

### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



# 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)

benefit trust or private foundation)

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

OMB No 1545-0047

Open to Public Inspection

<b>B</b> C		2010 Cai	endar year, or tax year be	ginning	11/11/20111	, and e	nding	<b>4</b> 12/31/	2011		
<u> </u>	Check if	applicable	C Name of organization (	Centro Por La Just	ıcia			D Employer id	entification n	nmper	
<u></u> ⊢ ∧	\ddress	change	Doing Business As			_		74-2720710			
□ N	Name ch	ange	Number and street (or P O	box if mail is not deliver	ed to street address)	Room/suite		E Telephone n	umber		
☐ ir	nitial reti	ım	1416 E Commerce Stre	et				(210) 222-17	<b>1</b> 4		
⊟ਾ	rerminat	ed	City or town, state or country					(Z_10) ZZZ=17.			_
Ħ₄	Amended	1 return	San Antonio	-	TX	78205		G Gross receip	ts \$	4	89,32
=		on pending	F Name and address of	orincipal officer	171_	70200	H/a) is t	his a group return			X No
ш^	тррпови		Ruben Solis 1416 E Co	•	on Antonio TV 70	2205	l · ·			_ = ;	=
				<u></u>			1	e all affiliates inclu		Yes[	No.
<u> Та</u>	ax-exem	pt status	X 501(c)(3) 501(c)	( ) <b>◀</b> (insert i	no)4947(a)(1)	or 527	"	No," attach a list	(see instruction	is)	
J W	Vebsite	: ► N/A	·				H(c) Gro	oup exemption nu	mber 🟲		
K Fo	orm of o	rganization	X Corporation Trus	Association	Other ▶	L Yea	r of form	ation 1994	M State of leg	al domicile	TX
P	art l	Sui	mmary		<b>=</b>		-	1334	1	,	10
	1		lescribe the organization'	e mission or most	significant activitie	e Prov	idos od	ucational and	cultural		
i	1 '	-	_		-				Cuituiai		<b>-</b>
<b>6</b>			to the community through					neib			
anc		raise aw	areness of issues which	impact the econor	nic development	or the comin	Junity_	·			
Activities & Governance	_								<b></b>		
စ္ပ	2		his box ▶ if the organi			ed of more tha	an 25% o	of its net assets			
45	3		of voting members of the					-	3		;
ties	4		of independent voting m					<u> </u>	4		
츷	5		mber of individuals empl		ear 2010 (Part V,	line 2a)		<b>—</b>	5		
¥	6		mber of volunteers (estin					_	6		2
i	7a		related business revenue					Ŀ	7a		(
	b	Net unre	elated business taxable in	come from Form 9	990-T, line 34				7b		(
				Prior Year	с	urrent Yea	r				
	8		itions and grants (Part Vi					596,3	53	4	63,08
- E	9	Program	n service revenue (Part V					21,64			
Revenue	10	Investm	ent income (Part VIII, col	umn (A), lines 3, 4					- (		
	11	Other re	venue (Part VIII, column	(A), lines 5, 6d, 8d	, 9c, 10c, and 11d	e)		12,9	900		4,600
	12	Total rev	enue—add lines 8 through	11 (must equal Part	VIII, column (A), lin	e 12)		609,2	253	4	89,32
	13	Grants a	and similar amounts paid	(Part IX, column (A	A), lines 1-3)						(
	مه ا				), line 4)						(
- 1	14	Benefits		Part IX, column (A	Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)						
<b>s</b>	15		paid to or for members (			5–10)		52,9	27		48.77
ses	1	Salaries,	paid to or for members ( other compensation, emplo	yee benefits (Part I)	K, column (A), lines	5–10)		52,9	027		48,772
chenses	15 16a	Salaries, Professi	paid to or for members ( other compensation, emplo onal fundraising fees (Pa	oyee benefits (Part I) art IX, column (A), I	K, column (A), lines line 11e)	,		52,9	27		48,772 (
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Form 9	90 (2010)	Centro Por La Justicia	74-2720710	Page 2
Pa	rt III	Statement of Program Service Accomplishments		
•		Check if Schedule O contains a response to any question in this Part III .		X
1		describe the organization's mission		
		as a fiscal agent to provide educational and cultural services to the community to		
	raise av	vareness of issues which impact economic development		
	Did Ma	and the second s		
2		organization undertake any significant program services during the year which were not listed on r Form 990 or 990-EZ?	X Yes	□No
	•	describe these new services on Schedule O	[A] Tes	140
3		organization cease conducting, or make significant changes in how it conducts, any program		
3	service		Yes	X No
		" describe these changes on Schedule O		٠٠٠ س
4		the exempt purpose achievements for each of the organization's three largest program services	by expenses	
•		501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amo		t
		ons to others, the total expenses, and revenue, if any, for each program service reported	Ū	
				_
4a	(Code	) (Expenses \$ 278,193 including grants of \$ 325,000 ) (Revenue	<b>\$</b>	0)
		s fiscal sponsorship to provide educational and cultural services to raise awareness of		
	issues	which impact the economic development in the community		
				<b>-</b>
4b	(Code	) (Expenses \$ 93,640 including grants of \$ 100,000 ) (Revenue	e \$	0)
	•	change - educating members on environmental issues affecting communities, workshops and		
		gn to register voters and educate them in voting rights and working with young people in		
	grassro	ots organizing		
		•		
4c	(Code	) (Expenses \$ 0 including grants of \$ 0 ) (Revenue	e \$	0)
	,			. <b></b>
				. <b></b>
A ~4	Other	program services (Describe in Schedule O )		
4d	(Expen		0)	
4e		program service expenses > 371.833		

#### Checklist of Required Schedules Part IV

•			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		<u> </u>
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		Х
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? <i>If "Yes,"</i>			v
7	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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		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		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable  Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete	11a	X	
	Schedule D, Part VI	IIa	$\widehat{}$	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
	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		Х
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		Х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
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	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"			
	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		<u>X</u> _
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  If "Yes," complete Schedule G, Part III  .	19		х
	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? <b>Note</b> . Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

74-2720710

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

Par	t 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		х
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		х
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		х
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		
С	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		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		×
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	230		<del>  ^</del>
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II  Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	26		х
27	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,			^
20	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	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
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
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			

Pa	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 0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	•		ĺ
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 2	<u> </u>		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	<b>Note</b> . 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		L.—
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	- <u>-</u>		· .
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
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		X
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		V
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	oa_		X
b	gifts were not tax deductible?	6b		l
7	Organizations that may receive deductible contributions under section 170(c).	0.5		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			İ
-	and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	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			
е	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?	<b>7</b> f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		X
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	<u> </u>	X
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?  Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		X
b 10	Section 501(c)(7) organizations. Enter	90		<del>  ^-</del>
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			
11	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year    12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u> </u>	L	L_
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	ļ	<u> </u>
	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	i '		
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	<u> </u>		<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<b> </b>	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	1	X

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Par	t 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, p.	rocesses,	or change	s ın		
		Schedule O See instructions.					
		Check if Schedule O contains a response to any question in this Part VI					
Sect	ion A. (	Soverning Body and Management					
					_	Yes	No
1a		e number of voting members of the governing body at the end of the tax year	1a	3			
b		e number of voting members included in line 1a, above, who are independent	1b	3		i	
2	-	officer, director, trustee, or key employee have a family relationship or a business relation	onship with	<u>_</u>			
	-	er officer, director, trustee, or key employee?		-	2		<u> </u>
3		organization delegate control over management duties customarily performed by or und					
		sion of officers, directors or trustees, or key employees to a management company or other	•	'  -	3		X
4		organization make any significant changes to its governing documents since the prior Form 990 w		-	4		<u>X</u>
5		organization become aware during the year of a significant diversion of the organization	s assets?	Ļ	5		X
6		e organization have members or stockholders?			6		
7a		e organization have members, stockholders, or other persons who may elect one or moi overning body?	e member	5	7a		v
ь		decisions of the governing body subject to approval by members, stockholders, or other	nereone?	ŀ	7b		<u>X</u>
8		organization contemporaneously document the meetings held or written actions underta	•	<u> </u>	<del>''</del>		
•		r by the following	nen danng		-	1	
а		verning body?		-	8a	X	
b	-	ommittee with authority to act on behalf of the governing body?			8b	Х	
9		any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot b	e reached				
	at the o	rganization's mailing address? If "Yes," provide the names and addresses in Schedule C			9		<u>X_</u>
Sect	<u>ion B. F</u>	olicies (This Section B requests information about policies not required by the I	nternal Re	evenue Co	de)		
				F		Yes	No
10a		e organization have local chapters, branches, or affiliates?			<u>10a</u>		X
b		does the organization have written policies and procedures governing the activities of s					
44-		s, and branches to ensure their operations are consistent with those of the organization?			10b		
па	form?	organization provided a copy of this Form 990 to all members of its governing body before	ore ming un		11a	х	
b	•	e in Schedule O the process, if any, used by the organization to review this Form 990		-	<u> </u>	$\stackrel{\sim}{-}$	
		e organization have a written conflict of interest policy? If "No," go to line 13		ŀ	12a	X	<del></del>
		pers, directors or trustees, and key employees required to disclose annually interests that	t could aive				
		onflicts?			12b	х	
С	Does th	e organization regularly and consistently monitor and enforce compliance with the policy	? If "Yes,"	, [			
	describ	e in Schedule O how this is done		L.	12c	Х	
13	Does th	e organization have a written whistleblower policy?		L	13		<u>X</u>
14		e organization have a written document retention and destruction policy?			14	Х	
15		process for determining compensation of the following persons include a review and app		_		ı	
	•	dent persons, comparability data, and contemporaneous substantiation of the deliberation	on and dec	P-			
a	-	anization's CEO, Executive Director, or top management official			15a	Х	<del></del>
b		fficers or key employees of the organization		-	15b		X
40-		to line 15a or 15b, describe the process in Schedule O (See instructions)			ŀ	ļ	
тьа		organization invest in, contribute assets to, or participate in a joint venture or similar arra exable entity during the year? .	ingement		16a		X
b		has the organization adopted a written policy or procedure requiring the organization to	evaluate	}	Iba		_
D		expation in joint venture arrangements under applicable federal tax law, and taken steps to		rd			
		inization's exempt status with respect to such arrangements?	o oalogual		16b	-i	
Sect		Disclosure			,		
<u> 17</u>		states with which a copy of this Form 990 is required to be filed ► UT					
18		6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and	990-T (501	(c)(3)s only	)		••
		e for public inspection. Indicate how you make these available. Check all that apply	,	. , , , ,	•		
		n website Another's website X Upon request					
19	Describ	e in Schedule O whether (and if so, how), the organization makes its governing docume	nts, conflict	t of interest			
	-	and financial statements available to the public					
20		e name, physical address, and telephone number of the person who possesses the book					
	organız	ation ► Marco Valdez	(2	10) 222-170	)4		
		1416 E Commerce Street, San Antonio, TX 78205					

Form 990 (2010)	Centro Por La Justicia									74-27207	10 Page <b>7</b>
Part VII	Compensation of Officers, Dire		es, K	еу	En	ıplo	oyee	s, I	lighest Comp	ensated	
•	Employees, and Independent C										<u></u>
	Check if Schedule O contains a re									· · ·	
Section A.	Officers, Directors, Trustees, Key I										
<b>1a</b> Complete organization's	this table for all persons required to be tax year	listed Report of	comp	ens	atıo	n fo	r the	cal	endar year endır	ng with or within	the
<ul><li>of compensate</li><li>List all</li><li>List the</li><li>who received</li></ul>	of the organization's current officers, of the Enter -0- in columns (D), (E), and of the organization's current key empler organization's five current highest correportable compensation (Box 5 of Forand any related organizations	(F) if no compe oyees, if any S mpensated emp	nsatio ee in oloye	on v stru es (	vas ictio oth	pai ns t er th	d for de nan a	fini n of	tion of "key emp fficer, director, tr	loyee " ustee, or key en	nployee)
List all	of the organization's <b>former</b> officers, keeportable compensation from the orga			_					d employees wh	no received more	e than
<ul> <li>List all organization,</li> </ul>	of the organization's <b>former directors</b> more than \$10,000 of reportable comp	or trustees that ensation from t	at rec	eive gan	ed, i	n th	ne ca <sub>l</sub> and a	oac any	related organiza	ations	of the
compensated	n the following order individual trustee employees, and former such persons										
Check th	is box if neither the organization nor ar	ny related organ	ızatıc	n c	omp	en	sated	an	y current officer,		tee
	(A)	(B)	Posit	ion (		C) k all	that ap	(vlac	(D)	(E)	(F)
	Name and Title	Average hours per	1	_	T	é			Reportable compensation	Reportable compensation	Estimated amount of
		week (describe hours for related organizations in Schedule O)	Individual trustee or director		Officer	y employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
44) 5 1		ŕ			_	L	<u>e</u>	_			
(1) Ruben		40	x			x	"		22,000		E 000
Executive Dir (2) Nick Cl		40	<del>  ^</del>	_	H	<del> </del> ^	X	-	32,000	0	5,808
President		2			x				o	o	0
(3) Raul Vi Vice Presider		2			x				0	0	0
(4) Robert	1										
Secretary		2	ļ		X				0	0	0
(5)											
(6)											
(7)											
(8)											
(9)											
(10)											
(11)	· · · · · · · · · · · · · · · · · · ·										
(12)											
(13)											
(14)											
(15)											

(16)

	990 (2010) Centro Por La Justicia									74-272	
P	Section A. Officers, Directors, Ti		nplo	yee			High	est			
	(A) Name and title	(B) Average	Posit	ion (	-	C) k all	that ap	ply)	(D) Reportable	(E) Reportable	(F) Estimated
		hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(17)							a				-
(18)											
(19)											
											_,
(26)											
(27)											
(28)											
1b	Sub-total  Total from continuation about to Bort VIII 6	Castian A						•	32,000	0	5,808
c d	Total from continuation sheets to Part VII, S Total (add lines 1b and 1c)	Section A						•	32,000	0	0 5,808
2	Total number of individuals (including but not I reportable compensation from the organization		ısted		ove) 0	wh	o rec	eive			
	Toportable componedion from the enganization				<u> </u>						Yes No
3	Did the organization list any <b>former</b> officer, diremployee on line 1a? <i>If</i> "Yes," complete Sche					ee,	or hi	ghe	st compensated	1	3 X
4	For any individual listed on line 1a, is the sum the organization and related organizations gre										
5	Individual  Did any person listed on line 1a receive or acc									dıvıdual	4 X
Sec	for services rendered to the organization? If "Yetion B. Independent Contractors	res, complete s	SCHE	Jule	J 10	or s	исп р	ers	on		5 X
1	Complete this table for your five highest comp	ensated indepe	ndent	COI	ntra	ctor	s tha	t re	ceived more tha	n \$100,000 of	
	compensation from the organization										<del></del>
	(A) Name and business add	ress							(B) Description of ser	vices C	(C) compensation
	NONE										0
											0
										<del></del>	0
											0
2	Total number of independent contractors (inclumore than \$100,000 in compensation from the		ited t	to th	ose	list	ted al	oov	e) who received		

489.327

21,645

Total revenue. See instructions

#### 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				D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	0			
2	Grants and other assistance to individuals in	_			
_	the U.S. See Part IV, line 22	- 0			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	o			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				
	trustees, and key employees	ol			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	o			
7	Other salaries and wages	41,600	32,000	9,600	
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	0			
9	Other employee benefits	3,990	3,990		
10	Payroll taxes	3,182	2,448	734	
11	Fees for services (non-employees)	22.550	22 550		
a b	Management Legal .	22,550 0	22,550		
C	Accounting	0			
d	Lobbying	0			
e	Professional fundraising services. See Part IV, line 17	0			· · ·
f	Investment management fees	1,600	1,600		
g	Other	0			
12	Advertising and promotion	186	186		
13	Office expenses	4,172		4,172	
14	Information technology .	0			
15	Royalties	0			
16	Occupancy	0	45 000	45.000	
17 18	Travel	31,264	15,632	15,632	<del></del>
10	Payments of travel or entertainment expenses for any federal, state, or local public officials	٥			
19	Conferences, conventions, and meetings	10,972	10,972		
20	Interest	0	10,072		
21	Payments to affiliates	0			<del></del> :
22	Depreciation, depletion, and amortization	6,030	3,015	3,015	0
23	Insurance	0			
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)	279.402	270 402		
a b	Program service fees Program supplies (for community garden	278,193 2,247	278,193 2,247		
C		2,247	2,241	-	
ď		0	-		
e		0			
f	All other expenses	2,584		2,584	
25	Total functional expenses. Add lines 1 through 24f	408,570	372,833	35,737	0
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			_	

Pa	art X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		<u> </u>	12,059	1	98,534
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			0	3	0
	4	Accounts receivable, net			4,836	4	4,736
	5	Receivables from current and former officers, of	directoi	rs, trustees, key		i	
		employees, and highest compensated employe Schedule L	ees Co	omplete Part II of		5	
	6	Receivables from other disqualified persons (a	s defin	ed under section			
		4958(f)(1)), persons described in section 4958					
		employers and sponsoring organizations of sec					
ध		employees' beneficiary organizations (see insti			6		
Assets	7	Notes and loans receivable, net	<u></u>	0		0	
۲	8	Inventories for sale or use	Ĭ		8		
	9	Prepaid expenses and deferred charges		Ī		9	**
	10a	Land, buildings, and equipment cost or		Ī			
		other basis Complete Part VI of Schedule D	10a	448,298			
	b	Less accumulated depreciation	10b	41,045	412,283	10c	407,253
	11	Investments—publicly traded securities		.,,	0		0
1	12	Investments—other securities See Part IV, line		0	12	0	
	13	Investments-program-related See Part IV, lin	0	13	0		
	14	Intangible assets		0	14	0	
	15	Other assets See Part IV, line 11			0	15	0
	16	Total assets. Add lines 1 through 15 (must eq	ual line	: 34)	429,178	16	510,523
	17	Accounts payable and accrued expenses			5,570	17	6,159
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
es	21	Escrow or custodial account liability Complete	Part IV	/ of Schedule D		21	
Liabilities	22	Payables to current and former officers, director	ors, trus	stees, key			
ap		employees, highest compensated employees,	and dis	squalified			
		persons Complete Part II of Schedule L		Ļ	<del> </del>	22	
	23	Secured mortgages and notes payable to unre	lated th	nird parties	271,712	23	271,712
	24	Unsecured notes and loans payable to unrelate		l parties	0	24	0
	25	Other liabilities Complete Part X of Schedule I	)		0	25	0
$\rightarrow$	26	Total liabilities. Add lines 17 through 25			277,282	26	277,871
ses		Organizations that follow SFAS 117, check complete lines 27 through 29, and lines 33 a					
ă	27	Unrestricted net assets		-	151,896	27	232,653
lag	28	Temporarily restricted net assets				28	
힏	29	Permanently restricted net assets				29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, and complete lines 30 through 34.	check	here ▶			
2	20	_		}-		20	
es	30	Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or e		ont filled		30	
ا <u>چ</u>	31 32					31 32	
[독	33	Retained earnings, endowment, accumulated in Total net assets or fund balances	, or other lunds	151 000		222.652	
				}	151,896		232,653
	34	Total liabilities and net assets/fund balances		<u></u>	429,178	34	510,524

Form 9	990 (2010) Centro Por La Justicia	74-	2720710	Pa	ge <b>12</b>
Par	t XI Reconciliation of Net Assets	_			
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		489	9,327
2	Total expenses (must equal Part IX, column (A), line 25)	2			3,570
3	Revenue less expenses Subtract line 2 from line 1	3			0,757
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			1,896
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
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		232	2,653
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 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
С	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?		2c	Χ	
	If the organization changed either its oversight process or selection process during the tax year, explain in	ı			- 1
	Schedule O				
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were		}		
	<u>issued on a separate basis, consolidated basis, or both</u>				li
	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		
			Form	aan	(2010)

#### 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

Open to Public Inspection

Name of the organization Centro Por La Justicia Employer identification number 74-2720710

Par	t I Reason f	or Public Cha	rity Status (All orga	nization	s must c	omplete	this pai	rt.) See ii	nstructio	ns.	
The o	organization is not	a private founda	ition because it is: (Fo	r lines 1 t	through 1	1, check	only one	box.)			
1	A church, con	vention of churc	hes, or association of	churches	s describe	ed in <b>sec</b>	tion 170(	(b)(1)(A)(i)	).		
2	A school desc	ribed in <b>section</b>	170(b)(1)(A)(ii). (Attac	h Sched	ule E.)						
3			spital service organiza			section 1	70(b)(1)(	(A)(iii).			
4			on operated in conjunc						)(b)(1)(A)	iii). Enter the	
-	_	ne, city, and state	•		•					•	
5	☐ An organizatio	on operated for	the benefit of a collect	ge or uni	versity ov	wned or	operated	by a go	vernment	al unit described in	
		)(1)(A)(iv). (Com		<b>3</b>			-,	, 3-			
6				al unit de	scribed in	section	170/h)/1	)( <b>Δ</b> )( <sub>4</sub> )			
7											
•	described in section 170(b)(1)(A)(vi). (Complete Part II.)										
					nnioto De						
8	_		n section 170(b)(1)(A)								
9			receives: (1) more that								
			to its exempt functi								
	• •	•	nt income and unrel						n 511 ta	x) from businesses	
	,	•	fter June 30, 1975. Se					-	_		
10		-	operated exclusively			-					
11			nd operated exclusive								
			licly supported organ								
	<b>509(a)(3).</b> Che	eck the box that	describes the type of	supportin	ig organiz	zation and	d comple	ete lines 1	1e throug	jh 11h.	
	a 🗌 Type I	b □	Type II c	Type	III-Funct	ionally int	tegrated		d□	Type III–Other	
е	☐ By checking t	his box, I certify	that the organization	is not co	ntrolled d	lirectly or	indirectl	y by one	or more	disqualified persons	
	other than fou	indation manage	ers and other than one	e or more	publicly	supporte	ed organi	izations d	lescribed	in section 509(a)(1)	
	or section 509	)(a)(2).									
f	If the organiz	ation received a	written determination	on from t	the IRS t	that it is	a Type	I, Type I	l, or Typ	e III supporting	
	organization, o	check this box .								🗆	
g	Since August	17, 2006, has t	he organization accer	oted any	gift or co	ontributio	n from a	ny of the	)		
_	following pers	ons?	-	·	_			Ť			
	(i) A person	who directly or i	ndirectly controls, eith	her alone	or toget	her with	persons	described	d in (ii) ar	d Yes No	
			ody of the supported o							11g(i)	
	(ii) A famıly m	ember of a person	on described in (i) abo	ve?						11g(ii)	
	• •	•	a person described in							11g(iii)	
h		-	on about the supporte							5()	
	Name of supported	(ii) EIN	(III) Type of organization		rganization		ou notify	661	s the	(vii) Amount of	
(1)	organization	(11) (11)	(described on lines 1–9		sted in your	the organ	nization in	organizat		support	
			above or IRC section	governing	document?		of your port?		zed in the		
			(see instructions))	Yes	No	Yes	No	Yes	No		
(A)											
		ļ									
(B)											
(C)							,				
								-			
(D)											
			ļ. <del> </del>				<b> </b>	ļ	<b> </b>		
(E)											
										·	
					Į l						

**Total** 

Schedu	lle A (Form 990 or 990-EZ) 2011						Page <b>2</b>
Part							
•	(Complete only if you checked the						llify under
	Part III. If the organization fails to	qualify unde	er the tests lis	ted below, p	lease comple	te Part III.)	
	on A. Public Support			·			
Caler	dar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	ınclude any "unusual grants.")	246.100	294.230	418,070	596,353	463,082	2,017,835
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					l	
	organization without charge						
4	Total. Add lines 1 through 3	248.100	294,230	418,070	596,353	463,082	2,017,835
5	The portion of total contributions by						
_	each person (other than a		<u> </u>				
	governmental unit or publicly	American de la composición del composición de la composición de la composición del composición de la composición del composición de la composición del com	hallon the most of securities that	and the statement of the con-		an initiativa ilia salah ili angan menjalah ili ang	
	supported organization) included on	the second secon	mac. dersial is sittlisee				
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.						3,017,835
Secti	on B. Total Support				·		
Calen	dar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	248,100	294,230	418,070		463,083	2,017,835
8	Gross income from interest, dividends,						
_	payments received on securities loans,						
	rents, royalties and income from similar						
	sources	19,304	27,649	14,700	12,900	4,800	79,153
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.)						
11	Total support. Add lines 7 through 10						2,096,988
12	Gross receipts from related activities, etc.	(see instruction	ons)			12	
13	First five years. If the Form 990 is for th	•	•		or fifth tax ve	. —	501(c)(3)
	organization, check this box and stop he						▶ □
Secti	on C. Computation of Public Suppor						
14	Public support percentage for 2011 (line 6			1. column (f))		14	96.23 %
15	Public support percentage from 2010 Sch		•			15	0.00 %
16a	331/3% support test-2011. If the organiz						
	box and stop here. The organization qua						. ▶ □
b	331/3% support test-2010. If the organ	•		-		15 is 33½% o	or more.
	check this box and stop here. The organi						. ▶ □
17a	10%-facts-and-circumstances test —20		, ,	• • •		a or 16b and l	ino 14 io
114	10% or more, and if the organization med						
	Part IV how the organization meets the "fa						
	organization	asis and-oncu	Gtarious tes	The organiz	adon qualifics (	as a publicly Su	.pported
•-	· ·					40. 4-	· - 🗀
b	10%-facts-and-circumstances test – 20						
	15 is 10% or more, and if the organization of						
	Explain in Part IV how the organization m				ne organizatioi	n quannes as a	publicly
40	supported organization						· <b>-</b> 🗆
18	Private foundation. If the organization di	и посспеска і	oox on line 13,	, 108, 100, 178	ı, or 170, cneci	k ulis box and s	see

#### 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.)

	if the organization falls to quality	under the te	sis listed beit	Jw, piease co	Jilipiele Fait	11. <i>)</i>	
	on A. Public Support				,		
Calen	dar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(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	<del></del>	<u> </u>				
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						1
c			<del>                                     </del>	<del> </del>			<del> </del>
6 7a	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and 3						<del>                                     </del>
1 a	received from disqualified persons .						
L	·		<del> </del>		<del> </del>		<del>  ·</del>
þ	Amounts included on lines 2 and 3 received from other than disqualified						1
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						1
	line 6.)						
Secti	on B. Total Support			•	•	•	•
Calen	dar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,		1				
	royalties and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975		ļ				1
	Add lines 10a and 10b		ļ				<b></b>
11	Net income from unrelated business					-	
	activities not included in line 10b, whether						
	or not the business is regularly carried on					ļ	<b>_</b>
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
12	(Explain in Part IV.)		<b> </b>	- <del></del>	<del> </del>	<del>                                     </del>	<del> </del> -
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the	ne organizatio	n's first secon	d third fourth	or fifth tay v	L ear as a sectio	1 on 501(c)(3)
	organization, check this box and <b>stop he</b>	•			•		
Secti	on C. Computation of Public Suppor			<u> </u>			<u> </u>
15	Public support percentage for 2011 (line			3, column (fl)		15	%
16	Public support percentage from 2010 Scl	• • •				<del></del>	%
	on D. Computation of Investment In						
17	Investment income percentage for 2011 (			y line 13, colu	mn (f))	17	%
18	Investment income percentage from 2010		• •	-			%
19a							
	17 is not more than 331/3%, check this box						
b	331/3% support tests-2010. If the organiz						
_	line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization di	d not check a	box on line 14	, 19a, or 19b,	check this box	and see instru	uctions 🕨 🗀

Schedule A (F	Form 990 or 990-EZ) 2011	Page 4
Part IV	<b>Supplemental Information.</b> 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 D** (Form 990)

**Supplemental Financial Statements** 

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

► 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.

Inspection Employer identification number

Centro	Por La Justicia		74-2720710
Par	Organizations Maintaining Dono organization answered "Yes" to Fo	r Advised Funds or Other Similar Fu orm 990, Part IV, line 6.	inds or Accounts. Complete if the
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year) .		
3	Aggregate contributions to (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and	donor advisors in writing that the assets	hold in donor advised
3	funds are the organization's property, subject		
_		-	_ ··· _ ···
6	Did the organization inform all grantees, do		
	only for charitable purposes and not for the		
	conferring impermissible private benefit? .		· · · · · · · · · · Yes · No
Par		lete if the organization answered "Yes	" to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held I		
	Preservation of land for public use (e.g.,	ecreation or education)	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 organiza	tion held a qualified conservation contribut	tion in 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	ements	2b
c	Number of conservation easements on a cer		i
d	Number of conservation easements includ		- i
_	historic structure listed in the National Regis		I I
3	Number of conservation easements modified		
•	tax year ►	r, transferred, released, extinguisited, er te	Thinated by the organization during the
4	Number of states where property subject to	conseniation easement is located	
5	Does the organization have a written pol		spection handling of
Ū	violations, and enforcement of the conserval		
6	Staff and volunteer hours devoted to monito		
O	Stan and volunteer hours devoted to monito	ing, inspecting, and emorcing conservation	in easements during the year
-	Amount of our amount of property and	menesting and enforcing concentation as	namenta during the year
7	Amount of expenses incurred in monitoring, ►\$	inspecting, and emorcing conservation ear	sements during the year
•		an line 2(d) above estiate the requirements	of acetion 170(b)(4)(D)
8	Does each conservation easement reported (i) and section 170(h)(4)(B)(ii)?		
_	(, , , , , , , , , , , , , , , , , , ,		Yes 🗌 No
9	In Part XIV, describe how the organization re		
	balance sheet, and include, if applicable, the	<del>_</del>	inancial statements that describes the
	organization's accounting for conservation e		Oth Ci!! A
Part		ctions of Art, Historical Treasures, o	
		ered "Yes" to Form 990, Part IV, line 8	
1a	If the organization elected, as permitted und		
	works of art, historical treasures, or other		
	public service, provide, in Part XIV, the text of		
b	If the organization elected, as permitted un		
	works of art, historical treasures, or other	<u>.</u>	education, or research in furtherance o
	public service, provide the following amount	s 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		
	following amounts required to be reported u		
а	Revenues included in Form 990, Part VIII, lin	e1	• \$
	Assets included in Form 990, Part X		

Part	Organizations Maintaining							
. 3	Using the organization's acquisition, a collection items (check all that apply):	accession, and c	ther reco	rds, chec	k any of th	e follow	ving that are a	significant use of its
а	☐ Public exhibition		d	□ Loan	or exchang	ie progi	ams	
b	☐ Scholarly research			☐ Othe		,- , 3		
c	☐ Preservation for future generations	•	·		·			·
4	Provide a description of the organizat		and expla	an how t	hev further	the ora	anization's exe	empt purpose in Part
•	XIV.				,			
5	During the year, did the organization	solicit or receive	donation	s of art.	historical tr	reasures	s, or other sim	ılar
	assets to be sold to raise funds rather							
Part								
ı uı	line 9, or reported an amoun				jainzanon (	u. 101101	00 100 101	01111 000, 1 411 111,
	Is the organization an agent, trustee,	custodian or of	her intern	nediary fo	or contribut	ions or	other assets	not
	included on Form 990, Part X?							·
ь	If "Yes," explain the arrangement in Pa							1cs 1to
	ii res, explain the arrangement iii r	art Arv and comp	note the re	mowning to	abic.			Amount
С	Beginning balance					1c	<del></del>	
d	Additions during the year					1d	+	
	•					1e	<del></del>	
e f	Distributions during the year Ending balance					1f		
	Did the organization include an amour							☐ Yes ☐ No
2a			מונא, וווופ	:21: .				□ 162 □ NO
	If "Yes," explain the arrangement in Pa Endowment Funds. Complete		zation ar	ewored	"Voc" to E	Form Q	On Part IV Jur	no 10
rail	Endowment Funds. Comple	(a) Current year	T	or year			(d) Three years ba	
4.	Beginning of year balance	(a) carron you	(3)		(0, 11/0 )00.	- Daox	(a) Thios yours bu	Cit (O) I dui years back
1a	- · · · · · · · · · · · · · · · · · · ·		<del> </del>					
b	Contributions							
С	Net investment earnings, gains, and losses							
	]							
	Grants or scholarships						· · · · · · · · · · · · · · · · · · ·	
е	Other expenditures for facilities and							
_	programs		<u> </u>					-
f	Administrative expenses		1					
g	End of year balance				L			
2	Provide the estimated percentage of the	-		e (line 1g	, column (a	i)) held a	as:	
а	Board designated or quasi-endowmer		%					
b	Permanent endowment >	%						
С	Temporarily restricted endowment	%						
_	The percentages in lines 2a, 2b, and 2							•
За	Are there endowment funds not in the	e possession of t	ne organi	zation the	at are neid	and ad	ministered for	
	organization by:							Yes No
	(i) unrelated organizations							. 3a(i)
	(ii) related organizations							. 3a(ii)
	If "Yes" to 3a(ii), are the related organi							. <b>3b</b>
4	Describe in Part XIV the intended uses							<del> </del>
Part	· · · · · · · · · · · · · · · · · · ·	· · ·		r				
	Description of property	(a) Cost or o			or other basis other)		Accumulated epreciation	(d) Book value
1a	Land				237,370			237,370
b	Buildings				209,198		39,315	169,883
С	Leasehold improvements	. [						
d	Equipment				1730		1730	
е	Other							
Total.	Add lines 1a through 1e. (Column (d) m	nust equal Form S	990, Part 2	X, column	n (B), line 10	O(c).)	▶	407,253

Part VII	Investments - Other Securities.	See Form 990, Part X	, line 12.	
. (6	a) Description of security or category (including name of security)	(b) Book value	(c) Method of val Cost or end-of-year n	
(1) Financia	l derivatives			
(2) Closely-	held equity interests			
(3) Other				
(A)		· ·	-	
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
(1)		<u> </u>		
	(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 va Cost or end-of-year n	
_(1)		· · · · · · · · · · · · · · · · · · ·		···
_(2)	·-			
_(3)				
_(4)				
(5)				
(6)		<del>-</del>		<del></del>
(7)				- · · · · · · · · · · · · · · · · · · ·
(8)			<u> </u>	
(9)			<del>-</del>	
(10)	(b) must equal Form 990, Part X, col. (B) line 13.)		<u> </u>	<del></del>
Part IX	Other Assets. See Form 990, Par	t X line 15		
r are ix		Description		(b) Book value
(1)		<u> </u>	·-·	(-,
(2)				
(3)		· <del> , </del>		
(4)				
(5)				<del> </del>
(6)		-		-
(7)				
(8)				
(9)				
(10)				
	mn (b) must equal Form 990, Part X, col			
Part X	Other Liabilities. See Form 990, F			
1.	(a) Description of liability	(b) Book value		
	income taxes	<del></del>		1
(2)		<u> </u>	_	
(3)		<u> </u>	_	
(4)		· · · ·	_	
(5)				
(6)			_	
(1)		<u>.</u>	4	
(8)			$\dashv$	Ì
(10)			$\dashv$	
(11)			$\dashv$	
	b) must equal Form 990, Part X, col. (B) line 25 )		$\dashv$	
	SC 740) Footnote. In Part XIV, provide t	he text of the footpote to	the organization's financial states	gente that reports the

Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statem		
Tabal management (Farma 000   Danit VIII   and to an a 40)		<del></del>
Total revenue (Form 990, Part VIII, column (A), line 12)	1	489,327
otal expenses (Form 990, Part IX, column (A), line 25)	2	408,570
excess or (deficit) for the year. Subtract line 2 from line 1	3	80,758
Net unrealized gains (losses) on investments	4	<del></del>
	5	
		<del></del>
		80,747
		60,747
		<del>-</del>
	<del>                                     </del>	
	-	
	-	
	1	
	20	
		·
	†	
	4c	
otal revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
	er Return	<del></del>
otal expenses and losses per audited financial statements	1	
mounts included on line 1 but not on Form 990, Part IX, line 25:		
onated services and use of facilities		
rior year adjustments	]	
Other losses	]	
Other (Describe in Part XIV.)		
dd lines 2a through 2d	2e	_
	3	
Other (Describe in Part XIV.)	]	
dd lines 4a and 4b	4c	
otal expenses. Add lines 3 and 4s. (This must equal Form 000, Bort I line 19)		
otal expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
	Avery period adjustments  And period adjustments (net). Add lines 4 through 8  Avery period adjustments (net). Add lines 4 through 8  Avery period (deficit) for the year per audited financial statements. Combine lines 3 and 9  If the Reconciliation of Revenue per Audited Financial Statements With Revenue per otal revenue, gains, and other support per audited financial statements  And the revenue, gains, and other support per audited financial statements  And the revenue, gains on investments  Bet unrealized gains on investment  Bet unrealized gains on in	rivestment expenses

Schedule D (For	rm 990) 2011	Page 5
Part XIV	Supplemental Information (continued)	
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#### **SCHEDULE O** (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization 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.

Employer identification number

Centro Por La Justicia	74-2720710
Form 990 Part Part IV Section B Line 11b Draft of 990 is e-mailed or delivered to board	
members before it is submitted	
Form 990 Part Part IV Section B Line 12b Board members and staff are required to sign a	•••••••
conflict of interest form in January every year	
Form 990 Part Part IV Section B Line 15a For salary compensation, board uses comparative	
salary schedule from the local nonprofit sector	
Form 990 Part Part III Line Line 2 Centro is expanding programs for social change - working	
with communities and educating members on how environmental issues affect communities and	how
to bring about change, doing campaigns to register voters and educating them on voters rights,	·
working with the youth in the community and teaching them how economic issues affect them	

Schedule O (Form 990 or 990-EZ) (2010)	Page 2
Name of the organization	Employer identification number
Centro Por La Justicia	74-2720710
••••••	
	•••••
•••••••••••••••••••••••••••••••••••••••	
•••••••••••••••••••••••••••••••••••••••	
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•••••••••••••••••••••••••••••••••••••••	

Total

11 Total accounts receivable

Part VIII, Lines 1a-h (990) - Contributions, Gifts, Grants, and Other Amounts Noncash 1 Federated Campaigns . . . . . 1,037 3 Fundraising events . . . . 4 Related organizations . . . . . . . . . . . . . 5 6 Government grants (contributions) . . . 6 All other contributions, gifts, grants, and similar amounts not included above: 461,325 720 Contributions 462,045 Other contributions total . . . . . . 463,082 <u>0</u>

Part IX, Line 22 (990) - Depreciati	on, Depletion, and	Amortization		
	(A) Total	(B) Program	(C) Management	(D) Fundraising
1 Depreciation	, <b>1</b> 6,030	services 3,015	and general 3,015	
2 Depletion	$\frac{2}{3} \frac{0}{0}$			
4 Tetal	6 030	3.015	3.015	

Part X, Line 4 (990) - Accounts Receivable Allowance for doubtful accounts Accounts receivable End Beginning End Beginning 4,736 1 4,836 Accts Receivable 2 3 2 4 5 6 7 8 8 9 9 10 10

4,836

11

4,736

0

ings, and Equipment
Land, Buildings
٦-
10b (990)
10b (99
and
, Lines 10a
5
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									448,298	35,015	41,045	0	0	407,253
				Leasehold				Check if		Beginning	Ending			
				Improve-			Investment	Asset	Cost/Other	ccumulated	Accumulated	Disposals	Beginning	Ending
	Category or Item	Land	Buldings	ments	Equipment	Ogher		Disposed	Basis	<b>Sepressation</b>	Depresation	Adjustments	Balance	Balance
-	Land	×							129,475	0			0	129,475
7	Land 1424 E.Commerce	×	,						107,895	0			0	107,895
m	Land/Building 311 Idaho		X						920'89				0	68,076
4	Building/improvements		Х						141,122	Š	36		0	101,807
5	Fumiliare and equipment				×			~~	1,730	1,730	1,730		0	0
ص									0	0			0	0
/									0	0			0	0
8						_			0	0			0	0
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74-2720710

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Balance due end of year 271,712 Part X, Lines 23 and 24 (990) - Secured and Unsecured Notes Payable Balance due beginning of year 271,712 271,712 Check If Unsecured Lender's name 1 Interfund Payables