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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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

| Α                   | For the 2                     | 2010 calen                          | dar year, or tax year beginning, 2010, and endin  | 9 _   |                                      |
|---------------------|-------------------------------|-------------------------------------|---|---|--------------------------------------|
| В                   | Check if ap                   | plicable                            |   | D Employe   | r Identification Number              |
|                     | Addres                        | ss change                           | Center for Third World Organizing   | 52-1  | .211059                              |
|                     | $\vdash$                      | change                              | 1218 East 21st Street   | E Telephon  |                                      |
|                     | initial                       | -                                   | Oakland, CA 94606   | 510-  | 533-7583                             |
|                     | H '                           |                                     |   | 310   | 333 7303                             |
|                     | Termii                        |                                     |   |   | 404 005                              |
|                     | Amen                          | ded return                          | <u> </u>  | G Gross red   |                                      |
|                     | Applic                        | ation pending                       | 541120220   | H(a) Is this a group return                               | <b>= "" = ""</b>                     |
|                     |                               |                                     | Same As C Above   | H(b) Are all affiliates inclu<br>If 'No.' attach a list ( |                                      |
| 1                   | Tax-exer                      | npt status                          | X 501(c)(3) 501(c) ( ) 		 (Insert no ) 4947(a)(1) or 527  |   | •                                    |
| J                   | Websi                         | te: ► Ww                            | w.ctwo.org  | H(c) Group exemption nur                                  | nber -                               |
| K                   | Form of                       | organization                        | X Corporation Trust Association Other ► L Year of Formati   | on 1980 M st  | ate of legal domicile CA             |
| P                   | art I                         | Summa                               |   |   |                                      |
|                     |                               |                                     | be the organization's mission or most significant activities CTWO world   | ks to build a   | racial and                           |
| •                   | 1                             |                                     | ustice movement led by people of color. We pr   |   |                                      |
| ]]<br>Governance    |                               |                                     | ts organizations and community members, train   |   |                                      |
| Ĕ                   |                               |                                     | guidance and facilities to groups, and head a   |   |                                      |
| <b>8</b>            |                               | eck this bo                         |   |   |                                      |
| ΞΞ                  |                               |                                     | oting members of the governing body (Part VI, line 1a)  | L   | 3 5                                  |
| Z 2                 | ,                             |                                     | dependent voting members of the governing body (Part VI, line 1b)   | <u>_</u>  | 4 5                                  |
| 44 ∯                |                               |                                     | of individuals employed in calendar year 2010 (Part V, line 2a)   | _   | 5 12                                 |
| ? টু                | 1                             |                                     | r of volunteers (estimate if necessary)   | -   | 6 0                                  |
| ⊉ `                 |                               |                                     | ed business revenue from Part VIII, column (C), line 12   | -   | 7a 0.                                |
| AUG <b>2 4 2011</b> | <b>D</b> Ne                   | t unrelated                         | business taxable income from Form 990-T, line-34  | Dian Year   |                                      |
|                     | 0 0-                          |                                     | RECEIVE S   | Prior Year<br>847, 89                                     | Current Year 95. 324, 657.           |
| OCANNEL<br>Revenue  | 8 Co                          | ntributions                         | and grants (Part VIII, line 1h) vice revenue (Part VIII, line 2g) ncome (Part VIII, column (A), lines 3.73 and 760) e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)                | 55,42   |                                      |
|                     | 9 Pro                         | ogram serv                          | ncome (Part VIII, column (A), lines 304 and VIG 0 8 25  |   | 94. 758.                             |
| Revenue             | 10 Inv                        | bor rovenu                          | o (Part VIII, column (A), lines 5, 6d Rc (9c, 10c, and 11e)   | <u> </u>  | 13,639.                              |
| 3 -                 | 12 To                         | tal revenue                         | e – add lines 8 through 11 (must equal Ract VIII) (4) line 12)  | 904,11  |                                      |
| ე —                 |                               |                                     | imilar amounts paid (Part IX, column (A), lines   |   | 1,300.                               |
|                     |                               |                                     | to or for members (Part IX, column (A), line 4)   |   | 1,300.                               |
|                     | 1                             | -                                   | er compensation, employee benefits (Part IX, column (A), lines 5-10)  | 322,37  | 72: 360,325.                         |
| ø                   | 15 Sa                         |                                     |   | 322,3   | 72: 300, 323.                        |
| Ę                   | 16a Pro                       | ofessional                          | fundraising fees (Part IX, column (A), line 11e)  | 6 - S. 7 85 Telegraph (C. )                               |                                      |
| Expenses            | <b>b</b> To                   | tal fundrais                        | sing expenses (Part IX, column (D), line 25) ►  |   |                                      |
| ú                   | 17 Oti                        | her expens                          | ses (Part IX, column (A), lines 11a-11d, 11f-24f)   | 230,09  | 380,589.                             |
|                     | <b>18</b> To                  | tal expense                         | es. Add lines 13-17 (must equal Part IX, column (A), line 25)   | 552,46  | 55. 742,214.                         |
|                     | 19 Re                         | venue less                          | expenses Subtract line 18 from line 12  | 351,65  | -318,189.                            |
| 8                   |                               |                                     |   | Beginning of Current                                      |                                      |
|                     |                               | tal assets                          | (Part X, line 16)   | 847,08  |                                      |
| \$ 8                | 1                             |                                     | s (Part X, line 26)   | 187,67  |                                      |
| 15                  | l .                           |                                     | fund balances Subtract line 21 from line 20   | 659,41  | <del> </del>                         |
|                     |                               | Signatui                            |   | 035,41  | 541,222.                             |
|                     |                               |                                     |   | be been at an entered as a                                |                                      |
| cor                 | der penalties<br>opiete Decla | of perjury, I di<br>ration of prepa | eclare that I have examined this return, including accompanying schedules and statements, and to t<br>arer (other than officer) is based on all information of which preparer has any knowledge | ne best of my knowledge a                                 | and belief, it is true, correct, and |
|                     |                               | D Ω.                                | 11.700  | 7211  |                                      |
| c:                  |                               | Bignatu                             | re of officer   | Date  |                                      |
| Si<br>He            | gri<br>Gre                    | TV.                                 | 10/10/10/10/10/   |   |                                      |
| ne                  | 1 <b>C</b>                    | Type or                             | print name and title  | <del></del>   |                                      |
|                     |                               | <b></b>                             | <del></del>   |   | , PTIN                               |
| _                   |                               | Trillo Type p                       |   |   | "                                    |
| Pa                  |                               | <u> </u>                            |   | self-employed   |                                      |
|                     | eparer                        | Firm's name                         |   |   | •• /-                                |
| US                  | e Only                        | Firm's addre                        |   | Firm's EIN  |                                      |
|                     |                               | <u> </u>                            | Oakland, CA 94612-2151  | Phone no  | (510) 835-2727                       |
|                     |                               |                                     | is return with the preparer shown above? (see instructions)   |   | X Yes No                             |
| RA                  | A For Pa                      | nerwork D                           | eduction Act Notice see the separate instructions   | 01131 12/21/10  | Form 990 (2010)                      |

| Forn | n <b>990</b> (2010) Center for Third World Organizing  | 52-121105         | 59 Page <b>2</b>  |
|------|--|-------------------|-------------------|
| Pai  | rt ill Statement of Program Service Accomplishments  |                   |                   |
|      | Check if Schedule O contains a response to any question in this Part III   |                   | X                 |
| 1    | Briefly describe the organization's mission.   |                   |                   |
|      | The Center for Third World Organizing is a racial-justice organiz  | ation led         | by people         |
|      | of color whose mission is to achieve social and economic justice.  |                   |                   |
|      |  |                   |                   |
|      |  |                   |                   |
|      | Did the organization undertake any significant program services during the year which were not listed or   | the prior         |                   |
|      | Form 990 or 990-EZ? See Schedule O   | X                 | Yes No            |
|      | If 'Yes,' describe these new services on Schedule O  |                   |                   |
| 3    |  | vices?            | Yes X No          |
| •    | If 'Yes,' describe these changes on Schedule O   | vccs              | 103 11 110        |
| 4    | Describe the exempt purpose achievements for each of the organization's three largest program services   | r by avnances (   | Section E01(a)(2) |
| 4    | and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants an   | d allocations to  | others, the total |
|      | expenses, and revenue, if any, for each program service reported   |                   | 2,                |
|      |  |                   |                   |
| 4 8  | a (Code (Expenses \$ 191, 341. including grants of \$ ) (R   | evenue \$         | )                 |
|      | See Schedule 0   |                   |                   |
|      |  |                   |                   |
|      |  |                   |                   |
|      |  |                   |                   |
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|      |  |                   |                   |
|      |  |                   |                   |
|      |  | <del></del> _     |                   |
| 4 t  | b (Code) (Expenses \$ 166,841. including grants of \$ ) (Re  | evenue \$         | <u>58,093.</u> )  |
|      | See Schedule 0   |                   |                   |
|      |  |                   |                   |
|      |  |                   |                   |
|      |  |                   |                   |
|      |  |                   |                   |
|      |  |                   | . <b></b>         |
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|      |  |                   |                   |
|      |  |                   |                   |
|      |  | <b></b>           |                   |
|      |  | <b></b>           |                   |
| Δ.   | (Code (Code (Expenses \$ 68,777. including grants of \$ ) (Re  | evenue \$         | 26.878            |
|      | Training and Retreat Center: The CTWO Training and Retreat Cente   | ris a uni         |                   |
|      | resource providing affordable and convenient meeting space to com  |                   |                   |
|      | other non-profits who may not otherwise be able to afford a quiet  |                   |                   |
|      |  |                   |                   |
|      | setting. We offer very low-cost overnight accommodations to ground the setting with a setting with the setti |                   |                   |
|      | space as well as to local organizations who may be flying people   | in ror a c        | ourerence         |
|      | or gathering but cannot afford hotel lodging. The Victorian mans   |                   |                   |
|      | to as the purple house by regular quests) has a meeting space and  |                   |                   |
|      | on the first floor and dorm style overnight rooms for more than 3  |                   |                   |
|      | second floor. The facility has housed generations of transformat   | <u>ive gather</u> | ings.             |
|      |  | <b></b>           |                   |
|      |  |                   |                   |
|      |  |                   |                   |
| 4d   | Other program services (Describe in Schedule O)  See Schedule O .  |                   |                   |
|      | (Expenses \$ 167,169. including grants of \$ 1,300.) (Revenue \$   |                   | )                 |
| 4e   | Total program service expenses ► 594, 128.   |                   |                   |
|      |  |                   | Form 990 (2010)   |

|        |   |      | 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      | <b>Section 501(c)(3) organizations</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If 'Yes,' complete Schedule C, Part II</i>   | 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   |     | Х        |
| 11     | If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.   | · .  |     |          |
| а      | Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI  | 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  | 11 ь |     | х        |
| С      | Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII  | 11 c |     | Х        |
|        | 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 Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X   | 11 e |     | Х        |
|        | 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        |
|        | Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII   | 12a  | _ X | _        |
| b      | 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   |     | X        |
| 14 a   | Did the organization maintain an office, employees, or agents outside of the United States?   | 14a  |     | <u>X</u> |
|        | 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                     | 14b  |     | Х        |
| 15     | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV                               | 15   |     | 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, Parts III and IV                                   | 16   |     | <u> </u> |
| 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   |     | <u>X</u> |
| 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   |     | X        |
| 20 a   | Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H   | 20   |     | X        |
| ь<br>— | If 'Yes' to line 20a, did the organization attach its audited financial statements to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)                 | 20 Ь |     | 2010     |

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                                    |                       | X        |
| 23   | Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>                      | 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                                   | !                     | x        |
| b    | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  | 24b                                   | <b> </b>              | <u> </u> |
| 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                                   | <u> </u>              | <u> </u> |
| 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        |
| b    | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I              | 25b                                   |                       | 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)   | , , , , , , , , , , , , , , , , , , , | 7 ( )<br>23 ( )       | -45      |
| а    | A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV  | 28a                                   |                       | X        |
| b    | A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV   | 28b                                   | <br> <br><del> </del> | x        |
|      | 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        |
| 29   | Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M   | 29                                    | ļ                     | X        |
|      | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M   | 30                                    |                       | Х        |
| 31   | Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I   | 31                                    |                       | Х        |
| 32   | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II   | 32                                    |                       | х        |
| 33   | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-3 and 301 7701-3 If 'Yes,' complete Schedule R, Part I  | 33                                    |                       | <u> </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                                    |                       | Х        |
| 35   | Is any related organization a controlled entity within the meaning of section 512(b)(13)?  | 35                                    |                       | Х        |
| 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  Yes 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                                    |                       | X        |
| 37   | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI  | 37                                    |                       | X        |
|      | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197  Note. All Form 990 filers are required to complete Schedule O   | 38                                    | Х                     |          |
| AA   |  | Form                                  | 990 (                 | 2010     |

| Part V | Stat | ements | Rega | rding | Other | IRS | Filings | and | Tax | Complianc | e |
|--------|------|--------|------|-------|-------|-----|---------|-----|-----|-----------|---|

|      | Check if Schedule O contains a response to any question in this Part V   |                                 |           |        |             |
|------|--|---------------------------------|-----------|--------|-------------|
|      |  |                                 |           | Yes    | No          |
| 1    | a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  | 17                              | r         |        |             |
| - 1  | <b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable   | 0                               |           | ŧ      | l           |
| -    | c Did the organization comply with backup withholding rules for reportable payments to vendors and r (gambling) winnings to prize winners?   | eportable gaming                | îc        | x      |             |
| 2    | a 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  | 12                              | •         |        |             |
| 1    | b If at least one is reported on line 2a, did the organization file all required federal employment tax re   | turns?                          | 2b        | Х      |             |
|      | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instruction   | ons)                            |           |        |             |
| 3    | a Did the organization have unrelated business gross income of \$1,000 or more during the year?  |                                 | 3a        |        | X           |
| i    | b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule Q  |                                 | 3b        |        |             |
|      | financial account in a foreign country (such as a bank account, securities account, or other financial   | er authority over, a account)?  | 4a        |        | Х           |
| - 1  |  |                                 |           |        | · .         |
|      |  | ſ                               | -         |        |             |
|      | · · · · · · · · · · · · · · · · · · ·  | <del>-</del>                    | <u>5a</u> |        | X           |
|      |  | action?                         | 5 b       |        | X           |
| •    | c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?   | <u> </u> -                      | 5c        |        | <b> </b>    |
| 6    | a Does the organization have annual gross receipts that are normally greater than \$100,000, and did solicit any contributions that were not tax deductible?   | he organization                 | 6a        |        | х           |
|      | Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  Of the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize with nest year of the gambling winnings to prize with nest 2g and 12 to 4 to |                                 | 6b        |        |             |
| 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                       | '_        |        |             |
|      | •  | <u> </u>                        | 7a        |        | X           |
|      |  | 📙                               | 7b        |        | ├—          |
| •    | c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v<br>Form 8282?   | vas required to file            | 7 c       |        | х           |
|      | 1 1  | <u> </u>                        |           |        | - T         |
|      |  | contract?                       | 7e        | 5      | X           |
|      | · · · · · · · · · · · · · · · · · · ·  | <u> </u>                        | 71        |        | Х           |
|      | g If the organization received a contribution of qualified intellectual property, did the organization file F  | <u> </u>                        | 7.        |        |             |
| ł    | h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization   | zation file a                   | 7g        |        |             |
|      |  | -                               | 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, have excludings at any time during the year?  | nizations. Did the ess business | 8         |        |             |
| 9    |  |                                 | 1         |        |             |
| ž    | , , , ,  | 1                               | 9a        |        |             |
|      | •  |                                 | 9Ь        |        |             |
| 10   | Section 501(c)(7) organizations. Enter   |                                 | ,         | 77.    | ,           |
|      | 1 1  |                                 | ı         | -:     | •           |
| t    | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  |                                 | `         |        |             |
| 11   | Section 501(c)(12) organizations. Enter  |                                 | 1         |        |             |
| ē    | a Gross income from members or shareholders 11a  |                                 | 7.4       |        | •           |
| t    | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)   |                                 | ادند      |        | :<br>مقصفة، |
| 12 a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1   | 041?                            | 12a       | ]      |             |
| b    | olf 'Yes,' enter the amount of tax-exempt interest received or accrued during the year   |                                 |           |        | · 55 -      |
| 13   | Section 501(c)(29) qualified nonprofit health insurance issuers.   |                                 |           | :.:1   | -<br>       |
| а    | Is the organization licensed to issue qualified health plans in more than one state?   | <u>_1</u>                       | За        |        |             |
|      | Note. See the instructions for additional information the organization must report on Schedule O   | <u> </u>                        | 3         |        | がほど         |
| 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  | ) .                             |           |        |             |
| C    | Enter the amount of reserves on hand   |                                 | وأندى     |        | 1           |
| 4 a  | Did the organization receive any payments for indoor tanning services during the tax year?   | 1                               | 4a        |        | X           |
| b    | If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule  | : O 1                           | 4b        | $\Box$ |             |

Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI 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 1b b Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee? See Schedule 0 X 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? See Sch O 3 Х 4 Did the organization make any significant changes to its governing documents 4 Х since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Х X 6 Does the organization have members or stockholders? 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7 a X X 7b 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 a The governing body? 8 a Х b Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O q Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10a Does the organization have local chapters, branches, or affiliates? 10 a Х b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11 a Х **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 See Schedule O 12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13 12a Х b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12c X See Schedule O X 13 Does the organization have a written whistleblower policy? 13 14 Does the organization have a written document retention and destruction policy? 14 X 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? X a The organization's CEO, Executive Director, or top management official See Schedule Q 15a b Other officers of key employees of the organization See Schedule O 15<sub>b</sub> Х T. 1 If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions) 30.7 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a X b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► <u>CA</u> 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 Another's website Upon request Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial 19 statements available to the public See Schedule O State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► Ayoka Turner 1218 East 21st Street Oakland CA 94606

| Form <b>.990</b> (2010) | Center | for | Third | World | Organizing |
|-------------------------|--------|-----|-------|-------|------------|

52-1211059

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#### 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

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

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

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

| Check this box if neither the organization | on nor any   | relate                        | ed o                  | rgan              | ızat         | ion co                       | mpe    | ensated any current o  | fficer, director, or trus   | tee  |
|--|--|-------------------------------|-----------------------|-------------------|--------------|------------------------------|--------|--|---|--|
| (A)  | (B)  | (C)                           |                       |                   |              |                              |        | (D)  | (E)   | (F)  |
| Name and title                             | Average hours per week (describe hours for related organiza tions in Schedule O) | ndividual trustee or director | institutional trustee | (checi<br>Officer | Key employee | Highest compensated employee | Former | Reportable<br>compensation from<br>the organization<br>(W-2/1099-MISC) | Reportable<br>compensation from<br>related organizations<br>(W-2/1099 MISC) | Estimated amount of other compensation from the organization and related organizations |
| (1) Francis Calpotura  Board Chair         | 2  | х                             |                       | х                 |              |                              |        | 0.   | 0.  | 0.   |
| (2) Ng'ethe Maina<br>Director              | 1  | х                             |                       |                   |              |                              |        | 0.   | 0.  | 0.   |
| (3) Larry Salomon Director                 | 1  | х                             | _                     |                   |              |                              |        | 0.   | 0.  | 0.   |
| Oirector                                   | 1  | х                             |                       |                   |              |                              |        | 0.   | 0.  | 0.   |
| Director                                   | 1_1_   | х                             |                       |                   |              |                              |        | 0.   | 0.  | 0.   |
| (6) Danielle Mahones Executive Dir.        | 50   |                               |                       | х                 |              |                              |        | 61,342.  | 0.  | 5,148.   |
| _(?)                                       |  |                               |                       |                   |              |                              |        |  |   | <del>-</del>   |
| _(a) · · · · · · · · · · · · · · · · · · · |  |                               |                       |                   |              |                              |        |  |   |  |
| (10)                                       |  |                               |                       |                   |              |                              |        |  |   |  |
| (וו)                                       |  |                               |                       | ,                 |              |                              |        |  |   |  |
| (12)                                       |  |                               |                       |                   |              |                              |        |  |   |  |
| (13)                                       |  |                               |                       |                   |              | -                            |        |  |   |  |
| <u>(14)</u>                                |  |                               | _                     |                   |              |                              |        |  |   | · · · · · · · · · · · · · · · · · · ·  |
| (15)                                       |  |                               |                       |                   |              |                              | _      |  |   |  |
| (16)                                       |  |                               | _                     |                   |              |                              | _      |  |   |  |
| <u>\$170</u>                               |  | ]                             |                       |                   |              |                              |        |  |   | F 000 (0015)   |
| BAA  |  | TI                            | LEA0                  | 107L              | 12/          | 21/10                        |        |  |   | Form <b>990</b> (2010)   |

| Part VII   Section A. Officers, Directors, Trus   | tees, k   | (ey         | En                    | nplo           | эуе          | es,  | an                   | d Highest Con                                | npensated Emp                            | oloyees (cont)               |
|---|---|-------------|-----------------------|----------------|--------------|--|----------------------|--|--|------------------------------|
| (A)   | (B)   |             |                       | •              | c)           |  |                      | (D)  | (E)                                      | (F)                          |
| Name and title  | Average   |             |                       | _              |              |  |                      | compensation from                            | Reportable compensation from             | Estimated<br>amount of other |
|   | per week<br>(describe<br>hours for<br>related<br>organi-<br>zations<br>in<br>Sch O) | u div       | Institutional trustee | Officer        | Key employee | Highest compensate employee                      | orm                  | the organization<br>(W 2/1099 MISC)          | related organizations<br>(W-2/1099 MISC) | compensation<br>from the     |
|   | related   | ecto        | Ì                     | "              | ğ            | yee  | Ę                    | 1  |  | organization<br>and related  |
|   | zations   | 2 5         | al tr                 |                | oye.         | l g  |                      |  |  | organizations                |
|   | Sch O)  | ee          | uste                  | 1              | "            | · en   | 1                    | 1  |  |                              |
|   |   |             | l °                   | ļ              |              | Ē  |                      | 1  |  |                              |
| (18)  |   |             |                       |                |              | <del>                                     </del> |                      |  |  |                              |
| 400   | -   | ┝           | _                     | -              | Ļ            | -  | _                    |  |  | ļ                            |
| (19)  |   |             |                       |                | <u> </u>     |  |                      |  |  |                              |
| (20)  |   |             |                       |                |              |  |                      |  |  |                              |
| (21)  |   |             |                       |                |              |  |                      |  | <del></del>                              | †···                         |
| (00)  |   | <u> </u>    | <u> </u>              |                | _            | ⊢  |                      |  |  | <u></u>                      |
| (22)  |   |             |                       |                |              |  |                      |  |  |                              |
| _(23)   | .[  |             | ľ                     |                |              |  |                      |  |  |                              |
| (24)  |   |             | -                     |                | -            |  | -                    |  |  | <del> </del>                 |
|   |   |             |                       |                | L            |  |                      |  |  |                              |
| (25)  |   |             |                       |                |              |  |                      |  |  |                              |
| (26)  |   |             |                       |                |              |  |                      |  |  | †                            |
| (27)  | ļ <u>.</u>  |             |                       |                |              |  |                      |  |  | <del> </del>                 |
|   |   |             |                       |                | L_           |  |                      |  | · · · · · · · · · · · · · · · · · · ·    |                              |
| _(28)   | i   |             |                       |                |              |  |                      |  |  |                              |
| (29)  |   |             |                       |                |              |  |                      | -  |  |                              |
| 1 b Sub-total   |   | L,          |                       |                | <u> </u>     |  | <b>&gt;</b>          | 61,342.                                      | 0.                                       | 5,148.                       |
| c Total from continuation sheets to Part VII, Section   | Α   |             |                       |                |              |  | •                    | 0.   | 0.                                       | 0.                           |
| d Total (add lines 1b and 1c)   |   |             |                       |                |              |  | •                    | 61,342.                                      | 0.                                       | 5,148.                       |
| 2 Total number of individuals (including but not limite   | d to thos   | se lis      | sted                  | abo            | ove)         | wh   | o re                 | ceived more than                             | \$100,000 in report                      | able compensation            |
| from the organization   0   |   |             |                       |                |              |  |                      | <del></del>                                  |  | <del></del>                  |
|   |   |             |                       |                |              |  |                      |  |  | Yes No                       |
| 3 Did the organization list any former officer, director<br>on line 1a? If 'Yes,' complete Schedule J for such in   | or truste   | ee, k<br>I  | ey (                  | emp            | loye         | ee, c  | or hi                | ghest compensate                             | ed employee                              | 3 X                          |
|   |   |             |                       |                |              |  |                      |  |  | 7000                         |
| 4 For any individual listed on line 1a, is the sum of re<br>the organization and related organizations greater t  | portable<br>han \$156   | con<br>0,00 | npei<br>0? /          | nsat<br>If 'Ya | ion<br>es' e | and<br>com                                       | otn<br><i>plet</i> e | er compensation t<br>e <i>Schedule J for</i> | rom                                      | - d 25 4 25 6                |
| such individual   |   | •           |                       |                |              |  |                      |  |  | 4 X                          |
| 5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,' or accrue of the organization of t | ompens:   | atior       | n fro<br>hedu         | m a            | ny i         | unre   | late                 | d organization or<br>erson                   | individual                               | 5 X                          |
| Section B. Independent Contractors  |   |             |                       |                |              |  |                      |  |  |                              |
| Complete this table for your five highest compensation from the organization  | ed indep  | end         | ent                   | con            | trac         | tors   | tha                  | t received more th                           | an \$100,000 of                          |                              |
| (A)   |   |             |                       |                |              |  | $\Box$               | (B)  |  | (C)                          |
| Name and business addres  | s<br>   |             |                       |                |              |  |                      | Description o                                | f services                               | Compensation                 |
|   |   |             |                       |                | _            |  | $\dashv$             | -  |  |                              |
|   |   |             |                       |                |              |  |                      | <del></del>                                  |  |                              |
|   |   |             |                       |                |              |  | $\Box$               |  |  |                              |
|   |   |             |                       |                |              |  | $\dashv$             |  |  |                              |
| 2 Total number of independent contractors (including  | but not I   | imite       | ed t                  | o the          | ose          | liste  | ed al                | bove) who receive                            | d more than                              | 1.7                          |
| \$100,000 in compensation from the organization   |   |             |                       |                |              |  | _                    |  |  |                              |

| Pa  | rt VIII Statement of Revenue  |  |  |   |  |
|---|---|--|--|---|--|
|   |   | (A)<br>Total revenue                   | (B) Related or exempt function revenue   | (C)<br>Unrelated<br>business<br>revenue | (D) Revenue excluded from tax under sections 512, 513, or 514  |
| Z 2   | 1a Federated campaigns 1a   |  |  |   |  |
| MAN   | b Membership dues 1b  | -                                      |  |   |  |
| S, G  | c Fundraising events 1c   |  |  |   |  |
| AR  | d Related organizations 1d  |  |  |   |  |
| S.E   | e Government grants (contributions)   |  | <b>j</b>   |   |  |
| PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS | f All other contributions, gifts, grants, and similar amounts not included above 1f 324, 657. |  |  |   |  |
| ξě  | g Noncash contributions included in lns 1a-1f \$  |  | 1.   | <b>[</b> .                              |  |
| <u>8₹</u>   | h Total. Add lines 1a-1f  | 324,657.                               |  | <u> </u>                                |  |
| IUE   | Business Code   |  | - 1- 4   | 1                                       |  |
| Y.  | 2a Fee for service 900099   | 52,042.                                | 52,042.  |   |  |
| 2   | b Facility rental 900099  | 26,878.                                |  |   |  |
| Ş   | c Registration fees 900099  | 6,051.                                 | 6,051.   |   |  |
| SER   | d   |  |  |   |  |
| ¥   | e   |  |  |   |  |
| DGR.  | f All other program service revenue   |  |  |   |  |
| <u> </u>  | g Total. Add lines 2a-2f ▶  | 84,971.                                |  |   |  |
|   | 3 Investment income (including dividends, interest and  |  |  |   |  |
|   | other similar amounts)  | 758.                                   | <del></del>  | <b></b>                                 | 758.   |
|   | 4 Income from investment of tax-exempt bond proceeds  |  |  |   |  |
|   | 5 Royalties   | ······································ |  |   |  |
|   | (i) Real (ii) Personal  |  | , .  |   |  |
|   | 6a Gross Rents  |  |  |   |  |
| '   | b Less rental expenses  | •                                      |  | ,                                       | [  |
|   | c Rental income or (loss)   |  | ~ .  |   |  |
|   | d Net rental income or (loss)   | <del></del>                            |  |   |  |
|   | 7a Gross amount from sales of assets other than inventory (i) Securities (ii) Other           |  |  |   |  |
|   | <b>b</b> Less. cost or other basis and sales expenses   |  |  |   |  |
|   | c Gain or (loss)  |  |  | .:                                      |  |
|   | d Net gain or (loss) ▶  |  |  |   |  |
| E E   | 8a Gross income from fundraising events (not including \$                                     |  |  | ,                                       |  |
| 2   | of contributions reported on line 1c)   | •                                      | ·  |   |  |
| OTHER REVENU                                      | See Part IV, line 18  |  |  | ] .                                     |  |
| 품   | b Less direct expenses b  | Name of the state of the               | ,  |   | ),<br>   |
| 0   | c Net income or (loss) from fundraising events ►  |  | , ,  |   |  |
|   | 9a Gross income from gaming activities<br>See Part IV, line 19                                |  |  |   |  |
|   | <b>b</b> Less direct expenses <b>b</b>  | ar than the month                      |  |   | , ,  |
|   | c Net income or (loss) from gaming activities   |  |  |   |  |
|   | 10 a Gross sales of inventory, less returns and allowances                                    | ,                                      | , .  |   | Tana.  |
|   | <b>b</b> Less cost of goods sold <b>b</b>   |  |  |   |  |
|   | c Net income or (loss) from sales of inventory  |  | المصيحة الما   | la mana indina s                        |  |
|   | Miscellaneous Revenue Business Code ,   |  |  | <del></del> ;                           | <del>-</del>   |
| }   | 11a Work study reimbursement 900099   | 11,183.                                |  | , .                                     | 11,183.  |
|   | b Miscellaneous 900099  | 2,456.                                 |  |   | 2,456.   |
|   | - 1.1.5cc11uncous   | 2,430.                                 |  |   | 2,430.   |
|   | d All other revenue   | <del></del>                            |  | ····                                    |  |
| Į   | e Total. Add lines 11a-11d  | 13,639.                                | The state of the s | 11.1 (1.1 (1.1 (1.1 (1.1 (1.1 (1.1 (1.1 | Carrie of the State of the Stat |
| ĺ   | 12 Total revenue. See instructions  | 424,025.                               | 84,971.  | 0.                                      | 14,397.  |
|   | 12 I Otal revenue. Occ mandenons  | 323,023.                               | <u></u>  |   |  |

#### 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)

|           | not include amounts reported on lines<br>7b, 8b, 9b, and 10b of Part VIII.   | I Total avangage      |                          |                                 | (D)                    |
|-----------|--|-----------------------|--------------------------|---------------------------------|------------------------|
| 1         |  | (A)<br>Total expenses | Program service expenses | Management and general expenses | Fundraising expenses   |
|           | Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21  | 1,300.                | 1,300.                   |                                 |                        |
| 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   | 66,490.               | 45,213.                  | 4,052.                          | 17,225.                |
| 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.  | 228,218.              | 221,509.                 | 5,520.                          | 1,189.                 |
| 8         | Pension plan contributions (include section 401(k) and section 403(b) employer contributions)  | 5,551.                | 4,980.                   | 571.                            |                        |
| 9         | Other employee benefits.   | 33,451.               | 27,811.                  | 2,963.                          | 2,677.                 |
| 10        | Payroll taxes  | 26,615.               | 24,056.                  | 934.                            | 1,625.                 |
|           | Fees for services (non-employees)  |                       | ,                        |                                 |                        |
| á         | Management   |                       |                          |                                 |                        |
| t         | Legal  |                       |                          |                                 |                        |
| (         | Accounting   | 10,180.               |                          | 10,180.                         |                        |
| •         | Lobbying   |                       |                          | - ,                             |                        |
| •         | Professional fundraising services See Part IV, line 17   |                       | T 1.3 5 75 1 6 7         | - ' , ' ,                       |                        |
| f         | Investment management fees   |                       |                          | -                               | -                      |
| ç         | Other  | 168,906.              | 89,472.                  | 41,893.                         | 37,541.                |
| 12        | Advertising and promotion  | 4,965.                | 4,836.                   | 64.                             | 65.                    |
| 13        | Office expenses  | 40,842.               | 32,857.                  | 3,398.                          | 4,587.                 |
| 14        | Information technology   | 6,952.                | 5,658.                   | 661.                            | 633.                   |
| 15        | Royalties  |                       |                          |                                 |                        |
| 16        | Occupancy  | 34,588.               | 31,786.                  | 1,396.                          | 1,406.                 |
| 17        | Travel   | 53,206.               | 51,314.                  | 717.                            | 1,175.                 |
| 18        | Payments of travel or entertainment expenses for any federal, state, or local public officials   |                       |                          |                                 |                        |
| 19        | Conferences, conventions, and meetings   | 33,360.               | 32,649.                  | 582.                            | 129.                   |
| 20        | Interest   | 5,384.                | 4,357.                   | 512.                            | 515.                   |
| 21        | Payments to affiliates   |                       |                          |                                 |                        |
| 22        | Depreciation, depletion, and amortization  | 8,825.                | 7,142.                   | 839.                            | 844.                   |
| 23        | Insurance  | 10,943.               | 6,800.                   | 3,339.                          | 804.                   |
| 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)                   |                       |                          |                                 |                        |
| а         | Professional development   | 1,874.                | 1,874.                   |                                 |                        |
| b         | Miscellaneous  | 564.                  | 514.                     | 23.                             | 27.                    |
| С         |  |                       |                          |                                 |                        |
| d         |  |                       |                          |                                 |                        |
| е         |  |                       |                          |                                 |                        |
| f         | All other expenses   |                       |                          |                                 |                        |
| 25        | Total functional expenses. Add lines 1 through 24f   | 742,214.              | 594,128.                 | 77,644.                         | 70,442.                |
| 26<br>RAA | Joint costs. Check here ► X 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 |                       |                          |                                 | Form <b>990</b> (2010) |

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**Balance Sheet** (A) (B) Beginning of year End of year 345,002 105,783. 1 1 Cash - non-interest-bearing 2 2 Savings and temporary cash investments 225,000 60,000. 3 3 Pledges and grants receivable, net 4,600 4 87,561. Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, 5 and highest compensated employees. Complete Part II of Schedule 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 6 organizations (see instructions) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 421 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 459,388 10b 195,729 272,484 10 263,659 **b** Less accumulated depreciation 11 Investments - publicly traded securities 12 Investments - other securities See Part IV, line 11 12 13 13 Investments - program-related See Part IV, line 11 14 Intangible assets 14 15 15 Other assets See Part IV, line 11 847,086 16 521,424 Total assets Add lines 1 through 15 (must equal line 34) 16 12,511. 17 19,313 17 Accounts payable and accrued expenses 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L 175,164 23 160,889. 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities Complete Part X of Schedule D 187,675 180,202 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here X and complete lines 27 through 29 and lines 33 and 34. en in historian in the 85,671 27 95,563. Unrestricted net assets 27 573,740. 28 245,659 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 32 341,222. 659,411. 33 33 Total net assets or fund balances

BAA

34

Total liabilities and net assets/fund balances

521,424. Form 990 (2010)

847,086

| Form 990 (2010) Center for Third World Organizing  | 2-1211059                           | •    | Pa    | age <b>12</b> |
|--|-------------------------------------|------|-------|---------------|
| 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                                   | 4    | 24,0  | 125           |
| 2 Total expenses (must equal Part IX, column (A), line 25)   | 2                                   |      | 42,2  |               |
| 3 Revenue less expenses Subtract line 2 from line 1  | 3                                   |      | 18,1  |               |
| 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).   | 4                                   |      | 59,4  |               |
| 5 Other changes in net assets or fund balances (explain in Schedule O)   | 5                                   |      |       | 0.            |
| 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                                   | 3    | 41,2  | 222.          |
| Part XII Financial Statements and Reporting  | · · · · · · · · · · · · · · · · · · |      |       |               |
| Check if Schedule O contains a response to any question in this Part XII   |                                     |      |       |               |
|  |                                     |      | Yes   | No            |
| 1 Accounting method used to prepare the Form 990 $\square$ Cash $ \overline{X} $ Accrual $\square$ Other $\underline{\hspace{1cm}}$  |                                     |      | ,     |               |
| 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             |
| <b>b</b> Were the organization's financial statements audited by an independent accountant?  |                                     | 2Ь   | Х     |               |
| c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight review, or compilation of its financial statements and selection of an independent accountant?   | of the audit,                       | 2c   |       | х             |
| If the organization changed either its oversight process or selection process during the tax year, explain   |                                     |      |       |               |
| ın Schedule O  |                                     |      | 4     | •             |
| <b>d</b> If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were separate basis, consolidated basis, or both   | issued on a                         |      |       | ,<br>T        |
| 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 Audit Act and OMB Circular A-133?   | the Single                          | 3a   |       | <u>x</u>      |
| <b>b</b> If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits | required audit                      | 3ь   |       |               |
| BAA  |                                     | Form | 990 ( | 2010)         |

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

**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.

OMB No 1545-0047 **2010** 

Don to Dublic

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

Employer identification number

| Cen                                    |   |  |                     | hird  |             |         |  |                        |                  |  |           |                                |   |           |   |                             | 21105                                 |             |           |        |
|--|---|--|---------------------|---|-------------|---------|--|------------------------|------------------|--|-----------|--------------------------------|---|-----------|---|-----------------------------|---------------------------------------|-------------|-----------|--------|
| Par                                    | <u>: I</u>  | Rea  | ason                | for Pu  | <u>ubli</u> | c Cha   | arity S                                | Status                 | s (All c         | rganızatı  | ons       | must                           | comple  | ete this  | s part.   | ) See                       | ınstruc                               | tions.      |           |        |
| The o                                  | rga   | nızatı   | on is               | not a pi  | rıvate      | e foun  | dation                                 | becaus                 | se it is         | (For lines 1   | thro      | ugh 11,                        | check o   | only one  | box )   |                             |                                       |             |           |        |
| 1                                      |   | A ch   | urch,               | convent   | tion (      | of chu  | rches                                  | or asso                | ciation          | of churches  | des       | cribed ii                      | n <b>sectio</b>   | n 170(b)  | <b>X1XAX</b> i                                    | ).                          |                                       |             |           |        |
| 2                                      | Г   | A sc   | hool d              | lescribe  | d in        | sectio  | n 170(                                 | <mark>(b)(1)(</mark> A | <b>)(ii).</b> (A | ttach Sched  | dule l    | E)                             |   |           |   |                             |                                       |             |           |        |
| 3                                      | Г   | A ho   | spital              | or a co   | oper        | ative l | hospita                                | al servic              | ce organ         | nization des   | scribe    | ed in <b>se</b>                | ction 17  | 0(b)(1)(  | A)(iii).  |                             |                                       |             |           |        |
| 4                                      |   | A m  | edical              | researd   | ch or       | ganiza  | ation o                                | perated                | d in conj        | unction wit  | hah       | nospital                       | describe  | ed in se  | ction 17  | <mark>/0(Ь)(</mark> 1)(     | A)(iii) E                             | nter the ho | spital'   | 's     |
|  |   |  |                     | , and st  |             |         |  |                        |                  |  |           |                                |   |           |   |                             |                                       |             |           |        |
| 5                                      |   | An organization operated for the benefit of a college or university owned or operated by a governmental unit described in <b>section</b> 170(b)(1)(A)(iv). (Complete Part II)  |                     |   |             |         |  |                        |                  |  |           |                                |   |           |   |                             |                                       |             |           |        |
| 6                                      | L   | A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).   |                     |   |             |         |  |                        |                  |  |           |                                |   |           |   |                             |                                       |             |           |        |
| 7                                      | X   | ın se  | ction               | anization that normally receives a substantial part of its support from a governmental unit or from the general public described ion 170(b)(1)(A)(vi). (Complete Part II) |             |         |  |                        |                  |  |           |                                |   |           |   |                             |                                       |             |           |        |
| 8                                      | <u>_</u>  |  |                     | -   |             |         |  |                        |                  | <b>(A)(vi).</b> (Co  | •         |                                |   |           |   |                             |                                       |             |           |        |
| 9                                      | L   | An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) |                     |   |             |         |  |                        |                  |  |           |                                |   |           |   |                             |                                       |             |           |        |
| 10                                     |   | An o   | rgania              | ation o   | rgan        | zed a   | nd ope                                 | erated e               | exclusiv         | ely to test f  | or pu     | ublic saf                      | ety See   | sectio    | n 509(a)  | (4).                        |                                       |             |           |        |
| 11                                     |   | An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See <b>section 509(a)(3)</b> . Check the box that describes the type of supporting organization and complete lines 11e through 11h   |                     |   |             |         |  |                        |                  |  |           |                                |   |           |   |                             |                                       |             |           |        |
|  | a ☐ Type I b ☐ Type III - C ☐ Type III - Functionally integrated d ☐ Type III - Other   |  |                     |   |             |         |  |                        |                  |  |           |                                |   |           |   |                             |                                       |             |           |        |
| е                                      | By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) |  |                     |   |             |         |  |                        |                  |  |           |                                |   |           |   |                             |                                       |             |           |        |
| f                                      | If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box   |  |                     |   |             |         |  |                        |                  |  |           |                                |   |           |   |                             |                                       |             |           |        |
| g                                      |   | Since  | e Aug               | ust 17, :   | 2006        | , has   | the org                                | ganızatı               | ion acce         | epted any g  | ıft o     | r contrit                      | oution fr   | om any    | of the fe   | ollowing                    | persons                               | 57          |           |        |
|  |   |  |                     |   |             |         |  |                        |                  |  |           |                                |   |           |   |                             |                                       |             | Yes       | No     |
|  |   | (i)  | belov               | v, the g  | over        | ning b  | ody of                                 | the su                 | pported          | either alon<br>organization  | e or      | togethe                        | r with pe   | ersons o  | lescribe  | d in (ii)                   | and (III)                             | 11 g (i)    |           |        |
|  |   | (ii)   |                     | •   |             |         |  |                        |                  | ı) above?  |           |                                |   |           |   |                             |                                       | 11 g (ii)   | <b> </b>  | ــــــ |
|  |   |  |                     |   |             |         |  |                        |                  | ed in (i) or   | ٠,        |                                |   |           |   |                             |                                       | 11 g (iii)  | <u> </u>  | L      |
| h                                      |   | Prov   | de th               | e follow  | ıng ı       | nform   | ation a                                | bout th                | e suppo          | orted organ  | ızatıc    | on(s)                          |   |           |   | ····                        |                                       |             |           |        |
|  |   |  | ne of si<br>rganiza | ipported<br>tion  |             |         | (iı) EIN                               |                        | (desc            | pe of organizations of the period on lines to the period on lines to the period of the | 1.9<br>on | organia<br>column (<br>your go | Is the<br>zation in<br>(i) listed in<br>overning<br>ment? | the organ | you notify<br>nization in<br>in (i) of<br>upport? | organiz<br>colui<br>organiz | Is the ration in min (i) ed in the S? | (viı) Amou  | nt of sup | port   |
|  |   |  |                     |   |             |         |  |                        | <u></u>          |  |           | Yes                            | No  | Yes       | No  | Yes                         | No                                    |             |           |        |
|  |   |  |                     |   | T           |         |  |                        |                  |  |           |                                |   |           |   |                             |                                       |             |           |        |
| (A)                                    |   |  |                     |   |             |         |  |                        |                  |  |           |                                |   |           |   |                             |                                       |             |           |        |
| (B)                                    |   |  |                     |   |             |         |  |                        |                  |  |           |                                |   |           |   |                             |                                       |             |           |        |
| ــــــــــــــــــــــــــــــــــــــ |   |  |                     |   | _           |         |  | -                      |                  |  |           |                                |   | <u> </u>  |   |                             |                                       |             |           |        |
| (C)                                    |   |  |                     |   | $\perp$     |         |  |                        |                  |  |           | <u> </u>                       | ļ   |           |   |                             |                                       |             |           |        |
| (D)                                    |   |  |                     |   |             |         |  |                        |                  |  |           |                                |   |           |   |                             |                                       |             |           |        |
|  |   |  |                     |   |             |         |  |                        |                  |  |           |                                |   |           |   |                             |                                       | _           |           |        |
| <u>(E)</u>                             |   |  | <del></del>         |   | ╁           |         | ······································ | -, -                   |                  | ;  |           |                                |   | , *       | , ·   |                             | , 2                                   | <del></del> |           |        |
| Total                                  |   |  |                     |   | 丄           |         | <u>.</u>                               | <u>,</u>               | ـــنـــ          |  |           | ,                              |   | ٠,,       | لِـــا  |                             | ا                                     | 200         |           |        |

## 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<br>begi | ndar year (or fiscal year<br>nning in) ►   | (a) 2006                                 | <b>(b)</b> 2007  | (c) 2008                               | <b>(d)</b> 2009                       | <b>(e)</b> 2010           | (f) Total         |
| 1            | Gifts, grants, contributions, and membership fees received (Do not include 'unusual grants ')  | 513,581.                                 | 562,339.   | 416,707.                               | 847,895.                              | 324,657.                  | 2,665,179.        |
|              | Tax revenues levied for the<br>organization's benefit and<br>either paid to it or expended<br>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   | 513,581.                                 | 562,339.   | 416,707.                               | 847,895.                              | 324,657.                  | 2,665,179.        |
| 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)  |  |  |  |                                       |                           | 1,515,458.        |
| 6            | Public support. Subtract line 5 from line 4  |  |  |  | · · · · · · · · · · · · · · · · · · · |                           | 1,149,721.        |
| Sec          | tion B. Total Support  | -  |  |  |                                       |                           |                   |
|              | ndar year (or fiscal year<br>nning in) ►   | (a) 2006                                 | <b>(b)</b> 2007  | <b>(c)</b> 2008                        | <b>(d)</b> 2009                       | <b>(e)</b> 2010           | (f) Total         |
| 7            | Amounts from line 4  | 513,581.                                 | 562,339.   | 416,707.                               | 847,895.                              | 324,657.                  | 2,665,179.        |
| 8            | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources   | 3,828.                                   | 11,660.  | 4,465.                                 | 794.                                  | 758.                      | 21,505.           |
| 9            | Net income from unrelated<br>business activities, whether or<br>not the business is regularly<br>carried on  |  |  |  |                                       |                           | 0.                |
| 10           | Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) See Part IV   |  |  |  |                                       | 13,639.                   | 13,639.           |
| 11           | Total support. Add lines 7 through 10  |  | ا<br>المعادلة المعادلة ا |  | ·                                     |                           | 2,700,323.        |
| 12           | Gross receipts from related activ  | ities, etc (see inst                     | tructions)   |  |                                       | 12                        | 294,258.          |
| 13           | 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 Pul   |  | · ·  |  |                                       | 1 1                       |                   |
|              | Public support percentage for 20   |  | •  | e 11, column (f)).                     |                                       | 14                        | 42.6%             |
|              | Public support percentage from 2 33-1/3% support test — 2010. If t   | •  | •  | oox on line 13, and                    | d the line 14 is 33                   | 15  <br>3-1/3% or more. c | 39.0%             |
|              | and stop here. The organization  | qualifies as a pub                       | licly supported or   | ganization                             |                                       |                           | X                 |
| b            | 33-1/3% support test — 2009. If t<br>and stop here. The organization   | he organization di<br>qualifies as a pub | id not check a boo<br>licly supported or   | x on line 13 or 16a<br>ganization      | a, and line 15 is 3                   | 33-1/3% or more,          | check this box    |
| 17 a         | 17a 10%-facts-and-circumstances test — 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.   |  |  |  |                                       |                           |                   |
|              | b 10%-facts-and-circumstances test — 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization |  |  |  |                                       |                           |                   |
|              | Private foundation. If the organiz   | zation did not chec                      | ck a box on line 1   | 3, 16a, 16b, 17a,                      |                                       | •                         |                   |
| BAA          |  |  |  |  | Scr                                   | ieuule 🗚 (Form 99         | 0 or 990-EZ) 2010 |

## Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

| Sec           | tion A. Public Support   | , ,                                    |   | <u> </u>   | ·   | <del> </del>                               |                     |
|---------------|--|--|---|--|---|--|---------------------|
|               | idar year (or fiscal yr beginning in)  | (a) 2006                               | <b>(b)</b> 2007                                 | (c) 2008   | (d) 2009                                      | <b>(e)</b> 2010                            | (f) Total           |
|               | Gifts, grants, contributions<br>and membership fees<br>received (Do not include<br>any 'unusual grants')   | (1)                                    |   |  |   | (7,000                                     | V                   |
| 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   |  |   |  |   |  |                     |
| <b>4</b><br>5 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  |  |   |  |   |  |                     |
| 5             | The value of services or facilities furnished by a governmental unit to the organization without charge  |  |   |  |   |  |                     |
|               | Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons  |  |   |  |   |  |                     |
| ł             | Amounts included on lines 2<br>and 3 received from other than<br>disqualified persons that<br>exceed the greater of \$5,000 or<br>1% of the amount on line 13<br>for the year  |  |   | -  |   |  |                     |
| (             | : Add lines 7a and 7b  |  |   |  |   |  |                     |
|               | Public support (Subtract line 7c from line 6)  | ř                                      |   | -  |   |  |                     |
| Sec           | tion B. Total Support  |  | T   | <del>,                                    </del> | , ,   |  |                     |
| Calen         | dar year (or fiscal yr beginning in)►  | (a) 2006                               | <b>(b)</b> 2007                                 | (c) 2008   | (d) 2009                                      | <b>(e)</b> 2010                            | (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)  |  |   |  |   |  |                     |
|               | First five years. If the Form 990 organization, check this box and   |  |   | nd, third, fourth, c                             | or fifth tax year as                          | a section 501(c)(3)                        | ▶ □                 |
|               | tion C. Computation of Pub   | •                                      |   |  |   |  |                     |
|               | Public support percentage for 20   | • •                                    | •         | ie 13, column (f))                               | 1   | 15   | %                   |
|               | Public support percentage from 2   |  |   | ·  | <del></del>                                   | 16   | %                   |
|               | tion D. Computation of Inve  |  |   |  |   |  |                     |
| 17            | Investment income percentage for   | or <b>2010</b> (line 10c,              | column (f) divide                               | d by line 13, colu                               | ımn (f))                                      | 17   | <u> </u>            |
|               | Investment income percentage from  |  |   |  |   | 18   | %                   |
|               | <b>33-1/3% support tests</b> – <b>2010.</b> If is not more than 33-1/3%, check   | this box and stop                      | <b>here.</b> The organ                          | ization qualifies a                              | as a publicly suppo                           | rted organization                          | ▶ 📙                 |
| b             | <b>33-1/3% support tests</b> – <b>2009.</b> If line 18 is not more than 33-1/3%,   | tne organization<br>, check this box a | aid not check a bi<br>ind <b>stop here.</b> The | ox on line 14 or l<br>e organization qu          | ine 19a, and line 1<br>ialifies as a publicly | ь is more than 33-1<br>/ supported organiz | /3%, and<br>ation ► |
| 20            | Private foundation. If the organiz   | ation did not che                      | ck a box on line 1                              | 4, 19a, or 19b, c                                | heck this box and                             | see instructions                           | ►□                  |

| Schedule F | (FOITH 990 OF 990-                                    | EZ) 2010 CEIT                                   | er for filt                         | Id WOIId OI                      | ganizing                         | 52-1211                                | .059 Page 4                    |
|------------|---|---|-------------------------------------|----------------------------------|----------------------------------|--|--------------------------------|
| Part IV    | Supplemental<br>Part II, line 17a<br>(See instruction | <b>Information.</b> C<br>a or 17b; and P<br>ns) | omplete this p<br>Part III, line 12 | part to provide<br>. Also comple | the explanation te this part for | ons required by P<br>any additional in | art II, line 10;<br>formation. |
|            | (See Instruction                                      | 113).   |                                     |                                  |                                  | ·                                      |                                |
|            |   |   |                                     |                                  |                                  |  |                                |
|            |   |   |                                     |                                  |                                  |  |                                |
|            |   |   |                                     |                                  |                                  |  |                                |
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|            |   |   |                                     |                                  |                                  | - <del></del>                          |                                |
|            |   |   |                                     |                                  |                                  |  |                                |
|            |   |   |                                     |                                  |                                  |  |                                |
|            | . – – – – – –   |   |                                     |                                  |                                  |  |                                |
|            |   |   |                                     | <del>-</del>                     |                                  |  |                                |
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#### SCHÈDULE 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.

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

OMB No 1545 0047

2010

Open to Public Inspection

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- 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), then

| •         | Section 501(c)(4), (5), or (6) or                            | organizations Complete Part III   |  |   |   |
|-----------|--|---|--|---|---|
| Name      | e of organization  |   |  | Employer identific  | cation number   |
| <u>Ce</u> | nter for Third Worl  | ld Organizing   |  | 52-12110  |   |
|           |  | rganization is exempt under sect  |  |   | ization.  |
|           | ·  | organization's direct and indirect political  | campaign activities in                     |   |   |
| 2         |  |   |  | ▶ :   | \$  |
|           | Volunteer hours  |   | 501(-)(2)                                  | <u> </u>  | <del></del>   |
|           |  | rganization is exempt under secti   |  |   | <u> </u>  |
|           | •  | cise tax incurred by the organization under   |  | ► <u>\$</u><br>► <u>\$</u>  | ' <del></del>   |
| 2         |  | cise tax incurred by organization managers<br>a section 4955 tax, did it file Form 4720 fo  |  | -   | ' <del></del>   |
| 3<br>A    | a Was a correction made?                                     | a section 4505 tax, did it life Form 4720 to  | r tilis year?                              |   | Yes No  |
|           | b If 'Yes,' describe in Part IV.                             |   |  |   | □ res □ no  |
|           |  | rganization is exempt under secti   | on 501(c), excep                           | t section 501(c)(3)   |   |
|           |  | pended by the filing organization for section   |  |   |   |
|           | -  | g organization's funds contributed to other   | -  |   |   |
| _         | function activities  | ng organization's funds contributed to other  | organizations for set                      | stion 527 exempt ► \$   | \$  |
| 3         | Total exempt function exper                                  | nditures Add lines 1 and 2 Enter here and   | on Form 1120-POL,                          | <b>▶</b> \$   |   |
| 4         | Did the filing organization fil                              | e Form 1120-POL for this year?  |  |   | Yes No  |
| 5         | organization made payments<br>amount of political contributi | and employer identification number (EIN)<br>s For each organization listed, enter the a<br>lons received that were promptly and direct<br>al action committee (PAC) If additional spi | mount paid from the thy delivered to a sep | filing organization's fun<br>arate political organizat            | ds. Also enter the tion, such as a senarate   |
|           | (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

| . Schedule C (Form 990 or 990-EZ) 20                                 | MnCenter for                            | Third World Orga  | nizina                   | 52-121                              | 11050 Page                              |
|--|---|---|--------------------------|-------------------------------------|---|
|  | the organization                        | on is exempt under se   |                          |                                     |   |
|  | • | longs to an affiliated group  | . **                     |                                     |   |
| B Check ► If the fill  | ing organization ch                     | ecked box A and 'limited co   | ontrol' provisions apply |                                     |   |
| (The term  | Limits on Lobb<br>'expenditures' me     | ying Expenditures<br>ans amounts paid or incur  | red.)                    | (a) Filing organization's totals    | (b) Affiliated group totals             |
| 1a Total lobbying expendit   | tures to influence p                    | ublic opinion (grass roots l  | obbyina)                 | -                                   |   |
|  | -                                       | legislative body (direct lob  | , .,                     |                                     |   |
| c Total lobbying expendit  |   | •   | -757                     | 0.                                  | 0.                                      |
| <b>d</b> Other exempt purpose  | •                                       | ,   |                          |                                     | <u> </u>                                |
| e Total exempt purpose of  | expenditures (add l                     | ines 1c and 1d)   |                          | 0.                                  | 0.                                      |
| f Lobbying nontaxable ar both columns.                               | mount Enter the ar                      | mount from the following ta   | able in                  |                                     |   |
| If the amount on line 1e, co   | lumn (a) or (b) is.                     | The lobbying nontaxable   | amount is                |                                     | )                                       |
| Not over \$500,000   |   | 20% of the amount on line 1e  |                          |                                     |   |
| Over \$500,000 but not over \$1                                      | ,000,000                                | \$100,000 plus 15% of the excess  | s over \$500,000.        |                                     |   |
| Over \$1,000,000 but not over \$                                     | \$1,500,000                             | \$175,000 plus 10% of the excess  |                          |                                     | , |
| Over \$1,500,000 but not over \$                                     | \$225,000 plus 5% of the excess         | over \$1,500,000.   |                          | . ,                                 |   |
| Over \$17,000,000  | ,                                       | ٠ ,   |                          |                                     |   |
| g Grassroots nontaxable  | amount (enter 25%                       | of line 1f)   |                          | 0.                                  | 0.                                      |
| h Subtract line 1g from lii  | ne 1a If zero or les                    | ss, enter -0-   |                          | 0.                                  | 0.                                      |
| i Subtract line 1f from lin  | ne 1c If zero or les                    | s, enter -0-  |                          | 0.                                  | 0.                                      |
| j If there is an amount of<br>section 4911 tax for this              | ther than zero on e<br>s year?          | ither line 1h or line 1i, did t   | the organization file Fo | rm 4720 reporting                   | ☐Yes ☐No                                |
| (Som   | e organizations the                     | 4-Year Averaging Period I<br>at made a section 501(h) el<br>ns below. See the instructi | lection do not have to   | complete all of the five<br>gh 2f.) |   |
|  | Lob                                     | bying Expenditures During   | 4-Year Averaging Per     | iod                                 |   |
| Calendar year (or fiscal year beginning in)                          | (a) 2007                                | <b>(b)</b> 2008   | (c) 2009                 | ( <b>d)</b> 2010                    | (e) Total                               |
| 2a Lobbying non-taxable amount                                       |   |   |                          |                                     | 0.                                      |
| <b>b</b> Lobbying ceiling<br>amount (150% of line<br>2a, column (e)) |   | , 10 mm   |                          |                                     | 0.                                      |
| c Total lobbying expenditures  |   |   |                          |                                     | 0.                                      |
| <b>d</b> Grassroots nontaxable amount                                |   |   |                          |                                     | 0.                                      |

f Grassroots lobbying expenditures

BAA

e Grassroots ceiling amount (150% of line 2d, column (e))

Schedule C (Form 990 or 990-EZ) 2010

0.

0.

| Schedule C (Form 990 or 990-EZ) 2010 Center for Third World Organizing  [Part II-B] Complete if the organization is exempt under section 501(c)(3) and has No (election under section 501(h)).                                    |                               | -12110<br>d Form |             |
|---|-------------------------------|------------------|-------------|
| (election under section 501(n)).  | (2                            | 9)               | (b)         |
|   | Yes                           | No               | Amount      |
| 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>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? <b>c</b> Media advertisements?  |                               |                  |             |
|   | r                             |                  |             |
| d Mailings to members, legislators, or the public?  | -                             |                  | <del></del> |
| e Publications, or published or broadcast statements?   | $\vdash$                      |                  |             |
| f Grants to other organizations for lobbying purposes?  |                               |                  |             |
| g Direct contact with legislators, their staffs, government officials, or a legislative body?   | L                             |                  |             |
| h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?   |                               |                  |             |
| i Other activities? If 'Yes,' describe in Part IV   | L                             |                  |             |
| j 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>b</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  | 1 1                           |                  |             |
| d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  | 1 1                           | <u> </u>         | * **        |
| Part III-A Complete if the organization is exempt under section 501(c)(4), section 50 section 501(c)(6).  | 1(c)(5),                      | or .             |             |
|   |                               |                  | Yes No      |
| 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           |
| Part III-B Complete if the organization is exempt under section 501(c)(4), section 50 section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered 'No' OR if P is answered 'Yes.'  | 1(c)(5),<br>art III- <i>l</i> | or<br>A, line :  | 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).  |                               | 4.2. S           |             |
| a Current year  |                               | 2a               |             |
| <b>b</b> Carryover from last year   | ſ                             | 2b               |             |
| c Total   | Ī                             | 2c               |             |
| 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues   | ļ                             | 3                |             |
| 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded the organization agree to carryover to the reasonable estimate of nondeductible lobbying and poexpenditure next year? | ss .                          | 4                |             |
| 5 Taxable amount of lobbying and political expenditures (see instructions)  | <u> </u>                      | 5                |             |
| Part IV Supplemental Information  | <u>-</u>                      |                  | <del></del> |
| Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5, a   | and David                     | U.D. I           | . 1.        |
| Also, complete this part for any additional information   | ina Fart                      | II-B, IINE       | : 11        |
|   |                               |                  |             |
|   |                               |                  |             |
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|   |                               |                  |             |

| Schedule C (Form 990 or 990-EZ) 2010 Center for Third world Organizing | 52-1211059 | Page 4 |
|--|------------|--------|
| Part IV Supplemental Information (continued)                           |            |        |
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# (Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Financial Statements**

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 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 Center for Third World Organizing 52-1211059 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) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 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 a Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b 2c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > 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 violations, and enforcement of the conservation easements it holds? No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section  $170(h)(4)(B)(ii)^7$ 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 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b if the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 ▶\$ ►\$ (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1 ▶\$ b Assets included in Form 990, Part X

| •  |  |  |   |                          |                  |          |
|--|--|--|---|--------------------------|------------------|----------|
| ·<br>Schedule <b>D</b> (Form 990) 2010 Cente                           | er for Third W                                   | World Organiz                                  | inα   | 52-121                   | 1059             | Page 2   |
| Part III Organizations Mainta  |  |  |   |                          |                  |          |
| 3 Using the organization's acquisiti items (check all that apply)      | on, accession, and o                             | ther records, check                            | any of the following                            | that are a significant u | ise of its colle | ction    |
| a Public exhibition  |  | d Loan or ex                                   | change programs                                 |                          |                  |          |
| b Scholarly research   |  | e Other  |   |                          |                  |          |
| c Preservation for future gener  | ations   |  |   |                          |                  |          |
| 4 Provide a description of the orga<br>Part XIV                        | nization's collections                           | and explain how the                            | y further the organiz                           | zation's exempt purpos   | se in            |          |
| 5 During the year, did the organiza assets to be sold to raise funds r | tion solicit or receive<br>ather than to be mail | donations of art, his<br>ntained as part of th | torical treasures, or<br>e organization's colle | other similar<br>ection? | Yes              | No       |
| Part IV Escrow and Custodia 9, or reported an amo                      | Arrangements.<br>unt on Form 990.                | Complete if organical Part X, line 21.         | inization answer                                | ed 'Yes' to Form 9       | 90, Part IV      | , line   |
| 1a Is the organization an agent, trus                                  |  |  | contributions or othe                           | ur assets not            | <del></del>      |          |
| included on Form 990, Part X?  | itee, custodian, or ou                           | ier intermediary for                           | contributions of othe                           | ir assets flot           | Yes              | No       |
| <b>b</b> If 'Yes,' explain the arrangement                             | in Part XIV and com                              | plete the following t                          | able  |                          |                  |          |
|  |  |  |   |                          | Amount           |          |
| c Beginning balance  |  |  |   | 1c                       |                  |          |
| <b>d</b> Additions during the year                                     |  |  |   | 1d                       |                  |          |
| <ul> <li>Distributions during the year</li> </ul>                      |  |  |   | 1 e                      |                  |          |
| f Ending balance   |  |  |   | 1f                       |                  |          |
| 2a Did the organization include an a                                   | mount on Form 990,                               | Part X, line 21?                               |   |                          | Yes              | No       |
| b If 'Yes,' explain the arrangement                                    | ın Part XIV                                      |  |   |                          |                  |          |
| Part V Endowment Funds. Co   | mplete if the org                                | anization answe                                | red 'Yes' to Forn                               | n 990, Part IV, line     | <del>:</del> 10. |          |
|  | (a) Current year                                 | (b) Prior year                                 | (c) Two years back                              | (d) Three years back     | (e) Four yea     | irs back |
| 1 a Beginning of year balance.   |  |  |   |                          |                  |          |
| <b>b</b> Contributions   |  |  |   | ` .                      |                  |          |
| c Net investment earnings, gains, and losses                           |  |  |   |                          |                  |          |
| d Grants or scholarships   |  |  |   |                          |                  | 7        |
| Other expenditures for facilities and programs                         |  |  |   |                          |                  |          |
| f Administrative expenses  |  |  |   |                          |                  |          |
| g End of year balance  |  |  |   | <u>'</u>                 | ,                | , , ,    |
| 2 Provide the estimated percentage                                     | e of the year end bala                           | ance held as                                   |   |                          | ,                |          |
| a Board designated or quasi-endow                                      | vment ►  | %  |   |                          |                  |          |
| b Permanent endowment ►  | %  |  |   |                          |                  |          |
| c Term endowment ▶   | %  |  |   |                          |                  |          |
| 3a Are there endowment funds not a organization by                     | n the possession of t                            | he organization that                           | are held and admin                              | stered for the           | Yes              | No       |
| (i) unrelated organizations  |  |  |   |                          | 3a(i)            | 1        |
| (ii) related organizations   |  |  |   |                          | 3a(ii)           |          |
| <b>b</b> If 'Yes' to 3a(II), are the related of                        | rganizations listed as                           | required on Schedu                             | ıle R?  |                          | 3b               | <u> </u> |
| 4 Describe in Part XIV the intended                                    | •  | •  |   |                          | <del></del>      |          |
| Part VI Land, Buildings, and E   |  |  |   |                          |                  |          |
| Description of investment  | · · · · · ·                                      |  | ) Cost or other                                 | (c) Accumulated          | (d) Book va      | alue     |

Description of investment

(a) Cost or other basis (investment)

(b) Cost or other basis (other)

(c) Accumulated depreciation

(d) Book value

(d) Book value

(e) Book value

(d) Book value

(d) Book value

(e) Cost or other basis (other)

(f) Cost or other basis (other)

(h) Cost or other basis

e Other 91, 256.

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

Schedule **D** (Form 990) 2010

263,659.

| Schedule D (Form 990) 2010 Center for Infre   |  |  | 52-1211059 Page  |
|---|--|--|--|
| Part VII Investments-Other Securities. See  |  |  |  |
| (a) Description of security or category (including name of security)  | (b) Book value                                   | (c) M  | Method of valuation<br>end-of-year market value  |
| (1) Financial derivatives   |  | 0031 01 6  | nu-or-year market value  |
| (2) Closely-held equity interests   |  |  |  |
| (3) Other   |  |  | <del>*************************************</del>   |
| (A)   |  |  |  |
| (B)   |  |  |  |
| (C)   |  |  |  |
| (D)   |  |  |  |
| <u>(E)</u>  |  |  |  |
| <u>(F)</u>  |  |  |  |
| (G)   | · <del></del>                                    |  |  |
| (H)   |  |  |  |
| (I)   |  |  | ·····  |
| Total. (Column (b) must equal Form 990 Part X, column (B) line 12)  Part VIII Investments—Program Related. (See | o Form 990 Port V                                |  |  |
| (a) Description of investment type  | (b) Book value                                   |  | 1ethod of valuation  |
| (a) Description of investment type  | (b) Book value                                   | Cost or e  | nd-of-year market value  |
| (1)   |  |  |  |
| (2)   |  |  |  |
| (3)   | <u> </u>   |  |  |
| (4)   |  |  |  |
| <u>(5)</u><br>(6)   |  |  | <del></del>  |
| (7)   | <u>-</u>   |  |  |
| (8)   | <del>                                     </del> |  |  |
| (9)   | <u> </u>   |  |  |
| (10)  |  |  | *  |
| Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)  | <b>&gt;</b>                                      | •  |  |
| Part IX Other Assets. (See Form 990, Part )   |  | <del></del>  |  |
| · · · · · · · · · · · · · · · · · · ·   | Description                                      | <del></del>  | (b) Book value   |
| (1)   |  |  |  |
| (2)   | <del></del>                                      |  | <del></del>  |
| (4)   |  | <del></del>  |  |
| (5)   | <del></del>                                      |  |  |
| (6)   |  |  |  |
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| (10)  | <del></del>                                      | ·····  |  |
| Total. (Column (b) must equal Form 990, Part X, column  |  |  | <u> </u>   |
| Part X Other Liabilities. (See Form 990, Pa  (a) Description of liability                                       |  |  |  |
| (1) Federal income taxes  | (b) Amount                                       | ┥`   |  |
| (2)   |  | ,  |  |
| (3)   |  | •  |  |
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| Total. (Column (b) must equal Form 990, Part X, column (B) line 25)   |  | The state of the s | Live La River  |

| Schedule D (Form 990) 2010 Center for Third World Organizing   | 52  | 2-1211059                            | Page 4        |
|--|---|--------------------------------------|---------------|
| Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Finance  |   | - :-                                 |               |
| 1 Total revenue (Form 990, Part VIII,column (A), line 12)  |   |                                      | 424,025.      |
| 2 Total expenses (Form 990, Part IX, column (A), line 25)  |   |                                      | 742,214.      |
| 3 Excess or (deficit) for the year Subtract line 2 from line 1   |   |                                      | -318,189.     |
| 4 Net unrealized gains (losses) on investments   |   |                                      |               |
| 5 Donated services and use of facilities   |   |                                      |               |
| 6 Investment expenses  |   |                                      |               |
| 7 Prior period adjustments   |   |                                      |               |
| 8 Other (Describe in Part XIV)   |   |                                      |               |
| 9 Total adjustments (net) Add lines 4 through 8  |   |                                      |               |
| 10 Excess or (deficit) for the year per audited financial statements. Combine lines 3  |   |                                      | -318,189.     |
| Part XII   Reconciliation of Revenue per Audited Financial Statement   | ts With Revenue per R   | eturn                                |               |
| 1 Total revenue, gains, and other support per audited financial statements   |   | 1                                    | 424,025.      |
| 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12   |   | `-                                   |               |
| a Net unrealized gains on investments  | 2a  | 1.                                   |               |
| <b>b</b> Donated services and use of facilities  | 2b  | <u>]</u> `                           |               |
| c Recoveries of prior year grants  | 2 c   | ]                                    |               |
| d Other (Describe in Part XIV)   | 2d  | ] <del>(</del>                       |               |
| e Add lines 2a through 2d  |   | 2e                                   |               |
| 3 Subtract line 2e from line 1   |   | 3                                    | 424,025.      |
| 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1  |   | 1                                    |               |
| a Investments expenses not included on Form 990, Part VIII, line 7b  | 4a  | 1 1                                  |               |
| <b>b</b> Other (Describe in Part XIV)  | 4b  |                                      |               |
| c Add lines 4a and 4b  |   | 4c                                   |               |
| 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12).   |   | 5                                    | 424,025.      |
| Part XIII   Reconciliation of Expenses per Audited Financial Statement   | nts With Expenses per   | Return                               |               |
| 1 Total expenses and losses per audited financial statements   |   | 1                                    | 742,214.      |
| 2 Amounts included on line 1 but not on Form 990, Part IX, line 25   | 1   | ***                                  |               |
| a Donated services and use of facilities   | 2a  | 1000<br>1000                         |               |
| <b>b</b> Prior year adjustments  | 2b  | No.                                  |               |
| c Other losses   | 2c  | 1, 1                                 |               |
| d Other (Describe in Part XIV)   | 2d  | * <b>***</b> **                      |               |
| e Add lines 2a through 2d  |   | 2e                                   |               |
| 3 Subtract line 2e from line 1   | 1   | 3                                    | 742,214.      |
| 4 Amounts included on Form 990, Part IX, line 25, but not on line 1:   |   | 1                                    |               |
| a Investments expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV )  | 4a<br>4b  |                                      |               |
| c Add lines <b>4a</b> and <b>4b</b>  | 40  | 4c                                   |               |
| 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)   |   | 5                                    | 742,214.      |
| Part XIV Supplemental Information  |   | 1 - 1                                | ,             |
| Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, line any additional information | rt III, lines 1a and 4, Part IV<br>es 2d and 4b Also complete | , lines 1b and ;<br>e this part to p | 2b,<br>rovide |
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Schedule **D** (Form 990) 2010

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| Schedule D (Form 990) 2010 Center for finite world Organizing | 27-1711023 | Page 5 |
|---|------------|--------|
| Part XIV   Supplemental Information (continued)               |            |        |
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#### SCHEDULE O (Form 990 or 990-EZ)

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

p provide information for responses to specific questions on

Department of the Treasury Internal Revenue Service

Center for Third World Organizing

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.

Open to Public Inspection

Employer identification number

52-1211059

OMB No 1545-0047

| Form 990, Part III, Line 2 - New Services  |
|--|
| The Brown Boi Project works to build the leadership skills and economic              |
| self-sufficiency of young womyn of color who are masculine-of-center and young men   |
| of color who are trans/straight/queer. The project aims to help these young womyn    |
| and men to use their own skills and life experiences to build collective power       |
| within their communities. It also seeks to promote cross-racial alliance building    |
| within_communities_of_color_and_to_reduce_the_homophobia_and_violence_that_young     |
| people_of_color_who_don't_conform_to_traditional_gender_norms_experience_from_their  |
| own_communities Through_leadership_development, political_education,_exposure_to     |
| community organizing, and the development of a personal life plan for each of our    |
| leaders, we offer a provocative reframing of masculinity and privilege that improves |
| the lives of both individuals and their communities.                                 |
| Form 990, Part III, Line 4a - Program Service Accomplishments                        |
| Grassroots Organizing: CTWO's current grassroots organizing project is the Black     |
| Organizing Project (BOP). It is a community-based organization designed to win real  |
| systematic change, build economic power, and create alternative models and           |
| institutions that will advance racial and economic justice. BOP works through a      |
| people-based approach to organizing as opposed to an issue-based approach.           |
| Participants have become involved, taken ownership of the project, and begun         |
| exponentially growing the network of support in the community. In 2010 staff and     |
| members made over 2000 contacts in the community. From these, we have developed an   |
| active base of 739 community residents. Many community participants have attended    |
| CTWO training programs to develop their leadership and organizing skills. BOP        |
| participants engaged in a participatory research process around jobs and education   |
| and around public-policy issues such as criminalization and local-hire practices.    |
| These community members but together events and cultural celebrations, developed a   |

| Name of the organization  Center for Third World Organizing              | Employer identification number 52-1211059 |
|--|---|
| Form 990, Part III, Line 4a - Program Service Accomplishments            |   |
| newsletter, started a political-education book club, and held            | community workshops on                    |
| institutional racism and internalized oppression.                        |   |
| Form 990, Part III, Line 4b - Program Service Accomplishments            |   |
| Training and Organizer Development: CTWO's three organizer-de            | velopment tracks                          |
| support community organizers at each level of their activism.            | Over the past 30                          |
| years, we have developed thousands of future leaders while dir           | ectly building the                        |
| campaign and leadership capacity of hundreds of community-base           | d organizations:                          |
| Through the Community Action Training program (CAT), CTWO ha             | s provided more than                      |
| 3,750 new organizers and community residents with the basic sk           | ills to effectively                       |
| carry out their base-building workThrough the Movement Ac                | tivist Apprenticeship                     |
| Program (MAAP), the nation's flagship training and internship            | placement program for                     |
| organizers of color, CTWO has brought 410 individuals into com           | nunity organizing.                        |
| Through the newer California Lead Organizers Institute (CLOI             | , CTWO has built the                      |
| leadership skills and collaborative networks of 97 key lead organization | ganizers. These                           |
| training programs are stepping-stones for generations of organ           | izers as they enter                       |
| into and progress in the field of community organizing. In 202           | 10 we were pleased                        |
| that the majority of participants in our core training programs          | were grassroots and                       |
| low-income leaders. Both CAT and MAAP create a fundamental pip           | peline for low-income                     |
| people, people of color, and students into work that matters to          | their communities.                        |
| Most of these participants will go on to be change agents in a           | variety of sectors,                       |
| including education, public policy, media, and healthcare. CLC           | OI provides advanced                      |
| development and mentoring for those who have been in the field           | of social and                             |
| economic justice for several years.                                      |   |
| Form 990, Part III, Line 4d - Other Program Services Description         |   |
| Strategic and Organizational Consulting: The consulting-service          | es program provides                       |
| customized training and consulting services for nonprofit organ          | izations,                                 |

ARC ended at the end of 2010.

ARC's employee performed many of the duties of the CFO for CTWO. The contract with

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| 2010 Schedule A, Part IV - Supplemental Information |             |                                   |      |      |       | Page 5 |            |      |        |
|---|-------------|-----------------------------------|------|------|-------|--------|------------|------|--------|
| lient CTWO  |             | Center for Third World Organizing |      |      |       |        | 52-1211059 |      |        |
| 7/26/11   |             |                                   |      |      |       |        |            |      | 02 32P |
| Part II, Line 10 - O                                | ther Income |                                   |      |      |       |        |            |      |        |
| Nature and Sou                                      | rce         | 2010                              | 2009 | 2008 |       | 2007   |            | 2006 |        |
| Miscellaneous<br>Work study rei                     | mburcomont  | 2,456.                            |      |      |       |        |            |      |        |
| work study lei                                      | Total \$    | 11,183.<br>13,639.                | 0.   | \$   | 0. \$ | 0      | . \$       |      | 0.     |
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## Form **8868** (Rev January 2011)

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

File a separate application for each return.

OMB No 1545-1709

Form 8868 (Rev 1-2011)

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Charities & Nonprofits Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns Employer identification number Name of exempt organization Type or print 52-1211059 Center for Third World Organizing File by the due date for Number, street, and room or suite number. If a P.O. box, see instructions filing your return See instructions 1218 East 21st Street City, town or post office, state, and ZIP code. For a foreign address, see instructions Oakland, CA 94606 03 Enter the Return code for the return that this application is for (file a separate application for each return) Application is For Application Is For Return Return Code Code 01 Form 990-T (corporation) 07 Form 990 Form 1041-A 08 02 Form 990-BL Form 4720 03 09 Form 990-EZ 10 04 Form 5227 Form 990-PF 05 Form 6069 11 Form 990-T (section 401(a) or 408(a) trust) 12 Form 990-T (trust other than above) Form 8870 ● The books are in the care of ▶ Sonia Pena FAX No ▶ • If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box 🕨 📗 If it is for part of the group, check this box 🕨 📗 and attach a list with the names and EINs of all members the extension is for 1 | request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 8/15 , 20 11 , to file the exempt organization return for the organization named above The extension is for the organization's return for |X| calendar year 20 10 or tax year beginning \_\_\_\_\_, 20 \_\_\_, and ending \_\_\_\_\_, 20 \_\_\_\_, 2 If the tax year entered in line 1 is for less than 12 months, check reason | Initial return Change in accounting period 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions 3a|\$ b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made include any prior year overpayment allowed as a credit 3b|\$ c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions 0. Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

FIFZ0501L 11/15/10

BAA For Paperwork Reduction Act Notice, see Instructions.