amount of any exce	se tax incurred by the organization under s	ection 4955 .	► \$	0.
2	Enter the amount of any exce	se tax incurred by organization managers i	under section 4955	► \$	0.
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for t	hıs year?		Yes No
4 a	Was a correction made?				Yes No
	If 'Yes,' describe in Part IV.				_
		rganization is exempt under secti			
1	Enter the amount directly exp	pended by the filing organization for section	527 exempt function	activities ►\$	
2	Enter the amount of the filing function activities	organization's funds contributed to other c	organizations for secti	on 527 exempt ►\$	
3	Total exempt function expendine 17b	ditures. Add lines 1 and 2. Enter here and o	on Form 1120-POL,	. ► \$	
4	Did the filing organization file	Form 1120-POL for this year?			Yes No
5	organization made payments amount of political contribution	and employer identification number (EIN) of an each organization listed, enter the anons received that were promptly and directly action committee (PAC). If additional space	nount paid from the fil v delivered to a separ	ıng organızatıon's funds ate political organızatıor	. Also enter the
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter 0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)	•				

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

Schedule C (Form 990 or 990-EZ) 2010

BAA

Part II-A Complete if t section 501(I	he organization	is exempt under sec		filed Form 5768 (el	ection under
		igs to an affiliated group.			
H		ked box A and 'limited conti	rol' provisions apply.		
	Limits on Lobbyi			(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditur	res to influence pub	lic opinion (grass roots lobb	oying).	3,359.	
	•	gislative body (direct lobbyi	• •	5,127.	
c Total lobbying expenditur		• • • •		8,486.	0.
d Other exempt purpose ex	•	•	-	269,243.	
e Total exempt purpose ex	•	es 1c and 1d)	. Г	277,729.	0.
f Lobbying nontaxable amo	ount. Enter the amo	unt from the following table	e in	55,546.	
If the amount on line 1e, colur	mn (a) or (b) is.	he lobbying nontaxable am	ount is.		
Not over \$500,000		20% of the amount on line 1e.			
Over \$500,000 but not over \$1,0	000,000	\$100,000 plus 15% of the excess o	ver \$500,000.		
Over \$1,000,000 but not over \$1	,500,000	\$175,000 plus 10% of the excess o	ver \$1,000,000.		
Over \$1,500,000 but not over \$1	7,000,000	\$225,000 plus 5% of the excess ov	er \$1,500,000.		
Over \$17,000,000		\$1,000,000.			
g Grassroots nontaxable a	mount (enter 25% o	f line 1f).		13,887.	0.
h Subtract line 1g from line	a 1a. If zero or less,	enter -0-	. [0.	0.
i Subtract line 1f from line	1c. If zero or less,	enter -0-		0.	0.
J If there is an amount oth section 4911 tax for this		er line 1h or line 1i, did the	organization file Form 4	720 reporting	☐Yes ☐ No
	ne organizations tha	4-Year Averaging Period United the Markett Averaging Period United the Markett Average	ction do not have to con	nplete all of the five f.)	
	Lobb	ying Expenditures During	4-Year Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying non-taxable amount	45,75	52,255.	58,952.	55,546.	212,506.
b Lobbying ceiling amount (150% of line 2a, column (e))					318,759.
c Total lobbying expenditures	1,81	4,623.	3,152.	8,486.	18,075.
d Grassroots nontaxable amount	11,43	3. 13,064.	14,738.	13,887.	53,127.
e Grassroots ceiling amount (150% of line 2d, column (e))					79,691.
f Grassroots lobbying expenditures		267.	2,326.	3,359.	5,952.

3, 359. 5, 952. Schedule **C** (Form 990 or 990-EZ) 2010

and Itab Complete if the organization is exempt under section 501(c)(3) and has N (election under section 501(h)).	OT tile	d Foi	m 5/68		
Control and Control Control	(a)		(b)	
	Yes	No	Am	ount	
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of.					
a Volunteers?					
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c Media advertisements?					
d Mailings to members, legislators, or the public?					
e Publications, or published or broadcast statements?					
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			-		
i Other activities? If 'Yes,' describe in Part IV			•		
] Total. Add lines 1c through 1i			-		
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?.					
b If 'Yes,' enter the amount of any tax incurred under section 4912					
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
and IIII-A Complete if the organization is exempt under section 501(c)(4), section 5	01(c)(5), or			
section 501(c)(6).					
				Yes	N
1 Were substantially all (90% or more) dues received nondeductible by members?			. 1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		
Complete if the organization is exempt under section 501(c)(4), section 5 section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered 'No' OR if is answered 'Yes.'	01(c)(5 Part III), or -A, liı	ne 3		
1 Dues, assessments and similar amounts from members		1			
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		:			
a Current year		2a			
b Carryover from last year		2b			
c Total		2c			
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedoes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polexies expenditure next year?	is tical	4			
5 Taxable amount of lobbying and political expenditures (see instructions)		5	_		
Supplemental Information					
emplete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; and	ad Dort I	I D lun		-	
ambiete this part to brovide the descriptions required for Part I.A. line I. Part I.B. line 4. Part I.C. line 5. at	no Part i	1-B, IIII	e 11.		

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Schedule C (Form 990 or 990-EZ) 2010 COMMUNITY ALLIANCE OF TENANTS	31-15/1929	Page 4
Schedule C (Form 990 or 990-EZ) 2010 COMMUNITY ALLIANCE OF TENANTS Part IV Supplemental Information (continued)		
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545 0047 2010

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990 or 990-EZ.

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Name of the organization	Employer identification number
COMMUNITY ALLIANCE OF TENANTS	31-1571929
Form 990, Part VI, Line 11b - Form 990 Review Process	
THE EXTERNAL ACCOUNTING FIRM WILL PREPARE THE FORM 990 AND SUPP	PLEMENTAL SCHEDULES
AND FORWARD A DRAFT OF THE RETURN TO THE EXECUTIVE DIRECTOR FOR	R REVIEW. ONCE THE
EXECUTIVE DIRECTOR HAS APPROVED FORM 990 AND SUPPLEMENTAL SCHED	DULES THE RETURN WILL
BE FINALIZED AND FILED. BOARD MEMBERS MAY ALSO REVIEW THE FORM	SUCH AS THE TREASURER
OR PRESIDENT, ALL BOARD MEMBERS RECEIVE A COPY AFTER REVIEW.	
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available	
No documents available to the public.	
	