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Activities & Governance

Revenue

or Sec

Net/ Fund/

Total assets (Part X, line 16)

Part II | Signature Block

Total liabilities (Part X, line 26)

Department of the Treasury

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)

Open to Public Inspection

OMB No 1545-0047

▶ 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 OCT 1. 2011 and ending SEP 30, 2012 D Employer identification number Check if applicable C Name of organization Address change CAMPAIGN FOR COMMUNITY CHANGE Name change 27-0061100 Doing Business As Initial Number and street (or P 0 box if mail is not delivered to street address) Room/suite E Telephone number Termin-1536 U STREET, N.W. 202-339-1811 4,158,902 City or town, state or country, and ZIP + 4 G Gross receipts \$ Applica-WASHINGTON, DC 20009 H(a) Is this a group return pendina F Name and address of principal officer: DEEPAK BHARGAVA Yes X No for affiliates? SAME AS C ABOVE H(b) Are all affiliates included? Yes No I Tax-exempt status: 501(c)(3) X 501(c) () ◀ (insert no) 4947(a)(1) or If "No," attach a list. (see instructions) J Website: ► WWW.CAMPAIGNFORCOMMUNITIES.ORG **H(c)** Group exemption number ▶ L Year of formation 2003 M State of legal domicile DC K Form of organization X Corporation Trust Association Part I Summary Briefly describe the organization's mission or most significant activities: SEE PART III, LINE 1. 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) 11 4 11 Number of independent voting members of the governing body (Part VI, line 1b) 8 5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 16 6 Total number of volunteers (estimate if necessary) Ō. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 4,083,801. 6,364,875 Contributions and grants (Part VIII, line 1h) 68,423. 74,492. Program service revenue (Part VIII, line 2g) 1,023 609. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 1,000. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 6,435,321 4,158,902 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 2,254,141 503,970 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. Benefits paid to or for members (Part IX, column (A), line 4) 375,710. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 542,651. 16a Professional fundraising fees (Part-IX, column-(A), line-11e) 0 b Total fundraising expenses (Part IX, column 1); line 25 283,773. Other expenses (Part IX, column (A) lines 11a-11d, 11f-24e)

Total expenses. Add lines 13-17 (Bust equal Part IX, column (A) (Ine 25)

Revenue less expenses. Subtract line 18 from line 12 3,077,467. 3,119,944. 17

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 Deglaration of preparer (other than officer) is based on all information of which preparer has any knowledge Signature of officer Sign Here MARY M. LASSEN, MANAGING DIRECTOR Type or print name and title ক্র Print/Type preparer's name Preparer's signator P01330558 Check **௸**aid Exand ndreas of Preparer ▶ GELMAN, ROSENBERG & FREEDMAN 52-1392008 Firm's name Firm's EIN Firm's address 4550 MONTGOMERY AVE SUITE Use Only

May the IRS discuss this return with the preparer shown above? (see instructions)

Net assets or fund balances Subtract line 21 from line 20

(301) 951-9090 X Yes No

Form 990 (2011)

4,124,088.

3,935,814.

675,937

259,877

End of Year

34,814.

5,749,795.

3,589,236.

3,225,063.

Beginning of Current Year

685,526.

364,173.

BETHESDA, MD 20814-2930

OGDEN, UT

Form 990 (2011) CAMPAIGN FOR COMMUNITY CHANGE
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
_	If "Yes," complete Schedule A	1	7,-	X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2_	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		v	
	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	N/	Δ
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or		147	
•	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 for which donors have the right to			-
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			-
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, 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		ŀ	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			Х
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	11a		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments · program related in Part X, line 13 that is 5% or more of its total	1		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	İ	X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	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	
В	Was the organization included in consolidated, independent audited financial statements for the tax year? If "You " and if the organization answered "No" to line 12a then completing School to D. Botto VI. VI. and VIII. is not and the completing School to D. Botto VI. VII. and VIII. is not and VIII.	-106		Х
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	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		ļ	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			17
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	_17		_X_
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			v
40	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,"			v
20a	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	202		$\frac{x}{x}$
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		
			990 (2	2011)
			J J J 12	

<u>Form</u>	990 (2011) CAMPAIGN FOR COMMUNITY CHANGE 27-00	<u> 961100</u>	Р	<u>age 4</u>
Pai	t IV Checklist of Required Schedules (continued)			
			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	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		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		х
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
Ŭ	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	2-70		
200	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	250		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualif	—		
20	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	ļ	х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20		
21	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
20	instructions for applicable filing thresholds, conditions, and exceptions)			1
2	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	<u> </u>	X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer	<u> </u>		
·	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			
00	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	"		
٠.	If "Yes," complete Schedule N, Part I	31		Х
_ ₃₂ _	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			-
-	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
-	sections 301 7701·2 and 301 7701·3 ⁹ If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity?	-35-		
0.	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b		000		1
	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 organization		 	† <u></u>
-	If "Yes," complete Schedule R, Part V, line 2	36	N/	A
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	00	 /	ſ
٥.	and that is tracted as a partnership for foderal isosome tox purposes? If "Vos " complete Schodulo P. Port M.	07		l x

Form **990** (2011)

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?

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

a Initiation fees and capital contributions included on Part VIII, line 12 N/A b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 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? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	Pai	Check if Schedule O contains a response to any question in this Part V				\Box			
b Enter the number of Forms W2S included in line 1a. Enter 9-if not applicable					Yes	No			
Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (payment) and provided the payments of the provided to the payment of the provided on Form W3, Transmittal of Wage and Tax Statements, fleed for the calendary year ending with or within the year covered by this return. 8 bit at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 8 bit at least one is reported on line 2a, did the organization file and 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 accounts. 8 bit 1 Yes, and 1 filed a form 990-T for the year? If YNo, "provide an explanation in Schedule O. 8 bit 1 Yes, and 1 filed a form 990-T for the year? If YNo, securities account, or other financial accounts. 9 bit 1 Yes, and 1 filed a form 990-T for the year? If YNo, securities account, or other financial accounts. 9 bit 1 Yes, and the organization and the value or is a party to a prohibited tax sheller transaction? 9 be matructions for filing requirements for Form 10 F 90-22.1, Report of Foreign Bank and Financial Accounts. 9 bit 1 Yes, 2 filed be organization that it was or is a party to a prohibited tax sheller transaction? 9 bit 1 Yes, 2 filed the organization file Form 8889-17 9 bit 1 Yes, 2 filed the organization and party to a prohibited tax sheller transaction solicit any contributions that were not tax deductible? 9 bit 1 Yes, 2 filed the organization microlly shed shed to the year solicitation an express statement that such contributions or grits were not tax deductible? 9 bit 1 Yes, 3 filed the organization include with very solicitation an express statement that such contributions or any solicitation and express statement that such contributions or grits were not tax deductible? 9 bit 1 Yes, 1 filed the org	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 37						
Gambling) winnings to præs winners? Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements. field for the calendar year ending with or within the year covered by this return If all seas one is reported on line 22, aid the organization file all required federal employment tax returne? Note. If the sum of lines 1a and 2s is greater than 250, you may be required to e-fife (see instructions) 30. Did the organization have unrelated business gross income of \$1,000 or more during the year? 31. The file of Form \$200 for for this year? If "Yoe," provide an application is Anocule O 32. 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 accounts? 33. But 1 **Yes," and if the sum of the foreign country (such as a bank account, securities account, or other financial accounts? 34. At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial accounts? 35. Was the organization and it was or is a party to a prohibitor of the things of the organization and it was or is a party to a prohibitor of the things of the organization selection of the financial Accounts. 36. Visually 1 **Yes, and the organization file Form 8888-17* 37. So If "Yes," the file organization is that was or is a party to a prohibitor of the value of the property of the organization selection of the value of the property of the prope	b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b 0						
2a Eart 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. b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2 as in greater than 250, you may be required to e-file (see instructions) 3 b If the veganization have undertaded bosiness gross income of \$1,000 or more dump the year? 3 b If Yes, has if filed a Form 990-T for this year? If Y-No, "provide an explanation in Schedule O 3 b If Yes, and the dump the calendary earl, 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)? 5 b If Y-Yes, "and the foreign country? 5 c If Yes, the security of the organization of the Yes year. 5 b Was the organization for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5 b Was the organization have annual gross receipte that are normally greater than \$100,000, and did the organization sclicit any contributions that were not tax deductible? 5 b If Yes, "did the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible? 5 b If Yes, "did the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible? 5 b If Yes, "did the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible? 5 b If Yes, "did the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible? 6 b If Yes, "did the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible? 7 b If Yes, "and the organization include with every solicitation an express statement that suc	C	Did the organization comply with backup withholding rules for reportable payments to vendors and re-	eportable gaming						
the for the calendary year endring with or within the year covered by this return Secondary Seco		(gambling) winnings to prize winners?		1c	X				
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Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3		filed for the calendar year ending with or within the year covered by this return	2a 8						
3a Dit the organization have unrelated business gross income of \$1,000 or more during the yeer? b if Yees, has filled a Form 990F for this yeer? if Yo," prowde an explanation in Schedule O 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 linancial account)? 5b if Yees, first the name of the foreign country (such as a bank account, securities account, or other linancial account)? 5c was the organization a party to a prohibited tax sheller transaction? 5c if Yees, to line 5a or 5b, did the organization that it was or is a party to a prohibited tax sheller transaction? 5c if Yees, to line 5a or 5b, did the organization that it was or is a party to a prohibited tax sheller transaction? 5c if Yees, to line 5a or 5b, did the organization that it was or is a party to a prohibited tax sheller transaction? 5c if Yees, to line 5a or 5b, did the organization file form 8886-17 5c if Yees, to line 5a or 5b, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 5c if Yees, to did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 5c if Yees, did the organization star are received eductible contributions under section 170(c). a bid the organization star may receive deductible contributions under section 170(c). a bid the organization star may receive deductible contributions under section 170(c). b If Yees, did the organization star may receive deductible contributions under section 170(c). c Did the organization serve any funds, directly to pay premiums on a personal benefit contract? 7c X 7b If Yees, did the organization server any funds, directly to pay premiums on a personal benefit contract? 7c X 7d If Yees, did the organization received a contribution of cars, boats, arplanes, or ot	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?	2b	X				
b if Yes, has it field a Form 990-T for this year? If Yes, *provide an explanation in Schedule O 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) b if Yes, *reter 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 Was the organization a party to a prohibited tax shelter transaction? 6b If Yes, *to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 6c If Yes, *to line 5a or 5b, did the organization that the sor is a party to a prohibited tax shelter transaction? 6c If Yes, *to line 5a or 5b, did the organization that the sor is a party to a prohibited tax shelter transaction? 6d 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? 6d If Yes, *to the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6d If Yes, *to the organization notify the denor of the value of the goods or services provided? 6d If Yes, *to did the organization notify the denor of the value of the goods or services provided? 7d Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to the Form 8282? 7e Did the organization, during the year, pay greniums, directly or indirectly, on a personal benefit contract? 7d If the organization received a contribution of qualified intellectual property, clid the organizations. But the supporting IN / A granization service for the mail of the organization make any taxable distributions under section 4968? 8 Spons		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)						
4a At any time during the calendary 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)? 5b If 'Yes,' enter the name of the foreign country: ▶ 5c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Was the organization a party to a prohibited tax shelter transaction? 5b Uas 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? 5b If 'Yes,' do the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 5c Organizations that may receive deductible contributions under section 170(c). 5d If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6d X 6d				3a		X			
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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 filling Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13b 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b	10								
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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? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b	11					ļ E			
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organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 13b 13c 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X 15c 16 Yes, has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b									
c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	b		l.a. I						
14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b					-				
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		· ·	13¢						
			- 0						
		in res, mas it med a Form 720 to report these payments / if "No," provide an explanation in Scheduli	 		990	2011			

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

	Check if Schedule O contains a response to any question in this Part VI	_		X						
Sec	tion 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 11									
	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		1							
ь	Enter the number of voting members included in line 1a, above, who are independent 1b 11									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other									
	officer, director, trustee, or key employee?	2		X						
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision									
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X						
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X						
6	6 Did the organization have members or stockholders?									
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or									
	more members of the governing body?	7a		<u>X</u>						
b	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or									
	persons other than the governing body?	7b		X						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following									
а	The governing body?	8a	Х							
b	Each committee with authority to act on behalf of the governing body?	8b	Х							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the									
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u>X</u>						
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)									
			Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?	10a		X						
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?	10ь								
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	,						
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990									
12a	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	Х							
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe									
	ın Schedule O how this was done	12c	Х							
13	Did the organization have a written whistleblower policy?	13	Х							
_14 -	Did the organization have a written document retention and destruction policy?	14	Х							
15	Did the process for determining compensation of the following persons include a review and approval by independent									
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
а	The organization's CEO, Executive Director, or top management official	15a		X						
b	Other officers or key employees of the organization	15b		Х						
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)									
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			:						
	taxable entity during the year?	16a		X						
b	If "Yes," 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 the organization's									
	exempt status with respect to such arrangements?	16b								
<u>Sec</u>	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed ►SEE SCHEDULE O									
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) and 990-T (Section 501(c)(3)s only) are	avaılab	le							
	for public inspection. Indicate how you made these available. Check all that apply.									
	Own website Another's website X Upon request									
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finan	cıal							
	statements available to the public during the tax year.									
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion 🕨	·							
	RYAN YOUNG - 202-339-3900									
132006	1536 U STREET, N.W., WASHINGTON, DC 20009									

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

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

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		orga	aniza			npei	ısaı				
(A)	(B)	(C) Position				١		(D)	(E)	(F) Estimated	
Name and Title	Average hours per	(do not check more			than		Reportable compensation	Reportable			
	week					or/trus		from	compensation from related	amount of other	
	(describe	cţō						the	organizations	compensation	
	hours for	l dre				麗	Į	organization	(W-2/1099-MISC)	from the	
	related	Stee	aste			Buss	l	(W·2/1099·MISC)		organization	
	organizations	를	oug		og e	5 8 8	ļ			and related	
	in Schedule O)	Individual frustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	orme			organizations	
(1) DEEPAK BHARGAVA		-	-		×	1 8	۳				
EXECUTIVE DIRECTOR	5.00	Х		Х			ŀ	0.	0.	0.	
(2) SUSAN SANDLER											
PRESIDENT/BOARD CHAIR	1.00	X						0.	0.	0.	
(3) MIALISA BONTA											
VICE CHAIR	1.00	Х				$oxed{oxed}$	<u> </u>	0.	0.	0.	
(4) ED BOOTH	1								_	-	
BOARD MEMBER	1.00	Х		ļ	_	-		0.	0.	0.	
(5) HEATHER BOOTH	1 00	,,							0	0	
BOARD MEMBER	1.00	Х	<u> </u>			ļ	<u> </u>	0.	0.	0.	
(6) BILL DEMPSEY	1.00	v						0.	0	0	
BOARD MEMBER (7) MATTHEW KLEIN	1.00	Х			-			0.	0.	0.	
(7) MATTHEW KLEIN BOARD MEMBER	- 1.00	X-					_	0.	-0.	- 0.	
(8) ALI NOORANI	1.00	^				├		0.	-0.		
BOARD MEMBER	1.00	х				ļ		0.	0.	0.	
(9) KENNETH E. REEVES		 				 	ļ				
BOARD MEMBER	1.00	Х						0.	0.	0.	
(10) JUSTIN RUBEN		Ì								J	
BOARD MEMBER	1.00	Х						0.	0.	0.	
(11) JANET SHENK											
BOARD MEMBER	1.00	Х					L	0.	0.	0.	
		ļ			-	_					
		}									
		-		_	 -	-	ļ				
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		Ь			_		Ь—			F 000 (0044)	

Form 990 (2011)

Part	VII Section A. Officers, Directors, Tru	stees, Key Er	nplo	yee	s, a	nd l	High	est	Compensated Employ	ees (continued)			
	(A)	(B)			(0	C)			(D)	(E)		(F)	
	Name and title	Average	(do		Pos) than	one	Reportable	Reportable			ted
		hours per	box	, unle	ss pe	erson	is bot	h an	compensation	compensation		amoun	
		week (describe	\vdash	00.0.			1	100,	from the	from related organizations	- 1	othe compens	
		hours for	director		Ì		<u>8</u>		organization	(W-2/1099-MIS		from t	
		related) o e e	ustee			ensate	1	(W-2/1099-MISC)	•		organiza	ation
		organizations	la fro	onal tr		ag of	e e					and rela	
		in Schedule O)	Individual trustee or	Institutional trustee	Officer	Кеу етрюуее	Highest compensated employee	Former				organiza	lions
		-	<u> </u>	=	10	<u>*</u>	± 25	╚			-		
								t					
											1		
		_		<u>.</u>									
	···		_	-	<u> </u>	ļ	ļ						
			\vdash		\vdash	-	\vdash	\vdash			\longrightarrow		
			 	-	 	 	+	 			\neg		
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						<u> </u>							
							Ļ				\rightarrow		
	Sub-total			-					0.		0.		0.
	Total from continuation sheets to Part VI	I, Section A							0.		0.		0.
_	Total (add lines 1b and 1c) Total number of individuals (including but n	ot limited to th	000	liete	nd a	boy	9) w			000 of reportable			<u>·</u>
	compensation from the organization	or infinced to th	1036	iiste	o a	004	C) WI	10 1	eceived more man proc	,000 of reportable	-		0
												Yes	No
3	Did the organization list any former officer,	director, or tru	ıste	e, ke	y er	nplo	oyee	, or	highest compensated e	mployee on			
	line 1a? If "Yes," complete Schedule J for s	uch individual										3	X
	For any individual listed on line 1a, is the su	•							•	the organization	-		
	and related organizations greater than \$150										-	4	X-
	Did any person listed on line 1a receive or a	•				•	•	elat	ted organization or indivi	dual for services	ŀ	_	
	rendered to the organization? If "Yes," com ion B. Independent Contractors	plete Schedul	e <i>J <u>†</u></i>	or st	uch	per	son					5	<u> </u>
	Complete this table for your five highest co	mnensated inc	dene	ende	ent c	ont	racto	ore t	that received more than	\$100,000 of com	nens:	ation from	
	the organization. Report compensation for	•	-								pense		
	(A)	<u>,</u>							(B)			(C)	
	Name and business								Description of s	ervices	C	ompensati	on
	ILE COMMONS, INC., 55		GT(NC	S'	rr:	EE:	- 1					
	TE 453, BROOKLYN, NY	11201							LIST BUILDIN	G		230,	<u>341.</u>
	SION STRATEGY	07.040		`									
PO	BOX 128 , MILL VALLEY	, CA 949	142					_	LIST BLDG/CO	NSULTING		210,	<u> 252.</u>
2	Total number of independent contractors (i	ncluding but n	ot li	mıte	d to	tho	se li	stec	d above) who received in	nore than	••••••		
	\$100,000 of compensation from the organi						1						

Pa	rt V	III Statement of Reve	nue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts	1 :	a Federated campaigns	1a					
e i	1	b Membership dues	1b					
A, C		c Fundraising events	1c				-	
Contributions, Gifts, Grants and Other Similar Amounts	,	d Related organizations	1d					
S.E		e Government grants (contribut	tions) 1e					`
i Si	1	f All other contributions, gifts, gran	its, and					
흕		similar amounts not included abo	ve 1f	4083801.				
	9	Noncash contributions included in lines	1a-1f \$					
<u>ŏ</u> ĕ		h Total. Add lines 1a-1f		•	4083801.			
			_	Business Code				
<u>ဗို</u>	2 8	FEES FOR SERVIC	CE	900099	74,492.	74,492.		
e e	I	b						
n S	•	c						
e a	•	d						
Program Service Revenue	•	e						
-	1	All other program service reve	enue		74 400			
-		g Total. Add lines 2a-2f		▶	74,492.			
	3	Investment income (including	dividends, inte		600			600
	_	other similar amounts)			609.			609.
		Income from investment of ta	x-exempt bond	proceeds -				
	5	Royalties	(A.D.)	() D				
		Cuasa vanta	(ı) Real	(II) Personal				
	7:	b Less rental expenses c Rental income or (loss)						
		d Net rental income or (loss) Gross amount from sales of	(i) Securities	T				
	, ,	assets other than inventory	(i) Securities	(II) Other				
		b Less cost or other basis		-				
		and sales expenses						
		Gain or (loss)						
		d Net gain or (loss)	<u> </u>			İ		
0		Gross income from fundraisin	a events-(not	·	3 c cm 3	¥		
ž		including \$	of					
eve		contributions reported on line						
<u>بر</u>		Part IV, line 18						
Other Revenu	,	Less direct expenses	ı					
١		Net income or (loss) from fund	draising events	>				•
	9 a	Gross income from gaming ac	ctivities. See					
		Part IV, line 19	·	a				
	ı	Less: direct expenses	ı					:
	•	Net income or (loss) from gam	ning activities					
	10 a	Gross sales of inventory, less	returns					
- 1		and allowances	ć	a				
		Less cost of goods sold						
ļ		Net income or (loss) from sale	s of inventory	>				
ļ		Miscellaneous Revenu	e	Business Code				
	11 a	·						
	i	·						
	(·						
	(d All other revenue		<u> </u>				
	•	Total. Add lines 11a-11d		▶	415000			
12200	12	Total revenue See instructions			4158902.	74,492.	0.	609.
13200 01-23	-12							Form 990 (2011)

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)

	Check if Schedule O contains a response not include amounts reported on lines 6b,	(A)	S Part IX (B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and	E02 070	502 070		
_	organizations in the United States See Part IV, line 21	503,970.	503,970.		
2	Grants and other assistance to individuals in				
_	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
4	United States. See Part IV, lines 15 and 16 Benefits paid to or for members				
5	Compensation of current officers, directors,				
•	trustees, and key employees	51,553.	25,776.	17,184.	8,593
6	Compensation not included above, to disqualified	31,333.	2371101	17,101.	0,333
•	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	391,343.	373,626.	15,632.	2,085
8	Pension plan accruals and contributions (include	• • • • • • • • • • • • • • • • • • • •	, , , , , , , , , , , , , , , , , , , ,		
	section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	66,138.	63,404.	2,734.	
10	Payroll taxes	33,617.	31,936.	1,681.	`
11	Fees for services (non-employees):				
а	Management				
b	Legal	18,488.	8,630.	9,733.	125
С	Accounting	17,388.		17,388.	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other	1,723,425.	1,157,822.	355,579.	210,024
12	Advertising and promotion	53,051.	53,051.		
13	Office expenses	143,295.	131,183.	7,961.	4,151 -735
14	Information technology	20,044.	18,075.	2,704.	-735 .
15	Royalties	120 050	01 020	10.054	0.067
16	Occupancy	120,059.	91,238.	19,854.	8,967
17-	F	161-, 764	<u> </u>	5,848.	- 116
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	31,775.	16,703.		15 072
19 20	Conferences, conventions, and meetings Interest	31,773.	10,703.		15,072
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	12,425.	9,398.	2,104.	923
23	Insurance	32,435.	15,026.	15,877.	1,532
24	Other expenses Itemize expenses not covered	02/1000	13,020.	13/07/1	1/332
	above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	PUBLIC OUTREACH	614,697.	598,197.		16,500
b	PHOTOGRAPHY/VIDEO	32,139.	27,026.		5,113
¢		27,545.	20,609.	4,806.	2,130.
d	OVERHEAD/INDIRECT	15,382.		15,382.	
е	All other expenses	53,555.	37,925.	6,453.	9,177
25	Total functional expenses. Add lines 1 through 24e	4,124,088.	3,339,395.	500,920.	283,773
26	Joint costs Complete this line only if the organization				
	reported in column (B) joint costs from a combined			ļ	
	educational campaign and fundraising solicitation				
	Check here If following SOP 98-2 (ASC 958-720)		1		

Par	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing	1,038,685.	1	1,917,565.
	2	Savings and temporary cash investments	599,497.	2	753,929.
	3	Pledges and grants receivable, net	1,942,500.	3	1,226,640.
	4	Accounts receivable, net	8,554.	4	33,115.
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees Complete Part II	į		
		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	
Assets	7	Notes and loans receivable, net		7	
Ass	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	4,565.
İ	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments · publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	3,589,236.	16	3,935,814.
	17	Accounts payable and accrued expenses	364,173.	17	675,937.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	_
န္မ	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Ě	22	Payables to current and former officers, directors, trustees, key employees,	•		
Liabilities		highest compensated employees, and disqualified persons. Complete Part II of Schedule L.		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	·
	25	Other liabilities (including federal income tax, payables to related third	***		·
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	364,173.	26	675,937.
		Organizations that follow SFAS 117, check here X and complete			
တ္ဆ		lines 27 through 29, and lines 33 and 34.			
ည	27	Unrestricted net assets	1,033,073.	27	2,269,323.
ala	28	Temporarily restricted net assets	2,191,990.	28	990,554.
B P	29	Permanently restricted net assets		29	• •
.5		Organizations that do not follow SFAS 117, check here and			······································
, o		complete lines 30 through 34.			
ş	30	Capital stock or trust principal, or current funds		30	
SS	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
⋖		Retained earnings, endowment, accumulated income, or other funds		32	
*	32				
Net Assets or Fund Balances	32 33	Total net assets or fund balances	3,225,063.	33	3,259,877.

Form **990** (2011)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► See separate instructions.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

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

- Section 501(c)(3) organizations. Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only

Section 501(c)(4), (5), or (6) organizations; Complete Part III.

If the organization answered "Yes" to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35c (Proxy Tax), then

Name of organization			Empl	loyer identification number
CAMPAIG		27-0061100		
Part I-A Complete if the or	ganization is exempt und	ler section 501(c	e) or is a section 527 o	rganization.
 Provide a description of the organi Political expenditures Volunteer hours 	zation's direct and indirect politic	cal campaign activities		203,791.
Part I-B Complete if the or	ganization is exempt und	ler section 501(c	:)(3).	
1 Enter the amount of any excise tax			▶ \$	
2 Enter the amount of any excise tax	incurred by organization manag	ers under section 495	_	
3 If the organization incurred a section	on 4955 tax, did it file Form 4720	for this year?		Yes No
4a Was a correction made?				Yes No
b If "Yes," describe in Part IV				1(0)
	ganization is exempt und			
1 Enter the amount directly expende			ction activities > \$	200,491.
2 Enter the amount of the filing organ exempt function activities	lization's funds contributed to ot	her organizations for		3,300.
3 Total exempt function expenditure:	e Add lines 1 and 2. Enter here s	and on Form 1120 DO		3,300.
line 17b	Add lines I and 2 Litter here a	and on Form 1120-FO	/∟, ▶ ¢	203.791.
4 Did the filing organization file Form	1120-POL for this year?		•	203,791. X Yes No
5 Enter the names, addresses and er made payments. For each organiza contributions received that were pr political action committee (PAC). If	ation listed, enter the amount pai comptly and directly delivered to	d from the filing orgar a separate political or	nization's funds Also enter th ganization, such as a separa	e amount of political
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
For Paperwork Reduction Act Notice,	see the Instructions for Form	990 or 990-EZ	Schedulo C	(Form 990 or 990-FZ) 2011

LHA

Schedule C (Form 990 or 990-EZ) 2011

Schedule C (Form 990 or 990-EZ) 2011	CAMPAIGN FO	R COMMUNITY	CHANGE	27-0	0061100 Page 2
Part II-A Complete if the org					
(election under sec	tion 501(h)).				
A Check ► ☐ If the filing organiza	tion belongs to an affi	liated group (and list in	Part IV each affiliated	group member's nar	ne, address, EIN,
expenses, and share	re of excess lobbying	expenditures).			
B Check Lifthe filing organiza	tion checked box A ar	nd "limited control" pro	visions apply.		
	ts on Lobbying Expe ditures" means amou	nditures Ints paid or incurred.)	1	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infli	uence public opinion (grass roots lobbying)	····		
b Total lobbying expenditures to infli					
c Total lobbying expenditures (add li	-	, , , , , ,			
d Other exempt purpose expenditure	es				
e Total exempt purpose expenditure	s (add lines 1c and 1c	d)			
f Lobbying nontaxable amount. Enter	er the amount from the	e following table in bot	h columns.		
If the amount on line 1e, column (a) o	r (b) is. The lob	bying nontaxable am	ount is:		
Not over \$500,000	20% of	the amount on line 1e.			
Over \$500,000 but not over \$1,000	0,000 \$100,00	00 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5	00,000 \$175,00	00 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17,		00 plus 5% of the exce	ss over \$1,500,000.		
Over \$17,000,000	\$1,000,	000.			
					<u> </u>
g Grassroots nontaxable amount (er	•				
h Subtract line 1g from line 1a. If zer					
i Subtract line 1f from line 1c. If zero	•	h 4	-tue - file Ferre 4700		
j If there is an amount other than ze reporting section 4911 tax for this		line 11, did the organiza	ation file Form 4720		Yes No
reporting section 4911 tax for this	•	eraging Period Under	Section 501(h)		
(Some organiz		ection 501(h) election		olete all of the five	
•		e instructions for line	-		
	Lobbying Exper	nditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount	·				
(150% of line 2a, column(e))					
			·		-
c Total lobbying expenditures			_		
d Grassroots nontaxable amount					
e Grassroots ceiling amount				7	
(150% of line 2d, column (e))					

Schedule C (Form 990 or 990-EZ) 2011

Schedule C (Form 990 or 990 EZ) 2011 CAMPAIGN FOR COMMUNITY CHANGE 27-006110 Part II:B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description	(a	<u> </u>	(t	<i>i</i>)
uring the year, did the filing organization attempt to influence foreign, national, state or cal legislation, including any attempt to influence public opinion on a legislative matter referendum, through the use of blunteers? and staff or management (include compensation in expenses reported on lines 1c through 1i)? ledia advertisements? alterial so to members, legislators, or the public? ublications, or published or broadcast statements? trants to other organizations for lobbying purposes? rect contact with legislators, their staffs, government officials, or a legislative body? allies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? their activities? total. Add lines 1c through 11 dithe activities in line 1 cause the organization to be not described in section 501(c)(3)? "Yes," enter the amount of any tax incurred under section 4912 "Yes," enter the amount of any tax incurred by organization managers under section 4912 "Yes," enter the amount of any tax incurred by organization managers under section 4912 "Healing organization incurred a section 4912 tax, did if file Form 4720 for this year? III-Al Complete if the organization is exempt under section 501(c)(4), section 501(c)(6). The substantially all (90% or more) dues received nondeductible by members? dithe organization make only in-house lobbying expenditures of \$2,000 or less? dithe organization agree to carry over lobbying and political expenditures from the prior year? III-Bl Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answernanswered "Yes." uses, assessments and similar amounts from members section 162(e) nondeductible lobbying and political expenditures (do not include amounts of porgengate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the best the organization agree to carryover to t	Yes	No	Amo	unt
During the year, did the filing organization attempt to influence foreign, national, state or				
local legislation, including any attempt to influence public opinion on a legislative matter				,
or referendum, through the use of		:		
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	_[
Part III-A Complete if the organization is exempt under section 501(c)(4), sect	ion 501(c)	(5), or se	ction	
501(c)(6).				
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1	Х	
2 Did the organization make only in house lobbying expenditures of \$2,000 or less?		2		Х
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		Х
answered "Yes." 1 Dues, assessments and similar amounts from members		1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	tical			
expenses for which the section 527(f) tax was paid).				
a Current year		2a		
b Carryover from last year		2b		
c Total		2c		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the e	cess			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political			
expenditure next year?	•	4		
5 Taxable amount of lobbying and political expenditures (see instructions)		5		
	Part II-A: and I	Part II-B. lu	ne 1 Also, o	
nis part for any additional information		·		•
PART I-A, LINE 1:				
THE CAMPAIGN RAN A GET OUT THE VOTE CANVASS, WHERE G	OTV CAN	IVASSE	RS LEE	$^{ ext{r}}$
·				
ITERATURE, WHICH ADVOCATED THE ELECTION OF ONE OF T	HE CAND	IDATE	S. THE	3
CAMPAIGN MAILED LITERATURE OPPOSING ARAPAIO IN ARIZO	NA. THE	CAMP	AIGN	
NAS ENGAGED IN SOME LIMITED INDEPENDENT EXPENDITURES	: SPECT	FICAL	LY, TH	ΙE
	, 201		<u> </u>	
CAMPAIGN PAID FOR AND MADE COMMUNICATIONS WHICH EXPR	ESSLY A	DVOCA	TED FO)R
The state of the s			990 or 990	•

Schedule C (Form 990 or 990-EZ) 2011 CAMPAIGN FOR COMMUNITY CHANGE	27-0061	100	Page 4
Schedule C (Form 990 or 990-EZ) 2011 CAMPAIGN FOR COMMUNITY CHANGE Part IV Supplemental Information (continued)			
OR OPPOSED THE ELECTION OF LOCAL CANDIDATES. THE SPECIFIC I	RACES IT	WAS	
INVOLVED IN WERE IN ARIZONA.			·
	-		
			

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization

Employer identification number

	CAMPAIGN FOR COMMUNITY CHANGE	27-0061100
Par	t I Organizations Maintaining Donor Advised Funds or Other Similar Funds or A	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6.	
		(b) Funds and other accounts
1	Total number at end of year	
	Aggregate contributions to (during year)	
2		
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised fun	
	are the organization's property, subject to the organization's exclusive legal control?	└ Yes
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used or	only
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose confer	rring
F-32	Impermissible private benefit?	Yes No
Pa	til Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV,	line 7.
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
	Preservation of land for public use (e.g., recreation or education)	ly important land area
	Protection of natural habitat Preservation of a certified hi	storic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a co	onservation 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 easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
_	• • • • • • • • • • • • • • • • • • • •	20
d -	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure	-
_	listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organ	nization during the tax
	year -	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it holds?	☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during t	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year	
8	Does each-conservation easement reported on line 2(d)-above satisfy the requirements of section 170(h)(4)(E	3)(1)
	and section 170(h)(4)(B)(ii)?	└─ Yes └─ No
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense state	ment, and balance sheet, and
	include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's	ganization's accounting for
	conservation easements	
Par	t III Organizations Maintaining Collections of Art, Historical Treasures, or Other	Similar Assets.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement as	nd balance sheet works of art,
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of	public service, provide, in Part XIV,
	the text of the footnote to its financial statements that describes these items.	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and be	palance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, education, or research in furtherance of public se	
	relating to these items	rios, provide the fellowing amounts
	(i) Revenues included in Form 990, Part VIII, line 1	b ¢
	(ii) Assets included in Form 990, Part X	► \$ ► \$
0		
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain,	provide
	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items	
a	Revenues included in Form 990, Part VIII, line 1	\$
b	Assets included in Form 990, Part X	► \$ ► \$

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Schedule D (Form 990) 2011

Schedule D (Form 990) 2011

Part VII Investments - Other Securities. S	ee Form 990, Part X, lin	e 12.		
(a) Description of security or category (including name of security)	(b) Book value	Co	(c) Method of valua est or end-of-year man	
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				· · · · · · · · · · · · · · · · · · ·
(A)				<u> </u>
(B)				
(C)				
(D)				
(E)				
				
(G)				
(H)				_
<u>(l)</u>				
Total. (Col (b) must equal Form 990, Part X, col (B) line 12)				
Part VIII Investments - Program Related.	See Form 990, Part X, II	ne 13.		
(a) Description of investment type	(b) Book value	Co	(c) Method of value est or end-of-year man	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				· · · · · · · · · · · · · · · · · · ·
(8)				
(9)				
(10)				
Total (Col (b) must equal Form 990, Part X, col (B) line 13)	. 45	<u> </u>		
Part IX Other Assets. See Form 990, Part X, Inc.	e 15) Description			(b) Book value
	, Description			(b) Book value
(1)				
(2)			·	
(3)				
(4)				
(6)				
(7)		<u> </u>		
(8)				
(9)			·	
(10)				
Total. (Column (b) must equal Form 990, Part X, col (B) lir	15)			
Part X Other Liabilities. See Form 990, Part X				
1. (a) Description of liability	,	(b) Book value		
(1) Federal income taxes				
(2)			1	
(3)		·	1	
(4)				
(5)			1	
(6)			1	
(7)	-		1	
(8)			1	•
(9)			1	
(10)			1	
(11)			1	
	251		1	
Total. (Column (b) must equal Form 990, Part X, col (B) lir	to the organization's financial s	tatements that reports the organ	I lization's liability for uncerta	in tax positions under

Schedule D (Form 990) 2011

Schedule D (Form 990) 2011	CAMPAIGN	FOR	COMMUNITY	CHANGE	27-0061100	Page 5
Schedule D (Form 990) 2011 Part XIV Supplemental Infor	mation (continue	ed)				
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AFTER IT IS FILED.						
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و. **≗ Employer identification number** 27-0061100 Open to Public OMB No 1545-0047 Inspection (h) Purpose of grant 201 or assistance X Yes PROGRAM SUPPORT PROGRAM SUPPORT PROGRAM SUPPORT PROGRAM SUPPORT PROGRAM SUPPORT PROGRAM SUPPORT Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000 Part II can be duplicated if additional space is needed in additional space is needed (if) Method of valuation (book, recipion of government assistance assistance other) 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 Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ٥. ó Ö Ö Ö Ö Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States ▶ Attach to Form 990. 500. 000 000 120,075 50,670 10,000 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 34, 20 15 CHANGE 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) CAMPAIGN FOR COMMUNITY Enter total number of other organizations listed in the line 1 table 52-0888113 42-1110721 41-1957358 43-1907795 54-2187655 26-2613701 General Information on Grants and Assistance criteria used to award the grants or assistance? C/O DORAN SCHRANTZ 2720 EAST 22ND 1 (a) Name and address of organization COMMUNITY ORGANIZATION IN ACTION 2001-2005 FIREST AVENUE - DES CENTER FOR COMMUNITY CHANGE IOWA CITIZENS FOR COMMUNITY 304 E. BRECKENRIDGE STREET IMPROVEMENT ACTION FUND -STREET - MINNEAPOLIS, MN 3518 S. EDMUNDS STREET ROCKY MOUNT, NC 27802 GRASSROOTS ORGANIZING WASHINGTON, DC 20009 Name of the organization 1536 U STREET, NW WA 98188 MOINES, IA 50311 MEXICO MS 65265 Department of the Treasury Internal Revenue Service P. O. BOX 1339 COMMUNIVERSITY SCHEDULEI 55406-1315 (Form 990) SEATTLE, Part Part ISAIAH ~

Schedule I (Form 990) (2011)

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(a) Name and address of (b) EIN (c) IRC section (d) Amount of non-cash organization or government assistance	(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
MAINE PEOPLE'S ALLIANCE 27 STATE STREET, SUITE 44 BANGOR, ME 04401	01-0383493	501(C)(4)	20,800.	0.			PROGRAM SUPPORT
MISSOURIANS ORGANIZING FOR REFORM AND EMPOWERMENT - 438 NORTH SKINKER BLVD - ST. LOUIS, MO 63130	27-1442310	501(C)(4)	15,000.	0.			PROGRAM SUPPORT
NEW HAMPSHIRE CITIZENS ALLIANCE FOR ACTION - 4 PARK ST., STE 304 - CONCORD, NH 03301	02-0505456	501(C)(4)	10,000.	0			PROGRAM SUPPORT
PICO ACTION FUND 100 MARYLAND AVE, NE, STE 505 WASHINGTON, DC 20002	45-4434103	501(C)(4)	28,000.	0			PROGRAM SUPPORT
TAKE ACTION MINNESOTA 1821 UNIVERSITY AVE. W #S137 SAINT PAUL, MN 55406	20-3338691	501(C)(4)	40,500.	.0			PROGRAM SUPPORT
OHIO ORGANIZATION CAMPAIGN 35 EAST GAY ST., STE 208 COLUMBUS, OH 43215	26-3064170	501(C)(4)	38,000.	0			PROGRAM SUPPORT
CALIFORNIA FOUNDATION COMMUNITY 675 SOUTH PARK VIEW ST. LOS ANGELES, CA 90057	95-3510055	501 (C)(3)	.000,99	0			FELLOWSHIPS
			-				
			-				
							Schedule I (Form 990)

Page 2 (f) Description of non-cash assistance 27-0061100 (e) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. ΒY RESTRICTED GRANTS ARE APPLIED TO THE APPROPRIATE PROJECT(S) AS INDICATED IN GRANTS ARE RECORDED ACCORDINGLY, Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information THE PROGRESS OF GRANT-FUNDED ACTIVITIES ARE MONITORED THROUGH (1) REGULAR AND (3) FINANCIAL REPORTS PROVIDED TO ENSURE COMPLIANCE OF AWARD TERMS AND CONDITIONS, CAREFULLY REVIEWED; THE EXECUTIVE DIRECTOR AND/OR MANAGING DIRECTOR HAVE MEETINGS WITH PROGRAM, MANAGEMENT, DEVELOPMENT, AND EXECUTIVE STAFF, (2) 2: TERMS AND CONDITIONS OF GRANT AWARD ARE (d) Amount of non-cash assistance (c) Amount of cash grant CAMPAIGN FOR COMMUNITY CHANGE (b) Number of recipients THE FINAL AUTHORITY TO APPROVE THE AWARD. MONTHLY FINANCIAL REVIEW OF PROJECTS, Part III can be duplicated if additional space is needed. (a) Type of grant or assistance LINE THE GRANT AGREEMENT. PART I, Schedule I (Form 990) (2011) H SCHEDULE GRANTEES Part IV Part III

Schedule I (Form 990) (2011)

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132102 01-27-12

SCHEDULE 0

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

CAMPAIGN FOR COMMUNITY CHANGE

Employer identification number 27-0061100

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: PROGRESSIVE MOVEMENT THAT UNITES ALL OF OUR ISSUES AND REPRESENTS THE AUTHENTIC VOICES OF PEOPLE MOST AFFECTED BY SOCIAL AND ECONOMIC INJUSTICE. THE CAMPAIGN FOR COMMUNITY CHANGE IS A VEHICLE TO HELP BUILD THIS MOVEMENT. THE CORE ISSUES ADDRESSED ARE HEALTH CARE FOR ALL, IMMIGRATION REFORM AND JOBS FOR THE COMMUNITY. FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: SECURITY THREATS.

- ORGANIZED GRASSROOTS GROUPS NATIONWIDE TO ADVOCATE FOR PASSAGE OF COMPREHENSIVE IMMIGRATION REFORM.
- EDUCATED AND EQUIPPED LOW-INCOME, RURAL AND OF-COLOR PEOPLE IN EIGHT STATES TO PARTICIPATE EFFECTIVELY IN THE PUBLIC DEBATE ABOUT THE FUTURE SOCIAL SECURITY, MEDICARE AND MEDICAID. THE EIGHT STATES WERE IOWA, MAINE, MINNESOTA, MISSOURI, MONTANA, NEW HAMPSHIRE, OHIO AND VIRGINIA.
- ORGANIZED, RECRUITED AND PROVIDED EDUCATIONAL MATERIALS TO ENABLE GRASSROOTS VOLUNTEERS TO CONDUCT ALMOST 200 HOUSE MEETINGS AROUND THE COUNTRY IN WHICH FRIENDS AND NEIGHBORS GATHERED TO LEARN ABOUT THE ECONOMY AND SHARE IDEAS FOR SOLVING THE UNEMPLOYMENT CRISIS.
- PROVIDED TECHNICAL ASSISTANCE AND POLICY SUPPORT TO GRASSROOTS GROUPS IN SIX STATES (ILLINOIS, NEW YORK, NORTH CAROLINA, OHIO, PENNSYLVANIA AND VIRGINIA) TO ADVANCE STATEWIDE JOBS AND ECONOMY CAMPAIGNS.
- HELPED LOCAL GRASSROOTS GROUPS TO DEVELOP THE SKILLS, LEADERSHIP AND SYSTEMS AND GAIN ACCESS TO DATA AND RESOURCES THAT ENABLED THEM TO CONDUCT NONPARTISAN EFFORTS TO INCREASE THE NUMBER OF LOW-INCOME PEOPLE

AND PEOPLE OF COLOR WHO VOTE. THE STATES WERE ARIZONA, COLORADO,

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

Schedule O (Form 990 or 990-EZ) (2011)

Name of the organization CAMPAIGN FOR COMMUNITY CHANGE **Employer identification number** 27-0061100

FLORIDA, ILLINOIS, NEVADA, WASHINGTON AND WISCONSIN.

FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 WAS PREPARED BY THE OUTSIDE ACCOUNTANTS AND REVIEWED BY THE AUDIT COMMITTEE CHAIR. THE FULL BOARD RECEIVED A COPY OF THE RETURN PRIOR TO FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C: EACH DIRECTOR, OFFICER, MEMBER OF A COMMITTEE WITH BOARD DELEGATED POWERS, AND EMPLOYEE ANNUALLY SIGNS A STATEMENT WHICH AFFIRMS THAT SUCH PERSON:

- A. HAS RECEIVED A COPY OF THE CONFLICTS OF INTEREST POLICY.
- B. HAS READ AND UNDERSTANDS THE POLICY.
- C. HAS AGREED TO COMPLY WITH THE POLICY.
- D. UNDERSTANDS THAT THE CORPORATION IS A CHARITABLE ORGANIZATION AND THAT IN ORDER TO MAINTAIN ITS FEDERAL TAX EXEMPTION IT MUST ENGAGE PRIMARILY IN ACTIVITIES WHICH ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PURPOSES. ENSURE THAT THE CORPORATION OPERATES IN A MANNER CONSISTENT WITH, AND DOES NOT ENGAGE IN ACTIVITIES THAT COULD JEOPARDIZE ITS STATUS AS AN ORGANIZATION EXEMPT FROM FEDERAL INCOME TAX, PERIODIC REVIEWS SHALL BE CONDUCTED TO ENSURE THAT COMPENSATION PAID BY THE CORPORATION IS REASONABLE AND RESULTS FROM ARM LENGTH TRANSACTIONS AND THAT ALL TRANSACTIONS OR ARRANGEMENTS TO WHICH THE CORPORATION IS A PARTY REFLECT REASONABLE PAYMENTS FOR GOODS OR SERVICES, FURTHER THE CORPORATION'S CHARITABLE PURPOSES AND DO NOT RESULT IN INUREMENT OR IMPERMISSIBLE PRIVATE BENEFIT. IF A CONFLICT ARISES, THE FOLLOWING STEPS ARE TAKEN: ALL EMPLOYEES MUST FULLY DISCLOSE TO THE MANAGING DIRECTOR, AND THE MANAGING DIRECTOR MUST DISCLOSE TO THE EXECUTIVE DIRECTOR, ANY SITUATION IN
- EMPLOYEES WHO HAVE ANY QUESTION AS TO WHETHER AN ACTIVITY THEY WANT TO Schedule O (Form 990 or 990-EZ) (2011)

WHICH A CONFLICT OR POTENTIAL CONFLICT EXISTS OR COULD ARISE.

Name of the organization CAMPAIGN FOR COMMUNITY CHANGE	Employer identification number 27-0061100
PARTICIPATE IN CONFLICTS WITH THE CENTER'S ACTIVITIES OR	INTERESTS
DISCUSSES THE ISSUE IN ADVANCE WITH THE MANAGING DIRECTOR	
- ANY VIOLATIONS OF THIS POLICY MAY RESULT IN DISCIPLINAR	Y ACTION UP TO AND
INCLUDING SUSPENSION AND TERMINATION OF EMPLOYMENT.	
MEMBERS ANNUALLY AGREE TO DISCLOSE TO THE BOARD IF THEY H	AVE A CONFLICT FOR
APPROPRIATE RESOLUTION.	
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY	OF FORM 990:
MS, MO, LA, NJ, NH, MN, MI, KS, ND, VA, FL, WI, AR, MA, AZ, AK, AL, OR, CA,	CT, IL, WV, MD, NY, NC
PA	
FORM 990, PART VI, SECTION C, LINE 19: ALL GOVERNING DOCU	MENTS, CONFLICT
OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE MADE AVA	ILABLE UPON
REQUEST.	
FORM 990, PART VI, SECTION B, LINE 15A: THE EXECUTIVE DIR	ECTOR IS
COMPENSATED BY THE CENTER FOR COMMUNITY CHANGE (CCC). CCC	AND THE
CAMPAIGN FOR COMMUNITY CHANGE HAVE SOME COMMON BOARD MEM	BERS AND SHARE
STAFF AND SPACE, BUT ARE NOT CONSIDERED RELATED ENTITIES	UNDER THE TAX
CODE. CCC UTILIZES COMPENSATION CONSULTANTS WHO USE SALAR	Y BENCHMARKING
AND COMPARABILITY DATA IN THEIR DETERMINATION. DELIBERATI	ONS AND
DECISIONS ARE SUBSTANTIATED.	