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

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

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

For the 2010 calendar year, or tax year beginning 04-01-2010 and ending 03-31-2011

**A For the 2010 calendar year, or tax year beginning 04-01-2010 and ending 03-31-2011**

- **Name and address of principal officer:** JODIE EVANS 2010 LINDEP AVE VENICE, CA 90291

- **Number and street (or P.O. box if mail is not delivered to street address):** 2010 LINDEP AVE

- **City or town, state or country, and ZIP + 4:** VENICE, CA 90291

- **Employer identification number:** 26-2823886

- **Telephone number:** (310) 827-3046

- **Gross receipts:** $544,693

**I Tax-exempt status**

- **501(c)(3) Yes**

**Part I Summary**

1. Briefly describe the organization's mission or most significant activities:
   CODEPINK IS A WOMEN-INITIATED GRASSROOTS PEACE & SOCIAL JUSTICE MOVEMENT WORKING TO END THE WARS IN IRAQ & AFGHANISTAN, STOP NEW WARS & REDIRECT OUR RESOURCES INTO HEALTHCARE, EDUCATION, GREEN JOBS & OTHER LIFE-AFFIRMING ACTIVITIES.

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

3. Number of voting members of the governing body (Part VI, line 1a)

4. Number of independent voting members of the governing body (Part VI, line 1b)

5. Total number of individuals employed in calendar year 2010 (Part V, line 2a)

6. Total number of volunteers (estimate if necessary)

7a. Total unrelated business revenue from Part VIII, column (C), line 12

7b. Net unrelated business taxable income from Form 990-T, line 34

8. Contributions and grants (Part VIII, line 1h)

9. Program service revenue (Part VIII, line 2g)

10. Investment income (Part VIII, column (A), lines 3, 4, and 7d)

11. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12. Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

13. Grants and similar amounts paid (Part IX, column (A), lines 1-3)

14. Benefits paid to or for members (Part IX, column (A), line 4)

15. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)

16a. Professional fundraising fees (Part IX, column (A), line 11e)

b. Total fundraising expenses (Part IX, column (D), line 25)

17. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)

18. Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)

19. Revenue less expenses Subtract line 18 from line 12

**Part II Revenue**

**Part II Expenses**

**Part II Net Assets of Fund Balances**

**Signature Block**

- Signature of officer: JODIE EVANS President

- Date: 2011-08-10

- Print/Type preparer's name: DAVID M REFF

- Preparer's signature: DAVID M REFF

- Date: [ ]

- Check if self-employed: [ ]

- Filing status: [ ]

- Paid Preparer Use Only:

- Firm's name: David M Reff/CPA An Acct Corp

- Firm's address: 13107 Ventura Blvd 202

- Studio City, CA 91604

- Phone number: (818) 981-9923

- May the IRS discuss this return with the preparer shown above? (see instructions): [ ] Yes [ ] No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No: 11282Y Form 990 (2010)
<table>
<thead>
<tr>
<th></th>
<th>Briefly describe the organization's mission</th>
</tr>
</thead>
<tbody>
<tr>
<td>PROMOTE SOCIAL WELFARE</td>
<td></td>
</tr>
</tbody>
</table>

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

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

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

<table>
<thead>
<tr>
<th></th>
<th>(Code ) (Expenses $ ) (Revenue $ )</th>
</tr>
</thead>
<tbody>
<tr>
<td>4a</td>
<td>INITIATE PEACE &amp; WORK TO END WAR, &amp; REDIRECT RESOURCES INTO PUBLIC WELFARE</td>
</tr>
<tr>
<td>4b</td>
<td></td>
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<td>4c</td>
<td></td>
</tr>
<tr>
<td>4d</td>
<td>Other program services (Describe in Schedule O)</td>
</tr>
<tr>
<td></td>
<td>(Expenses $ ) including grants of $ ) (Revenue $ )</td>
</tr>
<tr>
<td>4e</td>
<td>Total program service expenses $</td>
</tr>
</tbody>
</table>
## Part IV Checklist of Required Schedules

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
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<td>2</td>
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<td>11e</td>
<td>Yes</td>
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<td>11f</td>
<td>No</td>
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<tr>
<td>12a</td>
<td>No</td>
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<td>18</td>
<td>No</td>
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<td>19</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>20a</td>
<td>No</td>
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</tr>
<tr>
<td>20b</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 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 III.

Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If “Yes,” complete Schedule C, Part III.

Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If “Yes,” complete Schedule D, Part II.

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.

Did the organization maintain collections of works of art, historical treasures, or other similar assets? If “Yes,” complete Schedule D, Part II.

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.

Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If “Yes,” complete Schedule D, Part V.

If the organization’s answer to any of the following questions is ‘Yes,’ then complete Schedule D, Parts VI, VII, VII, VIII, IX, or X as applicable.

- Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If “Yes,” complete Schedule D, 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 assets reported in Part X, line 16? If “Yes,” complete Schedule D, Part VII.
- Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If “Yes,” complete Schedule D, Part VIII.
- 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.
- Did the organization report an amount for other liabilities in Part X, line 25? If “Yes,” complete Schedule D, Part X.
- Did the organization 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.

Did the organization obtain separate, independent audited financial statements for the tax year? If “Yes,” complete Schedule D, Parts XI, XII, and XIII.

Was the organization included in consolidated, independent audited financial statements for the tax year? If “Yes,” and if the organization answered ‘No’ to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.

Is the organization a school described in section 170(b)(1)(A)(ii)? If “Yes,” complete Schedule E.

Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If “Yes,” complete Schedule F, Parts I and IV.

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 U.S.? If “Yes,” complete Schedule F, Parts II and IV.

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 U.S.? If “Yes,” complete Schedule F, Parts III and IV.

Did the organization report a total of more than $15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If “Yes,” complete Schedule G, Part I (see instructions).

Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If “Yes,” complete Schedule G, Part II.

Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? If “Yes,” complete Schedule G, Part III.

Did the organization operate one or more hospitals? If “Yes,” complete Schedule H.

If “Yes” to line 20a, did the organization attach its audited financial statement to this return? Note: Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions).
### Part IV Checklist of Required Schedules (continued)

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>21 Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If &quot;Yes,&quot; complete Schedule I, Parts I and II . 21</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule I, Parts I and III . 22</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>23 Did the organization answer &quot;Yes&quot; to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If &quot;Yes,&quot; complete Schedule J . 23</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; answer lines 24b-24d and complete Schedule K. If &quot;No,&quot; go to line 25 . 24a</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>24d Did the organization act as an &quot;on behalf of&quot; issuer for bonds outstanding at any time during the year? 24d</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If &quot;Yes,&quot; complete Schedule L, Part I . 25a</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If &quot;Yes,&quot; complete Schedule L, Part I . 25b</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If &quot;Yes,&quot; complete Schedule L, Part II . 26</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If &quot;Yes,&quot; complete Schedule L, Part III . 27</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>28 Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) 28</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>a A current or former officer, director, trustee, or key employee? If &quot;Yes,&quot; complete Schedule L, Part IV . 28a</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>b A family member of a current or former officer, director, trustee, or key employee? If &quot;Yes,&quot; complete Schedule L, Part IV . 28b</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If &quot;Yes,&quot; complete Schedule L, Part IV . 28c</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>29 Did the organization receive more than $25,000 in non-cash contributions? If &quot;Yes,&quot; complete Schedule M . 29</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If &quot;Yes,&quot; complete Schedule M . 30</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>31 Did the organization liquidate, terminate, or dissolve and cease operations? If &quot;Yes,&quot; complete Schedule N, Part I . 31</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If &quot;Yes,&quot; complete Schedule N, Part II . 32</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If &quot;Yes,&quot; complete Schedule R, Part I . 33</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>34 Was the organization related to any tax-exempt or taxable entity? If &quot;Yes,&quot; complete Schedule R, Parts II, III, IV, and V, line 1 . 34</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? 35</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If &quot;Yes,&quot; complete Schedule R, Part V, line 2 . 36</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>b Did the organization make any transfers to an exempt non-charitable related organization? If &quot;Yes,&quot; complete Schedule R, Part V, line 2 . 36</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>c Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If &quot;Yes,&quot; complete Schedule R, Part VI . 37</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O . 38</td>
<td>No</td>
<td></td>
</tr>
</tbody>
</table>
**Part V** Statements Regarding Other IRS Filings and Tax Compliance

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

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable</td>
<td>16</td>
<td></td>
</tr>
<tr>
<td>c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gambling (gambling) winnings to prize winners?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return</td>
<td>2a</td>
<td></td>
</tr>
<tr>
<td>2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?</td>
<td>2b</td>
<td>No</td>
</tr>
<tr>
<td><strong>Note.</strong> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3a Did the organization have unrelated business gross income of $1,000 or more during the year?</td>
<td>3a</td>
<td>No</td>
</tr>
<tr>
<td>3b If &quot;Yes,&quot; has it filed a Form 990-T for this year? If &quot;No,&quot; provide an explanation in Schedule O.</td>
<td>3b</td>
<td>No</td>
</tr>
<tr>
<td>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)?</td>
<td>4a</td>
<td>No</td>
</tr>
<tr>
<td>b If &quot;Yes,&quot; enter the name of the foreign country ▶ See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</td>
<td>5a</td>
<td>No</td>
</tr>
<tr>
<td>5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</td>
<td>5b</td>
<td>No</td>
</tr>
<tr>
<td>5c If &quot;Yes,&quot; to line 5a or 5b, did the organization file Form 8886-T?</td>
<td>5c</td>
<td>No</td>
</tr>
<tr>
<td>6a Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?</td>
<td>6a</td>
<td>No</td>
</tr>
<tr>
<td>6b If &quot;Yes,&quot; did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</td>
<td>6b</td>
<td>No</td>
</tr>
<tr>
<td>7 Organizations that may receive deductible contributions under section 170(c).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?</td>
<td>7a</td>
<td>No</td>
</tr>
<tr>
<td>7b If &quot;Yes,&quot; did the organization notify the donor of the value of the goods or services provided?</td>
<td>7b</td>
<td>No</td>
</tr>
<tr>
<td>7c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?</td>
<td>7c</td>
<td>No</td>
</tr>
<tr>
<td>7d If &quot;Yes,&quot; indicate the number of Forms 8282 filed during the year</td>
<td>7d</td>
<td></td>
</tr>
<tr>
<td>8Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the sponsoring organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?</td>
<td>8</td>
<td>No</td>
</tr>
<tr>
<td>9Sponsoring organizations maintaining donor advised funds.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9a Did the organization make any taxable distributions under section 4966?</td>
<td>9a</td>
<td>No</td>
</tr>
<tr>
<td>9b Did the organization make a distribution to a donor, donor advisor, or related person?</td>
<td>9b</td>
<td>No</td>
</tr>
<tr>
<td>10 Section 501(c)(7) organizations. Enter</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a Initiation fees and capital contributions included on Part VIII, line 12</td>
<td>10a</td>
<td></td>
</tr>
<tr>
<td>10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</td>
<td>10b</td>
<td></td>
</tr>
<tr>
<td>11 Section 501(c)(12) organizations. Enter</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11a Gross income from members or shareholders</td>
<td>11a</td>
<td></td>
</tr>
<tr>
<td>11b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)</td>
<td>11b</td>
<td></td>
</tr>
<tr>
<td>12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?</td>
<td>12a</td>
<td>No</td>
</tr>
<tr>
<td>12b If &quot;Yes,&quot; enter the amount of tax-exempt interest received or accrued during the year</td>
<td>12b</td>
<td></td>
</tr>
<tr>
<td>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</td>
<td></td>
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</tr>
<tr>
<td>13a Is the organization licensed to issue qualified health plans in more than one state?</td>
<td>13a</td>
<td>No</td>
</tr>
<tr>
<td><strong>Note.</strong> See the instructions for additional information the organization must report on Schedule O</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13b 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</td>
<td>13b</td>
<td></td>
</tr>
<tr>
<td>13c Enter the amount of reserves on hand</td>
<td>13c</td>
<td></td>
</tr>
<tr>
<td>14a Did the organization receive any payments for indoor tanning services during the tax year?</td>
<td>14a</td>
<td>No</td>
</tr>
<tr>
<td>14b If &quot;Yes,&quot; has it filed a Form 720 to report these payments? If &quot;No,&quot; provide an explanation in Schedule O.</td>
<td>14b</td>
<td>No</td>
</tr>
</tbody>
</table>
### Part VI Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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.

<table>
<thead>
<tr>
<th>Section A. Governing Body and Management</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Enter the number of voting members of the governing body at the end of the tax year</td>
<td>1a 2</td>
<td></td>
</tr>
<tr>
<td>1b Enter the number of voting members included in line 1a, above, who are independent</td>
<td>1b 2</td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>2 No</td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>3 No</td>
<td></td>
</tr>
<tr>
<td>4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?</td>
<td>4 No</td>
<td></td>
</tr>
<tr>
<td>5 Did the organization become aware during the year of a significant diversion of the organization’s assets?</td>
<td>5 No</td>
<td></td>
</tr>
<tr>
<td>6 Does the organization have members or stockholders?</td>
<td>6 No</td>
<td></td>
</tr>
<tr>
<td>7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?</td>
<td>7a No</td>
<td></td>
</tr>
<tr>
<td>7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?</td>
<td>7b No</td>
<td></td>
</tr>
<tr>
<td>8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following</td>
<td>8a Yes</td>
<td></td>
</tr>
<tr>
<td>a The governing body</td>
<td>8a Yes</td>
<td></td>
</tr>
<tr>
<td>b Each committee with authority to act on behalf of the governing body</td>
<td>8b Yes</td>
<td></td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; provide the names and addresses in Schedule O</td>
<td>9 No</td>
<td></td>
</tr>
</tbody>
</table>

### Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

<table>
<thead>
<tr>
<th>Section B</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>10a Does the organization have local chapters, branches, or affiliates?</td>
<td>10a No</td>
<td></td>
</tr>
<tr>
<td>b If &quot;Yes,&quot; does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?</td>
<td>10b No</td>
<td></td>
</tr>
<tr>
<td>11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?</td>
<td>11a No</td>
<td></td>
</tr>
<tr>
<td>b Describe in Schedule O the process, if any, used by the organization to review this Form 990</td>
<td>11b No</td>
<td></td>
</tr>
<tr>
<td>12a Does the organization have a written conflict of interest policy? If &quot;No,&quot; go to line 13</td>
<td>12a Yes</td>
<td></td>
</tr>
<tr>
<td>b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?</td>
<td>12b Yes</td>
<td></td>
</tr>
<tr>
<td>c Does the organization regularly and consistently monitor and enforce compliance with the policy? If &quot;Yes,&quot; describe in Schedule O how this is done</td>
<td>12c Yes</td>
<td></td>
</tr>
<tr>
<td>13 Does the organization have a written whistleblower policy?</td>
<td>13 Yes</td>
<td></td>
</tr>
<tr>
<td>14 Does the organization have a written document retention and destruction policy?</td>
<td>14 Yes</td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>15a No</td>
<td></td>
</tr>
<tr>
<td>a The organization’s CEO, Executive Director, or top management official</td>
<td>15a No</td>
<td></td>
</tr>
<tr>
<td>b Other officers or key employees of the organization</td>
<td>15b No</td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes&quot; to line 15a or 15b, describe the process in Schedule O (See Instructions)</td>
<td>15c No</td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>16a No</td>
<td></td>
</tr>
<tr>
<td>b If &quot;Yes,&quot; has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization’s exempt status with respect to such arrangements?</td>
<td>16b No</td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Disclosure

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

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

- I own website
- Another’s website
- Upon request

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

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

JODIE EVANS
2010 LINDEN AVE
VENICE, CA 90291
(310) 827-4320

Form 990 (2010)
### 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, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization’s **current** key employees, if any. See instructions for definition of "key employee".
- List the organization’s five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization’s **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization’s **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

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

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

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Average hours per week (describe hours for related organizations in Schedule O)</th>
<th>(C) Position (check all that apply)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) MEDEA BENJAMIN</td>
<td>35 00 X</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Treasurer</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) JODIE EVANS</td>
<td>35 00 X</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>President</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

Form 990 (2010)
### Part VII  Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Average hours per week (describe hours for related organizations in Schedule O)</th>
<th>(C) Position (check all that apply)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1b Sub-Total

c Total from continuation sheets to Part VII, Section A

d Total (add lines 1b and 1c)

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

### Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Contributions, gifts, grants and other similar amounts</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512, 513, or 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Federated campaigns</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b Membership dues</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1c Fundraising events</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1d Related organizations</td>
<td></td>
<td>60,034</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1e Government grants (contributions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1f All other contributions, gifts, grants, and similar amounts not included above</td>
<td></td>
<td>484,467</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1g Noncash contributions included in lines 1a-1f $</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1h Total, Add lines 1a-1f</td>
<td></td>
<td>544,501</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Program Service Revenue</th>
<th>Business Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td></td>
</tr>
<tr>
<td>2d</td>
<td></td>
</tr>
<tr>
<td>2e</td>
<td></td>
</tr>
<tr>
<td>2f All other program service revenue</td>
<td></td>
</tr>
<tr>
<td>2g Total, Add lines 2a-2f</td>
<td>0</td>
</tr>
</tbody>
</table>

| 3 Investment income (including dividends, interest and other similar amounts) | 192 | 192 |
| 4 Income from investment of tax-exempt bond proceeds | 0 |
| 5 Royalties                                            | 0 |

<table>
<thead>
<tr>
<th>6a Gross Rents</th>
<th>(i) Real</th>
<th>(ii) Personal</th>
</tr>
</thead>
<tbody>
<tr>
<td>6b Less rental expenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6c Rental income or (loss)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6d Net rental income or (loss)</td>
<td></td>
<td>0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>7a Gross amount from sales of assets other than inventory</th>
<th>(i) Securities</th>
<th>(ii) Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>7b Less cost or other basis and sales expenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7c Gain or (loss)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7d Net gain or (loss)</td>
<td></td>
<td>0</td>
</tr>
</tbody>
</table>

<p>| 8a Gross income from fundraising events (not including $ of contributions reported on line 1c) | | |
| 8b Less direct expenses                                | a | |
| 8c Net income or (loss) from fundraising events        | | |
| 9a Gross income from gaming activities See Part IV, line 19 | a | |
| 9b Less direct expenses                                | b | |
| 9c Net income or (loss) from gaming activities         | | |
| 10a Gross sales of inventory, less returns and allowances | a | |
| 10b Less cost of goods sold                            | b | |
| 10c Net income or (loss) from sales of inventory       | | |</p>
<table>
<thead>
<tr>
<th>Miscellaneous Revenue</th>
<th>Business Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>11a</td>
<td></td>
</tr>
<tr>
<td>11b</td>
<td></td>
</tr>
<tr>
<td>11c</td>
<td></td>
</tr>
<tr>
<td>11d All other revenue</td>
<td></td>
</tr>
<tr>
<td>11e Total, Add lines 11a-11d</td>
<td></td>
</tr>
</tbody>
</table>

| 12 Total revenue. See Instructions                      |                  | 544,693                              | 192 |

---

Note: The table continues with similar entries and calculations, but the provided portion is sufficient to illustrate the structure and formatting of the document.
### Part IX  Statement of Functional Expenses

**Section 501(c)(3) and 501(c)(4) organizations must complete all columns.**

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

<table>
<thead>
<tr>
<th></th>
<th>(A) Total expenses</th>
<th>(B) Program service expenses</th>
<th>(C) Management and general expenses</th>
<th>(D) Fundraising expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Grants and other assistance to individuals in the U.S. See Part IV, line 22</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Benefits paid to or for members</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Compensation of current officers, directors, trustees, and key employees</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Compensation not included above, to disqualified persons (as defined under section 4958(f)(3)(D)) and persons described in section 4958(c)(3)(B)</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Other salaries and wages</td>
<td>75,434</td>
<td>75,434</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Pension plan contributions (include section 401(k) and section 403(b) employer contributions)</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Other employee benefits</td>
<td>432</td>
<td>432</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Payroll taxes</td>
<td>9,596</td>
<td>9,596</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Fees for services (non-employees)</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Legal</td>
<td>2,708</td>
<td>2,708</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Accounting</td>
<td>2,600</td>
<td>2,600</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Lobbying</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Professional fundraising services See Part IV, line 17</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>Investment management fees</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Other</td>
<td>78,628</td>
<td>75,228</td>
<td>3,400</td>
</tr>
<tr>
<td>12</td>
<td>Advertising and promotion</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Office expenses</td>
<td>6,839</td>
<td>6,839</td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Information technology</td>
<td>54,351</td>
<td>54,351</td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Royalties</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Occupancy</td>
<td>6,847</td>
<td>6,847</td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>Travel</td>
<td>18,871</td>
<td>18,871</td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Conferences, conventions, and meetings</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Interest</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Payments to affiliates</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Depreciation, depletion, and amortization</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Insurance</td>
<td>15,399</td>
<td>12,319</td>
<td>3,080</td>
</tr>
<tr>
<td>24</td>
<td>Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>YEAR END SOLICITATION</td>
<td>5,156</td>
<td>5,156</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>TELEPHONE</td>
<td>11,197</td>
<td>10,077</td>
<td>1,120</td>
</tr>
<tr>
<td>c</td>
<td>Printing and Publications</td>
<td>2,890</td>
<td>2,890</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Postage and Shipping</td>
<td>7,626</td>
<td>6,863</td>
<td>763</td>
</tr>
<tr>
<td>e</td>
<td>MISSION ACTIVITIES</td>
<td>45,935</td>
<td>45,935</td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>All other expenses</td>
<td>245</td>
<td>245</td>
<td></td>
</tr>
<tr>
<td>25</td>
<td><strong>Total functional expenses. Add lines 1 through 24f</strong></td>
<td>344,754</td>
<td>318,843</td>
<td>20,755</td>
</tr>
<tr>
<td>26</td>
<td><strong>Joint costs. Check here ▶ if following</strong> SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

*Form 990 (2010)*
## Form 990 (2010)

### Part X Balance Sheet

<table>
<thead>
<tr>
<th>Assets</th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Cash—non-interest-bearing</td>
<td></td>
<td>1.00</td>
</tr>
<tr>
<td>2. Savings and temporary cash investments</td>
<td>119,520</td>
<td>318,614</td>
</tr>
<tr>
<td>3. Pledges and grants receivable, net</td>
<td></td>
<td>0.00</td>
</tr>
<tr>
<td>4. Accounts receivable, net</td>
<td></td>
<td>0.00</td>
</tr>
<tr>
<td>5. Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees</td>
<td></td>
<td>0.00</td>
</tr>
<tr>
<td>Schedule L</td>
<td></td>
<td>0.00</td>
</tr>
<tr>
<td>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)</td>
<td></td>
<td>0.00</td>
</tr>
<tr>
<td>Schedule L</td>
<td></td>
<td>0.00</td>
</tr>
<tr>
<td>7. Notes and loans receivable, net</td>
<td></td>
<td>0.00</td>
</tr>
<tr>
<td>8. Inventories for sale or use</td>
<td></td>
<td>0.00</td>
</tr>
<tr>
<td>9. Prepaid expenses and deferred charges</td>
<td></td>
<td>0.00</td>
</tr>
<tr>
<td>10a. Land, buildings, and equipment cost or other basis</td>
<td>10a</td>
<td>0.00</td>
</tr>
<tr>
<td>Less accumulated depreciation</td>
<td>10b</td>
<td>0.00</td>
</tr>
<tr>
<td>11. Investments—publicly traded securities</td>
<td></td>
<td>0.00</td>
</tr>
<tr>
<td>12. Investments—other securities</td>
<td></td>
<td>0.00</td>
</tr>
<tr>
<td>See Part IV, line 11</td>
<td></td>
<td>0.00</td>
</tr>
<tr>
<td>13. Investments—program-related</td>
<td></td>
<td>0.00</td>
</tr>
<tr>
<td>See Part IV, line 11</td>
<td></td>
<td>0.00</td>
</tr>
<tr>
<td>14. Intangible assets</td>
<td></td>
<td>0.00</td>
</tr>
<tr>
<td>15. Other assets</td>
<td></td>
<td>3,205</td>
</tr>
<tr>
<td>See Part IV, line 11</td>
<td></td>
<td>0.00</td>
</tr>
<tr>
<td>16. Total assets. Add lines 1 through 15 (must equal line 34)</td>
<td>122,725</td>
<td>318,614</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Liabilities</th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>17. Accounts payable and accrued expenses</td>
<td></td>
<td>17.00</td>
</tr>
<tr>
<td>18. Grants payable</td>
<td></td>
<td>18.00</td>
</tr>
<tr>
<td>19. Deferred revenue</td>
<td></td>
<td>19.00</td>
</tr>
<tr>
<td>20. Tax-exempt bond liabilities</td>
<td></td>
<td>20.00</td>
</tr>
<tr>
<td>21. Escrow or custodial account liability</td>
<td></td>
<td>21.00</td>
</tr>
<tr>
<td>Complete Part IV of Schedule D</td>
<td></td>
<td>0.00</td>
</tr>
<tr>
<td>22. Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons</td>
<td></td>
<td>22.00</td>
</tr>
<tr>
<td>Complete Part II of Schedule L</td>
<td></td>
<td>0.00</td>
</tr>
<tr>
<td>23. Secured mortgages and notes payable to unrelated third parties</td>
<td></td>
<td>23.00</td>
</tr>
<tr>
<td>24. Unsecured notes and loans payable to unrelated third parties</td>
<td></td>
<td>24.00</td>
</tr>
<tr>
<td>25. Other liabilities</td>
<td></td>
<td>5,284</td>
</tr>
<tr>
<td>Complete Part X of Schedule D</td>
<td></td>
<td>1,234</td>
</tr>
<tr>
<td>26. Total liabilities. Add lines 17 through 25</td>
<td></td>
<td>5,284</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1,234</td>
</tr>
</tbody>
</table>

**Organizations that follow SFAS 117, check here \(\checkmark\) and complete lines 27 through 29, and lines 33 and 34.**

<table>
<thead>
<tr>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unrestricted net assets</td>
<td>117,441</td>
</tr>
<tr>
<td>Temporarily restricted net assets</td>
<td></td>
</tr>
<tr>
<td>Permanently restricted net assets</td>
<td></td>
</tr>
</tbody>
</table>

**Organizations that do not follow SFAS 117, check here \(\checkmark\) and complete lines 30 through 34.**

<table>
<thead>
<tr>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Capital stock or trust principal, or current funds</td>
<td></td>
</tr>
<tr>
<td>Paid-in or capital surplus, or land, building or equipment fund</td>
<td></td>
</tr>
<tr>
<td>Retained earnings, endowment, accumulated income, or other funds</td>
<td></td>
</tr>
<tr>
<td>Total net assets or fund balances</td>
<td>117,441</td>
</tr>
<tr>
<td>Total liabilities and net assets/fund balances</td>
<td>122,725</td>
</tr>
</tbody>
</table>
### Part XI: Reconciliation of Net Assets

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

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses, subtract line 2 from line 1</td>
</tr>
<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))</td>
</tr>
<tr>
<td>5</td>
<td>Other changes in net assets or fund balances (explain in Schedule O)</td>
</tr>
<tr>
<td>6</td>
<td>Net assets or fund balances at end of year (combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)))</td>
</tr>
</tbody>
</table>

### Part XII: Financial Statements and Reporting

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

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Accounting method used to prepare the Form 990</td>
<td>Cash</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Accrual</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2a</td>
<td>Were the organization’s financial statements compiled or reviewed by an independent accountant?</td>
<td>2a</td>
<td>No</td>
</tr>
<tr>
<td>2b</td>
<td>Were the organization’s financial statements audited by an independent accountant?</td>
<td>2b</td>
<td>No</td>
</tr>
<tr>
<td>2c</td>
<td>If “Yes,” to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?</td>
<td>2c</td>
<td>No</td>
</tr>
<tr>
<td>2d</td>
<td>If “Yes,” to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Separate basis</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Consolidated basis</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Both consolidated and separate basis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td>As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?</td>
<td>3a</td>
<td>No</td>
</tr>
<tr>
<td>3b</td>
<td>If “Yes,” did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits</td>
<td>3b</td>
<td>No</td>
</tr>
</tbody>
</table>
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

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)

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:

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 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?

Provide the following information about the supported organization(s)

<table>
<thead>
<tr>
<th>(i) Name of supported organization</th>
<th>(ii) Type of organization (described on lines 1 - 9 above or IRC section see instructions)</th>
<th>(iii) (iv) Is the organization in col (i) listed in your governing document?</th>
<th>(v) Did you notify the organization in col (i) of your support?</th>
<th>(vi) Is the organization in col (i) organized in the U S?</th>
<th>(vii) Amount of support</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### 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

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2006</th>
<th>(b) 2007</th>
<th>(c) 2008</th>
<th>(d) 2009</th>
<th>(e) 2010</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received (Do not include any &quot;unusual grants&quot;)</td>
<td></td>
<td></td>
<td></td>
<td>659,248</td>
<td>525,060</td>
<td>1,184,308</td>
</tr>
<tr>
<td>2 Tax revenues levied for the organization’s benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>3 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td>659,248</td>
<td>525,060</td>
<td>1,184,308</td>
</tr>
<tr>
<td>4 Total. Add lines 1 through 3</td>
<td></td>
<td></td>
<td></td>
<td>659,248</td>
<td>525,060</td>
<td>1,184,308</td>
</tr>
<tr>
<td>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)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>6 Public Support. Subtract line 5 from line 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1,184,308</td>
</tr>
</tbody>
</table>

#### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2006</th>
<th>(b) 2007</th>
<th>(c) 2008</th>
<th>(d) 2009</th>
<th>(e) 2010</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7 Amounts from line 4</td>
<td>659,248</td>
<td>525,060</td>
<td></td>
<td></td>
<td></td>
<td>1,184,308</td>
</tr>
<tr>
<td>8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td>224</td>
<td>192</td>
<td></td>
<td></td>
<td></td>
<td>416</td>
</tr>
<tr>
<td>9 Net income from unrelated business activities, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)</td>
<td>32,116</td>
<td>17,691</td>
<td></td>
<td></td>
<td></td>
<td>49,807</td>
</tr>
<tr>
<td>11 Total support (Add lines 7 through 10)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1,234,531</td>
</tr>
<tr>
<td>12 Gross receipts from related activities, etc (See instructions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>12</td>
</tr>
<tr>
<td>13 First Five Years If the Form 990 is for the organization’s first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th></th>
<th>14</th>
<th>15</th>
<th>16a</th>
<th>17a</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public Support Percentage for 2010 (line 6 column (f) divided by line 11 column (f))</td>
<td></td>
<td></td>
<td></td>
<td>0 %</td>
</tr>
<tr>
<td>Public Support Percentage for 2009 Schedule A, Part II, line 14</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>33 1/3% support test—2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>33 1/3% support test—2009. If the organization did not check the 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</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the &quot;facts and circumstances&quot; test, check this box and stop here. Explain in Part IV how the organization meets the &quot;facts and circumstances&quot; test The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the &quot;facts and circumstances&quot; test, check this box and stop here. Explain in Part IV how the organization meets the &quot;facts and circumstances&quot; test The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Part III** Support Schedule for Organizations Described in Section 509(a)(2)

(Calendar year, or fiscal year beginning in) ▶

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

**Section B. Total Support**

<table>
<thead>
<tr>
<th>Calendar year, or fiscal year beginning in</th>
<th>(a) 2006</th>
<th>(b) 2007</th>
<th>(c) 2008</th>
<th>(d) 2009</th>
<th>(e) 2010</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 Amounts from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10c Add lines 10a and 10b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 <strong>Total support (Add lines 9, 10c, 11 and 12)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14 <strong>First Five Years</strong> If the Form 990 is for the organization’s first, second, third, fourth, or fifth tax year as a section501(c)(3) organization, check this box and stop here</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Section C. Computation of Public Support Percentage**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>15 Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))</td>
<td>15</td>
</tr>
<tr>
<td>16 Public support percentage from 2009 Schedule A, Part III, line 15</td>
<td>16</td>
</tr>
</tbody>
</table>

**Section D. Computation of Investment Income Percentage**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>17 Investment income percentage for 2010 (line 10c column (f) divided by line 13 column (f))</td>
<td>17</td>
</tr>
<tr>
<td>18 Investment income percentage from 2009 Schedule A, Part III, line 17</td>
<td>18</td>
</tr>
<tr>
<td>19a <strong>33 1/3% support tests—2010.</strong> 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</td>
<td></td>
</tr>
<tr>
<td>19b <strong>33 1/3% support tests—2009.</strong> 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</td>
<td></td>
</tr>
<tr>
<td>20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions</td>
<td></td>
</tr>
</tbody>
</table>
Part IV  Supplemental Information. Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test


Schedule A (Form 990 or 990-EZ) 2010
### Part I  Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

<table>
<thead>
<tr>
<th>1. Total number at end of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Donor advised funds</td>
</tr>
<tr>
<td>(b) Funds and other accounts</td>
</tr>
</tbody>
</table>

| 2. Aggregate contributions to (during year) |
| (a) Donor advised funds       |
| (b) Funds and other accounts  |

| 3. Aggregate grants from (during year) |
| (a) Donor advised funds       |
| (b) Funds and other accounts  |

| 4. Aggregate value at end of year |
| (a) Donor advised funds       |
| (b) Funds and other accounts  |

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

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

### Part II  Conservation Easements

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

1. Purpose(s) of conservation easements held by the organization (check all that apply):
   - Preservation of land for public use (e.g., recreation or pleasure)
   - Preservation of an historically important land area
   - Protection of natural habitat
   - Preservation of a certified historic structure
   - Preservation of open space

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

<table>
<thead>
<tr>
<th>Held at the End of the Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
</tr>
<tr>
<td>2b</td>
</tr>
<tr>
<td>2c</td>
</tr>
<tr>
<td>2d</td>
</tr>
</tbody>
</table>

3. Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year

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

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

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

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

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

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

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

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

1a. If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

1b. If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

   (i) Revenues included in Form 990, Part VIII, line 1
   - $ ____________________

   (ii) Assets included in Form 990, Part X
   - $ ____________________

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

   a. Revenues included in Form 990, Part VIII, line 1
   - $ ____________________

   b. Assets included in Form 990, Part X
   - $ ____________________
### Part III  Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

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

- Public exhibition
- Scholarly research
- Preservation for future generations
- Loan or exchange programs
- Other

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

5. During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
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<tbody>
<tr>
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</tbody>
</table>

### Part IV  Escrow and Custodial Arrangements.

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

1a. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

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

<table>
<thead>
<tr>
<th></th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a</td>
<td></td>
</tr>
<tr>
<td>1b</td>
<td></td>
</tr>
<tr>
<td>1c</td>
<td></td>
</tr>
<tr>
<td>1d</td>
<td></td>
</tr>
<tr>
<td>1e</td>
<td></td>
</tr>
<tr>
<td>1f</td>
<td></td>
</tr>
</tbody>
</table>

2a. Did the organization include an amount on Form 990, Part X, line 21?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
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</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

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

### Part V  Endowment Funds.

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

1a. Beginning of year balance

<table>
<thead>
<tr>
<th></th>
<th>(a) Current Year</th>
<th>(b) Prior Year</th>
<th>(c) Two Years Back</th>
<th>(d) Three Years Back</th>
<th>(e) Four Years Back</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

b. Contributions

c. Investment earnings or losses

d. Grants or scholarships

e. Other expenditures for facilities and programs

f. Administrative expenses

g. End of year balance

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

- Board designated or quasi-endowment
- Permanent endowment
- Term endowment

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

(i) unrelated organizations

(ii) related organizations

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>3a(i)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3a(ii)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

b. If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
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<th></th>
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<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

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

### Part VI  Investments—Land, Buildings, and Equipment.

See Form 990, Part X, line 10.

<table>
<thead>
<tr>
<th>Description of investment</th>
<th>(a) Cost or other basis (investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Accumulated depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Land</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b Buildings</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1c Leasehold improvements</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1d Equipment</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1e Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c.).)
### Part VII Investments—Other Securities. See Form 990, Part X, line 12.

<table>
<thead>
<tr>
<th>(a) Description of security or category (including name of security)</th>
<th>(b) Book value</th>
<th>(c) Method of valuation Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Financial derivatives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Closely-held equity interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total. (Column (b) should equal Form 990, Part X, col (B) line 12.)

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

<table>
<thead>
<tr>
<th>(a) Description of investment type</th>
<th>(b) Book value</th>
<th>(c) Method of valuation Cost or end-of-year market value</th>
</tr>
</thead>
</table>

Total. (Column (b) should equal Form 990, Part X, col (B) line 13.)

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

<table>
<thead>
<tr>
<th>(a) Description</th>
<th>(b) Book value</th>
</tr>
</thead>
</table>

Total. (Column (b) should equal Form 990, Part X, col (B) line 15.)

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

<table>
<thead>
<tr>
<th>(a) Description of Liability</th>
<th>(b) Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Federal Income Taxes</td>
<td></td>
</tr>
<tr>
<td>Payroll Liabilities</td>
<td>976</td>
</tr>
<tr>
<td>Credit Card Payable</td>
<td>258</td>
</tr>
</tbody>
</table>

Total. (Column (b) should equal Form 990, Part X, col (B) line 25.)

2. FIN 48 (ASC 740) Footnote: In Part XIV, provide the text of the footnote to the organization’s financial statements that reports the organization’s liability for uncertain tax positions under FIN 48 (ASC 740).
**Part XI**  Reconciliation of Change in Net Assets from Form 990 to Financial Statements

<table>
<thead>
<tr>
<th>#</th>
<th>Description</th>
<th>Line</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (Form 990, Part VIII, column (A), line 12)</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (Form 990, Part IX, column (A), line 25)</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Excess or (deficit) for the year Subtract line 2 from line 1</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Net unrealized gains (losses) on investments</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Donated services and use of facilities</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Investment expenses</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Prior period adjustments</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Other (Describe in Part XIV)</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Total adjustments (net) Add lines 4 - 8</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Excess or (deficit) for the year per financial statements Combine lines 3 and 9</td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>#</th>
<th>Description</th>
<th>Line</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue, gains, and other support per audited financial statements</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part VIII, line 12</td>
<td></td>
</tr>
<tr>
<td>2a</td>
<td>Net unrealized gains on investments</td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td>Donated services and use of facilities</td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td>Recoveries of prior year grants</td>
<td></td>
</tr>
<tr>
<td>2d</td>
<td>Other (Describe in Part XIV)</td>
<td></td>
</tr>
<tr>
<td>2e</td>
<td>Add lines 2a through 2d</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part VIII, line 12, but not on line 1</td>
<td></td>
</tr>
<tr>
<td>4a</td>
<td>Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td></td>
</tr>
<tr>
<td>4b</td>
<td>Other (Describe in Part XIV)</td>
<td></td>
</tr>
<tr>
<td>4c</td>
<td>Add lines 4a and 4b</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)</td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>#</th>
<th>Description</th>
<th>Line</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total expenses and losses per audited financial statements</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part IX, line 25</td>
<td></td>
</tr>
<tr>
<td>2a</td>
<td>Donated services and use of facilities</td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td>Prior year adjustments</td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td>Other losses</td>
<td></td>
</tr>
<tr>
<td>2d</td>
<td>Other (Describe in Part XIV)</td>
<td></td>
</tr>
<tr>
<td>2e</td>
<td>Add lines 2a through 2d</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part IX, line 25, but not on line 1:</td>
<td></td>
</tr>
<tr>
<td>4a</td>
<td>Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td></td>
</tr>
<tr>
<td>4b</td>
<td>Other (Describe in Part XIV)</td>
<td></td>
</tr>
<tr>
<td>4c</td>
<td>Add lines 4a and 4b</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)</td>
<td></td>
</tr>
</tbody>
</table>

**Part XIV**  Supplemental Information

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

<table>
<thead>
<tr>
<th>Identifier</th>
<th>Return Reference</th>
<th>Explanation</th>
</tr>
</thead>
</table>
# Supplemental Information to Form 990 or 990-EZ

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

## Name of the organization
CODEPINK WOMEN FOR PEACE

## Employer identification number
26-2823386

<table>
<thead>
<tr>
<th>Identifier</th>
<th>Return Reference</th>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Form 990, Part VI, Line 19</td>
<td>Form 990, Part VI, Line 19 Other Organization Documents Publicly Available</td>
<td>No documents available to the public</td>
</tr>
<tr>
<td>Identifier</td>
<td>Return Reference</td>
<td>Explanation</td>
</tr>
<tr>
<td>------------------</td>
<td>---------------------------</td>
<td>-----------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Form 990, Part VI, Line 11</td>
<td>Form 990, Part VI, Line 11 Form 990 Review Process</td>
<td>RETURN IS REVIEWED BY THE PRESIDENT BEFORE FILING. ANY ISSUES ARE DISCUSSED WITH THE OTHER DIRECTOR</td>
</tr>
</tbody>
</table>
## Part I  Identification of Disregarded Entities

(Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

<table>
<thead>
<tr>
<th>Name, address, and EIN of disregarded entity</th>
<th>Primary activity</th>
<th>Legal domicile (state or foreign country)</th>
<th>Total income</th>
<th>End-of-year assets</th>
<th>Direct controlling entity</th>
</tr>
</thead>
<tbody>
<tr>
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</table>

## Part II  Identification of Related Tax-Exempt Organizations

(Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

<table>
<thead>
<tr>
<th>Name, address, and EIN of related organization</th>
<th>Primary activity</th>
<th>Legal domicile (state or foreign country)</th>
<th>Exempt Code section</th>
<th>Public charity status (if section 501(c)(3))</th>
<th>Direct controlling entity</th>
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</thead>
<tbody>
<tr>
<td>(1) CODEPINK ACTION FUND</td>
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<td>EDUCATE PUBLIC AWARENESS ABOUT THE COST OF WAR</td>
<td>CA</td>
<td>501(C)(4)</td>
<td>N/A</td>
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<table>
<thead>
<tr>
<th>Section 512(b)(13) controlled organization</th>
<th>Yes</th>
<th>No</th>
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</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
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</tbody>
</table>
Part III  Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocations?</th>
<th>(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner?</th>
<th>(k) Percentage ownership</th>
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<td>Yes</td>
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</table>

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

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Type of entity (C corp, S corp, or trust)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Percentage ownership</th>
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### Part V Transactions With Related Organizations

(Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)

**Note.** Complete line 1 if any entity is listed in Parts II, III or IV.

1. During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
   - a. Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity
   - b. Gift, grant, or capital contribution to other organization(s)
   - c. Gift, grant, or capital contribution from other organization(s)
   - d. Loans or loan guarantees to or for other organization(s)
   - e. Loans or loan guarantees by other organization(s)
   - f. Sale of assets to other organization(s)
   - g. Purchase of assets from other organization(s)
   - h. Exchange of assets
   - i. Lease of facilities, equipment, or other assets to other organization(s)
   - j. Lease of facilities, equipment, or other assets from other organization(s)
   - k. Performance of services or membership or fundraising solicitations for other organization(s)
   - l. Performance of services or membership or fundraising solicitations by other organization(s)
   - m. Sharing of facilities, equipment, mailing lists, or other assets
   - n. Sharing of paid employees
   - o. Reimbursement paid to other organization for expenses
   - p. Reimbursement paid by other organization for expenses
   - q. Other transfer of cash or property to other organization(s)
   - r. Other transfer of cash or property from other organization(s)

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

<table>
<thead>
<tr>
<th>(a) Name of other organization</th>
<th>(b) Transaction type(a-r)</th>
<th>(c) Amount involved</th>
<th>(d) Method of determining amount involved</th>
</tr>
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<tbody>
<tr>
<td>(1) CODEPINK ACTION FUND</td>
<td>p</td>
<td>27,034</td>
<td>ACTUAL COSTS</td>
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<td>(2) CODEPINK ACTION FUND</td>
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<td>60,034</td>
<td>ACTUAL AMOUNT</td>
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</table>
### Part VI  Unrelated Organizations Taxable as a Partnership

(Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

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

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Are all partners section 501(c)(3) organizations?</th>
<th>(e) Share of end-of-year assets</th>
<th>(f) Disproportionate allocations?</th>
<th>(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(h) General or managing partner?</th>
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**Part VII   Supplemental Information**

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

<table>
<thead>
<tr>
<th>Identifier</th>
<th>Return Reference</th>
<th>Explanation</th>
</tr>
</thead>
</table>

Schedule R (Form 990) 2010