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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2010

Open to Public Inspection

A For the 2010 calendar year, or tax year beginning JUL 1, 2010 **and ending** JUN 30, 2011

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
EAST HARLEM TUTORIAL PROGAM, INC.

Doing Business As

Number and street (or P O box if mail is not delivered to street address) — Room/suite
2050 SECOND AVENUE

City or town, state or country, and ZIP + 4
NEW YORK, NY 10029

F Name and address of principal officer: JEFFREY GINSBURG
SAME AS C ABOVE

D Employer identification number
23-7439789

E Telephone number
(212) 831-0650

G Gross receipts $ 4,344,628.

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.EHTP.ORG

K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1958 **M** State of legal domicile NY

Part I Summary

1 Briefly describe the organization's mission or most significant activities: THE FOLLOWING LIST OF ACHIEVEMENTS DEMONSTRATE THE VITAL IMPACT EHTP CONTINUES TO HAVE ON

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	24
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	24
5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	66
6	Total number of volunteers (estimate if necessary)	6	154
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	1,800,837.	3,903,023.
9	Program service revenue (Part VIII, line 2g)	0.	0.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	84,723.	<51,397.>
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	463,350.	<37,307.>
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,348,910.	3,814,319.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	59,655.
14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,331,237.	1,738,901.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 211,798.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	794,501.	1,008,696.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,125,738.	2,807,252.
19	Revenue less expenses. Subtract line 18 from line 12	223,172.	1,007,067.

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	5,780,027.	6,916,597.
21	Total liabilities (Part X, line 26)	175,650.	134,569.
22	Net assets or fund balances. Subtract line 21 from line 20	5,604,377.	6,782,028.

SCANNED JUN 18 2012

RECEIVED
MAY 10 2012
IRS-SC
OGDEN, UT

Part II Signature Block

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

Sign Here

▶ Signature of officer — Date 5/14/12

▶ JEFFREY GINSBURG, EXECUTIVE DIRECTOR
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: CHRISTOPHER D. PETERMANN — Preparer's signature — Date 5/14/12 — Check ☐ if self-employed — PTIN

Firm's name ▶ O'CONNOR DAVIES MUNNS & DOBBINS, LLP — Firm's EIN ▶

Firm's address ▶ 60 EAST 42ND STREET, 36TH FL
NEW YORK, NY 10165-3698 — Phone no (212)286-2600

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

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

5-17 9

Part III 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:
FOUNDED IN 1958, EAST HARLEM TUTORIAL PROGRAM PREPARES STUDENTS WITH THE ACADEMIC SKILLS, STRENGTH OF CHARACTER AND EMOTIONAL WELL-BEING TO EXCEL IN HIGH SCHOOL AND COLLEGE, TO LEAD IN THEIR COMMUNITIES AND TO REALIZE THEIR BEST POSSIBLE SELVES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No
If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No
If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 870,330. including grants of $ 23,013.) (Revenue $)
IN ORDER TO HELP YOUNG PEOPLE ACHIEVE THEIR GOALS, EHTP TAKES A COMPREHENSIVE APPROACH TO YOUTH DEVELOPMENT: THE ORGANIZATION FOCUSES ON LENDING INTENSIVE ACADEMIC SUPPORT, BUILDING CHARACTER AND SOCIAL SKILLS, AND INCREASING PARENT INVOLVEMENT IN LEARNING. THIS YEAR, EHTP MADE SEVERAL SIGNIFICANT DECISIONS IN STRATEGY THAT HELP US MAXIMIZE THE IMPACT, EFFICIENCY, AND QUALITY OF THE PROGRAMS WE OFFER TO YOUTH AND FAMILIES LIVING IN EAST HARLEM. THESE CHANGES HAVE LED US TO INCREASE THE NUMBER OF ACADEMIC LEARNING HOURS EVERY STUDENT RECEIVES, RAISE THE QUALIFICATIONS REQUIRED FOR OUR TEACHING STAFF, AND IMPLEMENT A MORE EXTENSIVE, MATRIX-BASED IMPACT ASSESSMENT TOOL.

ALL OF EHTP'S PROGRAMS AND SERVICES ARE OFFERED YEAR-ROUND AND AT NO

4b (Code:) (Expenses $ 1,290,993. including grants of $ 36,642.) (Revenue $)
THE EHTP UNIVERSITY PROGRAM (EHTP-UP) IS A DYNAMIC COLLEGE READINESS PROGRAM FOR MIDDLE SCHOOL AND HIGH SCHOOL STUDENTS. EHTP-UP HIGH SCHOOL PROGRAM INCORPORATES ALL ASPECTS OF COLLEGE PREPARATION AND ADMISSIONS INTO ITS EXECUTION, INCLUDING: HIGH SCHOOL CREDIT ACCUMULATION TRACKING, ENRICHMENT COURSES, REGENTS AND SAT TEST PREPARATION, COLLEGE APPLICATION ASSISTANCE, FINANCIAL AID COORDINATION, AND COUNSELING. IN ADDITION TO ACADEMIC AND COLLEGE PREP SUPPORT, EHTP-UP STUDENTS HAVE ACCESS TO A VARIETY OF ELECTIVES. THESE INCLUDE FILM AND WRITING, STEM AND FIRST ROBOTICS, AND PRE-PRE-MEDICAL EDUCATION. HIGH SCHOOL STUDENTS ALSO HAVE THE OPPORTUNITY TO TAKE ON ROLES AS PAID INTERNS AT EHTP; AS SUCH, THEY GAIN VALUABLE WORK EXPERIENCE BY SUPPORTING THE ORGANIZATION'S TEACHING AND ADMINISTRATIVE

4c (Code:) (Expenses $ 126,897. including grants of $) (Revenue $)
IN JULY 2011, EHTP REINSTATED THE K-5 SUMMER CAMP, WHICH WAS ON A ONE-YEAR HIATUS AND SET UP A SUMMER PROGRAM FOR 6-8TH GRADERS. THIS WAS A STIMULATING SUMMER FOR EHTP'S YOUNG SCHOLARS. THE PROGRAM'S THEME WAS "EXPLORATION," AND THE CURRICULUM INVITED STUDENTS TO VISIT EVERY CORNER OF THE GLOBE THROUGH BOOKS, FIELD TRIPS, AND HANDS-ON PROJECTS. STUDENTS WERE AFFORDED EXCITING EXPERIENCES AND OPPORTUNITIES TO EXPLORE THE WORLD OUTSIDE OF THEIR CLASSROOMS, WHICH WERE INVALUABLE TO THEIR COMPREHENSION AND RETENTION OF SUBJECT MATTER. IN MANY CASES, THE SUMMER CAMP EDUCATIONAL OUTINGS WERE THE FIRST TIME OUR STUDENTS HAD VENTURED OUTSIDE OF THEIR EAST HARLEM NEIGHBORHOOD.

USING THE THEME "EXPLORATION," EACH K-8TH GRADE CLASSROOM WAS

4d Other program services. (Describe in Schedule O.)
(Expenses $ including grants of $) (Revenue $)

4e **Total program service expenses** ▶ 2,288,220.

SEE SCHEDULE O FOR CONTINUATION(S)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		X
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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	X	
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.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		X
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
d	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*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	X	
12a	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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *If "Yes," complete Schedule F, Parts I and IV*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? *If "Yes," complete Schedule F, 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		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17		X
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
20a	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? **Note.** Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

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? *If "Yes," complete Schedule J*	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *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		
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		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *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		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *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		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? *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		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	X	
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2* [X] Yes [ ] 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
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	16		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	66		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file.* (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		X
b	If "Yes," enter the name of the foreign country: ▶ _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		5a		X
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5b		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5c		
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?				
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		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 services provided to the payor?		7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		8		
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*		14b		

Part VI Governance, Management, and Disclosure *For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions*

Check if Schedule O contains a response to any question in this Part VI [X]

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	24		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	24		
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?		2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		X
6	Does the organization have members or stockholders?		6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*		9		X

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?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this is done*	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 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?	16b		

Section C. Disclosure

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

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.

[ ] Own website [X] Another's website [X] Upon request

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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶

JEFFREY GINSBURG, EXECUTIVE DIRECTOR - (212) 831-0650
2050 SECOND AVENUE, NEW YORK, NY 10029

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

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
LAURIE GIDDINS CHAIRMAN	11.00	X		X				0.	0.	0.
LILI LYNTON TREASURER	7.00	X		X				0.	0.	0.
MICHAEL BROWN VICE CHAIR	6.00	X		X				0.	0.	0.
JOAN SOLOTAR VICE CHAIR	5.00	X		X				0.	0.	0.
JUDITH GOLD SECRETARY	5.00	X		X				0.	0.	0.
CANDITA GAUL BOARD MEMBER	5.00	X						0.	0.	0.
MILDRED BAEZ BOARD MEMBER	5.00	X						0.	0.	0.
JOHN BLANEY BOARD MEMBER	5.00	X						0.	0.	0.
K. DON CORNWELL BOARD MEMBER	5.00	X						0.	0.	0.
CAROLINA ESQUENAZI BOARD MEMBER	6.00	X						0.	0.	0.
EVE HALL BOARD MEMBER	5.00	X						0.	0.	0.
STEVE HUTENSKY BOARD MEMBER	5.00	X						0.	0.	0.
MIKI KAGAN BOARD MEMBER	5.00	X						0.	0.	0.
MARY W MACKINTOSH BOARD MEMBER	5.00	X						0.	0.	0.
TARA MURPHY BOARD MEMBER	5.00	X						0.	0.	0.
STEPHEN RABINOWITZ BOARD MEMBER	5.00	X						0.	0.	0.
WILLIAM RAHM BOARD MEMBER	5.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
MARILYN SIMONS BOARD MEMBER	5.00	X						0.	0.	0.
CARLOS MORALES BOARD MEMBER	6.00	X						0.	0.	0.
DAVID VAN PELT BOARD MEMBER	5.00	X						0.	0.	0.
DAVID WALKER BOARD MEMBER	5.00	X						0.	0.	0.
TOM WEBBER BOARD MEMBER	6.00	X						0.	0.	0.
FRANCISCO DIAZ BOARD MEMBER	5.00	X						0.	0.	0.
WILLIAM FRENCH BOARD MEMBER	5.00	X						0.	0.	0.
JEFF GINSBURG EXECUTIVE DIRECTOR	40.00			X				147,437.	0.	14,000.
LAUREN GOLDSTEIN DIRECTOR OF PLANNING & ADMIN.	32.00			X				111,615.	0.	0.
1b Sub-total ▶								259,052.	0.	14,000.
c Total from continuation sheets to Part VII, Section A ▶								0.	0.	0.
d Total (add lines 1b and 1c) ▶								259,052.	0.	14,000.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶ 2

		Yes	No
3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	4	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	5		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶ 0

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	825,839.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	359,073.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	2,718,111.				
	g Noncash contributions included in lines 1a-1f: $						
	h **Total.** Add lines 1a-1f		▶	3,903,023.			
Program Service Revenue		Business Code					
	2a						
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g **Total.** Add lines 2a-2f		▶				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		▶	37,685.			37,685.
	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)		▶				
		(i) Securities	(ii) Other				
	7a Gross amount from sales of assets other than inventory	330,102.					
	b Less: cost or other basis and sales expenses	419,184.					
	c Gain or (loss)	<89,082.>					
	d Net gain or (loss)		▶	<89,082.>			<89,082.>
	8a Gross income from fundraising events (not including $ 825,839. of contributions reported on line 1c). See Part IV, line 18	a	64,350.				
	b Less: direct expenses	b	111,125.				
	c Net income or (loss) from fundraising events		▶	<46,775.>			<46,775.>
	9a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities		▶				
	10a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory		▶				
	Miscellaneous Revenue	Business Code					
	11a MISCELLANEOUS INCOME	900099		9,468.			9,468.
	b						
	c						
	d All other revenue						
	e **Total.** Add lines 11a-11d		▶	9,468.			
	12 **Total revenue.** See instructions		▶	3,814,319.	0.	0.	<88,704.>

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S See Part IV, line 22	59,655.	59,655.		
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	282,110.	246,041.	22,569.	13,500.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,208,170.	1,065,290.	99,787.	43,093.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	14,761.	10,923.	1,181.	2,657.
9 Other employee benefits	74,706.	55,320.	5,871.	13,515.
10 Payroll taxes	159,154.	117,830.	12,573.	28,751.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	119,534.	90,960.	17,074.	11,500.
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other	146,369.	111,380.	20,907.	14,082.
12 Advertising and promotion				
13 Office expenses	159,112.	107,263.	7,955.	43,894.
14 Information technology	48,363.	36,802.	6,908.	4,653.
15 Royalties				
16 Occupancy	171,061.	151,837.	5,117.	14,107.
17 Travel	14,250.	11,933.	270.	2,047.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	36,312.	26,870.	2,543.	6,899.
23 Insurance	46,085.	34,102.	3,227.	8,756.
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)				
a STUDENT TRIPS AND SUPP	113,630.	111,378.	451.	1,801.
b BAD DEBT	100,434.		100,434.	
c EDUCATIONAL MATERIALS	38,966.	38,165.	161.	640.
d STAFF BOARD DEVELOP.	11,735.	10,965.	174.	596.
e MISCELLANEOUS	2,845.	1,506.	32.	1,307.
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	2,807,252.	2,288,220.	307,234.	211,798.
26 Joint costs. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing		258,265.	1	240,490.
	2	Savings and temporary cash investments		557,278.	2	668,073.
	3	Pledges and grants receivable, net		1,862,208.	3	1,489,057.
	4	Accounts receivable, net		7,377.	4	3,750.
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		29,021.	9	34,057.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 3,820,428.			
	b	Less accumulated depreciation	10b 380,842.	2,177,545.	10c	3,439,586.
	11	Investments - publicly traded securities		873,333.	11	949,511.
	12	Investments - other securities See Part IV, line 11			12	
	13	Investments - program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		15,000.	15	92,073.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		5,780,027.	16	6,916,597.
Liabilities	17	Accounts payable and accrued expenses		175,650.	17	134,569.
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities. Complete Part X of Schedule D			25	
	26	**Total liabilities.** Add lines 17 through 25		175,650.	26	134,569.
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		2,247,888.	27	3,875,402.
	28	Temporarily restricted net assets		2,593,750.	28	2,079,476.
	29	Permanently restricted net assets		762,739.	29	827,150.
		Organizations that do not follow SFAS 117, check here ▶ [ ] and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		5,604,377.	33	6,782,028.
	34	Total liabilities and net assets/fund balances		5,780,027.	34	6,916,597.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,814,319.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,807,252.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,007,067.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5,604,377.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	170,584.
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	6,782,028.

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990: [ ] Cash [X] Accrual [ ] Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	2c	X	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: [X] Separate basis [ ] Consolidated basis [ ] Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization	Employer identification number
EAST HARLEM TUTORIAL PROGAM, INC.	23-7439789

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

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

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.

a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Other

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

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

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

		Yes	No
(i)	A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?		
(ii)	A family member of a person described in (i) above?		
(iii)	A 35% controlled entity of a person described in (i) or (ii) above?		

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

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

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

Schedule A (Form 990 or 990-EZ) 2010

032021 12-21-10

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	5579069.	2743823.	2281626.	1800837.	3903023.	16308378.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	5579069.	2743823.	2281626.	1800837.	3903023.	16308378.
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)						3103574.
6 **Public support.** Subtract line 5 from line 4						13204804.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	5579069.	2743823.	2281626.	1800837.	3903023.	16308378.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	156,478.	116,697.	31,408.	15,706.	37,685.	357,974.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	10,366.	16,020.	11,016.	19,574.	9,468.	66,444.
11 **Total support.** Add lines 7 through 10						16732796.
12 Gross receipts from related activities, etc. (see instructions)					12	900,155.

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	78.92 %
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	96.70 %

16a **33 1/3% support test - 2010.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3% support test - 2009.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

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 ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 **Total support** (Add lines 9, 10c, 11, and 12.)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2010** (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from **2009** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2010.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests - 2009.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

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

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information (See instructions).

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

OTHER INCOME CONSISTS OF MISCELLANEOUS REVENUE AND CREDITS RECEIVED FROM VARIOUS VENDORS TOTALING $66,444 FOR THE PRIOD 2006 THROUGH 2010.

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization

EAST HARLEM TUTORIAL PROGAM, INC.

Employer identification number

23-7439789

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

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

1 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

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

		Held at the End of the Tax Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

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

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

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

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

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

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

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

1a If the organization elected, as permitted under SFAS 116 (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 ▶ $ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

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

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

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

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

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

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

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

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

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

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

		Amount
c	Beginning balance	1c
d	Additions during the year	1d
e	Distributions during the year	1e
f	Ending balance	1f

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

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

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

		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	762,739.	801,904.	1,040,138.		
b	Contributions					
c	Net investment earnings, gains, and losses	136,562.	<2,799.>	<82,595.>		
d	Grants or scholarships					
e	Other expenditures for facilities and programs	4,564.	36,366.	155,639.		
f	Administrative expenses					
g	End of year balance	894,737.	762,739.	801,904.		

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

a Board designated or quasi-endowment ▶ _____ %
b Permanent endowment ▶ 93.00 %
c Term endowment ▶ 7.00 %

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

		Yes	No
(i)	unrelated organizations	3a(i)	X
(ii)	related organizations	3a(ii)	X
b	If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		2,803,898.		2,803,898.
b Buildings		386,106.	62,322.	323,784.
c Leasehold improvements		418,754.	128,361.	290,393.
d Equipment		200,189.	182,011.	18,178.
e Other		11,481.	8,148.	3,333.
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)*			▶	3,439,586.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12) ▶		

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

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13) ▶		

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 15.)* ▶	

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

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25.)* ▶	

2. FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	3,814,319.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	2,807,252.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	1,007,067.
4	Net unrealized gains (losses) on investments	4	170,584.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	170,584.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	1,177,651.

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

1	Total revenue, gains, and other support per audited financial statements			1	3,984,903.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains on investments	2a	170,584.		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV.)	2d			
e	Add lines **2a** through **2d**			2e	170,584.
3	Subtract line **2e** from line **1**			3	3,814,319.
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	4b			
c	Add lines **4a** and **4b**			4c	0.
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	3,814,319.

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

1	Total expenses and losses per audited financial statements			1	2,807,252.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV.)	2d			
e	Add lines **2a** through **2d**			2e	0.
3	Subtract line **2e** from line **1**			3	2,807,252.
4	Amounts included on Form 990, Part IX, line 25, but not on line **1**:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	4b			
c	Add lines **4a** and **4b**			4c	0.
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	2,807,252.

Part XIV Supplemental Information

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

PART V, LINE 4: EHTP MAINTAINS VARIOUS FUNDS WHOSE PURPOSE IS TO PROVIDE LONG TERM SUPPORT FOR ITS PROGRAMS. IN CLASSIFYING SUCH FUNDS FOR FINANCIAL STATEMENT PURPOSES AS EITHER PERMANENTLY RESTRICTED, TEMPORARILY RESTRICTED OR UNRESTRICTED NET ASSETS, THE BOARD OF TRUSTEES LOOKS TO THE EXPLICIT DIRECTIONS OF THE DONOR WHERE APPLICABLE AND PROVISIONS OF THE LAWS OF STATE OF NEW YORK.

PART X, LINE 2: ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES

Part XIV Supplemental Information *(continued)*

EHTP RECOGNIZES THE EFFECT OF INCOME TAX POSITION ONLY IF THOSE POSITIONS ARE MORE LIKELY THAN NOT OF BEING SUSTAINTED. MANAGEMENT HAS DETERMINED THAT THE FOUNDATION HAD NO UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE FINANCIALY STATEMENT RECOGNITION.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2010

Open To Public Inspection

Name of the organization
EAST HARLEM TUTORIAL PROGAM, INC.

Employer identification number
23-7439789

Part I **Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply

a ☐ Mail solicitations
b ☐ Internet and email solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	(iii) No	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
Total ▶						

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

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000

		(a) Event #1 ANNUAL SPRING BENEF (event type)	(b) Event #2 (event type)	(c) Other events NONE (total number)	(d) Total events (add col (a) through col. (c))
Revenue	1 Gross receipts	890,189.			890,189.
	2 Less: Charitable contributions	825,839.			825,839.
	3 Gross income (line 1 minus line 2)	64,350.			64,350.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages	84,792.			84,792.
	8 Entertainment				
	9 Other direct expenses	26,333.			26,333.
	10 Direct expense summary. Add lines 4 through 9 in column (d)			▶	(111,125.)
	11 Net income summary. Combine line 3, column (d), and line 10			▶	<46,775.>

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

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

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

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: _____

11 Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity operated in:

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ _____ and the amount of gaming revenue retained by the third party ▶ $ _____ .

c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ $ _____

Description of services provided ▶ _____

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $ _____

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
EAST HARLEM TUTORIAL PROGAM, INC.

Employer identification number
23-7439789

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes [ ] No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Part II can be duplicated if additional space is needed ▶ [ ]

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance

2 Enter total number of section 501(c)(3) and government organizations ▶

3 Enter total number of other organizations ▶

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
STUDENT STIPEND	31	36,642.	0.	FMV	N/A
STUDENT SCHOLARSHIP	18	23,013.	0.	FMV	N/A

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE I, PART I, LINE 2:

EHTP GRANTS STIPENDS TO HIGH SCHOOL STUDENTS WHO HAVE INTERNED WITH THE ELEMENTARY AND ADMINISTRATIVE PROGRAMS. IN ADDITION, EHTP GRANTS SCHOLARSHIPS TO ASSIST HIGH SCHOOL GRADUATES WITH COLLEGE TUITION COSTS.EHTP HAS PROCESSES IN PLACE TO ENABLE IT TO IDENTIFY ALLOCATION OF FUNDS AND STUDENTS SELECTED FOR STIPENDS OR SCHOLARSHIPS.

SCHEDULE J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 23.**

▶ **Attach to Form 990.** ▶ **See separate instructions.**

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization

EAST HARLEM TUTORIAL PROGAM, INC.

Employer identification number

23-7439789

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	☐ First-class or charter travel	☐ Housing allowance or residence for personal use		
	☐ Travel for companions	☐ Payments for business use of personal residence		
	☐ Tax indemnification and gross-up payments	☐ Health or social club dues or initiation fees		
	☐ Discretionary spending account	☐ Personal services (e.g., maid, chauffeur, chef)		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	**1b**		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	**2**		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply.			
	☐ Compensation committee	☐ Written employment contract		
	☐ Independent compensation consultant	☐ Compensation survey or study		
	☒ Form 990 of other organizations	☒ Approval by the board or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a	Receive a severance payment or change-of-control payment from the organization or a related organization?	**4a**		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		X
c	Participate in, or receive payment from, an equity-based compensation arrangement?	**4c**		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a	The organization?	**5a**		X
b	Any related organization?	**5b**		X
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a	The organization?	**6a**		X
b	Any related organization?	**6b**		X
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**	X	
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	**8**		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	**9**		

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 JEFF GINSBURG	(i)	136,104.	11,333.	0.	4,863.	9,137.	161,437.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2	(i)							
	(ii)							
3	(i)							
	(ii)							
4	(i)							
	(ii)							
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information

PART I, LINE 7: THE FOLLOWING EMPLOYEES RECEIVED NON-FIXED PAYMENTS FORM THE ORGANIZATION IN THE FORM OF A BONUS AS FOLLOWS:

JEFFREY GINSBURG - $11,333

LAUREN GOLDSTEIN - $5,000

BONUSES ARE DETERMINED BASED UP PERFORMANCE AND ARE SUBJECT TO THE DISCRETION OF THE EXECUTIVE DIRECTOR AND DIRECTOR, PLANNING AND ADMINISTRATION IN CONSULTATION WITH THE THE SUPERVISOR.

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization: EAST HARLEM TUTORIAL PROGAM, INC.

Employer identification number: 23-7439789

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

HUNDREDS OF EAST HARLEM'S STUDENTS AND FAMILIES.

- IN FY 11, 90% OF EHTP'S 6TH & 8TH GRADERS WERE PROMOTED TO THE NEXT GRADE.
- OF 121 ELEMENTARY STUDENTS ENROLLED, 96% WERE PROMOTED TO THE NEXT GRADE.
- OF THE 20 12TH GRADERS WHO COMPLETED ALL REQUIREMENTS FOR GRADUATION, 20 (100%) WERE ACCEPTED AND HAVE ENROLLED INTO A 2 OR 4 YEAR COLLEGE.
- EHTP SENIORS WERE AWARDED $1.6 MILLION IN COLLEGE SCHOLARSHIPS.
- TWO (2) EHTP VOLUNTEERS WERE SELECTED AS BANK OF AMERICA LOCAL HEROES.
- THE PARTNERSHIP FOR AFTER SCHOOL EDUCATION (PASE) SELECTED AN EHTP DIRECTOR, UNIVERSITY PROGRAM AS ONE OF FIVE 2011 PASESETTER AWARD RECIPIENTS.
- EHTP'S LEGO ROBOTICS TEAM FINISHED 2ND PLACE OUT OF 28 TEAMS COMPETING IN A REGIONAL NEW YORK COMPETITION.
- STUDENTS RECEIVED AN AVERAGE OF 244 HOURS OF PROGRAM, EQUIVALENT TO MORE THAN 2 MONTHS OF SCHOOL.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

COST TO THE STUDENTS, FAMILIES, AND COMMUNITY EHTP SERVES. OUR ACADEMIC ENRICHMENT PROGRAMS ARE DIVIDED INTO TWO PARTS: THE ELEMENTARY PROGRAM AND THE UNIVERSITY PROGRAM, WHICH COMBINES MIDDLE SCHOOL AND HIGH SCHOOL. IN ADDITION, EHTP'S SUMMER PROGRAMS SERVE STUDENTS IN GRADES K-12 FOR FIVE WEEKS EACH SUMMER.

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EHTP'S ELEMENTARY PROGRAM SERVES GRADES K-5, PROVIDING STUDENTS WITH AN INTENSIVE AFTER-SCHOOL CURRICULUM THAT EMPHASIZES LITERACY AND MATH COMPLEMENTED BY A VARIETY OF ENRICHMENT ACTIVITIES. EHTP DEVELOPS THE WHOLE FAMILY BY PROVIDING A RANGE OF COUNSELING SERVICES TO STUDENTS AND FAMILY MEMBERS, FACILITATING SUPPORT GROUPS, HELPING STUDENTS GAIN ADMISSION TO HIGH QUALITY MIDDLE SCHOOLS, AND ENSURING THAT STUDENTS HAVE THE SOCIAL-EMOTIONAL WHEREWITHAL TO MEET THE OPPORTUNITIES AND CHALLENGES THEY FACE.

PARTICIPANTS ARE REQUIRED TO ATTEND PROGRAM 4 DAYS PER WEEK, ACHIEVING AN ANNUAL ATTENDANCE RATE OF NO LESS THAN 75%. THE WEEKLY PROGRAM SCHEDULE INCLUDES:

- FOUR DAYS OF INTENSIVE ACADEMIC INSTRUCTION (USUALLY THREE DAYS OF LITERACY AND ONE DAY OF MATH) UNDER THE GUIDANCE OF PROFESSIONAL EDUCATORS

- THEME-BASED UNITS THAT INCORPORATE READING, MATH, ART, SOCIAL STUDIES, AND CHARACTER EDUCATION

- AN ADDITIONAL 1.5 HOURS OF ONE-ON-ONE OR SMALL-GROUP LITERACY TUTORING

- 2-5 HOURS OF SPECIALIZED HOMEWORK HELP FROM DEDICATED VOLUNTEERS

IN ORDER TO OFFER MORE INDIVIDUALIZED EDUCATIONAL SUPPORT TO STUDENTS IN THE ELEMENTARY PROGRAM, EHTP PARTNERS WITH READ ALLIANCE (READING EXCELLENCY AND DISCOVERY FOUNDATION) AND PROVIDES A READING PROGRAM

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THAT ADDRESSES LITERACY SHORTFALLS ON THE KINDERGARTEN AND FIRST GRADE LEVELS. READ ALLIANCE IS A REGIMENTED PROGRAM THAT EMPHASIZES PHONETICS, NEW VOCABULARY, DICTATION, AND COMPREHENSION THROUGH ONE-ON-ONE TUTORING ACTIVITIES. NOT ONLY DO EHTP'S KINDERGARTEN AND FIRST GRADE STUDENTS BENEFIT FROM THE PROGRAM, EHTP'S HIGH SCHOOL STUDENTS WHO ARE SPECIALLY TRAINED TO CONDUCT THE PROGRAM DO AS WELL. THE YOUNGER STUDENTS GAIN CONFIDENCE AND PROWESS IN LITERACY, WHILE THEIR TEEN TUTORS GAIN LIFELONG SKILLS AND TRANSFERABLE EXPERIENCE

A FEW CRITICAL ELEMENTARY SCHOOL SUCCESSES INCLUDE:

- 96% OF STUDENTS WERE PROMOTED TO THE NEXT GRADE

- OF THE STUDENTS WHO STARTED THE PROGRAM READING AT OR ABOVE GRADE LEVEL, 93% MAINTAINED OR IMPROVED THEIR READING SCORES.

- OF THE STUDENTS WHO STARTED BELOW GRADE LEVEL, 82% SAW AN IMPROVEMENT IN THEIR READING SCORES WITH AN AVERAGE OF 14 MONTHS ACADEMIC PROGRESS.

- 52% OF STUDENTS WHO BEGAN THE YEAR BELOW GRADE LEVEL ENDED THE YEAR READING AT OR ABOVE GRADE LEVEL.

- THE 48% OF STUDENTS WHO REMAINED BELOW GRADE LEVEL SAW AN AVERAGE GAIN OF 13 ACADEMIC MONTHS' PROGRESS.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

STAFF.

Name of the organization: EAST HARLEM TUTORIAL PROGAM, INC.

Employer identification number: 23-7439789

AT THE MIDDLE SCHOOL LEVEL, EHTP-UP'S HELPS STUDENTS GAIN ADMISSION TO CHOICE HIGH SCHOOLS AND PREPARE FULLY FOR THE HIGH SCHOOL EXPERIENCE. THE MIDDLE SCHOOL PROGRAM PROVIDES A COMPREHENSIVE RANGE OF COUNSELING AND TUTORING SERVICES TO HELP STUDENTS AND FAMILIES NAVIGATE THIS PARTICULARLY CHALLENGING TRANSITIONAL PERIOD.

MIDDLE SCHOOL STUDENTS ARE REQUIRED TO ATTEND PROGRAM 4 DAYS PER WEEK, ACHIEVING AN ANNUAL ATTENDANCE RATE OF NO LESS THAN 75%. THE WEEKLY PROGRAM SCHEDULE INCLUDES:

- FOUR DAYS OF INTENSIVE ACADEMIC INSTRUCTION (USUALLY TWO DAYS OF LITERACY, ONE DAY OF MATH, AND ONE DAY OF SCIENCE) UNDER THE GUIDANCE OF PROFESSIONAL EDUCATORS

- THEME-BASED UNITS THAT INCORPORATE READING, MATH, ART, SCIENCE, SOCIAL STUDIES, AND CHARACTER EDUCATION

- AN ADDITIONAL 1.5 HOURS OF ONE-ON-ONE TUTORING IN CHALLENGING SUBJECTS

- 5 HOURS OF SPECIALIZED HOMEWORK HELP

A FEW CRITICAL MIDDLE SCHOOL SUCCESSES INCLUDE:

- 100% OF STUDENTS WERE PROMOTED TO THE NEXT GRADE AT THE END OF THE SCHOOL YEAR

- OF THE STUDENTS WHO STARTED THE PROGRAM READING AT OR ABOVE GRADE LEVEL, 96% MAINTAINED OR IMPROVED THEIR READING SCORES.

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- OF THE STUDENTS WHO STARTED BELOW GRADE LEVEL, 54% IMPROVED BY AT 14 MONTHS.

- EHTP'S LEGO ROBOTICS TEAM FINISHED IN SECOND PLACE OUT OF 28 TEAMS COMPETING IN A REGIONAL NEW YORK COMPETITION.

HIGH SCHOOL STUDENTS ARE REQUIRED TO ATTEND 3 DAYS PER WEEK BUT MANY ATTEND DAILY.

- ALL COLLEGE SENIOR ARE PAIRED WITH A COLLEGE ACCESS MENTOR (A VOLUNTEER) WITH WHOM THEY MEET WEEKLY FOR ONE YEAR TO SELECT, GAIN ADMISSION TO, AND ACCESS FINANCIAL AND AID AND SCHOLARSHIPS FOR AN IDEAL COLLEGE

- JUNIOR AND SENIORS PARTICIPATE IN EHTP'S INTERNSHIP PROGRAM WHICH PLACES THEM IN ELEMENTARY SCHOOL OST CLASSROOMS OR IN OUR ADMINISTRATIVE OFFICES. STUDENTS GAIN VALUABLE SKILLS AND EXPERIENCES AND RECEIVE STIPENDS FOR THEIR EFFORTS.

DUE TO THE SIGNIFICANT LACK OF MATH AND SCIENCE PROGRAMS AND RESOURCES AVAILABLE AT EAST HARLEM PUBLIC SCHOOLS, MANY STUDENTS HAVE LITTLE (OR NO) ACCESS TO COMPUTER TECHNOLOGY OR INDIVIDUALIZED, HANDS-ON INSTRUCTION IN MATH AND SCIENCE. AS A RESULT, MANY STUDENTS STRUGGLE TO LEARN EVEN THE MOST BASIC CONCEPTS IN THESE SUBJECT AREAS. TO ADDRESS THESE PRESSING ISSUES, EHTP BUILT UPON ITS STRONG PARTNERSHIPS DEVELOP A ROBUST STEM (SCIENCE, TECHNOLOGY, ENGINEERING, AND MATH) PROGRAM FOR HIGH SCHOOL PARTICIPANTS.

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FOR THE THIRD CONSECUTIVE YEAR, HIGH SCHOOL PARTICIPANTS TOOK ADVANTAGE OF OUR PRE-PRE-MEDICAL PROGRAM, WHICH WAS ESTABLISHED THROUGH EHTPS ONGOING PARTNERSHIP WITH TOURO COLLEGE OF MEDICINE (TOUROCOM). STUDENTS IN THE PRE-PRE-MEDICAL PROGRAM GAIN LAB EXPERIENCE, TAKE BIOLOGY AND ANATOMY CLASSES, AND WORK SIDE-BY-SIDE WITH MEDICAL STUDENTS.

EHTP'S EXPANDING FIRST ROBOTICS PROGRAM FEATURES RIGOROUS PHYSICS AND ENGINEERING TRAINING. MIDDLE SCHOOL PARTICIPANTS MAY ELECT TO PARTICIPATE IN LEGO ROBOTICS, WHICH INTRODUCES THEM TO THE FIRST ROBOTICS CURRICULUM. STUDENTS ENROLLED IN BOTH ROBOTICS PROGRAMS LEARN A WIDE RANGE OF SCIENCE- AND MATH-RELATED SKILLS. THEY ALSO BUILD KNOWLEDGE OF ETHICAL BUSINESS PRACTICES, INCREASE AWARENESS OF COMMUNITY ISSUES, AND PRACTICE WORKING IN TEAMS. THIS PAST YEAR, EHTP MADE SIGNIFICANT IMPROVEMENTS TO ITS ROBOTICS PROGRAMS. THESE INCLUDED INCREASED LAB TIME, UPGRADED RESOURCES, AND MORE INDIVIDUALIZED ATTENTION. THESE IMPROVEMENTS GREATLY IMPACTED THE PROGRAM'S SUCCESS.

AS PART OF ITS COLLEGE ACCESS EXPANSION EHTP CONTINUED ITS TWO-YEAR PARTNERSHIP WITH LET'S GET READY, AMERICA'S LARGEST NETWORK OF STUDENT-RUN COLLEGE ACCESS PROGRAMS. IN FY11, LET'S GET READY PROVIDED TWICE-WEEKLY FREE SAT PREP AND COLLEGE ADVISING TO PARTICIPANTS IN EHTP-UP. FOLLOWING AN ORIENTATION AND DIAGNOSTIC, STUDENTS WERE ASSIGNED TO SMALL GROUPS (EACH CONTAINING A MAXIMUM OF SIX STUDENTS) IN WHICH THEY PREPARED FOR THE MATH AND VERBAL SECTIONS OF THE SAT. LET'S GET READY PROVIDED ITS 11-WEEK PROGRAM TO EHTP SENIORS IN THE FALL AND TO JUNIORS IN THE SPRING.

THIS YEAR, STUDENTS TOOK DAY-LONG OR OVERNIGHT TRIPS TO INSTITUTIONS

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SUCH AS ITHACA COLLEGE, SYRACUSE UNIVERSITY, SUNY BINGHAMTON, BOSTON COLLEGE, BOSTON UNIVERSITY, NORTHEASTERN UNIVERSITY, EMMANUEL COLLEGE, AND SUNY STONY BROOK. EACH COLLEGE-BOUND SENIOR RECEIVES A LAPTOP COMPUTER TO ENSURE THEY ARE PROPERLY EQUIPPED FOR HIS/HER COLLEGE EXPERIENCE.

A FEW CRITICAL HIGH SCHOOL SUCCESSES INCLUDE:

- 100% OF EHTP'S HIGH SCHOOL SENIORS GRADUATED ON TIME AND HAVE ENROLLED IN 2- OR 4-YEAR COLLEGES.

- HIGH SCHOOL SENIORS AT EHTP RECEIVED 106 ACCEPTANCE LETTERS TO 62 UNIQUE COLLEGES AND WERE AWARDED $1.6 MILLION IN COLLEGE SCHOLARSHIPS.

- THE PARTNERSHIP FOR AFTER SCHOOL EDUCATION (PASE) AWARDED OUR DIRECTOR OF EHTP'S UNIVERSITY PROGRAM, A 2011 PASESETTER AWARD

- EHTP HIRED A FULL-TIME COLLEGE ACCESS MANAGER TO ITS STAFF, HELPING TO REACH A 100% COLLEGE ACCEPTANCE AND ENROLLMENT RATE.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:
DESIGNATED A SPECIFIC GEOGRAPHIC AREA OF FOCUS. OVER THE COURSE OF THE FIVE-WEEK PROGRAM, STUDENTS SPENT THREE DAYS A WEEK WORKING ON CLASSROOM ACTIVITIES IN THE MORNING AND PARTICIPATED IN RECREATIONAL SPORTS IN THE AFTERNOON. THE FOURTH DAY OF EACH WEEK WAS DEDICATED TO A CURRICULUM-RELATED FIELD TRIP. FOR EXAMPLE:

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THE 1ST GRADERS BEGAN THEIR EXPLORATION CLOSE TO HOME WITH A STUDY OF CENTRAL PARK - EXAMINING THE TREES, BIRDS, AND FLOWERS, INCLUDING THE CONSERVATORY GARDEN AT 5TH AVENUE AND 106TH STREET. ALTHOUGH MOST LIVE ONLY BLOCKS AWAY, MANY EHTP STUDENTS HAVE NOT BEEN TO CENTRAL PARK; AND EVEN FOR THOSE WHO ARE FAMILIAR WITH THE PARK, THESE ACTIVITIES AFFORDED STUDENTS A DEEPER LEVEL OF AWARENESS AND APPRECIATION FOR THIS LOCAL LANDMARK.

THE 2ND GRADERS LEARNED ALL ABOUT THE PHILIPPINES AND SAMPLED VARIOUS FOODS OF THE ISLANDS. THEY HAD EXCITING ADVENTURES ON LAND AND WATER, INCLUDING A VISIT TO THE NATURAL HISTORY MUSEUM. THE STUDENTS ALSO TOURED THE NEW YORK PUBLIC LIBRARY, LEARNED THE HISTORY OF THE FAMOUS LIONS AND ATTAINED LIBRARY CARDS. THE 3RD GRADERS STUDIED THE GALAPAGOS ISLANDS, SCULPTING THE UNIQUE ANIMALS THAT LIVE THERE AND CREATING INFORMATIONAL POSTERS ABOUT THEM. STUDENTS LEARNED HOW SAILORS TIE NAUTICAL KNOTS AND TOOK AN EXCITING VOYAGE ABOARD THE CLIPPER CITY TALL SHIP AROUND NEW YORK HARBOR.

THE 6TH, 7TH, AND 8TH GRADERS STUDIED MOUNT EVEREST AND THE HUMAN BODY. IN SO DOING THEY TESTED THEMSELVES IN NUMEROUS WAYS, EXPLORING SUBJECTS FROM THE SCIENCE OF ANATOMY TO ADVENTURE-BASED LITERATURE. THE MIDDLE SCHOOL PROGRAM HAD A STRONG EMPHASIS ON ENGLISH LANGUAGE ARTS AND STEM (SCIENCE, TECHNOLOGY, ENGINEERING, MATH) STUDIES. STUDENTS SOLVED MATHEMATICAL PUZZLES AND ENJOYED FIELD TRIPS THAT INCLUDED ROCK CLIMBING AT BROOKLYN BOULDERS AND THE BODIES EXHIBIT AT SOUTH STREET SEAPORT.

IN ADDITION TO THE REGULARLY SCHEDULED ACTIVITIES, ALL EHTP STUDENTS PARTICIPATED IN THE MY OWN BOOK PROGRAM, A PARTNERSHIP WITH

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FREEMAN-HARRISON FOUNDATION, WHICH INCLUDED AN INSTRUCTIONAL DISCUSSION ABOUT PROPERLY SELECTING READING MATERIALS AS WELL AS GIFT CARDS TO PURCHASE BOOKS. GROUPS OF EHTP STUDENTS WENT TO BARNES AND NOBLE WHERE THEY USED $30 GIFT CARDS TO BUY BOOKS, WHICH WERE ALSO SOLD TO THEM AT AN ADDITIONAL SPECIAL DISCOUNT. THE FIRE DEPARTMENT OF NEW YORK ALSO VISITED EHTP TO PROVIDE A PRESENTATION TO STUDENTS IN EVERY COHORT ABOUT FIRE SAFETY.

EHTP ALSO PARTNERED WITH GOLDMAN SACHS' COMMUNITY TEAMWORKS PROGRAM TO PLANT A LEARNING GARDEN IN THE OPEN SPACE BEHIND OUR BUILDING. GOLDMAN SACHS VOLUNTEERS PAIRED WITH FOURTH GRADERS FOR A FULL DAY OF ACTIVITIES THAT INCLUDED READING, HANDS-ON SCIENCE EXPERIMENTS, ART PROJECTS, AND GARDENING.

FITNESS ACTIVITIES WERE A PART OF CAMP THREE DAYS A WEEK AND INCLUDED LACROSSE, FLAG FOOTBALL, BASKETBALL, AND TRACK, AMONG OTHERS. THROUGH A SPECIAL PARTNERSHIP WITH THE NEW YORK CITY PARKS DEPARTMENT, MIDDLE SCHOOLERS WERE ABLE TO PARTICIPATE IN RUGBY EVERY THURSDAY. FITNESS IS PARTICULARLY IMPORTANT TO THE STUDENTS WE SERVE DUE TO THE GROWING HEALTH ISSUES (I.E. OBESITY, DIABETES, ASTHMA) FOR STUDENTS IN OUR COMMUNITY AND NEED FOR RECREATION BASED ON PARENT FEEDBACK. BREAKFAST AND LUNCH TIMES ALSO BECAME OCCASIONS FOR STUDENTS TO CATCH UP ON INDEPENDENT READING.

EHTP'S SUMMER INSTITUTE IS A CRITICAL COMPONENT FOR RISING HIGH SCHOOL FRESHMEN AT THE UNIVERSITY PROGRAM. THE PAST YEAR'S SUMMER INSTITUTE TOOK PLACE FROM JULY 5 & AUGUST 7 AND INCLUDED AN INTENSIVE ROBOTICS CAMP. IN ADDITION TO THE STANDARD SUMMER INSTITUTE PROGRAM. TWENTY

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RISING HIGH SCHOOL FRESHMEN PARTICIPATED IN THE SUMMER INSTITUTE AND ANOTHER TEN PARTICIPATED IN ROBOTICS CAMP, WHICH PROVIDED IN-DEPTH STUDY OF PHYSICS AND SCIENCE TOPICS.

AS IN PREVIOUS YEARS, THE SUMMER INSTITUTE INCLUDED TWO FULL WEEKS AT THE UNIVERSITY OF VIRGINIA (UVA), WHERE STUDENTS STAYED IN CAMPUS DORMS, TOOK CLASSES, AND WORKED ON GROUP PROJECTS. MOST OF EHTP'S HIGH SCHOOL STUDENTS WOULD NEVER HAVE ACCESS TO OR AWARENESS OF COLLEGE OPPORTUNITIES WITHOUT THE SUMMER INSTITUTE AND SUBSEQUENT COLLEGE VISITS LED BY EHTP. WHILE AT UVA, PARTICIPANTS IN ROBOTICS CAMP RECEIVED INTENSIVE PHYSICS INSTRUCTION COUPLED WITH LAB TIME; LAB TIME STRESSED PROBLEM-SOLVING AND REINFORCED THE CONCEPTS LEARNED DURING LECTURE SESSIONS.

UVA ALLOWED STUDENTS TO EXPERIENCE LIFE AWAY FROM HOME - AND IT WAS THE FIRST TIME THAT MOST STUDENTS HAD LIVED AWAY FROM HOME AT ALL. OVER THE COURSE OF THE TRIP, STUDENTS SUPPORTED EACH OTHER THROUGH THE CHALLENGES OF THE HIGH SCHOOL-TO-COLLEGE TRANSITION. STUDENTS ALSO PARTICIPATED IN ACADEMIC FIELD TRIPS (SUCH AS A VISIT TO THE SLAVE CEMETERY AT MONTICELLO, THOMAS JEFFERSON'S ESTATE) AND GROUP PROJECTS, MANY OF WHICH CONTINUED UPON THE STUDENTS' RETURN TO EAST HARLEM.

FORM 990, PART VI, SECTION B, LINE 11: A DRAFT OF THE FORM 990 IS DISTRIBUTED TO THE AUDIT COMMITTEE FOR REVIEW PRIOR TO BEING SUBMITTED TO THE IRS. THE DRAFT FORM 990 IS DISTRIBUTED EARLY ENOUGH TO PROVIDE EACH COMMITTEE MEMBER WITH A REASONABLE AMOUNT OF TIME FOR REVIEW AND SUBMISSION OF QUESTIONS OR COMMENTS PRIOR TO THE FILING DEADLINE. THE FINAL FORM 990 IS DISTRIBUTED TO EACH BOARD MEMBER PRIOR TO BEING FILED WITH THE IRS. THE

Name of the organization: EAST HARLEM TUTORIAL PROGAM, INC.

Employer identification number: 23-7439789

DRAFT AND FINAL FORM 990 MAY BE DISTRIBUTED IN PERSON, BY REGULAR MAIL, E-MAIL, OR FAX.

FORM 990, PART VI, SECTION B, LINE 12C: EHTP'S CONFLICT OF INTEREST POLICY IS APPLICABLE TO ALL DIRECTORS, OFFICERS, AND EMPLOYEES OF EHTP. AT THE BEGINNING OF EACH YEAR, ALL DIRECTORS, OFFICERS, AND EMPLOYEES ARE ASKED TO READ (OR RE-READ) THE CONFLICT OF INTEREST POLICY, SIGN AND SUBMIT A FORM ACKNOWLEDGING THAT THEY HAVE READ THE POLICY, AND SIGN AND SUBMIT A STATEMENT DISCLOSING A POTENTIAL CONFLICT OF INTEREST (OR STATING THAT NONE EXISTS). AFTER DISCLOSURE OF THE FINANCIAL INTEREST AND ALL MATERIAL FACTS, AND AFTER ANY DISCUSSION WITH THE INTERESTED PERSON, SUCH INDIVIDUAL, AND ANY OTHER INTERESTED PERSON SHALL LEAVE THE BOARD OR COMMITTEE MEETING WHILE THE DETERMINATION OF WHETHER ANY CONFLICT OF INTEREST (ACTUAL OR POTENTIAL) EXISTS IS DISCUSSED AND VOTED UPON. THE REMAINING DISINTERESTED BOARD OR COMMITTEE MEMBERS (REFERRED TO AS THE "INDEPENDENT EVALUATION COMMITTEE" OR "IEC" SHALL DECIDE IF A CONFLICT OF INTEREST EXISTS.

PROCEDURES FOR ADDRESSING THE CONFLICT OF INTEREST

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

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

THE PROPOSED TRANSACTION OR ARRANGEMENT.

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

D. IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST IS NOT REASONABLY ATTAINABLE UNDER THE CIRCUMSTANCES, THE IEC SHALL DETERMINE BY A MAJORITY VOTE WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE ORGANIZATION'S BEST INTEREST AND FOR ITS OWN BENEFIT AND WHETHER THE TRANSACTION IS FAIR AND REASONABLE TO THE ORGANIZATION AND SHALL MAKE ITS DECISION AS TO WHETHER TO ENTER INTO THE TRANSACTION OR ARRANGEMENT IN CONFORMITY WITH SUCH DETERMINATION.

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

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

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CONSIDERATION IN THE PROCESS IS THE ORGANIZATION BUDGET AND SALARIES OF OTHER STAFF. FOLLOWING THE TASK FORCE REVIEW, THE BOARD CHAIR AND THE EXECUTIVE DIRECTOR NEGOTIATE EXECUTIVE COMPENSATION BASED ON THE TASK FORCE FINDINGS. FINAL APPROVAL OF EXECUTIVE COMPENSATION MUST BE APPROVED BY THE BOARD OF TRUSTEES.

THIS PROCESS WAS LAST DONE DURING JUNE 2011.

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

FORM 990, PART VII, SECTION A, LINE 1A, COLUMN B:
HOURS FOR RELATED ORGANIZATION

DURING THE YEAR ENDED JUNE 30, 2011 THE EAST HARLEM SCHOLARS ACADEMY (THE "ACADEMY") WAS GRANTED A CHARTER BY THE UNIVERSITY OF THE STATE OF NEW YORK. AS STIPULATED IN THE BYLAWS OF ACADEMY, 51% OF ACADEMY'S BOARD OF DIRECTORS IS REQUIRED TO BE COMPRISED OF EHTP BOARD MEMBERS THUS RESULTING IN COMMON CONTROL. DURING FISCAL YEAR 2011, MEMBERS MICHAEL BROWN, TOM WEBBER, LAURIE GIDDINS, CARLOS MORALES AND CAROLINA ESQUENAZI ALL SERVED ON THE BOARD OF BOTH EHTP AND THE EAST HARLEM SCHOLARS ACADEMY. EACH MEMBER DEVOTED ONE (1) HOUR PER WEEK TO THE ACADEMY.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

Name of the organization: EAST HARLEM TUTORIAL PROGAM, INC.

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NET UNREALIZED GAINS ON INVESTMENTS: 170,584.

FORM 990, PART XII, LINE 2C, FINANCIAL STATEMENTS AND REPORTING:

THIS PROCESS HAS NOT CHANGED SINCE THE PRIOR YEAR.

SCHEDULE R (Form 990)
Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

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2010
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Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	(g) No
EAST HARLEM SCHOLARS ACADEMY - 27-4713450 1573 MADISON AVENUE NEW YORK, NY 10029	K-8TH GRADE PUBLIC CHARTER SCHOOL	NEW YORK	501(C)(3)	170(B)(1)(A)	EAST HARLEM TUTORIAL PROGRAM	X	

Part III **Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties or **(iv)** rent from a controlled entity	1a		X
b Gift, grant, or capital contribution to other organization(s)	1b		X
c Gift, grant, or capital contribution from other organization(s)	1c		X
d Loans or loan guarantees to or for other organization(s)	1d		X
e Loans or loan guarantees by other organization(s)	1e		X
f Sale of assets to other organization(s)	1f		X
g Purchase of assets from other organization(s)	1g		X
h Exchange of assets	1h		X
i Lease of facilities, equipment, or other assets to other organization(s)	1i		X
j Lease of facilities, equipment, or other assets from other organization(s)	1j		X
k Performance of services or membership or fundraising solicitations for other organization(s)	1k		X
l Performance of services or membership or fundraising solicitations by other organization(s)	1l		X
m Sharing of facilities, equipment, mailing lists, or other assets	1m		X
n Sharing of paid employees	1n		X
o Reimbursement paid to other organization for expenses	1o	X	
p Reimbursement paid by other organization for expenses	1p	X	
q Other transfer of cash or property to other organization(s)	1q		X
r Other transfer of cash or property from other organization(s)	1r		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1)	EAST HARLEM SCHOLARS ACADEMY	P	77,073.	FMV
(2)	EAST HARLEM SCHOLARS ACADEMY	O	100,000.	FMV
(3)				
(4)				
(5)				
(6)				

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproportionate allocations?		(g) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	No

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** and check this box ▶ [X]

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** (on page 1).

Part II **Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed).

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

Enter the Return code for the return that this application is for (file a separate application for each return) 01

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

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

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

4 I request an additional 3-month extension of time until MAY 15, 2012.

5 For calendar year _____, or other tax year beginning JUL 1, 2010, and ending JUN 30, 2011.

6 If the tax year entered in line 5 is for less than 12 months, check reason. ☐ Initial return ☐ Final return ☐ Change in accounting period

7 State in detail why you need the extension
ADDITIONAL TIME IS NEEDED TO COMPILE THE INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.

8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	$	0.
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	$	0.
c	**Balance due.** Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	$	0.

Signature and Verification

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

Signature ▶ Title ▶ CPA Date ▶ 1/23/12