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Short Form Return of Organization Exempt From Income Tax

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions) All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2011 calendar year, or tax year beginning

07-01, 2011, and ending

06-30, 2012

B Check if applicable

- Address change
Name change
Initial return
Terminated
Amended return
Application pending

C Name of organization

DALIT SOLIDARITY

Number and street (or P O box, if mail is not delivered to street address)

PO BOX 112

City or town, state or country, and ZIP + 4

HINES, IL 60141

D Employer identification number

25-1865082

E Telephone number

(708) 612-4248

F Group Exemption Number

G Accounting Method Cash Accrual Other (specify)

I Website: WWW.DALITSOLIDARITY.ORG

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

J Tax-exempt status (check only one) - 501(c)(3) 501(c) (insert no) 4947(a)(1) or 527

K Check if the organization is not a section 509(a)(3) supporting organization or section 527 organization and its gross receipts are normally not more than \$50,000

Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ \$ 116,158

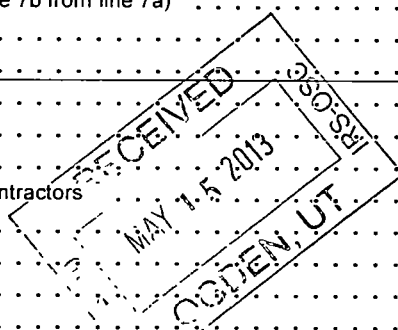
Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I

JUN 04 2013

SCANNED RECEIVED

Table with 21 rows and 2 columns. Rows include: 1 Contributions, gifts, grants, and similar amounts received (116,113); 2 Program service revenue including government fees and contracts; 3 Membership dues and assessments; 4 Investment income (45); 5a Gross amount from sale of assets other than inventory; 5b Less cost or other basis and sales expenses; 5c Gain or (loss) from sale of assets other than inventory; 6 Gaming and fundraising events; 6a Gross income from gaming; 6b Gross income from fundraising events; 6c Less direct expenses from gaming and fundraising events; 6d Net income or (loss) from gaming and fundraising events; 7a Gross sales of inventory, less returns and allowances; 7b Less cost of goods sold; 7c Gross profit or (loss) from sales of inventory; 8 Other revenue (describe in Schedule O); 9 Total revenue (116,158); 10 Grants and similar amounts paid (160,250); 11 Benefits paid to or for members; 12 Salaries, other compensation, and employee benefits; 13 Professional fees and other payments to independent contractors; 14 Occupancy, rent, utilities, and maintenance; 15 Printing, publications, postage, and shipping; 16 Other expenses (describe in Schedule O) (824); 17 Total expenses (161,074); 18 Excess or (deficit) for the year (44,916); 19 Net assets or fund balances at beginning of year (70,352); 20 Other changes in net assets or fund balances; 21 Net assets or fund balances at end of year (25,436).



99-10 13

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name
35 a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?
b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N
37 a Enter amount of political expenditures, direct or indirect, as described in the instructions
b Did the organization file Form 1120-POL for this year?
38 a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?
b If "Yes," complete Schedule L, Part II and enter the total amount involved
39 Section 501(c)(7) organizations Enter
a Initiation fees and capital contributions included on line 9
b Gross receipts, included on line 9, for public use of club facilities
40 a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911, section 4912, section 4955
b Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I
c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958
d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization
e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T
41 List the states with which a copy of this return is filed PA,
42 a The organization's books are in care of REV BENJAMIN CHINNAPPAN Telephone no 708-612-4248
Located at 758 N MICHIGAN ST ELMHURST, IL ZIP + 4 60126
b 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)? If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.
c At any time during the calendar year, did the organization maintain an office outside of the U S ? If "Yes," enter the name of the foreign country
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041-Check here and enter the amount of tax-exempt interest received or accrued during the tax year
44 a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ
b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ
c Did the organization receive any payments for indoor tanning services during the year?
d If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O
45 a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
45 b 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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II

Yes	No
	X

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

47 Did the organization engage in lobbying activities or have a section 501(n) election in effect during the tax year? If "Yes," complete Schedule C, Part II

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

49a Did the organization make any transfers to an exempt non-charitable related organization?

b If "Yes," was the related organization a section 527 organization?

Yes	No
	X
	X
	X
	X

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
NONE				

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated Independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? Note: All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A Yes No

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

Sign Here

Benjamin Chinnappan Signature of officer Date 2-28-13

REV. BENJAMIN CHINNAPPAN, EXECUTIVE DIRECTOR Type or print name and title

Paid Preparer Use Only

Print type preparer's name SAMUEL M BARBUSH Preparer's signature *Samuel Barbush* Date 2/1/13 Check if self-employed PTIN 200188510

Firm's name BARBUSH & HOFFMAN, CPA'S Firm's EIN

Firm's address 1104 FERNWOOD AVENUE CAMP HILL PA 17011 Phone no. 717-761-2801

May the IRS discuss this return with the preparer shown above? See instructions Yes No

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

2011

Open to Public
Inspection

Name of the organization

DALIT SOLIDARITY

Employer identification number

25-1865082

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

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

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)
- 9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)
- 10 An organization organized and operated exclusively to test for public safety See section 509(a)(4).
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h
 - a Type I b Type II c Type III-Functionally integrated d Type III-Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 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")	206,959	90,425	96,780	141,172	116,113	651,449
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	206,959	90,425	96,780	141,172	116,113	651,449
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						87,593
6 Public support. Subtract line 5 from line 4						637,565

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4	206,959	90,425	96,780	141,172	116,113	651,449
8 Gross income from interest, dividends, rents, royalties and income from similar sources	909	289	100	128	45	1,471
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						652,920
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	14	97.65	%
15 Public support percentage from 2010 Schedule A, Part II, line 14	15	87.21	%
16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>		
b 33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
17a 10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
b 10%-facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>		

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II

If the organization fails to qualify under the tests listed below, please complete Part II)

Section A. Public Support

Table with 7 columns: (a) 2007, (b) 2008, (c) 2009, (d) 2010, (e) 2011, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or bus under sec 513; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; b Amounts included on lines 2 and 3 received from other than disqualified persons; c Add lines 7a and 7b; 8 Public support (Subtract line 7c from line 6).

Section B. Total Support

Table with 7 columns: (a) 2007, (b) 2008, (c) 2009, (d) 2010, (e) 2011, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on; 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV); 13 Total support. (Add lines 9, 10c, 11, and 12).

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

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Row 15: Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f)) 15 %; Row 16: Public support percentage from 2010 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

Table with 2 columns: Line number, Percentage. Row 17: Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f)) 17 %; Row 18: Investment income percentage from 2010 Schedule A, Part III, line 17 18 %

19a 33 1/3% support tests - 2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here The organization qualifies as a publicly supported organization

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

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service
Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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2011

**Open to Public
Inspection**

DALIT SOLIDARITY

Employer identification number

25-1865082

01. General explanation attachment

FORM 990-EZ, PART III ORGANIZATION'S PRIMARY EXEMPT PURPOSE

TO PROVIDE HEALTH CARE SERVICES & EDUCATIONAL DEVELOPMENT

EDUCATIONAL PROGRAM

DALIT SOLIDARITY PROVIDES OVER 500 STUDENTS A YEAR WITH THE OPPORTUNITY TO OBTAIN A

QUALITY EDUCATION THROUGH THE FOLLOWING PROGRAMS:

ST. PATRICKS BOARDING HOME

THIS PROVIDES QUALIFIED DALIT CHILDREN WITH ROOM AND BOARD AND SCHOOLING. THIS HOME

ACCOMMODATES 20 CHILDREN AND EIGHT STAFF MEMBERS. CHILDREN LIVE IN OUR HOME AND ATTEND ST.

MARY'S SCHOOL FOR THEIR SCHOOLING. DURING THEIR STAY HERE, WE ALSO PROVIDE INTENSIVE

TRAINING IN COMMUNICATION AND LEADERSHIP SKILLS TO IMPROVE THEIR QUALITY OF EDUCATION.

FORM 990-EZ, PART III ORGANIZATION'S PRIMARY EXEMPT PURPOSE

ST PATRICKS ACADEMY

DALIT SOLIDARITY SUPPORTS ST PATRICKS ACADEMY ENGLISH SCHOOL THAT PROVIDES COST EFFECTIVE

AND QUALITY EDUCATION TO POOR CHILDREN WHO LIVE IN RURAL AREAS AROUND ST PATRICKS HOME.

THERE ARE 124 CHILDREN FROM 15 VILLAGES AND 10 STAFF. THE SCHOOL BEGAN IN 2012 IN THE

INTEREST OF THE POOR FAMILIES WHO CAN NOT AFFORD TO SEND THEIR CHILDREN TO ENGLISH BASED

EDUCATION. FORM 990-EZ, PART III ORGANIZATION'S PRIMARY EXEMPT PURPOSE (CONTINUED)

Name of the organization

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SCHOLARSHIP PROGRAM

DALIT SOLIDARITY PROVIDES OVER 150 STUDENTS WITH SCHOLARSHIPS TO CONTINUE THEIR HIGH SCHOOL AND COLLEGE STUDIES. WE ALSO PROVIDE INCENTIVES TO STUDENTS WHO PURSUE A VOCATIONAL TRAINING PROGRAM.

ST PATRICKS COMMUNITY COLLEGE

DALIT SOLIDARITY PROVIDES 1 YEAR VOCATIONAL TRAINING TO SCHOOL DROPOUT STUDENTS TO ACQUIRE SKILLS & KNOWLEDGE FOR IN ORDER TO OBTAIN A JOB. MORE THAN 85 STUDENTS ARE ENROLLED IN NURSING, 4 WHEELER MECHANICS, COMPUTERS AND ACCOUNTING, TAILORING & FASION. 90% OF STUDENTS GET JOBS IMMEDIATELY AFTER GRADUATION.

FORM 990-EZ, PART III ORGANIZATION'S PRIMARY EXEMPT PURPOSE (CONTINUED)

HEALTH CARE PROGRAM

DALIT SOLIDARITY PROVIDES BASIC HEALTH CARE IN MORE THAN 30 RURAL VILLAGES FOR PEOPLE WHO DO HAVE ACCESS TO ANY EMERGENCY CARE. WE OPERATE FOUR CLINICS IN REMOTE VILLAGES WITH THE HELP OF TWELVE NURSES AND ONE DOCTOR. MORE THAN 2,000 PATIENTS ARE GIVEN BASIC CARE AND HEALTH EDUCATION. CHILDREN ARE GIVEN SPECIAL FOCUS IN OUR CARE. FORM 990-EZ, PART III ORGANIZATION'S PRIMARY EXEMPT PURPOSE (CONTINUED)

ST. MARY'S ALSO OPERATES A MEDICAL OUTREACH PROGRAM. THE STAFF TRAVELS TO A DIFFERENT VILLAGE EACH WEEK TO PROVIDE ON-SITE CARE AND HEALTH EDUCATION PROGRAMS. APPROXIMATELY 150 PATIENTS PER WEEK RECEIVE TREATMENT THROUGH THE OUTREACH PROGRAM.

FIRST RESPONDERS

EMERGENCY TRANSPORTATION SERVICES ARE VIRTUALLY NON-EXISTENT IN RURAL INDIA. GENERALLY,

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PATIENTS TRAVEL BY OX CART OR ARE CARRIED BY FAMILY AND FRIENDS TO THE NEAREST EMERGENCY CENTER. FREQUENTLY HOURS PASS BEFORE PATIENTS REACH A TREATMENT CENTER. FORM 990-EZ, PART

III ORGANIZATION'S PRIMARY EXEMPT PURPOSE (CONTINUED)

IN AN EFFORT TO PROVIDE LIMITED ON-SITE EMERGENCY CARE AND TO STABILIZE PATIENTS UNTIL THEY CAN BE TRANSPORTED TO A MEDICAL FACILITY, DALIT SOLIDARITY INITIATED A FIRST RESPONDERS PROGRAM. THE PROGRAM PROVIDES FIRST AID TRAINING FOR TOW VOLUNTEERS FROM EACH VILLAGE. THE PROGRAM PROVIDES FIRST AID TRAINING FOR TOW VOLUNTEERS FROM EACH VILLAGE. DALIT SOLIDARITY BOARD MEMBERS DR. SUSAN BENEDICT AND MRS. LEENUS THIAG CONDUCTED THE TWO-DAY SEMINARS AT ST. MARY'S HEALTH CENTER. A VARIETY OF FIRST AID TOPICS ARE COVERED INCLUDING TREATMENT FOR FEVER, LACERATIONS, DIARRHEA, CHOKING, SNAKE BITES AND CPR. MORE THAN 1000 ADULT PATIENTS AND 450 CHILDREN ARE TREATED IN OUR FACILITY EACH MONTH. FORM 990-EZ, PART III ORGANIZATION'S PRIMARY EXEMPT PURPOSE (CONTINUED)

WIDOWS EMPOWERMENT PROGRAM

DALITY SOLIDARITY PROVIDES SUPPORT TO WIDOWS WHO BEAR THE BURDEN OF SHAME AND STIGMA. MORE THAN 150 WIDOWS BENEFIT FROM THIS PROGRAM WITH THE HELP OF MICROFINANCING AND SELF-HELP PROJECTS. THEY BECOME INDEPENDENT INCOME EARNERS FOR THEIR FAMILIES AND ARE ABLE TO GAIN HUMAN DIGNITY AND BECOME SELF-SUSTAINING. FORM 990-EZ, PART III ORGANIZATION'S PRIMARY EXEMPT PURPOSE (CONTINUED)

MILK COOPERATIVE SOCIETIES WERE OPENED TO IMPROVE THE LIVES OF OUR WIDOWS. WITH THE HELP OF TWO MILK COOPERATIVES, FIFTEEN WIDOWS MAKE A SMALL EARNING. THREE HOUSES WERE BUILT FOR THE POOREST OF THE POOR WIDOWS.

DEVELOPMENTAL PROGRAM

THIS PROVIDES AN OPPORTUNITY FOR SOME VILLAGERS TO START SMALL BUSINESSES SUCH AS GROCERY

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STORES, SELLING COW MILK AND MEAT. THIS ALSO PROVIDES AN OPPORTUNITY FOR SOME POOR

FAMILIES TO BUILD A SINGLE HOME.

FORM 990-EZ, PART III ORGANIZATION'S PRIMARY EXEMPT PURPOSE (CONTINUED)

OUTREACH PROGRAM

DALIT SOLIDARITY EXTENDS SUPPORT TO A FEW ORPHANAGES THAT NEED BOTH FINANCIAL AND MORAL

SUPPORT. MORE THAN 300 CHILDREN BENEFIT FROM THIS PROGRAM. 2011 FEDERAL WORKSHEETS DALIT

SOLIDARITY 25-1865082

EXCESS CONTRIBUTIONS SCHEDULE A, PART II, LINE 5

	2007	2008	2009	2010	2011	TOTAL	2%AMT	EXCESS
RICARD BENTZ	0	7000	6500	0	9500	23000	13614	9386
REV. BEN CHINNAPPAN	10000	0	2023	30000	0	42023	13614	28409
JOHN LOYA	0	0	30000	0	0	30000	13614	16386
JOHN ROSSI	2500	2000	7000	9000	25000	45500	13614	31886
FRED FISCHER	2500	4500	2500	6000	3000	15500	13614	1886
TOTALS	15000	13500	48023	45000	37500	156023	68070	87953

02. List of grants and similar amounts paid (Part I, line 10)

GRANTEE COMMUNITY CARE TRUST

ADDRESS TAMIL NADU, INDIA 605402

IN .

AMOUNT 139,000

GRANTEE VARIOUS

ADDRESS TAMIL NADU, INDIA 605402

Name of the organization

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DALIT SOLIDARITY

25-1865082

IN .

AMOUNT 21,250

03. Description of other expenses (Part I, line 16)

DESCRIPTION	AMOUNT
BANK FEES	183
WEBSITE MAINTENCANCE	29
OFFICE SUPPLIES	612

990

Overflow Statement

2011
Page 1

Name(s) as shown on return

FEIN

DALIT SOLIDARITY

25-1865082

OTHER PROGRAM SERVICES EXPENSES INCLUDES NO FOREIGN GRANTS

Description	Amount
OUTREACH PROGRAM	\$ 28,950
Total:	<u>\$ 28,950</u>