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#### Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Open to Public Inspection

benefit trust or private foundation) Department of the Treasury ▶The organization may have to use a copy of this return to satisfy state reporting requirements. Internal Revenue Service For the 2011 calendar year, or tax year beginning and ending C Name of organization D Employer identification number Check if applicable: U.S.-Mexico Border Philanthropy Partnership Address change Doing Business As 26-2946180 Number and street (or P.O. box if mail is not delivered to street address) Name change E Telephone number Initial return 2508 Historic Decatur Road 130 (619) 814-1388 City or town, state or country, and ZIP + 4 Terminated 92106 G Gross receipts \$ Amended return San Diego CA 285,462 F Name and address of principal officer: Application pending Yes X No H(a) Is this a group return for affiliates? Andy Carey 2508 Historic Decatur Road 130, San Diego, CA 92106 H(b) Are all affiliates included? If "No," attach a list. (see instructions) Tax-exempt status: X | 501(c)(3) 501(c) ) < (insert no.) 4947(a)(1) or Website: ▶ www.borderpartnership.org H(c) Group exemption number ▶ X Corporation L Year of formation: 2008 K Form of organization: Association Other ▶ M State of legal domicile: Part I Summary Briefly describe the organization's mission or most significant activities: The US-Mexico Border Philanthropy Partnership strengthens and grows community philianthropy in the US-Mexico border region. Check this box ▶ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) . . . . . . . . . . . . . . . . . Number of independent voting members of the governing body (Part VI, line 1b). 4 15 Total number of individuals employed in calendar year 2011 (Part V, line 2a) . . . 5 3 Total number of volunteers (estimate if necessary) . . . . . . . . . 6 Total unrelated business revenue from Part VIII, column (C), line 12. 7a Net unrelated business taxable income from Form 990-T, line 34. **Current Year** Contributions and grants (Part VIII, line 1h). . 527,350 285.055 9 Program service revenue (Part VIII, line 2g) . . . . . . . 9,840 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . . . 644 407 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12). 537,834 285,462 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . . . 21,884 57,918 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . . 12,932 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10). 15 303,102 299,767 16a Professional fundraising fees (Part IX, column (A), line 11e) . . . . . . Other expenses (Part IX, column (A), lines 11a-11d, 1/1f-24e) 17 178,494 208,924 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25). 18 513,077 569,944 Revenue less expenses. Subtract line 18 from line 12 3 19 24,757 -284.482 Beginning of Current Year End of Year 20 Total assets (Part X, line 16). . 246,551 191,398 21 Total liabilities (Part X, line 26). 3,193 33,099 22 Net assets or fund balances. Subtract line 21 from line 20 158,299 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. Declara n of preparer (other than officer) is based on all information of which preparer has any knowledge Sign EXECUTIVE Here DIRECTOR

**Preparer** ► Sonnenberg & Company. CPAs Firm's EIN ▶ 95-3749711 **Use Only** Firm's address ► 5190 Governor Dr, Ste. 201, San Diego, CA 92122 Phone no. (858) 457-5252 May the IRS discuss this return with the preparer shown above? (see instructions). XYes

6/6/2012

PTIN

P00287581

Check

self-employed

Type or print name and title Print/Type preparer's name

Leonard Sonnenberg

Paid

orm 9	90 (2011)	U.SMexico Border Philanthropy Partnership	26-2946180	Page 2
Pa	rt III	Statement of Program Service Accomplishments	<u> </u>	
		Check if Schedule O contains a response to any question in this Part III		. 📙
1	Briefly d	escribe the organization's mission:		
	The US	Mexico Border Philanthropy Partnership strengthens and grows community philianthropy		
		S-Mexico border region.		
2	Did the	organization undertake any significant program services during the year which were not listed or	n	
	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	9	Yes	X No
	If "Yes."	describe these changes on Schedule O.		
4	-	e the organization's program service accomplishments for each of its three largest program serv	vices, as measured	l by
		es. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to re		
		and allocations to others, the total expenses, and revenue, if any, for each program service repo		
	•	, , , , , , , , , , , , , , , , , , ,		
4a	(Code:	) (Expenses \$ 513,750 including grants of \$ 57,918 ) (Reven	ue \$	0.)
	•	on/Learning Community & Family Asset Building: BPP was formed in 2008 and launched an		
		i-making with both internal and external constituent groups. We also organize region-wide		
		a anatitable and a substitute and a subs		
	With Doi	der responsibilities, adding our vision and leadership to summon effective action. This		
		on program includes the creation of marketing and educational materials, as well as the		
	impleme	entation of Family Asset Building.		
	<del></del>			
4b	(Code:	) (Expenses \$ 0 including grants of \$ 0 ) (Reven	ue \$	0_)
		•••••••••••••••••••••••••••••••••••••••		
		***************************************		
		***************************************		
	<del>-10</del> ·			
4c	(Code:	) (Expenses \$ 0 including grants of \$ 0 ) (Reven	ue \$	0.)
			••••••	
		***************************************		
		***************************************		
		***************************************		
4d	Other p	rogram services. (Describe in Schedule O.)		
	(Expens		0)	
4e		ogram service expenses ► 513.750		

Part IV **Checklist of Required Schedules** Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," X 1 Is the organization required to complete Schedule B. Schedule of Contributors (see instructions)? . . . . . . . 2 Χ 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to Х 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 4 X 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, 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 6 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 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes." 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," Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes." complete Schedule D. Part V... 10 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 Х 11a b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more 11b c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more 11c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 11e 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 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a 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 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E...... 13 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV . . . . . . . . . 14b Х 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 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 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions). . . . . . . . . . . 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 20a b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . .

٠	•		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	ļ
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			١.,
	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	1		
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
04-	employees? If "Yes," complete Schedule J	23		<u> </u>
248	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			l
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		х
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a		├^-
	Did the organization minest any proceeds of tax-exempt bonds beyond a temporary period exception:	240		
Ŭ	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		
	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		Х
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		<u> </u>
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 employee thereof, a grant selection committee member, or to a 35% controlled	l !		١.,
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Χ
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 current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	20a		<del>  ^-</del>
_	Schedule L, Part IV	28b		x
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	1		
_	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		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		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	Ì		
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?	1 1	1	
	If "Yes," complete Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	III, IV, and V, line 1	34		_ X_
352	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		x
	Did the organization receive any payment from or engage in any transaction with a controlled entity within	33a		<u> </u>
_	the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	1000		-
. =	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			ĺ
	197 Note, All Form 990 filers are required to complete Schedule O	38	Y	l

Par	t 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			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c		_
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 3			
ь	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)	LU		
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
ь	If "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i>	3b		Ĥ
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			$\vdash$
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			ļ
	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	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	_	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, 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	i		l l
_	gifts were not tax deductible?	6b	,~ .	
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			-
l.	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	-	├
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		×
d	If "Yes," indicate the number of Forms 8282 filed during the year	70		ĥ
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		<del>                                     </del>
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		X
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9Ь		X
10	Section 501(c)(7) organizations. Enter:			1.72
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	814		
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders	, r.		
b	Gross income from other sources (Do not net amounts due or paid to other sources	鑑		
42-	against amounts due or received from them.)	420		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	12a	- TOE-7	are:
ь 13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers.			<b>P</b>
a	Is the organization licensed to issue qualified health plans in more than one state?	13a	prox ES	DEAT.
u	Note. See the instructions for additional information the organization must report on Schedule O.	130	711	F4-67
b	Enter the amount of reserves the organization is required to maintain by the states in which	20.01		100
-	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			ruos.
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	_	

Form 990 (2011) U.S.-Mexico Border Philanthropy Partnership 26-2946180 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI........ Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year . . . If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent . . . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? . . . Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . 6 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X 8a Χ 8b 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 . . . . . Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters. affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? . . . 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12s Did the organization have a written conflict of interest policy? If "No," go to line 13. . . . . . . . . . 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b X Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 14 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X 15a 15b 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 16a If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed 17 ► CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Upon request Own website Another's website Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public.

State the name, physical address, and telephone number of the person who possesses the books and records of the

2508 Historic Decatur Road, Ste 130, San Diego, CA 92106

organization: ► Andrew Carey

Form 990 (2011)	U.SMexico Border Philanthropy Partnership		26-2946180	Page
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highe	est Comper	sated	
	Employees, and Independent Contractors			
	Check if Schedule O contains a response to any question in this Part VII .			

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

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

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

Check this box if neither the organization nor ar		izatio	on c	omį	pen	sated	an	y current officer	, director, or trus	stee.
(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	box,	unle: er an	Pos neck ss pe	rson	the state of the s	nan (ee)	(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
(1) Tony Banegas Board Member	1.00	х						0	0	0
(2) Antonieta Beguerisse De Beltran Board Member	1.00	х						0	0	0
(3) Gustavo Bidart II Board Member	1.00	х						0	0	0
(4) Dennis Campa Board Member	1.00	x						0	0	0
(5) Jorge Contreras Board Member	1.00	х					_	0	0	0
(6) Alfredo Alvarez Board Member	1.00	х						0	0	0
(7) Ruben Gonzalez Board Member	1.00	x	<u> </u>					0	0	0
(8) Jaime Gonzalez Rodriguez  Board Member	1.00	x	<u> </u> _				-	0	0	0
(9) Russell Jones Board Member	1.00	x	<u> </u>	_				0	0	0
(10) Ana Maria De La Garza Board Member	1.00	x	_	_			ļ	0	0	0
(11) Richard Kiy  Board Member  (12) Chard Mathia Phalas	1.00	х	-					0	0	0
(12) Cheryl Alethia Phelps Chair	2.00		<u> </u>	x				0	0	0
(13) Robert Ashcraft Vice-Chair	1.00		<u> </u>	x				0	0	0
(14) Francisco Solis Treasurer	1.00			x				0	0	0

٢٤	Section A. Officers, Directors, 11	usiees, Ney Er	ubio	yee	s, a	na	nıgn	est	Compensated	<u>⊏mproyees</u>	(CO	ntinuea)_	
	(A) Name and title	(B) Average hours per	box,	unies er and	Pos neck ss pe	rson	e than is both or/trus	h an tee)	(D) Reportable compensation	(E) Reportable compensatio		(F) Estima amoun	ited
	!	week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organization: (W-2/1099-MIS	s	othe compens from the organize and relation	sation he ation ated
(15) Secre	Karen Yarza etary	1.00			x				0		0		0
	Andrew Carey utive Director	40.00				х	х	}	125,000		0		0
(17)													
(18)										•			
(19)													
(20)													
(21)													
(22)												-	
(23)													
(24)													
(25)													
1b	Sub-total				•		•	<b>•</b>	125,000		0		0
	Total from continuation sheets to Part VII, 5 Total (add lines 1b and 1c)							<b>&gt;</b>	125,000		0		0
2	Total number of individuals (including but not reportable compensation from the organizatio	limited to those		d ab				ceiv			.ن.		
3	Did the organization list any former officer, die employee on line 1a? If "Yes," complete Sche					yee	e, or h	nigh 	est compensate	ed		Yes 3	No X
4	For any individual listed on line 1a, is the sum the organization and related organizations greindividual	· ·	•						•			4	X
5	Did any person listed on line 1a receive or acc for services rendered to the organization? If "											5	X
Sect	ion B. Independent Contractors												
1	Complete this table for your five highest comp compensation from the organization. Report c year.											ı's tax	
	(A) Name and business add	ress							(B) Description of ser	vices	С	(C) ompensatio	'n
		<del></del>						<u> </u>					0
		<del></del>						-					0
								<del>                                     </del>					0
													0
2	Total number of independent contractors (incl more than \$100,000 of compensation from the		nited •	to t	hos	e lis	sted a		ve) who received	i Et	in is Tyrus		
	train \$ 100,000 or compensation from the	- organization							<del></del>	1823	72.5	Form 990	) (2011)

All other revenue . . . . . . . . . . . .

Total revenue. See instructions. .

0

0

285.462

#### 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).

	nclude amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	b, and 10b of Part VIII.		expenses	general expenses	expenses
	nts and other assistance to governments and				
_	anizations in the United States. See Part IV, line 21	10,750	10,750		
	nts and other assistance to individuals in the				
	ed States. See Part IV, line 22	0			
	nts and other assistance to governments,				
_	inizations, and individuals outside the			}	
	ed States. See Part IV, lines 15 and 16	47,168	47,168	ger en la la ger de la la ger	
	efits paid to or for members	0			
	pensation of current officers, directors,				
	tees, and key employees	125,000	111,375	12,500	1,12
	npensation not included above, to disqualified			.	
	sons (as defined under section 4958(f)(1)) and	_	·	Ì	
	sons described in section 4958(c)(3)(B)	0		10 110	
	er salaries and wages	132,615	120,791	10,449	1,37
	sion plan accruals and contributions (include			ļ	
	ion 401(k) and 403(b) employer contributions).	0			
	er employee benefits	25,607	23,792	1,537	27
	roll taxes	19,880	14,131	4,790	95
	s for services (non-employees):	_		, <u> </u>	
	agement	0			
•	al	0			
	ounting	7,047		7,047	
	bying	0	* * * * * * * * * * * * * * * * * * *	p 1 27 - m 2 2 2 1 1 2 2 1 1 2 2 2 1 1 2 2 2 2 1 1 2	
	essional fundraising services. See Part IV, line 17	0	<u> </u>		
	stment management fees	0			
_	er	92,459	88,454	2,250	1,75
	ertising and promotion				
	ce expenses	3,039	2,455	536	4
	mation technology	9,562	8,031	1,397	13
	alties	0			
	upancy	20,139	17,507	2,281	35
	/el	18,273	18,273		<del></del>
•	ments of travel or entertainment expenses				
_	any federal, state, or local public officials	0			
	ferences, conventions, and meetings	0			
	rest	0	<del> </del>		
•	ments to affiliates	0			
	reciation, depletion, and amortization	2,189	0	2,189	<del></del>
	rance	2,351		2,351	
	er expenses. Itemize expenses not covered				
	ve (List miscellaneous expenses in line 24e. If				
	24e amount exceeds 10% of line 25, column				
	amount, list line 24e expenses on Schedule O.)			The second secon	
	nings and Workshops	37,226	37,101	125	·
	s and subscriptions	515	515		<del></del>
	rd and committee meetings	8,083	6,085	1,998	· <del></del> ·
	ipment Rental	3,633	3,088	472	7
	other expenses	4,408	4,234	174	
	al functional expenses. Add lines 1 through 24e.	569,944	513,750	50,096	6,09
	at costs. Complete this line only if the	}		1	
	nization reported in column (B) joint costs				
	a combined educational campaign and	]		Ì	
	Iraising solicitation. Check here ► if	i l		İ	
follo	wing SOP 98-2 (ASC 958-720)	ı			

Part X	U.SMexico Border Philanthropy Partnership  Balance Sheet	<del></del>		26-2946180 Page <b>1</b>
•		(A) Beginning of year		(B) End of year
1	Cash—non-interest-bearing	18,584	1	53,320
2	Savings and temporary cash investments	222,294	2	107,699
3	Pledges and grants receivable, net	0	3	
4	Accounts receivable, net	3,531	4	27,90
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	0	7	
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges		9	
10a	Land, buildings, and equipment: cost or			
	other basis. Complete Part VI of Schedule D 10a 5,492			
Ь	Less: accumulated depreciation 10b 3,014	2,142	10c	2,478
11	Investments—publicly traded securities	0	Ī	
12	Investments—other securities. See Part IV, line 11	0		
13	Investments—program-related. See Part IV, line 11	0	i	
14	Intangible assets	0		
15	Other assets. See Part IV, line 11	0	15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	246,551	16	191,39
17	Accounts payable and accrued expenses	3,193		13,89
18	Grants payable		18	19,20
19	Deferred revenue		19	10,20
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D.	<del></del>	21	
	Payables to current and former officers, directors, trustees, key			and the second s
22	employees, highest compensated employees, and disqualified	!* !		
	persons. Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties	0	23	
24	Unsecured notes and loans payable to unrelated third parties	0		
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete			
1	Part X of Schedule D	o	25	
26	Total liabilities. Add lines 17 through 25	3,193		33,09
<del> -</del> -		5,195		33,09
	Organizations that follow SFAS 117, check here ► X and complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	243,358		123,57
28	Temporarily restricted net assets		28	34,72
29	Permanently restricted net assets		29	
27 28 29 30 31 32	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	<del></del>
32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	243,358		158,299
34	Total liabilities and net assets/fund balances	246,551		191,398

Form 9	990 (2011) U.SMexico Border Philanthropy Partnership	<u> 26-294</u>	6180	Pag	<sub>je</sub> 12
Part	XI Reconciliation of Net Assets		_		
	Check if Schedule O contains a response to any question in this Part XI	<u> </u>		<u> </u>	X.
	1				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		285	<u>,462</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2		_	<u>,944</u>
3	Revenue less expenses. Subtract line 2 from line 1	3			,482
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			<u>,358</u>
5	Other changes in net assets or fund balances (explain in Schedule O)	5		199	<u>,423</u>
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,	_			
_	column (B))	6		<u> 158</u>	,299
Part	Financial Statements and Reporting			r	
	Check if Schedule O contains a response to any question in this Part XII		· ·	<u>.                                     </u>	
				Yes	No
1	Accounting method used to prepare the Form 990:				
	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		<u> </u>
Ь	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			.,	
	the audit, review, or compilation of its financial statements and selection of an independent accountant?.		2c	<u>. X</u>	
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O.				
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				
3 <b>a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			Ì	İ
	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		
			Form	990 (	(2011)

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

# **Public Charity Status and Public Support**

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

Open to Public

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.

► See separate instructions.

Inspection

OMB No. 1545-0047

		e organization			_	-		<u> </u>	Employe	r identificati		per	
1			ilanthropy Partr		ropization	no must		this por	t \ Soo ir		946180		
Pa	_			arity Status (All orgation because it is: (Fe						istruction	IS		
1				rches, or association						i).			
2	Ħ			on 170(b)(1)(A)(ii). (A					(-)(-)(-)(-)(-)(-)(-)(-)(-)(-)(-)(-)(-)(	.,.			
3	Ħ			nospital service organi		•	section	170(b)(1)	(A)(iii).				
4	Ħ	-		ation operated in conju					• • • •	)(b)(1)(A)	(iii). En	ter the	
	_		me, city, and st										
5		_		r the benefit of a colle (Complete Part II.)	ge or univ	ersity ow	ned or op	erated by	a govern	mental ur	nit desc	ribed	
6		A federal, st	ate, or local gov	ernment or governme	ntal unit c	described	in section	n 170(b)(	1)(A)(v).				
7	X			y receives a substanti (1)(A)(vi). (Complete		its suppo	rt from a g	governme	ental unit d	or from the	e gene	ral pub	lic
8		A community	y trust described	in section 170(b)(1)	(A)(vi). (C	Complete	Part II.)						
9		An organiza	tion that normal	y receives: (1) more t	han 33 1/	3% of its	support fr	om contri	butions, n	nembersh	ip fees	, and g	ross
				ed to its exempt function to the control of the con									s
			-	after June 30, 1975.				-		lax) Ironi	DUSINE	55E5	
10			-	nd operated exclusive		•		-	•	4).			
11	П	_	-	nd operated exclusive	-		-				rv out t	he	
	_	purposes of	one or more pu	blicly supported organ	izations c	described	in section	509(a)(1	) or section	on 509(a)	(2). Se		on
				at describes the type o	_				te lines 1	1e throug	h 11h.		
	_	a Type		Type II c			tionally in	•			ype III-		
е	Ш			y that the organization									
				on managers and othe	er than on	e or more	publicly:	supported	l organiza	itions des	cribed	in secti	ion
f			section 509(a)(2	z). a written determinatio	n fanna tha	IDC 45-4	it in a Tue	a I Tima	ll on Tree	ممينم اللام			
•			, check this box						ii, or iyp	e III supp	orung		
g		•	•	the organization acce					of the			• • •	
		following per											
				or indirectly controls,								Yes	No
				verning body of the su person described in (i							11g(i) 11g(ii)		
				y of a person describe							11g(iii)		
<u>h</u>				ation about the suppo									
(i)		e of supported anization	(II) EIN	(iii) Type of organization		organization		ou notify		Is the		) Amoun	t of
	org	anization		(described on lines 1–9 above or IRC section		sted in your document?	col. (i)	of your		tion in col. ized in the		support	
				(see instructions))	Yes			port?		S.?	ł		
(A)					res	No	Yes	No	Yes	No	<b> </b>		
(~)				_				1		1			0
(B)													
<del></del>			ļ		ļ								0
(C)					1					1			0
(D)						<u> </u>	<u>†                                      </u>		<u> </u>	<del> </del>			
_					<b></b>	ļ	<u> </u>		ļ	ļ	<u> </u>		0
(E)					!				1	1			0
			<b>使用</b>		REFEE 2	Greener Te e Set a Albert	المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة المراجعة ا المراجعة المراجعة ال		Carre in	E - 22 '6.			
Tota			1 - 1 - 1 - 2 - 3 - 3 - 3	عَيْ اللَّهِ وَاللَّهُ السَّاقُ فَا اللَّهِ عَلَى عَلَيْهِ عَلَى اللَّهِ عَلَى عَلَيْهِ عَلَى اللَّه	L -7	IE 17.	ki izi	17、 等 行。	والمحا تيكترونا	F-4-4-	I		^

	<ul> <li>(Complete only if you checked the Part III. If the organization fails to</li> </ul>				_	•	under
Sect	ion A. Public Support	quemy under		z zolowy pical		<u> </u>	
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Gifts, grants, contributions, and	(4, 200.	(2) 2000	(6) 2000	(0) 2010	(6) 2011	(1) 10441
1	membership fees received. (Do not						
	include any "unusual grants.")		107 270	600 264	537,190	205.055	1 600 076
2	Tax revenues levied for the organization's		197,370	680,361	537,190	285,055	1,699,976
2	benefit and either paid to or expended on					ļ	
	its behalf						0
3	The value of services or facilities						0
3	furnished by a governmental unit to the			i			
	organization without charge	1					0
4	Total. Add lines 1 through 3	o	107 270	600 361	527 400	205.055	<u>0</u> 1,699,976
4 5	The portion of total contributions by each	0	197,370	680,361	537,190	285,055	1,099,970
Ð							
	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)	man even	أحيشة وياسيسا يفتانا		Ada Long to	i Lini e un e 🗷	4 000 070
6	Public support. Subtract line 5 from line 4.	<u> </u>	<u></u> .			<u></u> . <u>.</u> <u>.</u> .	1,699,976
	ion B. Total Support ndar year (or fiscal year beginning in)	(a) 2007	(h) 2000	(=) 2000	(4) 2040	(=) 2044	/6 Total
			(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	0	197,370	680,361	537,190	285,055	1,699,976
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar	1					
_	sources		72	681	644	407	1,804
9	Net income from unrelated business					İ	
	activities, whether or not the business is						
	regularly carried on		<del></del>				0
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)						0
11	Total support. Add lines 7 through 10.	استستستان	<del></del>				1,701,780
12	Gross receipts from related activities, etc. (s					12	
13	First five years. If the Form 990 is for the o						
	organization, check this box and stop here	· · · · · ·	<u> </u>	· · · · · ·	<u> </u>	<u> </u>	<b>▶</b> [X]
<u>Sect</u>	ion C. Computation of Public Support					<del></del>	
14	Public support percentage for 2011 (line 6, o	• • •	•	, , , ,		14	0.00%
15	Public support percentage from 2010 Scheo					15	0.00%
16a	33 1/3% support test—2011. If the organization						
_	and stop here. The organization qualifies as						
b	33 1/3% support test—2010. If the organize						
	box and stop here. The organization qualific	es as a publicly	supported org	janization			▶ []
17a	10%-facts-and-circumstances test—2011						
	is 10% or more, and if the organization mee						
	Part IV how the organization meets the "fact	ts-and-circumst	ances" test. Ti	he organization	n qualifies as a	publicly suppo	rted
	organization		<i>.</i> .				▶□
b	10%-facts-and-circumstances test—2010	. If the organiza	ation did not ch	eck a box on li	ine 13, 16a, 16	b, or 17a, and	line
	15 is 10% or more, and if the organization m	neets the "facts	-and-circumsta	ances" test, che	eck this box an	d stop here. E	xplain in
	Part IV how the organization meets the "fact	ts-and-circumst	ances" test. Ti	he organization	qualifies as a	publicly	
	supported organization						▶[_]
18	Private foundation. If the organization did i	not check a box	on line 13. 16	ia, 16b, 17a, or	17b, check th	is box and see	
	instructions						▶□
						redule A (Form 990	
					361		

20

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

	(Complete only if you checked the					ualify under Pa	art II.
	If the organization fails to qualify ur	nder the tests	listed below,	please compl	ete Part II.)		
	tion A. Public Support		# \ aaaa		( ) 55 ( )		<del></del>
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						C
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						C
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				·		
5	its behalf						
6	Total. Add lines 1 through 5	0	0	0	0	Ö	C
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons				-		O
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					- 1	_
_	amount on line 13 for the year	<del>-</del>				<del></del>	
8 8	Add lines 7a and 7b	0	0	0		0	
·	line 6.)						c
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	l ol	o	o	o	0	
10a		<del></del>	<del></del> _		· · ·		· · · · · ·
	Gross income from interest, dividends,	1 1					
	Gross income from interest, dividends, payments received on securities loans,						
	payments received on securities loans, rents, royalties and income from similar sources						
	payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less		,				
	payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses						
b	payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0		0	0	0	
b	payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses	0	0	0	0	0	0
b	payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	0	
b	payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	0	
b	payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	0	
b 11	payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	0	
b 11 12	payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	0	
b c 111 12 13	payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	O ation's first, secon	O nd, third, fourth, c	0 or fifth tax year a	0 s a section 501(d	0	
b c 111 12 13 14 Sec	payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	otion's first, secon	O nd, third, fourth, c	O or fifth tax year a	0 s a section 501(0	0(3)	<b>▶</b> □
b c 111 12 13 14 Sec 15	payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	olation's first, secon	0 ad, third, fourth, c	O or fifth tax year a	0 s a section 501(	0 (3)	<b>▶</b> □
6 11 12 13 14 Sec 15 16	payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	otion's first, secon Percentage (f) divided by line Part III, line 15.	od, third, fourth, o	O or fifth tax year a	0 s a section 501(	0(3)	<b>▶</b> [
b c 11 12 13 14 Sec 15 16 Sec	payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	olation's first, secon Percentage (f) divided by line Part III, line 15.	ond, third, fourth, o	or fifth tax year a	0 s a section 501(	0 (3)	0.00%
b c 11 12 13 14 Sec 15 16 Sec	payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	Percentage (f) divided by line Part III, line 15. Dome Percenta column (f) divided le A, Part III, line	ond, third, fourth, control of the second of	or fifth tax year a	0 s a section 501(d	0 c)(3) 	0.00% 0.00%
6 11 12 13 14 Sec 15 16	payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	Percentage  (f) divided by line Part III, line 15.  Ome Percenta column (f) divided le A, Part III, line did not check the	e 13, column (f))	or fifth tax year a	0 s a section 501(0	0 c)(3) 	► □ 0.00% 0.00%
b 11 12 13 14 Sec 15 16 Sec 17	payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	Percentage (f) divided by line Part III, line 15. Die Percenta column (f) divided le A, Part III, line did not check the ere. The organiza	e 13, column (f))  ge d by line 13, colu 17 box on line 14, a	or fifth tax year a	s a section 501(o	0 2)(3) 15 16 17 18 , and line 17 is	► □ 0.00% 0.00%

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

Schedule A (Form	990 or 990-EZ) 2011	U.SMexico E	Border Philanthro	opy Partnership		26-2946180	Page 4
Part IV	Supplemental I				he explanations required	by Part II, line 1	
					his part for any additional		
,		Ji IID, and I	ait iii, iiiie 12. /	riso complete ti	ins part for any additiona	i illioittiation. (Se	56
	instructions).						
				· · · · · · · · · · · · · · · · · · ·			
				. <b></b>			
		•					
				••••••			
					,		

Schedule A (Form 990 or 990-EZ) 2011

#### SCHEDULE D (Form 990)

**Supplemental Financial Statements** 

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047 20**11** 

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

	Mexico Border Philanthropy Partnership	<del></del>		26-2946180
Part			imilar Funds	s or Accounts. Complete if
	the organization answered "Yes" to	o 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 d	onor advisors in writing that the a	ssets held in o	donor advised
•	funds are the organization's property, subject			
6	Did the organization inform all grantees, dor			
•	used only for charitable purposes and not for			
	purpose conferring impermissible private be			
Par	II Conservation Easements. Comp	lete if the organization answer	ed "Yes" to F	orm 990, Part IV, line 7.
1	Purpose(s) of conservation easements held	by the organization (check all tha	it apply).	
	Preservation of land for public use (e.g., recr	· —		n historically important land area
	Protection of natural habitat	· =		certified historic structure
		Fie	servation of a	certified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organiza	ation held a qualified conservation	contribution i	n the form of a conservation
	easement on the last day of the tax year.			
				Held at the End of the Tax Year
а	Total number of conservation easements .			2a
b	Total acreage restricted by conservation eas	sements		2b
C	Number of conservation easements on a ce	rtified historic structure included in	n (a) .   .   .	2c
ď	Number of conservation easements include	d in (c) acquired after 8/17/06, and	d not on a	
	historic structure listed in the National Regis	ster		2d
3	Number of conservation easements modifie	d, transferred, released, extinguis	hed, or termin	ated 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			andling of
	violations, and enforcement of the conserva			
6	Staff and volunteer hours devoted to monito			
_	<b>&gt;</b>	, and other states of the stat		
7	Amount of expenses incurred in monitoring,	inspecting and enforcing consen	vation easeme	ents during the year
•	► \$	moposting, and omoromy contest	valion odocini	onto during the your
8	Does each conservation easement reported	on line 2(d) above satisfy the red	uirements of	section
•	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?			
9	In Part XIV, describe how the organization re			
3	balance sheet, and include, if applicable, the			
	the organization's accounting for conservation		zauon s imand	ciai statements triat describes
Par			or Other Sin	allos Acade
Гаг	Complete if the organization answere			mar Assets.
	Complete if the organization answere	d res to Form 990, Part IV, line	<u> </u>	
1a	If the organization elected, as permitted und	ler SFAS 116 (ASC 958), not to re	eport in its rev	enue statement and balance sheet
	works of art, historical treasures, or other sin			
	of public service, provide, in Part XIV, the te	xt of the footnote to its financial st	latements that	describes these items.
b	If the organization elected, as permitted und	ler SFAS 116 (ASC 958), to repor	t in its revenue	e statement and balance sheet
	works of art, historical treasures, or other sin			
	of public service, provide the following amou			
	(i) Revenues included in Form 990, Part VII			▶ \$
	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of			
	following amounts required to be reported u			- · · · · · · · · · · · · · · · · · · ·
а	Revenues included in Form 990, Part VIII, li			
	Assets included in Form 990, Part X			
~				

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

2,478

 $\blacktriangleright$ 

Part VII	Investments—Other Securitie	es. See Form 990, Part X,	line 12.	
(a	Description of security or category (including name of security)	(b) Book value	(c) Method of va Cost or end-of-year r	
(1) Financial	I derivatives	0		
	neld equity interests	0		
(3) Other		0		
		0		
(B)		0		
(Ç)		0		
		0		
∫⊑≀ (F)		0	<del> </del>	
3 <u>.</u> 5		0		
(H)		0		
(1)		0		
Total. (Column (b.	) must equal Form 990, Part X, col (B) line 12)	0	the property of the second sec	
Part VIII	Investments—Program Relat	ed. See Form 990, Part X	, line 13.	
	(a) Description of investment type	(b) Book value	(c) Method of va Cost or end-of-year r	
(1)		0		
(2)		0		····
<u>(3)</u>		0		
(4)		0		<del></del>
<u>(5)</u>		0		
<u>(6)</u> (7)	<del></del>	0		
(8)		0		***************************************
(9)		0		
(10)		0		
Total. (Column (b	) must equal Form 990, Part X, col (B) line 13)	0		
Part IX	Other Assets. See Form 990,	Part X, line 15.		
	(	a) Description		(b) Book value
(1)			·	0
(2)				0
(3)		<u> </u>		0
<u>(4)</u>				0
(5)	<del>-</del>			0
<u>(6)</u> (7)		<del></del>		0
(8)				0
(9)				0
(10)				0
	mn (b) must equal Form 990, Part X, o	col. (B) line 15.)	<u></u>	0
Part X	Other Liabilities. See Form 99	0, Part X, line 25.		
1	(a) Description of liability	(b) Book value		
(1) Federa	l income taxes	0		
(2)		0		
(3)	<del></del>	0		
(4)		0		
<u>(5)</u>				
<u>(6)</u> (7)		0		
(8)		<u>_</u>		
(9)		0		
(10)		0		
(11)		0	and the second	
	) must equal Form 990, Part X, col (B) line 25)	0		

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).

Sched	ule D (Form 990) 2011				Page 4
Par	Reconciliation of Change in Net Assets from Form 990 to A	Audit	ed Financial	Statements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	285,462
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	569,944
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3	-284,482
4	Net unrealized gains (losses) on investments			4	
5	Donated services and use of facilities			5	
6	Investment expenses			6	
7	Prior period adjustments			7	
8	Other (Describe in Part XIV.)			8	
9	Total adjustments (net). Add lines 4 through 8			9	0
10	Excess or (deficit) for the year per audited financial statements. Combine lines			10	-284,482
Par				er Return	
1	Total revenue, gains, and other support per audited financial statements			1 1	285,462
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
C	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV.)				
e	Add lines 2a through 2d		· · · · · · ·	2e	0
3	Subtract line 2e from line 1			3	285,462
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	j	1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)				
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.)				285,462
Par	Reconciliation of Expenses per Audited Financial Statemen				
1	Total expenses and losses per audited financial statements			1 1	569,944
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a	1		
b	Prior year adjustments	2b			
С	Other losses	2c			
d		2d			
е	Add lines 2a through 2d			2e	0
3	Subtract line 2e from line 1			3	569,944
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	4b			
С	Add lines 4a and 4b			4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	8.)		5	569,944
Par	XIV Supplemental Information		<del></del>		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II, lines 3, and 9; Part II, lines 3, and 9; Part II, lines 4, and 9; Part II, lines 4, and 9; Part II, lines 4, and 9; Part II, lines 4, and 9; Part II, lines 4, and 9; Part II, lines 4, and 9; Part II, lines 4, and 9; Part II, lines 4, and 9; Part II, lines 4, and 9; Part II, lines 4, and 9; Part II, lines 4, and 9; Part II, lines 4, and 9; Part II, lines 4, and 9; Part II, lines 5, and 9; Part II, lines 5, and 9; Part II, lines 4, and 9; Part II, lines 5, and 9; Part I	art III.	lines 1a and 4:	Part IV. line	s 1b
	2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Par				
	part to provide any additional information.	·		•	
-					
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	•••••••••••••••••••••••••••••••••••••••				
	•••••••••••••••••••••••••••••••••••••••				
	•••••••••••••••••••••••••••••••••••••••				
	•••••••••••••••••••••••••••••••••••••••				
	***************************************				

#### Schedule F (Form 990)

Department of the Treasury

Statement of Activities Outside the United States

Complete if the organization answered "Yes" to Form 990. Part IV, line 14b, 15, or 16.

► Attach to Form 990.

► See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service **Employer Identification number** Name of the organization U.S.-Mexico Border Philanthropy Partnership 26-2946180 General Information on Activities Outside the United States. Complete if the organization answered Part I "Yes" to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (b) Number of (c) Number of (f) Total (a) Region (d) Activities conducted in (e) If activity listed in (d) is offices in the employees, region (by type) (e.g., a program service, expenditures for region agents, and fundraising, program describe specific type of and investments independent services, investments, service(s) in region In region contractors grants to recipients in region located in the region) North America (1) 0 Grants to recipients located 47.168 (2) 0 0 (3) 0 (4) (5) (6)

OF THE PARTY OF TH

c Totals (add lines 3a and 3b)

0

47,168

Page .

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who 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. Part II

Part II C	an be auplicated	rari il can de duplicated il additional space is needed.	is needed.					
(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(I) Method of valuation (book, FMV, appraisal,
					}			other)
				0		0		
(2)				0		0		
(3)				0		0		
(4)				0		0		
(5)				0		0		
				0		0		
				0		0		
				0		0		
				0		0		
(0D)				0		0		
				0		0		
((2)	offments and a second			0		0		
(18) British W				0		0		
(4) (4) (4) (4) (4) (4) (4) (4) (4) (4)				0		0		
				0				
(16)				0		0		

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . .

Enter total number of other organizations or entities.

Schedule F (Form 990) 2011

U.S.-Mexico Border Philanthropy Partnership

Schedule F (Form 990) 2011

Part III

Page 3 Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance E 8 (3) 4 9 ම B (11) (8) ම (10) (12)(13) (14) (15) (16) (17) (18)

Schedule F (Form 990) 2011

scheor	ile F (Form 990) 2011 U.SMexico Border Philanuhropy Partnership	_20-2940	0100	Page
Part	IV Foreign Forms			
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No	
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X No	
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	Yes	X No	
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	· Yes	X No	
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	Yes	X No	
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	X No	

	exico Border Philanthropy Partnership Form 990) 2011
Part·V	Supplemental Information Complete this part to provide the inform (accounting method; amounts of investr (accounting method); and Part III, colur provide any additional information (see

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).
Part I Line 2 Prior to awarding grant, BPP verifies all organizations, including its board
and staff leaders, are not listed on the terrorist watch lists as reguired. Grant
recipient organizations receive money and complete programs as outlined in original
proposals. At completion date or program end date, a report is submitted to U.S. Mexico
Border Philanthropy Partnership (BPP) to verfiy activities and results. A survey is
distributed to recipient organizations and BPP completes final grant report.

**SCHEDULE 1** (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047 20

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

Open to Publ Inspectio

**Employer Identification number** 

26-2946180

U.S.-Mexico Border Philanthropy Partnership

General Information on Grants and Assistance Part

ĝ X Yes 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? . . . .

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 Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 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
(1)			0	0			
(2)			0	0			
(3)			0	0			
(4)			0	0			
(5)			0	0			
(6)			0	0			
(7)			0	0			
(8)			0	0			
(6)			0	0			
(10)			0	0			
(11)			0	0	•		
(12)			0	0			
2 Enter total number of section 501(c)(3) and government organ	n 501(c)(3) and	government organia	nizations listed in the line 1 table.	a 1 table			
S Eliter total number of ourer organizations listed in the line 1 to	Jugariizauoris IIS		gole				0

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2011)

(HTA)

U.S.-Mexico Border Philanthropy Partnership

Schedule I (Form 990) (2011)

Page 2 (f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) Part I Line 2 Grant recipient organizations receive money and complete programs as outlined in original proposals. At completion date or program end date, a report is submitted to U.S. Mexico Border Philanthropy Partnership (BPP) to verfly activities and results. A (d) Amount of non-cash assistance (c) Amount of cash grant survey is distributed to recipient organizations and BPP completes final grant report. Part III can be duplicated if additional space is needed (b) Number of reciplents (a) Type of grant or assistance Part IV Part I

Schedule ! (Form 990) (2011)

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

**Transactions With Interested Persons** 

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,

OMB No. 1545-0047

Open To Public

Department of the Treasury Internal Revenue Service

(8) (9) (10) or Form 990-EZ, Part V, line 38a or 40b.

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

Inspection

Name of the o	rganization						En	nployer	identifi	cation n	umber	
U.SMexic	o Border Philanthropy Partnersh	ip					26	-29461	180			
Part I	Excess Benefit Transaction	s (section	501(c)(	3) and section 501(	c)(4) organization	ns o	nly).					
	Complete if the organization	answered	"Yes" or	Form 990, Part IV	, line 25a or 25b	, or l	Form	990-E	ΞZ, Pa	rt V, lir	ne 40b	) <u>.                                    </u>
	(a) blame of discustified nor				(b) Description of transaction				(c) Cor	rected?		
1	(a) Name of disqualified per	SON			(b) Description of the	ansac	Suom		_		Yes	No
(1)												
(2)												
(3)												
(4)	<del></del>		_									
(5)												
(6)	······································											
2 En	ter the amount of tax imposed o	n the orga	nization	managers or disqu	alified persons of	luring	g the	year				
un	der section 4958								. <del>-</del> . ▶	\$		
3 En	ter the amount of tax, if any, on	line 2, abo	ove, reim	bursed by the orga	nization				🕨	\$		
Part II	Loans to and/or From Inter-											
	Complete if the organization	answered	"Yes" or	Form 990, Part IV	, line 26, or Forr	n 990	<u>0-EZ</u>	, Part	<u>V, line</u>	38a.		
(a) Nar	me of interested person and purpose		to or from	(c) Original	(d) Balance due	-   (	e) In d	lefault?	(f) Ap	proved		/ritten
		the orga	nization?	principal amount	•		by board or committee?				agree	ment?
		ļ			i	L			comm	nittee?		
		То	From				Yes	No	Yes	No	Yes	No
(1)	<del></del> -			0		0				L		
(2)		<b>_</b>		0		0						
(3)				0		0						
(4)	·		<u> </u>	0		0						ļ
(5)				0		0						
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(7)	······	<u> </u>		0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0						
(8)				0		0						
(9)			<u> </u>	0		0						
_(10)	<del></del>		<u> </u>	0		0						
Total	<del></del>			<u> ▶ \$</u>		0						
Part III	Grants or Assistance Bene											
	Complete if the organization	answered	"Yes" or	Form 990, Part IV	, line 27.							
(	(a) Name of Interested person	(b) F	Relationship	between interested pers	on and the		(c) A	mount a	nd type	of assist	ance	
		<u> </u>		organization								
(1)												
(2)										<u> </u>		
(3)												
(4)		<u> </u>			1							
(5)												
(6)												
4=1												

Schedule L (Form 990 or 990-EZ) 2011

(a) Name of interested person	(b) Relationship between	(c) Amount of	(d) Description of transaction	(e) Sh	anng of
	Interested person and the organization	transaction	(-)	organi; rever	zation's nues?
(4) Karan Yama	Doord March on	0.440	Tabalada ada a	Yes	No
(1) Karen Yarza (2) Francisco Solis	Board Member		Technical assistance award to		X
(3) Jaime Gonzalez	Board Member Board Member		Technical assistance award to		X
(4)	Board Wember	5,000	Technical assistance award to		X
(5)		0			
(6)		0	· · · · · · · · · · · · · · · · · · ·		
(7)		0			
(8)		0			
(9)		0			
(10)		0			
Part V Supplemental Information					
Complete this part to prov	ide additional information for res	sponses to questions	on Schedule L (see instruction	s).	
			• • • • • • • • • • • • • • • • • • • •		
				• • • • • •	
	•				
• • • • • • • • • • • • • • • • • • • •					
			•••••••••••••••••••••••••••••••••••••••		
			• • • • • • • • • • • • • • • • • • • •		
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#### **SCHEDULE O** (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ

Open to Public

OMB No. 1545-0047

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.

Inspection

**Employer identification number** Name of the organization 26-2946180 U.S.-Mexico Border Philanthropy Partnership Form 990 Part XI Line 5 Other changes in Net Assets is due to a prior year adjustment to recognize revenue of \$199,423. Form 990 Part VI Section B Line 11b The Form 990 is prepared by an outside accountant and reviewed by the Executive Director. The Board Treasurer and Board Chair give a final review and approval before it is officially submitted. The final copy is shared with the Board of Directors. Form 990 Part VI Section B Line 12c A conflict of interest policy is in effect and reviewed annually by the Board of Directors and Executive Director. The Board members, officers, and Executive Directors hold each other accountable. Form 990 Part VI Section B Line 15a The Executive Director was given an employment contract outlining salary and benefits for the duration of the contract. The Board of Directors sought and received outside support/guidance to secure information and benefits for similar positions and years of experience. The Executive Director was hired in September 2008. There has been no change in salary or benefits since that time. Form 990 Part VI Section C Line 19 The governing documets, conflict of interest policy, and financial statements including the 990 are all available for review upon request.