PUBLIC DISCLOSURE COPY

** PUBLIC DISCLOSURE COPY **

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

Open to Public Inspection

OMB No. 1545-0047

ΑΙ	For the	2011 calendar year, or tax year beginning $$	<u>J</u> UN 30, 2012						
В	Check if applicable:	C Name of organization COALITION TO ABOLISH SLAVERY OF	D Employer identifi	cation number					
	Address change	TRAFFICKING							
	□Name □change □Initial	Doing Business As		008533					
	return Termin-	Number and street (or P.O. box if mail is not delivered to street address) Room/s 5042 WILSHIRE BLVD Room/s		365-1906					
F	ated Amende		G Gross receipts \$	1,644,714.					
	⊒return ⊒Applica ⊒tion		-	H(a) Is this a group return					
	pending	F Name and address of principal officer:KAY BUCK	for affiliates?	Yes X No					
		SAME AS C ABOVE	H(b) Are all affiliates in	cluded? Yes No					
$\overline{\Gamma}$	Tax-exe	p. 512.12.5	527 If "No," attach a	list. (see instructions)					
		E ► WWW.CASTLA.ORG	H(c) Group exemption						
			Year of formation: 2003	M State of legal domicile: CA					
Pa		Summary	GUDUTUODA OF						
Activities & Governance		Briefly describe the organization's mission or most significant activities: ${ t TO}$ ${ t SERVE}$ ${ t RAFFICKING}$ & ${ t TO}$ ${ t PROMOTE}$ ${ t THEIR}$ ${ t HUMAN}$ ${ t RIGHTS}$	SURVIVORS OF						
¥.	2	Check this box 🕨 🔲 if the organization discontinued its operations or disposed of r	nore than 25% of its net a						
Š		lumber of voting members of the governing body (Part VI, line 1a)		11					
<u>ھ</u>		lumber of independent voting members of the governing body (Part VI, line 1b)		11					
ies		otal number of individuals employed in calendar year 2011 (Part V, line 2a)		11					
ξi		otal number of volunteers (estimate if necessary)		30					
Aci		otal unrelated business revenue from Part VIII, column (C), line 12		0.					
	b N	let unrelated business taxable income from Form 990-T, line 34		0.					
	, ,	Contributions and grants (Dort VIII line 1h)	Prior Year 1,942,406.	Current Year 1,586,252.					
Jue		Contributions and grants (Part VIII, line 1h)	3,108.	11,738.					
Revenue		Program service revenue (Part VIII, line 2g) nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	1,084.	673.					
æ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.					
	1	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,946,598.	1,598,663.					
_		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	50,000.	43,500.					
	1	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.					
S	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	800,587.	791,553.					
Expenses	16 a F	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.					
xbe		otal fundraising expenses (Part IX, column (D), line 25) 93,474.							
Ш	17 (Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	696,641.						
		otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,547,228.						
	19 F	Revenue less expenses. Subtract line 18 from line 12	399,370.						
Net Assets or Fund Balances			Beginning of Current Year	End of Year					
Sse	20 ⊺	otal assets (Part X, line 16)	929,051. 110,463.	1,200,785.					
let /	21 T	otal liabilities (Part X, line 26)	818,588.	1,046,128.					
P	22 N art II	let assets or fund balances. Subtract line 21 from line 20	010,500.	1,040,120.					
		ies of perjury, I declare that I have examined this return, including accompanying schedules and sta	atements, and to the best of m	v knowledge and belief, it is					
		and complete. Declaration of preparer (other than officer) is based on all information of which prep		y miomougo ana zonon, mio					
Sig	n	Signature of officer	Date						
Her	re	KAY BUCK, EXEC. DIRECTOR							
		Type or print name and title	I Data	LI DTIN					
		Print/Type preparer's name Preparer's signature	Date Check L	PTIN					
Pai	-	RICHARD L. RUVELSON CREEN HACGON C. TANKS LID	self-employ						
		Firm's name GREEN HASSON & JANKS LLP	Firm's EIN	95-1777440					
use	Only	Firm's address 10990 WILSHIRE BLVD., 16TH FLOOR LOS ANGELES, CA 90024-3929	Dhono no /	310) 873-1600					
<u> </u>			Phone no. (
Ma	y tne IR	S discuss this return with the preparer shown above? (see instructions)		X Yes No					

	COALITION TO ABOLISH SLAVERY OF
Form	1990 (2011) TRAFFICKING 10-0008533 Page 2
Pai	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	TO ASSIST PERSONS TRAFFICKED FOR THE PURPOSE OF FORCED LABOR AND
	SLAVERY-LIKE PRACTICES AND TO WORK TOWARDS ENDING ALL INSTANCES OF
	SUCH HUMAN RIGHTS VIOLATIONS.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	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 X No
Ū	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
4	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. (Code:) (Expenses \$ 241,601. including grants of \$) (Revenue \$ 11,738.)
4a	(Code:) (Expenses \$ 241,601. including grants of \$) (Revenue \$ 11,738.) CLIENT SERVICES: THE COALITION TO ABOLISH SLAVERY AND TRAFFICKING
	(CAST) CLIENT SERVICES PROGRAM IS A COMPREHENSIVE SOCIAL SERVICE MODEL
	DESIGNED TO HELP SURVIVORS OF HUMAN TRAFFICKING RECOVER FROM THEIR
	TRAFFICKING EXPERIENCE AND BECOME SELF-SUFFICIENT. THESE SERVICES
	INCLUDE ACCESS TO FOOD, SHELTER, JOB TRAINING, INTENSIVE CASE
	MANAGEMENT AS WELL AS LEGAL SERVICES. WITHIN THE CAST SERVICES MODEL,
	CLIENTS ARE TRANSFORMED FROM VICTIMS TO SURVIVORS AND IN SOME CASES,
	INTO ADVOCATES AGAINST MODERN DAY SLAVERY.
4b	(Code:) (Expenses \$839, 247. including grants of \$43, 500.) (Revenue \$)
	ADVOCACY / OUTREACH: CAST'S ADVOCACY WORK IS DIRECTLY INFORMED BY THE
	REAL EXPERIENCES OF THE CLIENTS IT SERVES. CAST INITIATES ALL OF ITS
	OUTREACH AND POLICY INITIATIVES BY ENGAGING OUR MAIN CONSTITUENTS:
	SURVIVORS THEMSELVES. BY ORGANIZING SURVIVORS OF TRAFFICKING, CAST
	LAUNCHED THE SURVIVOR ADVISORY CAUCUS, A ONE-OF-A-KIND LEADERSHIP
	DEVELOPMENT PROGRAM WHERE MEMBERS OF THE CAUCUS SPEAK PUBLICLY ON
	BEHALF OF ALL SURVIVORS OF TRAFFICKING. CAST ALSO PROVIDES TRAINING AND
	TECHNICAL ASSISTANCE TO LAW ENFORCEMENT OFFICIALS, HEALTH AND HUMAN
	SERVICE PROVIDERS, ATTORNEYS, COMMUNITY, GOVERNMENT AND FAITH-BASED
	ORGANIZATIONS, WHICH HELP IT IDENTIFY TRAFFICKED PERSONS AND ENSURE
	THAT THEY RECEIVE FAIR TREATMENT AS VICTIMS OF CRIME.
4c	(Code:) (Expenses \$
4d	Other program services (Describe in Schedule O.)
4e	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ▶ 1,080,848.

132002 02-09-12

Form **990** (2011)

4e Total program service expenses ▶

Form 990 (2011) TRAFFICKIN Part IV Checklist of Required Schedules

1 Is the organization described in section S01(c)(S) or 4947(a)(1) (other than a private foundation)? 1 If Yes, "complete Schedule D, Schedule D, Schedule of Contributors? 2 Is the organization request in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule D, Part I I 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule D, Part I I 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(f)) election in effect during the tax year? If "Yes," complete Schedule D, Part II 5 Is the organization ascions 501(c)(4), 501(c)(6), or 501(c)(6) organization that receives memberahip dues, assessments, or similar amounts as defined in Revenue Procedure a 9819 If "Yes," complete Schedule D, Part II 6 Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II 7 Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II 8 Did the organization maintain and collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV 9 Did the organization maintain and part in Part X, line 21; severe as a custodian for amounts not listed in Part X, or provide credit counseling, debit management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part VII 11 If the organization shared and anount for investments - other securities in Part X, line 10? If Yes, "complete Schedule D, Part VIII 12 Did the organization report an amount for Investments - other securities in Part X, line 10? If Yes, "complete Schedule D, Part VIII 12 Did the organization repor				Yes	No
2 Is the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public efficien? If "Yes," complete Schedule C, Part I 3 X 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(f) election in effect during the tax year? If "Yes," complete Schedule C, Part II 5 Is the organization a section 501(c)(4) of 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 8-19 If "Yes," complete Schedule C, Part II 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 for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide organization industry and errors. If "Yes," complete Schedule D, Part II 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, instolic land areas, or historic structures? If "Yes," complete Schedule D, Part III 8 Did the organization memoral amount in Part X, line 21; serve as a custodian for amounts not listed in Part X or provide credit counseling, debt management, redit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization sample of through a related organization, organization downwents, permanent and organization sample and part X, line 10 If "Yes," complete Schedule D, Part IV 11 If the organization sample and amount for investimatis, organization in Part X, line 15 that is 5% or more of i	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
3 Dut the organization engage in direct or indirect political campalgn activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II 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 yea? "It "Yes," complete Schedule C, Part II 5 Is the organization assection 501(c)(4), 501(c)(c), 501(c)(c)), 501(c)(c)(c), 501(c)(c)(c)(c)(c)(c)(c)(c)(c)(c)(c)(c)(c)(If "Yes," complete Schedule A	1		
public office? If "Yes," complete Schedule C, Part I 4 Section 501(6)(3) organizations. Did the organization egage in lobbying activities, or have a section 501(f)) election in effect during the tax year? If "Yes," complete Schedule C, Part II 5 Is the organization a section 501(6)(4), 501(6)(5), or 501(6)(6) organization that receives membership dues, assessments, or similar amounts as addinical in Newnue Procedure 98.19? If "Yes," complete Schedule C, Part III 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 II 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historical dreasance is conservation easement, including easements to preserve open space, the environment, historical dreasance, or other similar assets? If "Yes," complete Schedule D, Part III 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 9 Did the organization export an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, receil repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 11 If the organization report an amount for land, buildings, and equipment 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 VI 11 Did the organization report an amount for investments: orther securities 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 X VIII, VIII, X X 12 Did the organization report an amount for other t	2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) lack complete Schedule C, Part II 5 is the organization as 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 99 197 if "Ves," complete Schedule C, Part III 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 for which donors have the right to provide advice on the distribution or investment of amounts in such 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 III Did the organization maintain called areas, or historic structures? If "Yes," complete Schedule D, Part III Did the organization maintain collections of works of art, historical treasures, or other similar assets If II"yes, complete Schedule D, Part IV Did the organization right of a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part IV Did the organization asserver to any of the following questions is "Yes," then complete Schedule D, Part IV, III, IV, IV, VIII, IV, IV, VIII, IV, IV	3		3		Х
Signaturation 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	4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	4	х	
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 for which donors have the right to provide advice on the distribution or investment of amounts in such 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 II 1 bit 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 III 2 bit the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II 3 bit 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 10 bit the organization report an amount for land, buildings, and equipment in Part X, line 107 If "Yes," complete Schedule D, Part V 11 bit organization report an amount for investments of their securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part V 11 bit of the organization report an amount for investments - program related in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part V 11 bit of 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 167 If "Yes," complete Schedule D, Part V 12 bit the organization report an amount for other labilities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part X 11 bit organization report an amount for ot	5				
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 II Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, listoric land areas, or historic structures? If "Yes," complete Schedule D, Part III Sold Did the organization maintain collections of works of art, historical treasures, or other similar assess? If "Yes," complete Schedule D, Part IV 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 IV 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 IV 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 VI Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part X Did the organization report an amount for other liabilities 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 X Did the organization report an amount for other liabilities 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 X Did the organization report an amount for other liabilities 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 X Did the organization in separate, independe			5		Х
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 A Did the organization maintain collections of works of art, historical treasures, or other similar assests? If "Yes," complete Schedule D, Part III 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 temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part VI The organization's answer to any of the following questions is "Yes," then complete Schedule D, Part VI Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments - other securities in Part X, line 10? 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 VII 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 XII Did the organization is separate or consolidated financial statements for the tax year include a footnote that addresses the organization is beginned to section and part X, line 16? If "Yes," complete Schedule D, Part X Did the organization obtain separate or possitions under Final Als (ASC 740)* If "Yes," complete Schedule D, Part X Did the organization neotion asseparate or consolidated, independent audited financial statements for the tax year? If "Yes," comple	6				
the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 8 Since II bid the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 8 Schedule D, Part III 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 oredit consensing, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 9 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 11 If the organization is answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 11 It X 11		provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III S Y Yes, "complete Schedule D, Part IV Pill 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 Pill 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	7				
Schedule D, Part III 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 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 III If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V III If the organization report an amount for investments or the securities in Part X, line 10? If "Yes," complete Schedule D, Part V III III III III III III III III III			7		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 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasiendowments? If "Yes," complete Schedule D, Part V 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V, III III III III III III III III III	8		8		х
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 1 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, III, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 11a X 11b Uff the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI 11b X 2 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 VI 11b X 2 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 X 11b X 2 Did the organization report an amount for other liabilities in Part X, line 15? If "Yes," complete Schedule D, Part X 11b X 2 Did the organization is separate or consolidated financial statements for the tax year include a footnote that addresses the organization is separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 11f X 2 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 11f X 2 Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 11f X 2 Did the organization as school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule D, Part X, XII, and XIII is optional 12b X 11b Was 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 f	9				
endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V		credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable. 11	10		10	х	
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI b 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 c 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 VII 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 f Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organization is separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X XIII, and XIII b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII is optional If If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional If If Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional If If Yes," complete Schedule E 13	11				
Part VI b 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 c 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 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 XIII e Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organization in sport an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 110		· ·			
b 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 VIII c 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 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 VIII f Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organization amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 110	а			7.7	
assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII c 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 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 X			11a	X	
c 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 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 e Did the organization report an amount for other liabilities 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 X 11d X 11d X 12 Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X III X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part XI, XII, and XIII Spatial III S	b		441.		v
assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 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 e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part 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 111	_		116		
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 e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization is liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 111	C		110		x
Part X, line 16? If "Yes," complete Schedule D, Part IX e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part 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 112a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X III X 12b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization asknowledge of the organization asknowledge of the organization asknowledge of the organization asknowledge of the III III III III III III III III III I	d		110		
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part 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 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional 12b X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 14a X 15 Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any 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 II and IV 15 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 17 Did the organization report more than \$15,000 of gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18 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 II 19 Did the organization operate one or more hospital facilities? If	-		11d		Х
the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f	е				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 b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional 13 Is the organization as school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 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 III and IV 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part II 17 Did the organization report more than \$15,000 of gross income and contributions on Part VIII, lines 1 cand 8a? If "Yes," complete Schedule G, Part II 18 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 18 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
Schedule D, Parts XI, XII, and XIII b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional 12b X 13 Is the organization a school described in section 170(b)(1)(A)(iii)? If "Yes," complete Schedule E 13 Did the organization maintain an office, employees, or agents outside of the United States? 14a Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 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 III and IV 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 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 c and 8a? If "Yes," complete Schedule G, Part III 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a Did the organization attach a copy of its audited financial statements to this return?			11f		X
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 Is X Ida Did the organization maintain an office, employees, or agents outside of the United States? Ida Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV Ib 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 Ib 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 If 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 Id Did the organization report more than \$15,000 of all of fundraising event gross income and contributions on Part VIII, lines 18 X In 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 In Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H In Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H In Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H In Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H In Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	12a		12a	х	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 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 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 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1a A B A II "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20 Did the organization attach a copy of its audited financial statements to this return?	b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
14a Did the organization maintain an office, employees, or agents outside of the United States? 14a X 15 Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 16 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 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 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 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 and 8a? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20a Did the organization attach a copy of its audited financial statements to this return?			12b		
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 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 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 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 18 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 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20 Did the organization attach a copy of its audited financial statements to this return?	13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		
investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 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 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 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X End of the organization attach a copy of its audited financial statements to this return?	14a		14a		<u> X</u>
or more? If "Yes," complete Schedule F, Parts I and IV 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 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 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 18 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 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20a If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	b				
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 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 18 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 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?				_v	
or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV 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 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 18 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 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20 If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	15		140		
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 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 18 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 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20 X 20 If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	i		15	x	
located outside the United States? If "Yes," complete Schedule F, Parts III and IV 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 18 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 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20 X 20 If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	16				
column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 18 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 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
1c and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	1/	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b	18		18	X	
20aDid the organization operate one or more hospital facilities? If "Yes," complete Schedule H20aXbIf "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?20b	19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b		complete Schedule G, Part III	19		
					X
	b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?			0044)

Form 990 (2011) TRAFFICKING Part IV Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the		Yes	No
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
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		X
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
!4a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
.5a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
6	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
7	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
•	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
·	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
9	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	25		
,		30		x
		30		
1	Did the organization liquidate, terminate, or dissolve and cease operations?			x
	If "Yes," complete Schedule N, Part I	31		
2	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			x
_	Schedule N, Part II	32		
3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
84	Was the organization related to any tax-exempt or taxable entity?	١		, .
_	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		х
6	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
7	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
•	and the triangle of the control of the following transport of the control of the	37		x
8	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	3,		
~	Did the organization complete obnequie of and provide explanations in obnequie 0 101 Fatt VI, Illies 11 and 19?	38	х	l

Form **990** (2011)

Page 5

COALITION TO ABOLISH SLAVERY OF TRAFFICKING

Form 990 (2011)

Pai	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 11			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country: ►			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			37
	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?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		-
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		X
	to file Form 8282?	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year 7d 7			
_	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?	7g		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	7h		
0	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	-		
	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	30		
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	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			
С	Enter the amount of reserves on hand 13c			
		14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form **990** (2011)

10-000853<u>3 Page 6</u> TRAFFICKING 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.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 1			
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		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		X
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		X
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		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
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		X
Sec	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?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		77	
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		v	
40	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14 15	Did the organization have a written document retention and destruction policy?	14	Λ	
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?			
_	The organization's CEO, Executive Director, or top management official	15a	х	
	Other officers or key employees of the organization	15b	 -	Х
b	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	100		
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		Х
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		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶CA			
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) a	vailab	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, and	d finar	ncial	
	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 organization	ion: 🕨	<u> </u>	
	CARMEN WILLIAMS - 213-365-1906			
	50/2 WII CUIDE DIVID CUITME 586 IOC ANCELEC CA 90036			

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.

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

- 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.

Classifier Compensation Compen	(A) Name and Title	(B) Average hours per week	box	(C) Position (do not check more than box, unless person is bo officer and a director/tru			than	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
BOARD MEMBER S.00 X O.		(describe hours for related organizations in Schedule	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization	organizations	compensation from the organization and related
C2 MOLLY RHODES BOARD MEMBER B.00 X		0.00	ι,						0	0	0
BOARD MEMBER		8.00	X						0.	0.	0.
Sample S		8.00	\v_						0	0	0
BOARD MEMBER S.00 X O.		0.00	1						•	0.	<u> </u>
TRIPP DUBOIS BOARD MEMBER		8.00	$ _{\mathbf{x}}$						0.	0.	0.
South Sout			 							•	•
South Sout	BOARD MEMBER	8.00	x						0.	0.	0.
(6) MARK LIEBLEIN BOARD MEMBER 8.00 X 0.0 0.0 0	(5) DEBI ZUMTUMBEL										
BOARD MEMBER 8.00 X 0. 0. 0 0 0 0 0 0 0 0	BOARD MEMBER	8.00	X						0.	0.	0.
(7) SARBANI BHADURI 8.00 X 0.0 0.0 BOARD MEMBER 8.00 X 0.0 0.0 (8) SR. MARY GENINO 8.00 X X 0.0 0.0 BOARD PRESIDENT 8.00 X X 0.0 0.0 (9) KEVIN DAVIS 8.00 X X 0.0 0.0 BOARD VICE PRESIDENT 8.00 X X 0.0 0.0 (10) RACHEL J. LEE 8.00 X X 0.0 0.0 BOARD TREASURER 8.00 X X 0.0 0.0 (11) JU PARK 8.00 X X 0.0 0.0 (12) KAY BUCK 8.00 X X 111,648. 0.14,400 (13) MYRNA JACKSON 111,648. 0.14,400	(6) MARK LIEBLEIN										
BOARD MEMBER 8.00 X	BOARD MEMBER	8.00	Х						0.	0.	0.
(8) SR. MARY GENINO BOARD PRESIDENT 8.00 X X X 0.0.0 0 0 (9) KEVIN DAVIS 8.00 X X 0.0.0 0.0.0 0											
BOARD PRESIDENT 8.00 X X X 0.00 0 <td></td> <td>8.00</td> <td>X</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>0.</td> <td>0.</td> <td>0.</td>		8.00	X						0.	0.	0.
(9) KEVIN DAVIS BOARD VICE PRESIDENT (10) RACHEL J. LEE BOARD TREASURER (11) JU PARK BOARD SECRETARY (12) KAY BUCK EXECUTIVE DIRECTOR (13) MYRNA JACKSON 8.00 X X X 0. 0. 0. 0 0. 0. 0 111,648. 0. 14,400			l		l						
BOARD VICE PRESIDENT 8.00 X X 0.0.0 0.0.0 (10) RACHEL J. LEE 8.00 X X 0.0.0 0.0.0 BOARD TREASURER 8.00 X X 0.0.0 0.0.0 (11) JU PARK 0.0.0 0.0.0 0.0.0 0.0.0 (12) KAY BUCK 0.0.0 0.0.0 0.0.0 0.0.0 0.0.0 (13) MYRNA JACKSON 111,648.0 0.14,400 0.0.0 0.0.0 0.0.0		8.00	X		Х		<u> </u>		0.	0.	0.
(10) RACHEL J. LEE BOARD TREASURER 8.00 X X 0. 0. 0 (11) JU PARK BOARD SECRETARY 8.00 X X 0. 0. 0 (12) KAY BUCK EXECUTIVE DIRECTOR 40.00 X 111,648. 0. 14,400		0 00	١,,		٠,,					0	_
BOARD TREASURER 8.00 X X 0. 0. 0 (11) JU PARK 8.00 X X 0. 0. 0 BOARD SECRETARY 8.00 X X 0. 0. 0 (12) KAY BUCK EXECUTIVE DIRECTOR 40.00 X X 111,648. 0. 14,400 (13) MYRNA JACKSON 111,648. 0. 14,400		8.00	<u> </u>		Λ				0.	0.	0.
(11) JU PARK BOARD SECRETARY (12) KAY BUCK EXECUTIVE DIRECTOR (13) MYRNA JACKSON (10) X X X 0. 0. 0. 0 (11) JU PARK (10) DIRECTOR (11) JU PARK (12) COLUMN (13) PARK (13) MYRNA JACKSON (14) 400		8 00	_v		v				0	<u></u>	0
BOARD SECRETARY 8.00 X X 0. 0. 0 (12) KAY BUCK 40.00 X 111,648. 0. 14,400 (13) MYRNA JACKSON 111,648. 0. 14,400		0.00	<u> </u>		^		<u> </u>		0.	0.	· ·
EXECUTIVE DIRECTOR 40.00 X 111,648. 0. 14,400 (13) MYRNA JACKSON		8.00	x		х				0.	0.	0.
(13) MYRNA JACKSON	(12) KAY BUCK										
	EXECUTIVE DIRECTOR	40.00			Х				111,648.	0.	14,400.
DIRECTOR OF OPERATIONS 40.00 X 73,817. 0. 14,400											
	DIRECTOR OF OPERATIONS	40.00			X				73,817.	0.	14,400.

Form **990** (2011)

Page 8

COALITION TO ABOLISH SLAVERY OF TRAFFICKING

Part VII Section A. Officers, Directors, Tru	stees, Key Er	mplo	oyee	s, a	nd l	High	est	Compensated Employ	ees (continued)			
(A) Name and title	(B) Average hours per week (describe	box	not c , unle	Pos heck ss pe	more rson	than is bot or/trus	h an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations		Estin amou otl	F) nated unt of her ensation
	(describe hours for related organizations in Schedule O) High short of the control of the cont								(W-2/1099-MISC)	fron organ and r	n the nization elated zations
				0		1 0						
1b Sub-total c Total from continuation sheets to Part VI	I, Section A					>		185,465. 0. 185,465.		0. 0.		,800. 0. ,800.
 d Total (add lines 1b and 1c) 2 Total number of individuals (including but n compensation from the organization 						e) wh	no r			-		<u>, 800 .</u> 1
3 Did the organization list any former officer,	director or tru	ıste	e ke	ev er	mplo	ovee	or	highest compensated e	mplovee on		Y	es No
line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the su	uch individual										3	X
and related organizations greater than \$150Did any person listed on line 1a receive or a	0,000? <i>If</i> "Yes,	" co	mple	ete S	Sche	edule	e J 1	for such individual			4	X
rendered to the organization? If "Yes," com Section B. Independent Contractors	plete Schedul	e J f	or su	uch _i	pers	son .					5	X
Complete this table for your five highest co the organization. Report compensation for										ens	ation fro	m
(A) Name and business	address	N	ONE	3				(B) Description of s	ervices	С	(C) Compens	ation
2 Total number of independent contractors (i \$100,000 of compensation from the organic		ot lii	mite	d to		se lis	stec	d above) who received m	nore than			
+ 100,000 of componidation from the organic											OC	20 (2011)

COALITION TO ABOLISH SLAVERY OF

Form 990 (2011)

TRAFFICKING

Pa	rt VII	II Statement of Rever	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
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Fundraising events Related organizations Government grants (contributi All other contributions, gifts, grant similar amounts not included abov Noncash contributions included in lines	1b 1c 1d 1d ions) ts, and we 1f 1,	106,742. 321,822. 157,688.	1,586,252.			
	2 a		TING	Business Code 900099		11,738.		
Program Service Revenue	c d e f							
	g g	Total. Add lines 2a-2f			11,738.			
	3 4 5	Investment income (including other similar amounts)	dividends, interest.	est, and proceeds	673.			673.
		D	(i) Real	(ii) Personal				
	7 a	Net rental income or (loss) Gross amount from sales of assets other than inventory Less: cost or other basis	(i) Securities	(ii) Other				
	d	and sales expenses Gain or (loss) Net gain or (loss) Gross income from fundraising		>				
Other Revenue		including \$ 106,7 contributions reported on line Part IV, line 18	42 • of 1c). See a	46,051. 46,051.				
	С	Less: direct expenses Net income or (loss) from fund Gross income from gaming ac Part IV, line 19	Iraising events	>	0.			
	С	Less: direct expenses Net income or (loss) from gam Gross sales of inventory, less	bing activities					
	b	and allowances Less: cost of goods sold Net income or (loss) from sale:	a					
1		Miscellaneous Revenue		Business Code				
1	11 a							
	b							
	С							
		All other revenue						
		Total. Add lines 11a-11d Total revenue. See instructions.			1 500 662	11,738.	0.	673.
	12	rotal revenue. See instructions.			 - 1.030,003	1 11,/30•	U •	0/3.

10-0008533 Page 10

COALITION TO ABOLISH SLAVERY OF TRAFFICKING

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).

comp	olete columns (B), (C), and (D).				
	Check if Schedule O contains a respon				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				·
	organizations in the United States. See Part IV, line 21				
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				
	United States. See Part IV, lines 15 and 16	43,500.	43,500.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	204,438.	173,772.	16,356.	14,310.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	413,721.	351,663.	33,098.	28,960.
8	Pension plan accruals and contributions (include				
	section 401(k) and section 403(b) employer contributions)	19,145.	16,273. 87,435.	1,532.	1,340. 7,201.
9	Other employee benefits	102,865.	87,435.	8,229.	7,201.
10	Payroll taxes	51,384.	43,676.	4,111.	3,597.
11	Fees for services (non-employees):				
а	Management				
b	Legal				
С	Accounting	56,146.		56,146.	
d	Lobbying	30,317.	30,317.		
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	40.454			1 - 100
g	Other	62,156.	6,446.	38,081.	17,629.
12	Advertising and promotion	60 100	F0 200	10 455	6 242
13	Office expenses	69,199.	50,399.	12,457.	6,343.
14	Information technology	52,864.	44,159.	3,415.	5,290.
15	Royalties	01 640	60 204	C F 21	F 71F
16	Occupancy	81,640.	69,394.	6,531.	5,715.
17	Travel	49,356.	48,188.	623.	545.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	C 705	4 (17	2 160	
19	Conferences, conventions, and meetings	6,785.	4,617.	2,168.	
20	Interest				
21	Payments to affiliates	7 012		7 012	
22	Depreciation, depletion, and amortization	7,913. 18,968.	16,123.	7,913. 1,517.	1,328.
23	Insurance Other expenses. Itemize expenses not covered	10,900.	10,143.	1,31/•	1,340.
24	uther expenses. Itemize expenses not covered 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	PROGRAM/CLIENT SERVICES	83,755.	83,755.		
b	DUES AND SUBSCRIPTIONS	7,313.	7,313.		
C	REPAIRS AND MAINTENANCE	3,008.	, == 0 0	3,008.	
d		,		,	
e	All other expenses	6,650.	3,818.	1,616.	1,216.
25	Total functional expenses. Add lines 1 through 24e	1,371,123.	1,080,848.	196,801.	93,474.
26	Joint costs. Complete this line only if the organization			·	<u> </u>
-	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form **990** (2011)

COALITION TO ABOLISH SLAVERY OF TRAFFICKING

Form 990 (2011)

Pa	rt X	Balance Sheet				<u> </u>
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		390,953.	1	641,573.
	2	Savings and temporary cash investments		246,395.	2	262,939.
	3	Pledges and grants receivable, net		115,650.	3	154,860.
	4	Accounts receivable, net		140,276.	4	102,508.
	5	Receivables from current and former officers, directors, trustees, key				
		employees, and highest compensated employees. Complete Part II of Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section				
	•	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributi				
		employers and sponsoring organizations of section 501(c)(9) voluntar	-			
		employees' beneficiary organizations (see instructions)	-		6	
şţs	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
⋖	9	Prepaid expenses and deferred charges		18,857.	9	16,920.
	I	Land, buildings, and equipment: cost or other		20,007.0	9	20/3201
	lua		7,266.			
	١,	Less: accumulated depreciation 10b 8	6,645.	5,556.	10c	10,621.
	11	Investments - publicly traded securities	-	373301	11	10,021
	12	Investments - other securities. See Part IV, line 11			12	
	13	Investments - program-related. See Part IV, line 11			13	
	1					
	14	Intangible assets		11,364.	14	11,364.
	15	Other assets. See Part IV, line 11		929,051.	15 16	1,200,785.
	16	Total assets. Add lines 1 through 15 (must equal line 34)		110,463.	17	154,657.
	17	Accounts payable and accrued expenses	110,403.		134,037.	
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
ies	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
Liabilities	22	Payables to current and former officers, directors, trustees, key empl	-			
<u>E</u>		highest compensated employees, and disqualified persons. Complet				
_		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 Pa				
		Schedule D		110,463.	25	154,657.
	26	Total liabilities. Add lines 17 through 25		110,405.	26	134,037.
,		Organizations that follow SFAS 117, check here X and co	ompiete			
Çe		lines 27 through 29, and lines 33 and 34.		414,822.		730,536.
<u>la</u> n	27	Unrestricted net assets		378,766.	27	290,592.
Ва	28	Temporarily restricted net assets		25,000.	28	25,000.
pur	29	Permanently restricted net assets	1 1	43,000.	29	23,000.
Ę		Organizations that do not follow SFAS 117, check here	and			
SO		complete lines 30 through 34.				
set	30	Capital stock or trust principal, or current funds			30	
As	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		010 500	32	1 046 100
_	33	Total net assets or fund balances		818,588.	33	1,046,128.
	34	Total liabilities and net assets/fund balances		929,051.	34	1,200,785.

Form **990** (2011)

	000	(0044)	
-orm	990	(2011)	

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>,59</u>		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1	,37		
3	Revenue less expenses. Subtract line 2 from line 1	3			7,5	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		81	8,5	88.
5	Other changes in net assets or fund balances (explain in Schedule O)	5				0.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	1	,04	6,1	28.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII					X
	<u> </u>				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.					
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?					X
b	b Were the organization's financial statements audited by an independent accountant?				X	
С						
	review, or compilation of its financial statements and selection of an independent accountant?					
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule (O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a				
	separate basis, consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	ıdit			
	Act and OMB Circular A-133?			За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired au	dit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.			3b		
				Form	9 <mark>90</mark> (2011)

SCHEDULE A

Department of the Treasury

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

COALITION TO ABOLISH SLAVERY OF TRAFFICKING

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

Employer identification number

10-0008533

The	organ	ization is not a	a private foundation	because it is: (For lines 1	1 through	11, check	only one b	ox.)					
1	Ш	•		s, or association of churc		ribed in se	ection 170	(b)(1)(A)(i)).				
2	Н	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)											
3	\square			tal service organization o									
4				operated in conjunction	with a hos	pital desc	ribed in se	ction 170	(b)(1)(A)(ii	i). Enter	the hospita	's nam	ne,
		city, and state											
5	Ш	_	•	benefit of a college or ur	niversity o	wned or op	perated by	a governi	mental uni	t describ	ed in		
			(b)(1)(A)(iv). (Comple	•									
6			- ·	ent or governmental unit									
7	X	_	•	eives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general	public desc	ribed i	in
			b)(1)(A)(vi). (Comple										
8	Щ	A community	trust described in s	ection 170(b)(1)(A)(vi).	(Complete	Part II.)							
9		An organizati	on that normally rec	eives: (1) more than 33 1	1/3% of its	support f	rom contri	butions, m	nembershi	p fees, a	ınd gross re	ceipts	from
		activities rela	ted to its exempt fur	nctions - subject to certa	ain excepti	ons, and (2) no more	than 33 1	1/3% of its	support	t from gross	invest	ment
		income and u	unrelated business to	axable income (less sect	tion 511 ta	x) from bu	isinesses a	acquired b	y the orga	nization	after June	30, 197	75.
		See section !	509(a)(2). (Complete	Part III.)									
10	Н	An organizati	on organized and op	perated exclusively to tes	st for publ	ic safety. S	See sectio	n 509(a)(4	1).				
11		An organizati	on organized and op	perated exclusively for th	ne benefit (of, to perfo	orm the fur	nctions of,	or to carr	y out the	purposes of	of one	or
				itions described in section				2). See se o	ction 509(a	a)(3). Ch	eck the box	that	
				organization and comple							7		
		a Type I		• •	: Ш Тур		•	•		d└	ا Type III - ا		
е		, ,	,	t the organization is not		,	,	,		•	•		ın
			· ·	han one or more publicly	,	•				9(a)(1) or	section 509	}(a)(2).	
f		If the organize	ation received a writ	ten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
			rganization, check th										. L
9	l			rganization accepted ar									
				irectly controls, either al								Yes	No
				upported organization?									
				n described in (i) above?									
				person described in (i) o							11g(iii)		
h	l	Provide the fo	ollowing information	about the supported org	ganization	(s).							
			1	(III) T									
(i) Name	of supported	(ii) EIN				(v) Did you		(vi) Is organizatio	the on in col.	(vii) Ar	nount o	f
	orga	anization		(described on lines 1 0	in col. (i) lis governing				(i) organiz	ed in the	sup	port	
				above or IRC section			.,,		U.S.				
				(see instructions))	Yes	No	Yes	No	Yes	No			
Tota	al.												
וטני	aí										L		

132021

Schedule A (Form 990 or 990-EZ) 2011

Form 990 or 990-EZ.

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2011

TRAFFICKING

10-0008533 Page 2

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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1102812.	1101848.	1468096.	1942406.	1586252.	7201414.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	1102812.	1101848.	1468096.	1942406.	1586252.	7201414.
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)						833,006.
6	Public support. Subtract line 5 from line 4.						6368408.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Amounts from line 4	1102812.	1101848.	1468096.	1942406.	1586252.	7201414.
8							
_	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	11,930.	7,319.	2,423.	1,084.	673.	23,429.
9	Net income from unrelated business	,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	_,	_,,		
Ū	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part IV.)		88.				88.
11	Total support. Add lines 7 through 10		331				7224931.
	Gross receipts from related activities,	etc (see instructi	one)			12	194,821.
	First five years. If the Form 990 is for	•	,	d fourth or fifth to			
10	organization, check this box and stop	-			-		ightharpoonup
Sec	etion C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2011 (column (f))		14	88.14 %
	Public support percentage from 2010					15	94.55 %
	33 1/3% support test - 2011. If the o						
	stop here. The organization qualifies						
h	33 1/3% support test - 2010. If the						
	and stop here. The organization qual						
170	10% -facts-and-circumstances tes						
1/8							
	and if the organization meets the "fact						
	meets the "facts-and-circumstances"						
D	10% -facts-and-circumstances tes						
	more, and if the organization meets the						
40	organization meets the "facts-and-circ						
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 160, 1/a, or 17b	o, cneck this box a	ina see instruction	s

Schedule A (Form 990 or 990-EZ) 2011

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support	iow, picase com	oloto i dit ii.j				
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and		, ,	,	, , , , , , , , , , , , , , , , , , ,	,	.,
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions,						
merchandise sold or services per-						
formed, or facilities furnished in						
any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
· · · · · · · · · · · · · · · · · · ·						
6 Total. Add lines 1 through 5						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received						
from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.) Section B. Total Support						
	/-\ 0007	(I-) 0000	(-) 0000	(-1) 0040	(-) 0044	(6) T-+-1
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
dividends, payments received on						
securities loans, rents, royalties						
and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b,						
whether or not the business is						
regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital						
assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth t	ax year as a sectio	n 501(c)(3) organiz	zation,
check this box and stop here						>
Section C. Computation of Public					г г	
15 Public support percentage for 2011 (lin					15	<u>%</u>
16 Public support percentage from 2010					16	%
Section D. Computation of Inves					I I	
17 Investment income percentage for 201					17	%
18 Investment income percentage from 2					18	<u>%</u>
19a 33 1/3% support tests - 2011. If the	-					
more than 33 1/3%, check this box an						
b 33 1/3 % support tests - 2010. If the o	-					
line 18 is not more than 33 1/3%, chec			•		•	
20 Private foundation. If the organization	ı did not check a	box on line 14, 19	a, or 19b, check t	his box and see ins	structions	<u></u>

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

2011

Name of the organization

COALITION TO ABOLISH SLAVERY OF TRAFFICKING

Employer identification number

10-0008533

Organization type (check one):							
Filers of:	Section:						
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
, ,	eation is covered by the General Rule or a Special Rule. 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.						
General Rule							
ū	nization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one Complete Parts I and II.						
Special Rules							
509(a)(1) an	in 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections d 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% int on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.						
total contrib	on 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, outions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or ion of cruelty to children or animals. Complete Parts I, II, and III.						
contribution If this box is purpose. Do	in 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, as for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. In the checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., on not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively naritable, etc., contributions of \$5,000 or more during the year.						
Caution. An organiz	ation that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF),						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
COALITION TO ABOLISH SLAVERY OF
TRAFFICKING

Employer identification number

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 200,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Humo, dudreos, and Eli T	\$ 150,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		- \$\$_105,534.	Person X Payroll

Name of organization
COALITION TO ABOLISH SLAVERY OF
TRAFFICKING

Employer identification number

Part I	Contributors (see instructions). Use duplicate copies of Part I if addit	ional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$62,912. 	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$50,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Name of organization
COALITION TO ABOLISH SLAVERY OF
TRAFFICKING

Employer identification number

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
		\$				
	···	Cohodulo D /Farro O	00 000 E7 or 000 DE\ /2011\			

Name of organization

Employer identification number

COALITION TO ABOLISH SLAVERY OF

mn 7	BBT	$\alpha T T$	ING
.I.K 7	нні	l K	1 1/1/1

	FICKING		10-0008533
Part III	Exclusively religious, charitable, etc., indiverse. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc. Use duplicate copies of Part III if addition	vidual contributions to section 501(c)(7), he following line entry. For organizations co c., contributions of \$1,000 or less for the y al space is needed.	(8), or (10) organizations that total more than \$1,000 for the impleting Part III, enter ear. (Enter this information once.)
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, al	(e) Transfer of gift	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, a		Relationship of transferor to transferee

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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.

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.

	e organization answered "Yes" to		Tax), or Form 990-EZ	, Part V, line 35c (Proxy T	ax), then		
	Section 501(c)(4), (5), or (6) organizate of organization COALITI	ON TO ABOLISH SLA	AVERY OF	Empl	oyer identification number		
		ICKING			10-0008533		
Pa		ganization is exempt unde	er section 501(c)	or is a section 527 o			
2	Provide a description of the organize Political expenditures Volunteer hours	zation's direct and indirect politica	al campaign activities ir	n Part IV.			
		ganization is exempt unde					
1	Enter the amount of any excise tax	incurred by the organization under	er section 4955				
2	Enter the amount of any excise tax	incurred by organization manage	rs under section 4955				
	If the organization incurred a section						
	Was a correction made?				Yes No		
_	o If "Yes," describe in Part IV. Int I-C Complete if the org	ganization is exempt unde	er section 501(c)	except section 501/	c)(3)		
		•		•	, , ,		
2 3 4	 Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. 						
	(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.

Schedule C (Form 990 or 990-EZ) 2011

LHA

132041

Schedule C (Form 990 or 990-EZ) 2011	TRAFFICK	TNG	DAVERT OF	10-0	008533 Page 2
Part II-A Complete if the org			n 501(c)(3) and fil	ed Form 5768	TOUSS Fage Z
(election under sed		•	()()		
A Check ► if the filing organization expenses, and share in the filing organization in the filing org	ation belongs to an a	ffiliated group (and list ing expenditures). and "limited control" pro		group member's nam	e, address, EIN,
Limi	its on Lobbying Exp	•		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infl	luence public opinio	(grass roots lobbying)			
b Total lobbying expenditures to infl	•			30,317.	
c Total lobbying expenditures (add				30,317.	
d Other exempt purpose expenditur				1,340,806.	
e Total exempt purpose expenditure				1,371,123.	
f Lobbying nontaxable amount. Ent				212,112.	
If the amount on line 1e, column (a)	or (b) is: The le	obbying nontaxable am	ount is:		
Not over \$500,000		of the amount on line 1e.			
Over \$500,000 but not over \$1,00	0,000 \$100,	000 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5	500,000 \$175,	000 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17	7,000,000 \$225,	000 plus 5% of the exce	ess over \$1,500,000.		
Over \$17,000,000	\$1,00	0,000.			
g Grassroots nontaxable amount (el	nter 25% of line 1f)			53,028.	
h Subtract line 1g from line 1a. If zer	ro or less, enter -0-			0.	
i Subtract line 1f from line 1c. If zer	·			0.	
j If there is an amount other than ze	ero on either line 1h	or line 1i, did the organiz	ation file Form 4720	_	
reporting section 4911 tax for this	<u> </u>			L	Yes No
, ,	zations that made a	veraging Period Under section 501(h) election the instructions for line	n do not have to com		
	Lobbying Exp	enditures 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	202,412	. 230,853.	227,361.	212,112.	872,738.
b Lobbying ceiling amount (150% of line 2a, column(e))					1,309,107.
c Total lobbying expenditures	35,000	. 53,120.	35,500.	30,317.	153,937.
d Grassroots nontaxable amount	50,603	. 57,713.	56,840.	53,028.	218,184.
 Grassroots ceiling amount 					

Schedule C (Form 990 or 990-EZ) 2011

327,276.

(150% of line 2d, column (e))

f Grassroots lobbying expenditures

TRAFFICKING

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)).

	(election under Section Sorting.	_			
	ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description	(6	a)	(t	o)
of th	e lobbying activity.	Yes	No	Amo	ount
1	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 b	Volunteers?Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? 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				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
<u>d</u>	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)	(5), or se	ection	
	301(0)(0).			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		
	t III-B Complete if the organization is exempt under section 501(c)(4), section	on 501(c)	(5), or se	ection	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered				e 3, is
	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)	cal			
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
b	Carryover from last year		2b		
С	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 exceeds the amount on line 3, what portion of the exceeds the amount on line 3.	cess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	oolitical			
	expenditure next year?		4		
	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par					
	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part I-C,	art II-A; and	Part II-B, li	ne 1. Also, d	complete
	part for any additional information.				
PAI	RT II-B, LINE 1, LOBBYING ACTIVITIES:				
THI	ORGANIZATION WAS INVOLVED IN THE FOLLOWING LOBBYI	NG ACT	TIVITE	s.	
FEI	DERAL ADVOCACY AROUND THE TRAFFICKING VICTIMS PROTE	CTION	ACT		
REZ	AUTHORIZATION AND OTHER PREVENTIVE MEASURES TO COME	AT HUN	MAN		
TRA	AFFICKING. STATE LEGISLATIVE ADVOCACY TO ENACT A CA	LIFOR	NIA HO	TLINE	
POS	STING BILL TO COMBAT HUMAN TRAFFICKING.				
		Schedu	le C (Form	990 or 990)-EZ) 2011

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.

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization

COALITION TO ABOLISH SLAVERY OF TRAFFICKING

Employer identification number 10-0008533

Pai	t I Organizations Maintaining Donor Advised I	Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6.		
	organization and restricted to the control of the c	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	` '	• • • • • • • • • • • • • • • • • • • •
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writ	ing that the assets held in donor advis-	ed funds
Ŭ	are the organization's property, subject to the organization's exc	-	
6	Did the organization inform all grantees, donors, and donor advis		
•	for charitable purposes and not for the benefit of the donor or do		
	impermissible private benefit?		
Pai			
1	Purpose(s) of conservation easements held by the organization		
•	Preservation of land for public use (e.g., recreation or educ		torically important land area
	Protection of natural habitat	Preservation of a certi	
	Preservation of open space	, , , , , , , , , , , , , , , , ,	
2	Complete lines 2a through 2d if the organization held a qualified	conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
	,,		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b			
С	Number of conservation easements on a certified historic struction		
d	Number of conservation easements included in (c) acquired afte		
	listed in the National Register		
3	Number of conservation easements modified, transferred, release		
	year▶		
4	Number of states where property subject to conservation easem	nent is located >	
5	Does the organization have a written policy regarding the period	ic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it ho	olds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and	d enforcing conservation easements du	uring the year ➤
7	Amount of expenses incurred in monitoring, inspecting, and enfo	orcing conservation easements during	the year ► \$
8	Does each conservation easement reported on line 2(d) above s	atisfy the requirements of section 170((h)(4)(B)(i)
	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	statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	's financial statements that describes t	the organization's accounting for
_	conservation easements.		0: :: 4
Pai	t III Organizations Maintaining Collections of A	-	tner Similar Assets.
	Complete if the organization answered "Yes" to Form 990		
1a	If the organization elected, as permitted under SFAS 116 (ASC 9	•	
	historical treasures, or other similar assets held for public exhibit	·	nce of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that describes		
b	If the organization elected, as permitted under SFAS 116 (ASC 9		
	treasures, or other similar assets held for public exhibition, educ	ation, or research in furtherance of pub	olic service, provide the following amounts
	relating to these items:		. .
	(i) Revenues included in Form 990, Part VIII, line 1		
2	If the organization received or held works of art, historical treasu		ı gaın, provide
_	the following amounts required to be reported under SFAS 116 (▶ •
a	Revenues included in Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		

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

Schedule D (Form 990) 2011

Pai	rt III Organizations Maintaining C	collections of Ar	t, Historical Tr	easures, or	Other	Similar Ass	ets (conti	nued)
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that a	are a sign	ificant use of it	s collection	n items
	(check all that apply):							
а	Public exhibition	d	Loan or exc	hange program	าร			
b	Scholarly research	е	Other					
С	Preservation for future generations							
4	Provide a description of the organization's co	ollections and explain	n how they further t	he organization	ı's exemp	ot purpose in P	art XIV.	
5	During the year, did the organization solicit o	r receive donations o	of art, historical trea	sures, or other	similar as	ssets _		
	to be sold to raise funds rather than to be ma						Yes	U No
Pai	rt IV Escrow and Custodial Arran	gements. Comple	ete if the organization	n answered "Y	es" to Fo	orm 990, Part IV	, line 9, or	
	reported an amount on Form 990, Par	t X, line 21.						
1a	Is the organization an agent, trustee, custodi	an or other intermed	liary for contribution	s or other asse	ets not inc	cluded		
	on Form 990, Part X?					L	Yes	└─ No
b								
							Amount	
С	Beginning balance					1c		
d	Additions during the year					1d		
е	Distributions during the year					1e		
f	Ending balance					1f		
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21?			L	Yes	└── No
	If "Yes," explain the arrangement in Part XIV.							
Pai	rt V Endowment Funds. Complete i	f the organization an	swered "Yes" to Fo					
		(a) Current year	(b) Prior year	(c) Two years	back (d)	Three years bac	k (e) Four	years back
1a		25,032.						
b	Contributions		25,000.					
С	Net investment earnings, gains, and losses	9.	32.					
d	Grants or scholarships							
е	Other expenditures for facilities							
	and programs							
f	Administrative expenses							
g	End of year balance	25,041.	25,032.					
2	Provide the estimated percentage of the curr	rent year end balanc	e (line 1g, column (a	a)) held as:				
а	Board designated or quasi-endowment		_%					
		<u>%</u>						
С	Temporarily restricted endowment	<u>.16</u> %						
	The percentages in lines 2a, 2b, and 2c shou							
3a	Are there endowment funds not in the posse	ssion of the organiza	ation that are held a	nd administere	d for the	organization	г	
	by:							Yes No
	(i) unrelated organizations						3a(i)	X
								<u>^</u> _
b	If "Yes" to 3a(ii), are the related organizations						3b	
D ₂	Describe in Part XIV the intended uses of the							
Га	, , ,						/ N D	
	Description of property	(a) Cost or of basis (investment)		or other (other)		umulated eciation	(d) Bool	value
	Land	,	Dasis	(Otrier)	uepre	CIALIUII		
	Land							
	•							
	Leasehold improvements		<u> </u>	7,266.	Ω	86,645.	1 /	0,621.
	I Equipment		- 	7,400.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		J, UZI •
	Other Al Add lines 1a through 1e (Column (d) must e		X column (R) line 1	(O(c))			1 (0,621.

Schedule D (Form 990) 2011

Schedule D (Form 990) 2011 TRAFFICKING

Part VII Investments - Other Securities. See Form 990. Part X. line 12.

ΨR	ΔFI	オつエ	TNG

Turt vii investmente strief securities: 3	er offir 330, raft X, life	5 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)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
(l)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)				
Part VIII Investments - Program Related. S	See Form 990, Part X, lin	ne 13.		
(a) Description of investment type	(b) Book value	Co	(c) Method of valua 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.) ► Part IX Other Assets. See Form 990, Part X, line	45			
	Description			(b) Book value
(1)	, Decemption			(b) Book value
(1)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Column (b) must equal Form 990, Part X, col (B) lin	e 15.)		>	
Part X Other Liabilities. See Form 990, Part X	, line 25.			
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2)				
(3)			_	
(4)			_	
(5)				
(6)			_	
(7)				
(8)				
(9)			-	
(10)			-	
(11) Total (Column (b) must equal Form 990, Part Y, col (R) lin	0.25)			
Total. (Column (b) must equal Form 990, Part X, col (B) lin	to the organization's financial st	atements that reports the organ	nization's liability for uncerta	in tax positions under
2. FIN 48 (ASC 740).				

01-23-12

Schedule D (Form 990) 2011

	rt XI Reconciliation of Change in Net Assets from Form 990	to Audited	Financia	State		ts
1						1,598,663.
2	T					1,371,123.
3	Excess or (deficit) for the year. Subtract line 2 from line 1					227,540.
4				_		227,3400
	Net unrealized gains (losses) on investments					
5	Donated services and use of facilities			_		
6	Investment expenses		·····			
7	Prior period adjustments			_		
8	Other (Describe in Part XIV.)					
9	Total adjustments (net). Add lines 4 through 8			_		227,540.
10 Da	Excess or (deficit) for the year per audited financial statements. Combine lines 3 at XII Reconciliation of Revenue per Audited Financial Statem	and 9 Donte With			Oturn	
					1	2,027,867.
1					-	2,021,001.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	ا ۔ما				
a	Net unrealized gains on investments		429,	201	-	
b	Donated services and use of facilities		449,	204.	-	
С.	Recoveries of prior year grants				-	
d	Other (Describe in Part XIV.)				+	429,204.
e	Add lines 2a through 2d				2e	1,598,663.
3	Subtract line 2e from line 1				3	1,390,003.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1.1				
а	Investment expenses not included on Form 990, Part VIII, line 7b				-	
b	Other (Describe in Part XIV.)	4b			_	0
С	Add lines 4a and 4b				4c	1.500.663
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				5	1,598,663.
Ра	rt XIII Reconciliation of Expenses per Audited Financial State					
1	Total expenses and losses per audited financial statements				1	1,800,327.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1	400	004		
а	Donated services and use of facilities		429,	204.	-	
b	Prior year adjustments	2b			_	
С	Other losses	2c				
d	Other (Describe in Part XIV.)	2d				
е	Add lines 2a through 2d				2e	429,204.
3	Subtract line 2e from line 1				3	1,371,123.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV.)	4b				_
С	Add lines 4a and 4b				4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)				5	1,371,123.
Pa	rt XIV Supplemental Information					
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Par e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also cor					

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

➤ Attach to Form 990. ➤ See separate instructions.

2011
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization
COALITION TO ABOLISH SLAVERY OF
TRAFFICKING

Employer identification number

10-0008533

to Form 99.9 Part IV, line 14b. 1 For grantmakers. Dese the organization maintain records to substantiate the amount of its grants and other assistance, the grantmakers diplibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number of (c) Number of (d) Activities conducted in region of in the region in the region of service(s) in region. NORTH AMERICA 7 RAINING, OUTREACH, DIRECT SERVICE PROVISION 7 RAINING, OUTREACH, DIRECT SERVICE PROVIS	Pa	Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes"										
the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?		to Form 990, Part IV, line 14b.										
2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number of Offices in the region of offices in the region of other activities in the region of other activities in the region of other activities in region of other activities of the region of service(s) in region of services, in region of service(s) in region of service(1	1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance,										
United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number of offices in the region in re		the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes No										
United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number of offices in the region of space is in the region in region in region in region. NORTH AMERICA TRAINING, OUTREACH, DIRECT SERVICE PROVISION 43,500. 3 a Sub-total of the region of the region in reg												
3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number of (c) Number of degrates and in the region of separates and inches per contractors in tegion. (b) Number of degrates and inches per Region. (The following Part I) Inches a per contractors of separates and inches per contractors of separates and inches per contractors in tegion. (b) Number of degrates and inches per contractors of separates and inches per contractors in tegion. (c) Hactivity listed in (d) (e) It activity listed in (d) appropriate separation of separates and inches per contractors of service(s) in region. (d) Activities conducted in region is a program service, describe specific type of service(s) in region. TRAINING, OUTREACH, DIRECT SERVICE FROVISION 43, 500. PROGRAM SERVICES TRAINING, OUTREACH, DIRECT SERVICE FROVISION 43, 500. 43, 500. Training of the region of service(s) in region of service(s) in region. TRAINING, OUTREACH, DIRECT SERVICE FROVISION 43, 500. 43, 500. Training of the region of service(s) in region of service(s) in region. TRAINING, OUTREACH, DIRECT SERVICE FROVISION 43, 500.	2	2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the										
(a) Region (b) Number of offices in the region offices in the region of the region in		United States.										
offices in the region in regio	3	Activities per Region. (TI	he following Part	I, line 3 table ca	an be duplicated if additional space is	needed.)						
NORTH AMERICA PROGRAM SERVICES TRAINING, OUTREACH, DIRECT SERVICE PROVISION 43,500.		(a) Region	offices	(c) Number of employees, agents, and independent	(by type) (e.g., fundraising, program	is a program service,	expenditures for and					
### PROGRAM SERVICES DIRECT SERVICE PROVISION 43,500.			, and the second	contractors in region								
### PROGRAM SERVICES DIRECT SERVICE PROVISION 43,500.												
### PROGRAM SERVICES DIRECT SERVICE PROVISION 43,500.						TRAINING OUTRE ACU						
3 a Sub-total 0 0	MODI	תם אשבסדכא			DDOCDAM CERVICES		43 500					
b Total from continuation sheets to Part I 0 0 0 0 0.	NOR:	TH AMERICA			PROGRAM SERVICES	DIRECT SERVICE PROVISION	43,500.					
b Total from continuation sheets to Part I 0 0 0 0 0.												
b Total from continuation sheets to Part I 0 0 0 0 0.												
b Total from continuation sheets to Part I 0 0 0 0 0.												
b Total from continuation sheets to Part I 0 0 0 0 0.												
b Total from continuation sheets to Part I 0 0 0 0 0.												
b Total from continuation sheets to Part I 0 0 0 0 0.												
b Total from continuation sheets to Part I 0 0 0 0 0.												
b Total from continuation sheets to Part I 0 0 0 0 0.												
b Total from continuation sheets to Part I 0 0 0 0 0.												
b Total from continuation sheets to Part I 0 0 0 0 0.												
b Total from continuation sheets to Part I 0 0 0 0 0.												
b Total from continuation sheets to Part I 0 0 0 0 0.												
b Total from continuation sheets to Part I 0 0 0 0 0.												
b Total from continuation sheets to Part I 0 0 0 0 0.												
b Total from continuation sheets to Part I 0 0 0 0 0.												
b Total from continuation sheets to Part I 0 0 0 0 0.												
b Total from continuation sheets to Part I 0 0 0 0 0.												
b Total from continuation sheets to Part I 0 0 0 0 0.												
b Total from continuation sheets to Part I 0 0 0 0 0.												
b Total from continuation sheets to Part I 0 0 0 0 0.												
b Total from continuation sheets to Part I 0 0 0 0 0.												
b Total from continuation sheets to Part I 0 0 0 0 0.												
b Total from continuation sheets to Part I 0 0 0 0 0.												
b Total from continuation sheets to Part I 0 0 0 0 0.												
b Total from continuation sheets to Part I 0 0 0 0 0.												
b Total from continuation sheets to Part I 0 0 0 0 0.												
b Total from continuation sheets to Part I 0 0 0 0 0.	_	0.1.1.1					42 500					
sheets to Part I 0 0 .			- ·	<u> </u>			43,500.					
Sheets to fair f	b		_	_								
	-		- ·									
and 3b)	С	Totals (add lines 3a and 3b)	0	0			43 500.					

132071 01-23-12

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

Schedule F (Form 990) 2011

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any								
recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000								
	plicated if additional	space is needed.	<u> </u>		ı		1	1
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	PROGRAM SERVICES	10,000.	WIRE TRANSFER	0.	N/A	воок
		NORTH AMERICA	PROGRAM SERVICES	15,000.	WIRE TRANSFER	0.	N/A	воок
				,				
		NORTH AMERICA	PROGRAM SERVICES	7,000.	WIRE TRANSFER	0.	N/A	воок
	he grantee or couns	el has provided a section	recognized as charities by the n 501(c)(3) equivalency letter		-			3
	<u></u>						Schedu	ıle F (Form 990) 2011

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.									
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)		

"Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions

Part	IV	Foreign Forms		
1	orga	s the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the anization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign poration (see Instructions for Form 926)	Yes	X No
2	may Rec	the organization have an interest in a foreign trust during the tax year? If "Yes," the organization be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and seipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X No
3	the o	the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To tain Foreign Corporations. (see Instructions for Form 5471)	Yes	X No
4	qual <i>Infoi</i>	s the organization a direct or indirect shareholder of a passive foreign investment company or a lified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, armation Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund.	Yes	X No
5	the o	the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain eign Partnerships. (see Instructions for Form 8865)	Yes	X No
6	Did :	the organization have any operations in or related to any boycotting countries during the tax year? If		

Schedule F (Form 990) 2011

Schedule F (Form 990) 2011	TRAFFICKING			10-0008533	Page 5
Part V Supplemental Ir		uirad by Bart I. lina 2 (manit	toring of funds): Port Lli	as 2 column (f) (associating	mothod:
	provide the information requests. expenditures per region				
(c) (estimated number	r of recipients), as applicable	e. Also complete this part to	o provide any additional	information.	
SCHEDULE F, PART	I, LINE 2: THE	ORGANIZATION	MONITORS TH	E USE OF THE	
FUNDS BY CONDUCTI	NG BI-ANNUAL V	ISITS TO ORGA	NIZATIONS IN	NORTH AMERICA	•

SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

Open To Public

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

Open To Public Inspection

Employer identification number Name of the organization COALITION TO ABOLISH SLAVERY OF 10-0008533 TRAFFICKING Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not Part I required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations □ Solicitation of non-government grants Internet and email solicitations □ Solicitation of government grants
 □ b Phone solicitations c In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or Yes key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? No b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts tò (or retained by) to (or retained by) (ii) Activity have custody fundraiser or entity (fundraiser) from activity or control of contributions? organization listed in col. (i) Yes No 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

132081 01-23-12

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

Schedule G (Form 990 or 990-EZ) 2011

10-000<u>8533 Page 2</u>

			'ICKING			-0008533 Page 2	
Pa	art		-				
		of fundraising event contributions and gr				ots greater than \$5,000.	
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
			ANNUAL		NONE	(add col. (a) through	
			FUNDRAISER			col. (c))	
пe			(event type)	(event type)	(total number)	` "	
Revenue	1	Gross receipts	152,793.			152,793.	
	2	Less: Charitable contributions	106,742.			106,742.	
	3	Gross income (line 1 minus line 2)	46,051.			46,051.	
	4	Cash prizes					
ses	5	Noncash prizes					
Direct Expenses	6	Rent/facility costs					
Direct	7	Food and beverages	23,700.			23,700.	
	8	Entertainment					
	9	Other direct expenses				22,351.	
	10	Direct expense summary. Add lines 4 throug			•	(46,051,	
	11	Net income summary. Combine line 3, colum	n (d), and line 10		>	0.	
Pa	art	Gaming. Complete if the organization	answered "Yes" to Form	990, Part IV, line 19, or	reported more than		
		\$15,000 on Form 990-EZ, line 6a.					
ē			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add	
Revenue			(,g -	bingo/progressive bingo	(-, gg	col. (a) through col. (c))	
Rev							
	1	Gross revenue					
ses	2	Cash prizes					
Expenses	3	Noncash prizes					
Direct I	4	Rent/facility costs					
_	_	Other divest suremen					
_	5	Other direct expenses			Vac 0/		
	6	Volunteer labor	Yes % No	Yes % No	Yes % No		
	7	Direct expense summary. Add lines 2 throug	h 5 in column (d)		>	()	
	8	Net gaming income summary. Combine line	1, column d, and line 7		>		
		,	<u> </u>		· ·		
9	En	ter the state(s) in which the organization opera	ites gaming activities:				
á	a Is the organization licensed to operate gaming activities in each of these states?						
k	b If "No," explain:						
	_						
		ere any of the organization's gaming licenses r			year?	Yes No	
K	, II	Yes," explain:					
	_						
1320	82 N	1-23-12			Schedule G (Fo	rm 990 or 990-EZ) 2011	

COALITION TO ABOLISH SLAVERY OF

Sch	nedule G (Form 990 or 990-EZ) 2011 TRAFFICKING	10-0008533 _{Pag}	e 3
11	Does the organization operate gaming activities with nonmembers?	Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	No
13	Indicate the percentage of gaming activity operated in:		
	a The organization's facility	13a	%
			/ 0 %
	An outside facility		90
14	Enter the name and address of the person who prepares the organization's gaming/special events books and record	IS:	
	Name ▶		
	Address		
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes 🗌	No
b	o If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amou	ınt	
	of gaming revenue retained by the third party \blacktriangleright \$		
	If "Yes," enter name and address of the third party:		
·	on res, enter hame and address of the till party.		
	Nama N		
	Name		
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation > \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to		
٠	retain the state gaming license?	Yes	No
Ľ	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	i the	
D -	organization's own exempt activities during the tax year > \$		
Pa	Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, colur		II,
	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional info	rmation (see instructions)	<u>. </u>
_			
_			
_			
_			
_			

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service 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

2011
Open to Public Inspection

Name of the organization

COALITION TO ABOLISH SLAVERY OF TRAFFICKING

Employer identification number 10-0008533

FORM 990, PART VI, SECTION B, LINE 11: THE EXECUTIVE DIRECTOR AND THE FINANCE COMMITTEE OF THE BOARD FIRST REVIEW THE FORM 990. IT IS THEN GIVEN TO ALL BOARD MEMBERS FOR REVIEW AND APPROVAL PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C: EACH BOARD MEMBER IS GIVEN AN

ANNUAL QUESTIONNAIRE TO SIGN. THE BOARD DEVELOPMENT COMMITTEE ENSURES ALL

QUESTIONNAIRES ARE SUBMITTED AND MONITORS THE CONFLICT OF INTEREST POLICY.

POTENTIAL VIOLATIONS OF THE CONFLICT OF INTEREST POLICY ARE BROUGHT BEFORE

THE BOARD OF DIRECTORS FOR DISCUSSION AND FINAL RESOLUTION.

FORM 990, PART VI, SECTION B, LINE 15A: BOARD MEMBERS DETERMINE SALARY

LEVELS FOR OFFICERS, ON A BIANNUAL BASIS, BY USING CURRENT INDUSTRY DATA

WHICH INCLUDES POSITION, SALARY GRADE, GEOGRAPHIC LOCATION, ORGANIZATION

SIZE, AND BUDGET SIZE.

15B- THERE WERE NO OTHER OFFICERS, THEREFORE THIS QUESTION IS NOT APPLICABLE.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS

GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS

AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XII, LINE 2C

FINANCIAL STATEMENTS AND REPORTING

NO CHANGES WERE MADE TO THE OVERSIGHT PROCESS OR SELECTION PROCESS

DURING THE TAX YEAR, AS COMPARED TO THE PRIOR TAX YEAR.

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

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

Schedule O (Form 990 or 990-EZ) (2011) Name of the organization COALITION TO ABOLISH SLAVERY OF Employer identification number				
Name of the organization	COALITION TO ABOLISH SLAVERY OF	Employer identification number		
ŭ	TRAFFICKING	Employer identification number 10-0008533		