COMMITTEE ON NATURAL RESOURCES Disclosure Form As required by and provided for in House Rule XI, clause 2(g) and the Rules of the Committee on Natural Resources

Oversight hearing on "The Chu Memorandum: Directives Could Increase Electricity Costs for over 40 Million Families and Small Businesses."

For Individuals:

1. Name:

2. Address:

- 3. Email Address:
- 4. Phone Number:

* * * * *

For Witnesses Representing Organizations:

- 1. Name: Jim Baak, Director of Policy for Utility-Scale Solar
- 2. Name of Organization(s) You are Representing at the Hearing: The Vote Solar Initiative
- 3. Business Address: 300 Brannan St., Suite 609, San Francisco, CA, 94107
- 4. Business Email Address: [Information redacted for privacy]
- 5. Business Phone Number: [Information redacted for privacy]

Name/Organization____Jim Baak/ The Vote Solar Initiative_

Title/Date of Hearing_<u>The Chu Memorandum: Directives</u> Could Increase Electricity Costs for Over 40 Million Families and Small Businesses, September 11, 2012

a. Any training or educational certificates, diplomas or degrees or other educational experiences that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

Bachelor of Science, Economics (magna cum laude), University of South Carolina, 1986

b. Any professional licenses, certifications, or affiliations held that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

No

c. Any employment, occupation, ownership in a firm or business, or work-related experiences that relate to your qualifications to testify on or knowledge of the subject matter of the hearing.

I have worked in the electric utility industry for 24 years, the first 10+ years as a rate analyst for two public power organizations (first with ElectriCities of North Carolina, Inc., then Alameda Bureau of Electricity (now called Alameda Power) located in the San Francisco Bay Area). As such, I am very familiar with public power costs and ratemaking practices, as well as the relationship between Western Area Power Administration and its preference customers.

I have also worked in a variety of other sectors of the utility industry, including working for an energy services provider (Utility.com), a utility geospatial and engineering analysis software developer and consultant (Powel Group), as an independent consultant/contractor, and for one of the nation's largest investor owned utilities (Pacific Gas & Electric Company).

Since joining The Vote Solar Initiative over four years ago as Policy Director for Utility-Scale Solar, I have increasingly become involved in regional transmission and planning issues. I currently serve as the Solar Technology Advocate for the Western Electricity Coordinating Council's Scenario Planning Steering Group, which is developing 10- and 20-year transmission plans under the Regional Transmission Expansion Planning process. I also serve on the Technical Advisory Committee to the Nevada New Energy Industry Task Force, which is developing a business case for building transmission to facilitate development of Nevada's vast renewable energy resources. (Please note, the testimony I am providing represents my views and the views of The Vote Solar Initiative – not the views of WECC/TEPPC/SPSG or the Nevada New Energy Industry Task Force.)

d. Any federal grants or contracts (including subgrants or subcontracts) from the <u>Department of the Interior</u> (<u>and /or other agencies invited</u>) that you have received in the current year and previous four years, including the source and the amount of each grant or contract.

None

e. A list of all lawsuits or petitions filed by you against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed.

None

Name/Organization____Jim Baak/ The Vote Solar Initiative_

Title/Date of Hearing_<u>The Chu Memorandum: Directives Could Increase Electricity Costs for Over 40</u> <u>Million Families and Small Businesses, September 11, 2012</u>

f. Any other information you wish to convey that might aid the Members of the Committee to better understand the context of your testimony.

The Vote Solar Initiative is a member of the Western Clean Energy Advocates (WCEA) – a diverse and growing coalition working to transform the way we produce, use and distribute energy across the West. WCEA's Clean Energy Vision is to create jobs, protect the West's wildlife, water and ecosystems, address climate change and enhance energy security. (A list of current members can be found at www.westerngrid.net/wcea/)

Several of the member organizations participated in the DOE/ Western Joint Workshops and Listening Sessions on the Future of the Grid and contributed to the written testimony submitted for this hearing.

Name/Organization _______ Jim Baak/ The Vote Solar Initiative ________ Title/Date of Hearing_The Chu Memorandum: Directives Could Increase Electricity Costs for Over 40 Million Families and Small Businesses, September 11, 2012 In addition, for witnesses representing organizations:

g. Any offices, elected positions, or representational capacity held in the organization(s) on whose behalf you are testifying.

None

h. Any federal grants or contracts (including subgrants or subcontracts) from the <u>Department of the Interior</u> (<u>and /or other agencies invited</u>) that were received in the current year and previous four years by the organization(s) you represent at this hearing, including the source and amount of each grant or contract for each of the organization(s).

The Vote Solar Initiative is a "sub-award recipient" (equivalent to subcontractor) on a DOE grant to SolarTech - reference "EE0005348 - Solar3.0, A National Platform for Process Innovation".

The sub-award is for \$79,980 over 3 years (\$19,980 in 2012). Full award to SolarTech is \$2.5million dispersed from 2012 - 2015. To date, the Vote Solar Initiative has not received any of this money and DOE must re-approve the grant annually, making it unlikely that Vote Solar will receive the full amount of the sub-award.

i. A list of all lawsuits or petitions filed by the organization(s) you represent at the hearing against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed for each of the organization(s).

None

j. A list of any countries from which the organization(s) you represent at the hearing have received foreign donations and the total amount of donations received from each country, for the current year and the previous four years, by each organization.

None

k. For tax-exempt organizations and non-profit organizations, copies of the three most recent public IRS Form 990s (including Form 990-PF, Form 990-N, and Form 990-EZ) for each of the organization(s) you represent at the hearing (not including any contributor names and addresses or any information withheld from public inspection by the Secretary of the Treasury under 26 U.S.C. 6104)).

Attached

						CT #	94566						
	Form 990 Return of Organization Exempt From									_		OMB No. 1545-0047	
	1.000		1		5		•					2010	
			Und	er secti (exc	on 501(c), 5/ ept black lu	27, or 4947 na benefit	7(a)(1) of the t trust or pri	e Internal Rev ivate foundati	/enue Co ion)	de	1.565		
Dep	artment of th nal Revenue	e Treasury Service						atisfy state repor				Open to Public Inspection	
			year, or tax year					10, and endir			<u></u>	,	
	Check if app	T								DE	mployer Iden	tification Number	
	Addres		ides Cente								94-3213		
	Name) Box 2990 In Francis		'A 94129-	-0907				E Telephone number			
	Initial return San Francisco, CA 94129-0907								(415) 5	61-6300			
	Termin	ated led return									ross receipts	\$ 96,619,220.	
	H		Name and address	of principa	al officer: LC	ori Eas	on		H(a) Is this	J	return for aff		
			ame As C A								es included?	Yes No	
1	Tax-exen	npt status 🛛 🛛 🛛	501(c)(3) 5	01(c) () • (i	nsert no.)	4947(a)(1) or 527		attacn	a list. (see ins	structions)	
J	Websit	and a second	tides.org		q						ion number		
K			Corporation	rust	Association	Other ►		L Year of Forma	ition: 199	4	M State of	legal domicile: CA	
Pa	rtl 1 Brid	Summary	the organization	vie miee	ion or most	cianificant	t activitian:	To propo	to and	1 0111	oport o	emerging	
Activities & Governance							· ••• ••• ••• ••• •••						
erna													
Gov		eck this box I	► if the org g members of t					isposed of m				ssets. 8	
ণ্য গ			pendent voting r									5	
itie	5 Tot	al number of	individuals emp	loyed in	n calendar y	ear 2010 (Part V, line	2a)			5	851	
ctiv			volunteers (est									1,000	
۷			ousiness revenu									11,649.	
	b Net	t unrelated bu	isiness taxable	income	from Form S	990-1, line	34					10,649.	
	8 Co	ntributions or	id grants (Part \	/III line	16)					Prior Y	ear 1,511.	Current Year 84,029,370.	
Чe			revenue (Part)		,						9,291.	9,296,421.	
Revenue			me (Part VIII, co								3,463.	964,667.	
Ъ			Part VIII, columi								2,697.	-42,434.	
	12 Tot	al revenue -	add lines 8 thro	ough 11	(must equa	l Part VIII,	, column (A)), line 12)	. 68	8,97	1,568.	94,248,024.	
			lar amounts pai	•		-				5,95	9,805.	17,386,308.	
			or for members	•	•								
Ś			ompensation, e								3,055.	39,886,211.	
sasua			draising fees (P						and the state	19	7,706.	205,253.	
Exper			expenses (Par					693,065.	-	200			
_			(Part IX, colum								8,634.	37,742,834.	
			Add lines 13-17								9,200. 7,632.	<u>95,220,606.</u> -972,582.	
¥ 8	19 Rev		penses. Subtra		o nom line	12	<u></u>	<u></u>			urrent Year	End of Year	
Net Assets or Fund Balances	20 Tot	al assets (Pa	rt X, line 16)						. 7	7,76	4,176.	77,295,676.	
Asa Ba			Part X, line 26)								7,246.	8,457,182.	
ş	22 Net	assets or fu	nd balances. Su	btract li	ne 21 from I	ine 20			69	9,55	6,930.	68,838,494.	
Pa	rt II	Signature	Block										
Und com	er penalties plete. Declar	of perjury, I decla ration of preparer	re that I have examin (other than officer) is	ed this ref	urn, including ac	companying s	schedules and s arer has any kn	statements, and to owledge.	the best of r	my know	vledge and be	lief, it is true, correct, and	
				<u> </u>			-			î }			
Sig	In	Signature o	f officer						I Da	ate			
He	re	ME.	L1554	BA	ADLE	Y			11	181	111		
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US	e Only	Firm's address	► 44 Monto				e 2019			1			
			San Frar	ICISC	o, CA 94	104				Phone	no. (415	5) 983-0200	

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

 BAA For Paperwork Reduction Act Notice, see the separate instructions.

 TEEA0113L
 12/21/10

.... Yes X No Form 990 (2010)

ATTORNEY GENERAL'S COPY

Part II	Additional (Not Automatic) 3-Month Name of exempt organization	Extension o	f Time. Only file the original	(no copies needed) Employer identification number	
Type or				0.4. 001 01 00	
print	Tides Center Number, street, and room or suite number, if a P.O. box, so	ee instructions.		94-3213100	
File by the extended					
due date for filing the	PO Box 29907				
return. See instructions.	City, town or post office, state, and ZIP code. For a foreign		ctions.		
	San Francisco, CA 94129-0907				
Enter the F	Return code for the return that this application i	s for (file a sep	arate application for each return)		. 01
Application	1	Return Code	Application Is For		Retur Code
Form 990		01	-		
Form 990-E	3L	02	Form 1041-A		08
Form 990-E	Z	03	Form 4720		09
	ЭЕ	04	Form 5227		10
		V+			
Form 990-1	(section 401(a) or 408(a) trust)	05	Form 6069		11
Form 990-1 Form 990-1 STOP! Do I Telepho If the or If this is vhole group nembers the	(section 401(a) or 408(a) trust) (trust other than above) not complete Part II if you were not already gra oks are in care of ► Lori Eason one No. ► (415) 561-6300 rganization does not have an office or place of s for a Group Return, enter the organization's for p, check this box ► If it is for part of the ne extension is for.	05 06 nted an automa FAX No. ► business in the our digit Group he group, chec	Form 8870 atic 3-month extension on a previous United States, check this box Exemption Number (GEN) k this box ► and attach a list wit	. If this	11 12 is for th
Form 990-7 Form 990-7 STOP! Do r • The boy Telepho • If the or • If the or • If this is whole grou, members th • I requ 5 For ca 6 If the	(section 401(a) or 408(a) trust) (trust other than above) not complete Part II if you were not already gra oks are in care of ► Lori Eason one No. ► (415) 561-6300 rganization does not have an office or place of s for a Group Return, enter the organization's fi p, check this box ► If it is for part of the ne extension is for. lest an additional 3-month extension of time un alendar year 2010, or other tax year begin tax year entered in line 5 is for less than 12 month hange in accounting period in detail why you need the extension	05 06 nted an automa FAX No. ► business in the our digit Group he group, chec til 11/15 nning onths, check re ne_Organiz	Form 8870 atic 3-month extension on a previous United States, check this box Exemption Number (GEN) k this box	. If this h the names and EINs of , 20 Final return	11 12 is for th f all
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Form 990-7 Form 990-7 STOP! Do r • The boy Telepho • If the or • If the or • If this is whole grou, members th 4 I requ 5 For ca 6 If the C 7 State f Ba If this nonre b If this payme with F c Balan EFTPS	(section 401(a) or 408(a) trust) (trust other than above) not complete Part II if you were not already graphs are in care of ► Lori Eason one No. ► (415) 561-6300 rganization does not have an office or place of s for a Group Return, enter the organization's find p, check this box ► . If it is for part of the extension is for. The extension is for. The extension is for. The extension of time under the extension of time under alendar year 2010, or other tax year begind tax year entered in line 5 is for less than 12 mm hange in accounting period in detail why you need the extension The ormation necessary to file a application is for Form 990-BL, 990-PF, 990-T, fundable credits. See instructions. application is for Form 990-PF, 990-T, 4720, on ents made. Include any prior year overpayment orm 8868. ce due. Subtract line 8b from line 8a. Include y S (Electronic Federal Tax Payment System). S Single state that them examined this form. Include	05 06 nted an automa FAX No. ► business in the our digit Group he group, chec til 11/15 nning onths, check re a Organiz complete 4720, or 6069, r 6069, enter art allowed as a c our payment wi ee instructions gnature and	Form 8870 atic 3-month extension on a previous United States, check this box. Exemption Number (GEN) k this box	. If this h the names and EINs of , 20 Final return nal time to gath 	11 12 is for the f all
Form 990-7 Form 990-7 STOP! Do 1 • The box Telepho • If the oil • If this is whole grou, members th 4 I requ. 5 For ca 6 If the 1 C 7 State in f 8a If this nonre b If this payme with F c Balan EFTPS	(section 401(a) or 408(a) trust) (trust other than above) not complete Part II if you were not already graphs are in care of ► Lori Eason one No. ► (415) 561-6300 rganization does not have an office or place of s for a Group Return, enter the organization's find p, check this box ► . If it is for part of the extension is for. The extension is for. The extension is for. The extension of time under the extension of time under alendar year 2010, or other tax year begind tax year entered in line 5 is for less than 12 mm hange in accounting period in detail why you need the extension The ormation necessary to file a application is for Form 990-BL, 990-PF, 990-T, fundable credits. See instructions. application is for Form 990-PF, 990-T, 4720, on ents made. Include any prior year overpayment orm 8868. ce due. Subtract line 8b from line 8a. Include y S (Electronic Federal Tax Payment System). S Single state that them examined this form. Include	05 06 nted an automa FAX No. ► business in the our digit Group he group, chec til 11/15 nning onths, check re a Organiz complete 4720, or 6069, r 6069, enter art allowed as a c our payment wi ee instructions gnature and	Form 8870 atic 3-month extension on a previous United States, check this box. Exemption Number (GEN) k this box	. If this h the names and EINs of , 20 Final return nal time to gath 	11 12 is for th f all

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, (2)



Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

● If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing *(e-file).* You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/efile* and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension – check this box and complete Part I only.... 🕨

All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns.

	Name of exempt organization		Employer identification number
Type or print	Tides Center		94-3213100
File by the	Number, street, and room or suite number. If a P.O. box, see instructions.		.
due date for filing your return. See	PO Box 29907	PAD	∇
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.		
	San Francisco, CA 94129-0907		

Application Is For		Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

• The books are in the care of .
Lori Eason

٦	Telephone No. ► (415) 561-6300 FAX No. ► FAX No. ►
1	f the organization does not have an office or place of business in the United States, check this box
1	f this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group,
C	check this box .
t	he extension is for.
1	I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time
	until $8/15$, 20, 11, to file the exempt organization return for the organization named above.
	The extension is for the organization's return for:
	► X calendar year 20 10 or
	 X calendar year 20 <u>10</u> or tax year beginning, 20, and ending, 20
2	If the tax year entered in line 1 is for less than 12 months, check reason:
3 a	a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b	\$0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c	\$0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

BAA For Paperwork Reduction Act Notice, see Instructions.

Form 990 (2010) Tides Center	94-3213100	Page 2
Part III Statement of Program Service Accomplishments		
Check if Schedule O contains a response to any question in this Part III	* * - * * * * . * * * . * * * * . * * * *	X
1 Briefly describe the organization's mission:		
See Schedule 0		
2 Did the organization undertake any significant program services during the year which were not listed	d on the prior	
Form 990 or 990-EZ?		X No
If 'Yes,' describe these new services on Schedule O.	L.s.m.d	d
3 Did the organization cease conducting, or make significant changes in how it conducts, any program	services? Yes	X No
If 'Yes,' describe these changes on Schedule O.		
4 Describe the exempt purpose achievements for each of the organization's three largest program serv and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants expenses, and revenue, if any, for each program service reported.	rices by expenses. Section and allocations to others,	501(c)(3) the total
4a (Code:) (Expenses \$ 30,090,376. including grants of \$ 8,491,112.)	(Revenue \$ 2,718	3,085.)
The Policy, Strategy, & Global Initiatives program utilizes str		
outreach, civic engagement, and leadership development, among		
policy research and advocacy. Projects in this program work in		from
religion, ethics, and conscience to human rights and social jus		
international development and anti-globalization to government		
opportunity. These projects serve a variety of constituents and		
emphasis on the most vulnerable populations, including women, m	<u>ligrants_and_refu</u>	ge <u>es</u> ,
and racial, ethnic and sexual minorities.		
4b (Code:) (Expenses \$ 24,436,342. including grants of \$ 8,072,233.) See Schedule 0	(Revenue \$1,982	2,521.)
4c (Code:) (Expenses \$ 17,020,831. including grants of \$ 822,963.)	(Revenue \$ 4,595	,815.)
See Schedule 0		
4d Other program services. (Describe in Schedule O.) See Schedule O		
(Expenses \$ 1,627,840. including grants of \$) (Revenue	\$	
4e Total program service expenses ► 73,175,389.		

100000000 g

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	Form 990 (20.0/		Center	
w	Part IV	Chec	klist of	Required	Schedules

*

94-3213100

Page 3

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4	x	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I.	6	x	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If 'Yes,' complete Schedule D, Part II.</i>	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV.	9		x
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>i</i> 'Yes,' complete Schedule D, Part V.	10		x
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI.</i>	11a	x	
i	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? <i>If 'Yes,' complete Schedule D, Part VII</i>	11b		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? <i>If 'Yes,' complete Schedule D, Part VIII.</i>	<u>11 c</u>		X
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part IX</i>	11 d		x
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11e	X	
1	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11f		<u>x</u>
12	a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If 'Yes,' complete Schedule D, Parts XI, XII, and XIII</i>	12a		X
I	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	
	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If 'Yes,' complete Schedule E</i>	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If 'Yes,' complete Schedule F, Parts II and IV</i>	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? <i>If 'Yes,' complete Schedule F, Parts III and IV</i>	16		X
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? <i>If 'Yes,' complete Schedule G, Part I (see instructions)</i>	17	X	
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.	18	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	19		<u>X</u>
20 :	aDid the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X
t	If 'Yes' to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20 b		
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Pa	t IV Checklist of Required Schedules (continued)	~		ugo .
Nime-Calcopy			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	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? <i>If 'Yes,' complete Schedule J</i>	23	X	
24	a 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, and that was issued after December 31, 2002? <i>If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25</i>	24a		х
ł	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
C	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a 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
ł	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? <i>If 'Yes,' complete Schedule L, Part I</i>	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If 'Yes,' complete Schedule L. Part III</i> .	27		Х
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):			
ä	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a	<u>X</u>	
ł	A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV.</i>	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If 'Yes,' complete Schedule L, Part IV</i>	28c	x	
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I</i>	33	X	·
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		Х
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes</i> , <i>' complete Schedule R, Part V, line 2</i> X Yes			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		<u>X</u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>	37		<u>X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.	38	X	
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Part V Statements Regarding Other IRS Filings and Tax Compliance				-
Check if Schedule O contains a response to any question in this Part V				μ
To Enter the symbol reported in Pay 2 of Form 1006 Enter 0, if not applicable	1. 1. 0.20	-	Yes	No
	1a 1,028 1b 0			
	171			
c Did the organization comply with backup withholding rules for reportable payments to vendors (gambling) winnings to prize winners?	and reportable gaming	1c	X	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State- ments, filed for the calendar year ending with or within the year covered by this return	2a 851			
b If at least one is reported on line 2a, did the organization file all required federal employment		2b	X	_
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see insi				
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a	X	
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule Q		36	X	-
4a At any time during the calendar year, did the organization have an interest in, or a signature o financial account in a foreign country (such as a bank account, securities account, or other financial account).	or other authority over, a ancial account)?	4a	_	х
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 Fin				v
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax		5a 5b	-	XX
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter		50 5c	-	•
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		50	-	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and 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 con not tax deductible?	tributions or gifts were	6b		
7 Organizations that may receive deductible contributions under section 170(c).		00		-
a Did the organization receive a payment in excess of \$75 made partly as a contribution and part	tly for goods and			
services provided to the payor?		7a	X	
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7b	X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for white Form 8282?	ch it was required to file	7c	1	Х
	7d			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal be		7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benef		7f	_	Х
g If the organization received a contribution of qualified intellectual property, did the organization as required?	*********	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the o Form 1098-C?	rganization file a	7h	_	12.
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting supporting organization, or a donor advised fund maintained by a sponsoring organization, hav holdings at any time during the year?	organizations. Did the ve excess business	8		x
9 Sponsoring organizations maintaining donor advised funds.			-	
a Did the organization make any taxable distributions under section 4966?		9a		х
b Did the organization make a distribution to a donor, donor advisor, or related person?		9b		Х
10 Section 501(c)(7) organizations. Enter:				
a Initiation fees and capital contributions included on Part VIII, line 12	Oa			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 1	0b			
11 Section 501(c)(12) organizations. Enter:				
	1a			
a 🖥 al line al line al line en line an en al line i l'al al line de la section de la complete de la comp	16			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of F		12a	-	-
	26			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.				
a Is the organization licensed to issue qualified health plans in more than one state?		13a	-	-
Note. See the instructions for additional information the organization must report on Schedule	0.			
	3b			
	3c		-	
14a Did the organization receive any payments for indoor tanning services during the tax year?	and the second	14a		X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Sc.	hedule ()	14b		_

For	n 990 (2010) Tides Center	94-3213100	-	F	Page 6
Pa	rt VI Governance, Management and Disclosure For each 'Yes' response a 'No' response to line 8a, 8b, or 10b below, describe the circumstan Schedule O. See instructions.	ces, processes, or char	nges	în	
-	Check if Schedule O contains a response to any question in this Part VI.		111710		X
See	ction A. Governing Body and Management			100	1
		1 1 1	-	Yes	No
	a Enter the number of voting members of the governing body at the end of the tax year b Enter the number of voting members included in line 1a, above, who are independent	1a 8			
	Did any officer, director, trustee, or key employee have a family relationship or a business n officer, director, trustee or key employee?		2		X
	Did the organization delegate control over management duties customarily performed by or of officers, directors or trustees, or key employees to a management company or other personal sectors are as a sector of the sector of t	under the direct supervision on?	3		x
4	Did the organization make any significant changes to its governing documents		4		X
	since the prior Form 990 was filed?		1.51	1	
5	Did the organization become aware during the year of a significant diversion of the organization		5		X
6 7	Does the organization have members or stockholders? See Schedule. O a Does the organization have members, stockholders, or other persons who may elect one or		6	X	
	governing body?		7a	X	-
	b Are any decisions of the governing body subject to approval by members, stockholders, or o	ther persons? See . Sch . O	7b	Х	-
8	Did the organization contemporaneously document the meetings held or written actions und the following:				
4	a The governing body?	*****	8a	Х	_
	b Each committee with authority to act on behalf of the governing body?		8b	X	
9	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who ca organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	innot be reached at the	9		x
Sec	ction B. Policies (This Section B requests information about policies not required by the Inte	rnal Revenue Code.)			
				Yes	No
10	a Does the organization have local chapters, branches, or affiliates?		10a		X
-	b If 'Yes,' does the organization have written policies and procedures governing the activities and branches to ensure their operations are consistent with those of the organization?	of such chapters, affiliates,	10 b		
11.	a Has the organization provided a copy of this Form 990 to all members of its governing body	before filing the form?	11a	Х	
	b Describe in Schedule O the process, if any, used by the organization to review this Form 99). See Schedule O			
12	a Does the organization have a written conflict of interest policy? If 'No,' go to line 13	*********	12a	Х	
4	Are officers, directors or trustees, and key employees required to disclose annually interests to conflicts?	that could give rise	12 b	х	
	c Does the organization regularly and consistently monitor and enforce compliance with the po Schedule O how this is done	olicy? If 'Yes,' describe in	12c	x	
	Does the organization have a written whistleblower policy?		13	Х	
14	Does the organization have a written document retention and destruction policy?		14	Х	L
15	Did the process for determining compensation of the following persons include a review and persons, comparability data, and contemporaneous substantiation of the deliberation and de	approval by independent cision?			
	The organization's CEO, Executive Director, or top management official. See. Schedule		15a	Х	
	Other officers of key employees of the organization. See Schedule 0.		15b	Х	
	If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)				1
16:	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar taxable entity during the year?	arrangement with a	16a		x
2	If 'Yes,' has the organization adopted a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and taken steps 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 - See Schedul	e_0			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a inspection. Indicate how you make these available. Check all that apply.	nd 990-T (501(c)(3)s only) av	ailable	e for p	public
19	Describe in Schedule O whether (and if so, how) the organization makes its governing docur statements available to the public. See Schedule O	nents, conflict of interest poli	cy, an	d fina	ancial
20	State the name, physical address, and telephone number of the person who possesses the t	books and records of the oroa	nizati	on:	

Lori Eason PO Box 29907 San Francisco, CA 94129-0907 (415) 561-6300

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, High and Independent Contractors	nest Compensated Employe	ees,
Check if Schedule O contains a response to any question in this Part VII		
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compe	nsated Employees	
1a Complete this table for all persons required to be listed. Report compensation for the calendar	ar vear 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

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

Check this box if heither the organizat					mpe	1	1			
(A)	(B)		141 ·	-	C)	1	1.5	(D)	(E)	(F)
Name and title	Average hours per week (describe hours for related organiza- tions in Schedule O)	Pol Individual trustee or director	Institutional trustee	Officer	k all Key employee	that app Highest compensated	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
(1) Melissa Bradley										
CEO	2	<u>X</u>		X	ļ	 		0.	49,831.	129.
(2) Dan Carol	4									0
Director	1	X	ļ				<u> </u>	0.	0.	0.
_(3)_John_O'Neil										•
Director	1	X			 		ļ	0.	0.	0.
_(4)_Lawrence_Litvak	-									2
Dir./Vice Chair	1	X		X			<u> </u>	0.	0.	0.
_(5)_Maya_Wiley								100 000		F 442
Director	40	X						120,000.	0.	5,443.
_(6) Noa Emmett Aluli, MD		v								0
Director	1	X						0.	0.	0.
(7) Stephanie Clohesy	4	v		v				12 000		0
Director/Chair	1	X		X				13,800.	0.	0.
(8) Drummond Pike	- 2	x		Х					240.000	20 525
CEO/Ex Officio				<u> </u>				0.	240,000.	28,636.
(9) Iara Peng	-1	X						30,458.	0.	65
Director (10) Vikki Spruill								50,458.	U.	65.
	-1	x						0.	0.	0
Director (11) Kim Sarnecki	_ <u>_</u>							U.	U.	0.
	0.5			Х				0.	73,040.	10 410
Secretary (12) Lori Eason	0.5							0.	/3,040.	10,419.
Treasurer	40			Х				131,185.	0.	10,861.
(13) Carla Dartis	40			~				151,105.		10,001.
Managing Director	40				Х			175,632.	0.	21,529.
(14) Thomas G. David	- <u>-</u>				- 23			1,3,032.		<u> </u>
Proj Sr Strtgst	24					х		154,848.	0.	21,627.
(15) Giovanna Taormina						~ ~ ~		101/010.		
Project Dir.	40					Х		157,500.	o.	11,058.
(16) Daniel Weintraub	<u> </u>								<u>.</u>	11,000.
Project Dir.	40					х		170,000.	0.	9,748.
(17) Alan Jenkins								1.0,0001		
Project Dir.	40					х		184,363.	0.	31,026.
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Part VII Section A. Officers, Directors, Trus	T	ley	<u>E</u> II			es,	an			
(A)	(B) Average	Daci	tion (с) Колтн	hata	nnhà	(D)	(E)	(F)
Name and title	hours per week (describe hours for related organi- zations in Sch O)			Officer		Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation fr related organizat (W-2/1099-MIS	om Estimated amount of other compensation C) from the organization and related organizations
(18) Nancy Soderberg Managing Dir	40					x		154,500.		0. 2,124
(19)										
(20)									******	
(21)									******	
(22)										
(23)									****	
(24)										
(25)										
(26)										
(27)										
(28)										
(29)										
1 b Sub-total						• •	•	1,292,286.	362,87	
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)	A	• • • •	• • •				•	0. 1,292,286.	362,87	0. 0. 0. 152,665
2 Total number of individuals (including but not limited	d to those	se lis	sted	abo	ove)	who	b red			
from the organization ► 48										Yes No
 3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in 4 For any individual listed on line 1a, is the sum of replaced on line 1a. 	ndividua	<i>l</i>		••••		•••		••••••	• • • • • • • • • • • • • • • •	
the organization and related organizations greater the such individual	1an \$15	0,00	0? 1	lf 'Y	'es' d	com	pleti	e Schedule J for		<u>4 X</u>
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,' c	ompens omplete	atior Sci	n fro hedi	om a ule .	any ι <i>J for</i>	unre <i>suc</i>	late h p	d organization or i erson	individual	5 X
Section B. Independent Contractors Complete this table for your five highest compensation from the organization.	ed indep	pend	lent	con	trac	tors	tha	t received more th	an \$100,000 o	f
(A) Name and business address	5							(B) Description o	f services	(C) Compensation
ronworks Consulting, LLC P.O. Box 791259 Bal						.259	,	Consulting Ser		173,600
Participata, LLC 1707 Eye Street, Bakersfield	1, CA 9	9338	0-1	.075				Consulting Ser		196,686
Manatt Health Solutions	#112 9	San	Car	-01 c	20	C A	9.1	Consulting Ser		<u>388,914</u> 164,000
Hood & Strong, LLP 100 First Street, 14th Flo								Audit Services		157,000
										1

Form 990 (2010) Tides Center Part VIII Statement of Revenue

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			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from ta under sections 512, 513, or 514
1a Federated campaigns	1a					
b Membership dues			1	-		
c Fundraising events		453,136.				
d Related organizations	1d	4,866,220.				
e Government grants (contributions)	1e	9,197,843.				
f All other contributions, gifts, grants, a similar amounts not included above.	and					
		69,512,171.				
g Noncash contributions included in Ins						
h Total. Add lines 1a-1f	******	Business Code	84,029,370.			
2a Program Revenues		900099	9,284,772.	9,284,772.		
b Prgm Rev - Adverti	sing	516110	11,649.	9,204,112.	11,649.	
		510110	11,049.		11,049.	
d						
e						
f All other program service rev						
g Total. Add lines 2a-2f			9,296,421.			
3 Investment income (including	dividend	s, interest and	1 1 1 1 1 1 1 1 1 1 1			1
other similar amounts)	********	*	855,748.			855,748
4 Income from investment of ta	1	the second se		1		
5 Royalties	(i) Real					
	(I) Real	(ii) Personal		1.1.1		
6a Gross Rents		-				
b Less: rental expenses.				100		
d Net rental income or (loss)						
(3)	Securities	(ii) Other		-		
a Gross amount from sales of	57,120			-		
b Less: cost or other basis		1 640				
and sales expenses 2, 14 c Gain or (loss)						
		1,649.	108,919.			100 010
d Net gain or (loss)			108,919.			108,919
8a Gross income from fundraisin (not including. \$ 453	3,136.					
of contributions reported on li						12.5
See Part IV, line 18						
b Less: direct expenses			10 101			10 101
c Net income or (loss) from fun			-42,434.			-42,434
9a Gross income from gaming an See Part IV, line 19	ctivities.					1
b Less: direct expenses						
c Net income or (loss) from gar						
10a Gross sales of inventory, less	returns					
and allowances b Less: cost of goods sold	a				1	
c Net income or (loss) from sal						
Miscellaneous Revenue		Business Code				
^{11a}						· · · · · · · · · · · · · · · · · · ·
b						1
c						
d All other revenue						

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).

	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	17,218,024.	17,218,024.		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	163,011.	163,011.		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	5,273.	5,273.		
45	Benefits paid to or for members. Compensation of current officers, directors, trustees, and key employees.	513,473.	513,473.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	31,632,751.	22,509,092.	6,580,191.	2,543,468.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	716,522.	507,060.	153,351.	56,111.
9	Other employee benefits	4,370,724.	3,081,942.	943,542.	345,240.
10	Payroll taxes	2,652,741.	1,877,260.	567,745.	207,736.
11	Fees for services (non-employees):				
	a Management	· · · · · · · · · · · · · · · · · · ·			
	b Legal	154,254.		154,254.	
	c Accounting	231,284.		231,284.	
	d Lobbying.				
	e Professional fundraising services. See Part IV, line 17	205,253.			205,253.
1	f Investment management fees.	95,081.	9,069.	86,012.	
	g Other	17,020,376.	13,179,448.	2,404,311.	1,436,617.
12	Advertising and promotion.	1,636,800.	1,634,359.	2,441.	
13	Office expenses	2,858,811.	2,176,032.	441,980.	240,799.
14	Information technology	820,047.	599,002.	221,045.	
15	Royalties	CONTRACTOR NO.	1 a	Provide the second second	and the second second
16	Occupancy.	4,428,646.	3,330,594.	952,486.	145,566.
17	Travel	3,515,877.	2,872,471.	336,118.	307,288.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
	Conferences, conventions, and meetings	1,295,831.	1,058,521.	124,043.	113,267.
20	Interest	and the second second			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	599,381.	425,714.	173,667.	
	Insurance	417,447.	413,687.	3,760.	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.).				
2	Shared Services	2,523,456.	211,126.	2,312,330.	
	Other Expenses	664,555.	381,562.	265,786.	17,207.
	P/Y & C/Y Write-offs	583,172.	334,834.	233,238.	15,099.
	Other Project Expenses	495,310.	442,732.	3,586.	48,992.
	Payroll Processing Fees	113,737.	65,303.	45,489.	2,945.
	All other expenses	288,769.	165,800.	115,493.	7,477.
	Total functional expenses. Add lines 1 through 24f	95,220,606.	73,175,389.	16,352,152.	5,693,065.
	Joint costs. Check here ►if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	50,220,000.		10,000,100.	

Form 990 (2010) Tides Center Part X Balance Sheet

....

Cash — non-interest-bearing. Savings and temporary cash investments Pledges and grants receivable, net Accounts receivable, net Accounts receivable, net Accounts receivable, net Receivables from other disqualified persons (as define versons described in section 4958(c)(3)(B), and contr ponsoring organizations of section 501(c)(9) voluntar riganizations (see instructions). Notes and loans receivable, net nventories for sale or use. Prepaid expenses and deferred charges.	s, truste II of Sch ed under ibuting e y emplo	es, key employees, edule L section 4958(f)(1)), mployers and yees' beneficiary	10,548,394. 22,477,922. 443,002.	1 2 3 4 5	4,424,532. 11,089,612. 17,779,472. 878,793.
Pledges and grants receivable, net Accounts receivable, net Receivables from current and former officers, director and highest compensated employees. Complete Part Receivables from other disqualified persons (as define persons described in section 4958(c)(3)(B), and contr ponsoring organizations of section 501(c)(9) voluntar organizations (see instructions)	s, truste II of Sch ed under ibuting e y emplo	es, key employees, edule L section 4958(f)(1)), mployers and yees' beneficiary	10,548,394. 22,477,922. 443,002.	3 4	11,089,612 17,779,472 878,793
Pledges and grants receivable, net Accounts receivable, net Receivables from current and former officers, director and highest compensated employees. Complete Part Receivables from other disqualified persons (as define persons described in section 4958(c)(3)(B), and contr ponsoring organizations of section 501(c)(9) voluntar organizations (see instructions)	s, truste II of Sch ed under ibuting e y emplo	es, key employees, edule L section 4958(f)(1)), mployers and yees' beneficiary	22,477,922. 443,002.	3 4	17,779,472 878,793
Accounts receivable, net Receivables from current and former officers, director and highest compensated employees. Complete Part Receivables from other disqualified persons (as define persons described in section 4958(c)(3)(B), and contr ponsoring organizations of section 501(c)(9) voluntar organizations (see instructions)	s, truste II of Sch ed under ibuting e y emplo	es, key employees, edule L section 4958(f)(1)), mployers and yees' beneficiary	443,002.		878,793
Receivables from current and former officers, director and highest compensated employees. Complete Part Receivables from other disqualified persons (as define persons described in section 4958(c)(3)(B), and contr ponsoring organizations of section 501(c)(9) voluntar organizations (see instructions)	s, truste II of Sch ed under ibuting e y emplo	es, key employees, iedule L section 4958(f)(1)), mployers and yees' beneficiary		5	
ponsoring organizations of section 501(c)(9) voluntar rganizations (see instructions) lotes and loans receivable, net nventories for sale or use	y emplo	yees' beneficiary	レントリング ちょうかい ちょうちょうしょう		
nventories for sale or use			1	6	
				7	······································
				8	
				9	434,186
	1				
			2 540 932	100	2,385,566
		and the second		+	39,620,469
				tt	
				f	
				t	683,046
					77,295,676
		······································		4,899,209	
					701,040
				+	
				+	
				t	
				21	
ayables to current and former officers, directors, trus ighest compensated employees, and disqualified per f Schedule L	stees, ke sons. Co	y employees, omplete Part II		22	
			15,300.	23	12,000
				24	
			1,771,338.	25	2,844,933.
otal liabilities. Add lines 17 through 25				26	8,457,182
Drganizations that follow SFAS 117, check here ►	X and	complete lines		332	, , ,
7 through 29 and lines 33 and 34.	لسسما	•			
-			12,024,841.	27	15,958,561.
emporarily restricted net assets		28	52,879,933.		
ermanently restricted net assets.		29			
-				389.5	
-			n van men uederseers op nateriet in stereten.	30	ale, renne de prinstaure print haiteadig
			31		
			69,556,930.		68,838,494.
					77,295,676.
envirunt at onder a saigfieln at onder or	ess: accumulated depreciation	ass: accumulated depreciation	vestments – publicly traded securities. vestments – other securities. See Part IV, line 11. vestments – program-related. See Part IV, line 11. tangible assets. ther assets. See Part IV, line 11. tangible assets. Add lines 1 through 15 (must equal line 34). counts payable and accrued expenses. rants payable. efferred revenue. ax-exempt bond liabilities. scrow or custodial account liability. Complete Part IV of Schedule D. ayables to current and former officers, directors, trustees, key employees, ghest compensated employees, and disqualified persons. Complete Part II Schedule L. ecured mortgages and notes payable to unrelated third parties. her liabilities. Complete Part X of Schedule D. tal liabilities. Add lines 17 through 25. rganizations that follow SFAS 117, check here ► X and complete lines through 29 and lines 33 and 34. mestricted net assets. ganizations that do not follow SFAS 117, check here ► and complete	IDb 3, 234, 882. 2, 540, 932. vestments – publicly traded securities. 40, 693, 376. vestments – other securities. See Part IV, line 11. 40, 693, 376. vestments – program-related. See Part IV, line 11. 514, 702. ther assets. See Part IV, line 11. 514, 702. ottal assets. Add lines 1 through 15 (must equal line 34) 77, 764, 176. ccounts payable and accrued expenses. 5, 479, 020. ants payable 941, 588. eferred revenue 941, 588. exervempt bond liabilities. ccrow or custodial account liability. Complete Part IV of Schedule D. syables to current and former officers, directors, trustees, key employees, phest compensated employees, and disqualified persons. Complete Part II Schedule L. 15, 300. uscured mortgages and notes payable to unrelated third parties. 15, 300. isecured notes and loans payable to unrelated third parties. 1, 771, 338. tat liabilities. Complete Part X of Schedule D. 1, 771, 338. tat liabilities. Add lines 17 through 25. 8, 207, 246. rganizations that follow SFAS 117, check here ► and complete lines through 29 and lines 33 and 34. 57, 532, 089. restricted net assets. 57, 532, 089.	10b 3,234,882. 2,540,932. 10c vestments – publicly traded securities. 40,693,376. 11 vestments – other securities. See Part IV, line 11. 12 vestments – program-related. See Part IV, line 11. 13 tangible assets. 14 her assets. See Part IV, line 11. 514,702. ther assets. Add lines 1 through 15 (must equal line 34) 77,764,176. scounts payable and accrued expenses. 5,479,020. ants payable 941,588. eferred revenue 941,588. score or custodial account liabilities. 20 score or custodial account liability. Complete Part IV of Schedule D. 21 scuered mortgages and notes payable to unrelated third parties. 15,300. scuered mortgages and notes payable to unrelated third parties. 15,300. scuered mortgages and notes payable to unrelated third parties. 1,771,338. stal liabilities. Complete Part X of Schedule D. 1,771,338. scured mortgages and notes payable to unrelated third parties. 12,024,841. ther liabilities. 57,532,089. 28 transporticed net assets. 57,532,089. 28 organizations that do not follow SFAS 117,

BAA

Form 990 (2010)

Form 990 (2010) Tides Center	94-3213100	£	Pa	age 12
Part XI Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				X
1 Total revenue (must equal Part VIII, column (A), line 12).		94,2	48,0	024.
2 Total expenses (must equal Part IX, column (A), line 25).	2	95,2	20,6	506.
3 Revenue less expenses. Subtract line 2 from line 1.		-9	72,	582.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		69,5	56,9	930.
5 Other changes in net assets or fund balances (explain in Schedule O). See. Schedule . 0.		2	54,1	146.
6 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line column (B)).	33, 6	68,8	38,4	194.
Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII				. П
		-	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 Schedule O.	ain			
2a Were the organization's financial statements compiled or reviewed by an independent accounta	ant?	2a	1	X
b Were the organization's financial statements audited by an independent accountant?		2b	Х	
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for review, or compilation of its financial statements and selection of an independent accountant?.	r oversight of the audit,	20	х	
If the organization changed either its oversight process or selection process during the tax year in Schedule O.	r, explain			
 d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the separate basis, consolidated basis, or both: Separate basis X Consolidated basis Both consolidated and separate basis 	********			1
3a As a result of a federal award, was the organization required to undergo an audit or audits as s Audit Act and OMB Circular A-133?		3a	х	
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not un or audits, explain why in Schedule O and describe any steps taken to undergo such audits	ndergo the required audit	3b	х	
BAA		Form	990 ((2010)

SCHEDULE A (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.

2010	
Open to Public	

OMB No. 1545-0047

Department Internal Rev	of the Treasury	► Attach to	Form 990 or Form 990-				uctions			Open t Insp	o Pub ection	lic
1.20.202.0	organization	1.00000							er identifica	tion number		
	Center								213100			
PartI	And in case of the local division of the loc	lic Charity State	s (All organizations	s must o	comple	ete this	part.)					
The organ			use it is: (For lines 1 thr									
1	A church, convention	n of churches or as:	sociation of churches de	scribed in	sectio	n 170(b)	(1)(A)(i)					
2	A school described i	n section 170(b)(1)	(A)(ii). (Attach Schedule	E.)								
3	A hospital or a coop	erative hospital ser	vice organization describ	ed in se	ction 17	0(b)(1)(A	A)(iii).					
4	A medical research	organization operate	ed in conjunction with a	hospital	describe	ed in sec	tion 17	0(b)(1)(A)(iii). Er	nter the ho	spital	s
5	name, city, and state An organization oper 170(b)(1)(A)(iv). (Co	rated for the benefit	of a college or universit	ty owned	or oper	ated by	a gover	nmenta	al unit de	scribed in a	sectio	
6 🗍			anvernmental unit desc	ribed in s	ection	170/6/1	AVAN					
		normally receives a	or governmental unit described in section 170(b)(1)(A)(v). s a substantial part of its support from a governmental unit or from the general public describ Part II.)								ribe	
8 🗌	Call Contraction of the second second		170(b)(1)(A)(vi). (Comple									
9	from activities relate	d to its exempt fund and unrelated busin	 more than 33-1/3% of ctions – subject to certa ess taxable income (less complete Part III.) 	in except	tions, an	nd (2) no	more t	han 33.	-1/3% of	its support	from	aros
10	An organization orga	nized and operated	I exclusively to test for p	ublic saf	ety. See	section	509(a)	(4).				
11	more publicly support	rted organizations of	l exclusively for the bene lescribed in section 509(ation and complete line	a)(1) or s	section !	509(a)(2	ctions o). See s	of, or ca	509(a)(3)	he purpose Check th	s of c ie box	ne o that
	a Type I	b Type II	and the second se		1		ed		d	Type III -	- Othe	er
_	By checking this box other than foundation section 509(a)(2).	, I certify that the on managers and oth	rganization is not contro her than one or more pul	lled dired blicly sup	ctly or in ported	ndirectly organiza	by one tions de	or more scribed	e disqual I in section	ified person on 509(a)(1	ns I) or	
f	If the organization re	eceived a written de	termination from the IRS	6 that is a	a Type I	, Type II	or Type	e III sup	porting (organizatio	n,	Ē
g	Since August 17, 200	06, has the organiza	ation accepted any gift	or contrib	oution fr	om any	of the fo	llowing	persons	?		-
	(i) A person who	directly or indirectly	controls, either alone or	togethe	r with pe	ersons d	escribed	d in (ii)	and (iii)	1.50.50	Yes	No
			supported organization?.									-
			ribed in (i) above?								-	-
			n described in (i) or (ii) : the supported organizati		*******					11 g (iii)	-	L
	(i) Name of supported	(ii) EIN	1	1	Is the	(v) Did y	ou notify	(vi)	Is the	(vii) Amour	d of sur	oourt
	organization	(i) Env	(iii) Type of organization (described on lines 1-9 above or IRC section	organiz	ation in i) listed in	the organ	ization in	organiz	ration in mn (i)	(vii) Aniodi	it of sul	poit.
			(see instructions))	your go	overning ment?	your su		organiz	ed in the S.?			
			1	Yes	No	Yes	No	Yes	No			
						7.2.11		1		-		
4)			· · · · · · · · · · · · · · · · · · ·					-				
B)				-			1	_				
C)								in the				
)									-			
E)												
otal	100 million - 100 million							1	1			

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

Schedule A (Form 990 or 990-EZ) 2010

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	endar year (or fiscal year inning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include 'unusual grants.')	49859754.	72506209.	88985021.	60111511.	84209931.	355672426.
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	49859754.	72506209.	88985021.	60111511.	84209931.	355672426.
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)						48,643,732.
6	Public support. Subtract line 5 from line 4						307028694.
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year nning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4	49859754.	72506209.	88985021.	60111511.	84209931.	355672426.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	1,468,532.	1,709,489.	1,524,288.	930,343.	855,748.	6,488,400.
9	Net income from unrelated business activities, whether or not the business is regularly carried on.						0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0.
11	Total support. Add lines 7 through 10.						362160826.
12	Gross receipts from related activ	ities, etc (see ins	tructions)			12	37,019,824.
1.1	First five years. If the Form 990 organization, check this box and	stop here		nd, third, fourth, o	r fifth tax year as	a section 501(c)	(3) ► □
	tion C. Computation of Pul					1.25	
	Public support percentage for 20						84.8%
	Public support percentage from 2						83.7%
	a 33-1/3% support test – 2010. If t and stop here. The organization a 33-1/3% support test – 2009. If t	qualifies as a put	olicly supported o	rganization			••••••••••••••••••••••••••••••••••••••
1	and stop here. The organization	qualifies as a put	plicly supported of	rganization.			
17 a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstance:	s' test, check this	box and stop her	e. Explain in Part	IV how
	or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances'	test. The organiz	s' test, check this ation qualifies as	box and stop her a publicly support	e. Explain in Part ted organization.	IV how the
18	Private foundation. If the organiz	zation did not che	ck a box on line	13, 16a, 16b, 17a,	or 17b, check thi	s box and see ins	structions 🕨 🗌
BAA	the second se				Sch	nedule A (Form 9	90 or 990-EZ) 2010

*

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.)

Sec	tion A. Public Support						
Calen 1	dar year (or fiscal yr beginning in)► Gifts, grants, contributions and membership fees	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	received. (Do not include any 'unusual grants.')						
2	Gross receipts from admis- sions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						
4 5	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
	facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
t	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						
с	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.).						
Sec	tion B. Total Support						
Calen	dar year (or fiscal yr beginning in) >	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
	income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b 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 Ins 9, 10c, 11, and 12.)						
_	First five years. If the Form 990 organization, check this box and	stop here		nd, third, fourth, o	r fifth tax year as	a section 501(c	⊳)(3)
	tion C. Computation of Pul						
	Public support percentage for 20	•					
	Public support percentage from 2					16	00 00
Sec	tion D. Computation of Inv	estment Incor	ne Percentage	?			·····
17	Investment income percentage for	or 2010 (line 10c,	column (f) divide	d by line 13, colu	mn (f))		the second s
	Investment income percentage fi						
	33-1/3% support tests – 2010. If is not more than 33-1/3%, check						
b	33-1/3% support tests – 2009. If line 18 is not more than 33-1/3%	the organization	did not check a b and stop here . Th	ox on line 14 or li e organization qu	ine 19a, and line alifies as a public	16 is more than v supported or	33-1/3%, and ►
20	Private foundation. If the organiz		•		-		

Page 3

Schedule A	(Form 990 or 990-EZ) 20	10 Tides C	enter		
Deve IV	Cumulan antal Inform	nation Comp	late this part to	provide the	avalanati

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Department of the Treasury

Schedule of Contributors

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

2010

Internal Revenue Service		
Name of the organization		Employer identification number
Tides Center		94-3213100
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(<u>3</u>) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a 527 political organization	private foundation
Form 990-PF	501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a priva 501(c)(3) taxable private foundation	ate foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules

For a section 501(c)(3) organization filing Form 990 or 990-EZ, that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 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% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

Caution: An organization 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) but it **must** answer 'No' on Part IV, line 2 of their Form 990, or check the box on line H of its Form 990-EZ, or on 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).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

	B (Form 990, 990-EZ, or 990-PF) (2010)			Page 1	of 1	of Part III		
Name of organ					Employer identifica			
Tides (to individual contributio		E01(-)	94-321310			
ran III	<i>Exclusively</i> religious, charitable, e organizations aggregating more the second secon	han \$1.000 for the year.Co	ns to secti mplete cols (on 501(c) a) through (e	(7), (8), or (10) e) and the followin	na line entrv.		
	For organizations completing Part III, enter total of <i>exclusively</i> religious, charitable, etc, contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)							
	contributions of \$1,000 or less for the year.		ee instruction	ns.)	►\$	N/A		
(a) No. from	(b)	(c)		Deer	(d)	4 1		
Part I	Purpose of gift	Use of gift		Desc	cription of how gi	it is held		
	N/A				*****			
		(e) Transfer of gift		.				
	Transferee's name, addres	Pole	tionchin of	transferor to tran	cformo			
		I.C.C						
						·····		
(2)	(b)	(c)			(d)			
(a) No. from	(b) Purpose of gift	Use of gift		Desc	ription of how gil	ft is held		
Part I								
					·····			
	(e) Transfer of gift							
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transfere					sferee		
(a)	(b)	(c)			(d)			
No. from Part I	Purpose of gift	Use of gift		Desc	ription of how gif	t is held		

······								
					·····			
	Transferrada nome addres	Relationship of transferor to transferee						
	Transferee's name, addres	5, allu zir + 4	rteia	uonsnip oi	transferor to trans	Sieree		
(a)	(b)	(c)			(d)			
No. from	Purpose of gift	Use of gift		Desc	ription of how gif	t is held		
Part I	- -							
		(e)						
	Transfer of gift Transferee's name, address, and ZIP + 4			Relationship of transferor to transferee				
						·····		
					000 000 57			

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Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

SCHEDULE C		Political Compaign and I	OMB No. 1545-0047		
(Form 990 or 990-EZ)		Political Campaign and Lobbying Activities			
	For	or Organizations Exempt From Income Tax Under section 501(c) and section 527			2010
Department of the Treasury		Complete if the organization			Open to Public
Department of the Treasury Internal Revenue Service	L	Attach to Form 990 or Form 990-EZ			Inspection
		,' to Form 990, Part IV, line 3, or Form 990		Political Campaign Activ	vities), then
		s: Complete Parts I-A and B. Do not comp		Do not complete Deut I	D
 Section 501(c) (off Section 527 organi 		tion 501(c)(3)) organizations: Complete Pa mplete Part I A only	arts I-A and C below.	Do not complete Part 1-	В.
If the organization ans	wered 'Yes	; ' to Form 990, Part IV, line 4, or Form 990 s that have filed Form 5768 (election unde			
,	•	s that have NOT filed Form 5768 (election			•
If the organization ans		,' to Form 990, Part IV, line 5 (Proxy Tax) o	or Form 990-EZ, Part	V, line 35a (Proxy Tax),	then
• Section 501(c)(4), Name of organization	(5), or (6) o	rganizations: Complete Part III.		Employer identifica	*i a 14 14 14 14 14 14
-				94-321310	
Tides Center	o if the o	rganization is exempt under section	on 501(c) or is a		
Fourier and a second		organization's direct and indirect political			
Part L.B. Complet	e if the o	rganization is exempt under secti	n 501(c)(3)		
1 Enter the amount	t of any eve	sise tax incurred by the organization under	section /955	►¢	0.
2 Enter the amount	t of any exc	tise tax incurred by the organization under	under section /955	ې ۲	0.
		a section 4955 tax, did it file Form 4720 for			
-					hannand hannand
b If 'Yes,' describe					
		rganization is exempt under section	on 501(c) excen	t section $501(c)(3)$	
		pended by the filing organization for section			
2 Enter the amount	t of the filin	g organization's funds contributed to other	organizations for sec	tion 527 exempt	
		•••••••••••••••••••••••••••••••••••••••		►\$	
line 17b		ditures. Add lines 1 and 2. Enter here and			
		e Form 1120-POL for this year?			
amount of politic:	al contributi	and employer identification number (EIN) s. For each organization listed, enter the a ons received that were promptly and direc a action committee (PAC). If additional spa	tly delivered to a sen	arate political organizati	on, such as a separate.
(a) Name		(b) Address	(c) EIN	(d) Amount paid from filing	(e) Amount of political
				organization's funds.	contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
BAA For Paperwork Redu	ction Act Noti	ce, see the Instructions for Form 990 or 990-EZ.		Schedule C (For	n 990 or 990-EZ) 2010

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OMB No. 1545-0047

TEEA3201L 02/02/11

chedule C (Form 990 or 990-EZ) 2010 SPart II-A Complete if th			tion 501/c/2) and	94-321 d filed Form 5768 (e	
section 501(h)	e organizat).	ion is exempt under se		a med Form 5768 (e	lection under
		belongs to an affiliated group.			
		checked box A and 'limited co	ntrol' provisions apply		
(The term 'ex	Limits on Lob openditures' m	bbying Expenditures neans amounts paid or incurr	ed.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditure	s to influence	public opinion (grass roots lo	bbying)		
b Total lobbying expenditure	s to influence	a legislative body (direct lobb	ying)		
c Total lobbying expenditure	s (add lines 1	a and 1b)			
and the second					
e Total exempt purpose exp	enditures (add	lines 1c and 1d)		1	
f Lobbying nontaxable amou both columns.	unt. Enter the	amount from the following tal	ole in		
If the amount on line 1e, colum	n (a) or (b) is:	The lobbying nontaxable a	mount is:		
Not over \$500,000		20% of the amount on line 1e.			
Over \$500,000 but not over \$1,000	0,000	\$100,000 plus 15% of the excess	over \$500,000.		
Over \$1,000,000 but not over \$1,5	00,000	\$175,000 plus 10% of the excess	over \$1,000,000.		
Over \$1,500,000 but not over \$17,	000,000	\$225,000 plus 5% of the excess of	over \$1,500,000.		
Over \$17,000,000		\$1,000,000.		12	
g Grassroots nontaxable am	ount (enter 25	5% of line 1f)			
h Subtract line 1g from line	1a. If zero or I	less, enter -0			
i Subtract line 1f from line 1	Ic. If zero or le	ess, enter -0			
j If there is an amount other section 4911 tax for this ye	r than zero on ear?	either line 1h or line 1i, did t		orm 4720 reporting	Yes []
(Some o	organizations colu	4-Year Averaging Period L that made a section 501(h) el mns below. See the instruction	Inder Section 501(h) ection do not have to ons for lines 2a throug	complete all of the five gh 2f.)	
	Lo	bbying Expenditures During	4-Year Averaging Per	riod	
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures				1	

Schedule C (Form 990 or 990-EZ) 2010

Schedule C (Form 990 or 990-E2)2010 Tides Center
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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)).

		(a)			(b)	
		Yes	No	TOC:	Amoun	EL.
1	During the year, did the filing organization attempt to influence foreign, national, state or local					
	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:					
	Volunteers?	v				
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X				
	Media advertisements?	X			5	134
	Mailings to members, legislators, or the public?	-	X	-	5	1.14
	Publications, or published or broadcast statements?	X	A	-	13	775
	Grants to other organizations for lobbying purposes?					000
	Direct contact with legislators, their staffs, government officials, or a legislative body?	X		-		726
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X		231	120
	Other activities? If 'Yes,' describe in Part IV.		X	11		
	Total. Add lines 1c through 1i	1	A		434	635
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		х		151	000
	If 'Yes,' enter the amount of any tax incurred under section 4912.	-	1	-		
	If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912	1.1	1	-		
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		х	-		
	III-A Complete if the organization is exempt under section 501(c)(4), section 501((c)(5)				
-	section 501(c)(6).		1.50			
					Ye	s No
1	Were substantially all (90% or more) dues received nondeductible by members?			14 100	1	1.0
	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?			-	1	
2 3	Did the organization make only in house lobbying expenditures of \$2,000 or less?				-	
2 3	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	(c)(5)	, or		2	
2 3 Part	Did the organization make only in house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered 'No' OR if Part	(c)(5) rt III-/	, or		2	
2 3 Part 1 2	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered 'No' OR if Part is answered 'Yes.' Dues, assessments and similar amounts from members. Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	(c)(5) rt III-/	, or A, lin		2	
2 3 Part 1 2 a	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered 'No' OR if Part is answered 'Yes.' Dues, assessments and similar amounts from members. Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year.	(c)(5) rt III-/	, or A, lin		2	
2 3 Part 1 2 a	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered 'No' OR if Part is answered 'Yes.' Dues, assessments and similar amounts from members. Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	(c)(5) rt III-/	, or A, lin 1		2	
2 3 Part 1 2 a b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered 'No' OR if Part is answered 'Yes.' Dues, assessments and similar amounts from members. Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year.	(c)(5) rt III-/	, or A, lin 1 2a		2	
2 3 Part 1 2 a b c	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? Did the organization agree to carryover lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered 'No' OR if Part is answered 'Yes.' Dues, assessments and similar amounts from members. Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year. Carryover from last year.	(c)(5) rt III-/	, or A, lin 1 2a 2b		2	
2 3 Parl 1 2 a b c 3	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered 'No' OR if Part is answered 'Yes.' Dues, assessments and similar amounts from members. Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year. Carryover from last year. Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues.	c)(5) rt III-,	, or A, lin 1 2a 2b 2c		2	
2 3 Part 1 2 a b c 3 4	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? Did the organization agree to carryover lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered 'No' OR if Part is answered 'Yes.' Dues, assessments and similar amounts from members. Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year. Carryover from last year. Total	c)(5) rt III-,	, or A, lin 1 2a 2b 2c		2	
2 3 Part 1 2 a b c 3 4	 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered 'No' OR if Part is answered 'Yes.' Dues, assessments and similar amounts from members. Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year. Carryover from last year. Total. Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political political estimate of nondeductible lobbying and political political political estimate of nondeductible lobbying and political political estimate of nondeductible lobbying and political estimate of nondeductible lobbying estimate of nondeductible lobbying and political estimate of nondeductible lobbying and	c)(5) rt III-/ s ical	, or A, lin 1 2a 2b 2c 3		2	
2 3 Parl 1 2 a b c 3 4 5	 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered 'No' OR if Part is answered 'Yes.' Dues, assessments and similar amounts from members. Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year. Carryover from last year. Total. Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and politie expenditure next year? 	c)(5) rt III-/ s ical	, or A, lin 1 2a 2b 2c 3 4		2	
2 3 Part 1 2 a b c 3 4 5 Part Comp	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered 'No' OR if Part is answered 'Yes.' Dues, assessments and similar amounts from members. Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year. Carryover from last year. Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions).	c)(5) rt III-, s ical	, or A, lin 2a 2b 2c 3 4 5	ne 3	2	

Schedule C (Form 990 or 990-EZ) 2010 Tides Center

 Part IV
 Supplemental Information (continued)

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94-3213100

Page 4

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, lines 6, 7, 8, 9, 10, 11, or 12.
 Attach to Form 990. See separate instructions.

Open to Public Inspection Employer identification number

Name	of the organization		Employer identification number
	les Center		94-3213100
Pa	tl Organizations Maintaining Donor the organization answered 'Yes' to	Advised Funds or Other Similar Fund Form 990, Part IV, line 6.	ds or Accounts. Complete if
-		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	1	
2	Aggregate contributions to (during year)	202,704.	
3	Aggregate grants from (during year)	183,983.	
4	Aggregate value at end of year	18,721.	
5	Did the organization inform all donors and dono funds are the organization's property, subject to	r advisors in writing that the assets held in do the organization's exclusive legal control?	onor advised XYes No
6	Did the organization inform all grantees, donors used only for charitable purposes and not for th purpose conferring impermissible private benefit	e benefit of the donor or donor advisor, or for	any other
Pai	t II Conservation Easements. Comple	te if the organization answered 'Yes'	to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by	the organization (check all that apply).	
	Preservation of land for public use (e.g., red		f an historically important land area
	Protection of natural habitat	Preservation o	f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization last day of the tax year.	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
	Total number of conservation easements		
	Total acreage restricted by conservation easem		***
	Number of conservation easements on a certifie		
	Number of conservation easements included in	생각의 전 이번 감독 전자 방송 전에서 가격에서 전망하지?	
	structure listed in the National Register		2d
3	Number of conservation easements modified, tr tax year ►		ed by the organization during the
4	Number of states where property subject to con	servation easement is located >	
5	Does the organization have a written policy rega and enforcement of the conservation easements		
6	Staff and volunteer hours devoted to monitoring	, inspecting, and enforcing conservation ease	ments during the year
7	Amount of expenses incurred in monitoring, ins \$	pecting, and enforcing conservation easement	ts during the year
8	Does each conservation easement reported on I 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	ine 2(d) above satisfy the requirements of sec	ction Yes 🗌 No
	In Part XIV, describe how the organization reports or include, if applicable, the text of the footnote to conservation easements.	the organization's financial statements that de	escribes the organization's accounting for
Par	Complete if the organization answer	tions of Art, Historical Treasures, or ered 'Yes' to Form 990, Part IV, line 8	Other Similar Assets. ^{3.}
1a	If the organization elected, as permitted under s art, historical treasures, or other similar assets in in Part XIV, the text of the footnote to its financ	held for public exhibition, education, or resear	tue statement and balance sheet works of ch in furtherance of public service, provide,
t	If the organization elected, as permitted under S historical treasures, or other similar assets held following amounts relating to these items:	for public exhibition, education, or research in	n furtherance of public service, provide the
	(i) Revenues included in Form 990, Part VIII, li		
ŝ	(ii) Assets included in Form 990, Part X		••••••••••••••••••
	If the organization received or held works of art, amounts required to be reported under SFAS 11	6 (ASC 958) relating to these items:	
	Revenues included in Form 990, Part VIII, line 1		
1.1	Assets included in Form 990, Part X	****************	• • • • • • • • • • • • • • • • • • •

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

Schedule D (Form 990) 2010 Tides Ce Part III Organizations Maintaining		storical Treasures, o	94-32 r Other Similar As		ontin	Page ued)
3 Using the organization's acquisition a					1.1.1.1.1.1	
items (check all that apply):			er 1920 e e 1920 e e e e			
a Public exhibition	d Loa	an or exchange programs				
b Scholarly research	e Oti	ner			-	_
c Preservation for future generations	5					
4 Provide a description of the organization Part XIV.						
5 During the year, did the organization s assets to be sold to raise funds rather	olicit or receive donations of than to be maintained as no	art, historical treasures, o	or other similar	Vec	1	No
Part IV Escrow and Custodial Arr 9, or reported an amount of	angements. Complete	if organization answe				
1a Is the organization an agent, trustee, or included on Form 990, Part X?	custodian, or other intermedi	ary for contributions or oth	ner assets not	Yes		No
b If 'Yes,' explain the arrangement in Pa						
an real address the analysis in the	a construction of the second second second			Amoun	ŧ	
c Beginning balance			1c	, integan		
d Additions during the year.						
e Distributions during the year						_
f Ending balance						
2a Did the organization include an amoun			the second se			
이야지 않는 것 같은 것 같		21 <i>1</i>		Yes		No
b If 'Yes,' explain the arrangement in Pa		newarad 'Vas' to Far	m 000 Dart IV lin	0.10		
art V Endowment Funds. Comple					Territo contra	the back
) Current year (b) Prior	year (c) Two years bac	k (d) Three years back	(e)	Four yea	IS DACK
1a Beginning of year balance				-		
b Contributions.			-	1	-	
c Net investment earnings, gains, and losses	i					
d Grants or scholarships						
e Other expenditures for facilities and programs						
f Administrative expenses					_	
g End of year balance				ty L		
2 Provide the estimated percentage of th	e year end balance held as:			1000		
a Board designated or guasi-endowment	• %					
b Permanent endowment	26					
c Term endowment	00					
3a Are there endowment funds not in the organization by:	possession of the organizati	on that are held and admi	nistered for the	Г	Yes	No
(i) unrelated organizations				. 3a(i)		1.10
(ii) related organizations				3a(ii)		-
b If 'Yes' to 3a(ii), are the related organized	and the second			3b		-
4 Describe in Part XIV the intended uses						1
art VI Land, Buildings, and Equi						
Description of investment	(a) Cost or other bas (investment)		(c) Accumulated depreciation	(d) E	Book v	alue
		1,168,130.	asprodution	1	,168	.130
1a land		1,100,100.			, 100	, 100
	Contraction of the Contraction o					
b Buildings.		751 900	285 170		166	221
c Leasehold improvements	. expresses	751,809.	285,478.			
b Buildings		751,809. 3,237,586. 462,923.	285,478. 2,586,951. 362,453.		650	,331 ,635 ,470

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Schedule D (Form 990) 2010 Tides				94-32	13100 Page 3
Part VII Investments-Other S			ne 12.	N/A	
(a) Description of security or (including name of secu	category rity)	(b) Book value		(c) Method of valua Cost or end-of-year ma	ation: arket value
(1) Financial derivatives					
(2) Closely-held equity interests					
(3) Other					
<u>(A)</u>					
<u>(B)</u>					
<u>(C)</u>					
<u>(D)</u>					
<u>(E)</u>					
<u>(F)</u>					
(G)					
<u>(H)</u>					
(I) Total. (Column (b) must equal Form 990 Part X, c	aluma (P) line 12)				
Part VIII Investments-Program		m 990 Part X	line 13)	N/A	
(a) Description of investme		(b) Book value		(c) Method of value	ation
(a) Description of investme	па туре	(b) DOOK Value		Cost or end-of-year ma	irket value
(1)					
(2)					
(3)					
(4)		The second se			
(5)					
(6)					
(7)			1		
(8)					
(9)					
(10)					
Total. (Column (b) must equal Form 990, Part X, c Part IX Other Assets. (See Fo	olumn (B) line 13.)►	e 15) N/A			
Fait in Other Assets. (See 10	(a) Descrip				(b) Book value
(1)	(a) Descrip		Para and		(b) Dook value
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					/
(9)					
(10)					
Total. (Column (b) must equal Form 99			*********		
Part X Other Liabilities. (See			1		
(a) Description of liab	oility	(b) Amount	-		
(1) Federal income taxes	an an at i an a	2 044 02	2		
(2) Liability - Agency Tr	ansactions	2,844,93	5.		
(3)			-		
(4) (5)					
(6)			-		
(7)					
(8)			1		
(9)					
(10)					
(11)		1. C			
Total. (Column (b) must equal Form 990, Part X, co	lumn (B) line 25)	2,844,93	3.		
					CARL MACRONIC BUILT

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

art XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements	94-3213	3100	Page
T Table and (Farm 000 D + 1)(0, 1 + 20)		D4 04	0 004
1 Total revenue (Form 990, Part VIII,column (A), line 12)		94,24	
2 Total expenses (Form 990, Part IX, column (A), line 25)		95,22	
3 Excess or (deficit) for the year. Subtract line 2 from line 1.			2,582
4 Net unrealized gains (losses) on investments		25	4,14
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.			4,14
Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		-71	8,43
art XII Reconciliation of Revenue per Audited Financial Statements With Revenue			
1 Total revenue, gains, and other support per audited financial statements	1	94,92	0,72
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1		
	,146.		
b Donated services and use of facilities 2b 195	,556.		
c Recoveries of prior year grants			
d Other (Describe in Part XIV)			
e Add lines 2a through 2d.		44	9,70
3 Subtract line 2e from line 1.		94,47	1,01
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a Investments expenses not included on Form 990, Part VIII, line 7b 4a			
	,995.		
c Add lines 4a and 4b		-22	2,99
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		94,24	
art XIII Reconciliation of Expenses per Audited Financial Statements With Expense			-1
1 Total expenses and losses per audited financial statements		95,63	9,15
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:			_
에는 것은 것은 것이 가지? 것이 가지 않는 것이 없는 것이 없었다. 이는 것은 것이 많이 많이 있는 것이 같아요. 그는 것이 많이 많이 나는 것이 없는 것이 없는 것이 없는 것이 없는 것이 없다.	,556.		
b Prior year adjustments	<u></u>		
c Other losses 2c			
d Other (Describe in Part XIV.), 2d			
e Add lines 2a through 2d.		10	5,55
3 Subtract line 2e from line 1.		95,44	
Amounts included on Form 990, Part IX, line 25, but not on line 1:		35,44	5,00
a Investments expenses not included on Form 990, Part VIII, line 7b			
	,995.		
c Add lines 4a and 4b.		-22	2,99
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).		95,22	
		20100	0,00

9.	4-	3	2	1	3	1	0	С	Pag	е	5
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Schedule D (Form 990) 2010 Tides Center
Part XIV Supplemental Information (continued)

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2010 Schedule D, Part XIV - Supplemental Information	Page 6
Tides Center	94-3213100
Schedule D, Part XII, Line 4b Other Revenue Included On Form 990 But Not Included In F/S Fundraising Event Exp Netted Against Rev	\$ -222,995. \$ -222,995.
Schedule D, Part XIII, Line 4b Other Expenses Included On Form 990 But Not Included In F/S	
Fundraising Event Exp Netted Against RevTotal	\$ -222,995. \$ -222,995.

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.

OMB No. 1545-0047
2010
2010
Open to Public
Incoection

No

Department of the Treasury Internal Revenue Service Name of the organization

Tides Center

Employer identification number 94-3213100

Part I General Information on Activities Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?... X Yes

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds 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	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
				AIDS Health	
(1)				Care Issues,	
Central				Health	
(2) America/Caribbea				Education,	
n (3)			Program Services	Human Rights AIDS Health	66,437.
(4)				Care Issues, Health	
East Asia and				Education,	
(5) the Pacific			Program Services	Human Rights	563,528.
	1			AIDS Health	
(6)				Care Issues,	
(7)				Health Education,	
Europe (8)			Program Services	Human Rights Community	235,214.
Middle East and			1	Outreach,	
(9) North Africa			Program Services	Human Rights	118,799.
(10)				AIDS Health Care Issues,	
(11)				Health Education,	
North America (12)			Program Services	Human Rights AIDS Health	837,812.
Russia and the (13) Newly				Care Issues, Health	
Independent				Education,	
(14) States			Program Services	Human Rights	118,908.
				AIDS Health	
(15)	1			Care Issues,	
(16)				Health Education,	
South America (17)			Program Services	Human Rights AIDS Health	290,959.
3a Sub-total	1				3,548,406.
b Total from continuation sheets to Part I		(18)			
c Totals (add lines 3a and 3b)	0	0			3,548,406.

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

Schedule F (Form 990) 2010

94-3213100

Page 2

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....

		S Sahara Africa	Sci/Tech				
		Africa			Wire	N/A	N/A
		millicu	Edu	5,273.	Transfer	 	
					1		
and the second							
	1						
and the second							
1.12.62	4						
L. Lawrence	1				-		
1. 1. 1. 1.							
							ber of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which counsel has provided a section 501(c)(3) equivalency letter.

Schedule F (Form 990) 2010 Tides Center

94-3213100

Page 3

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
(1)							
(2)					1		
(3)							11
(4)				1.5.1.4			
(5)	1						
(6)							
(7)					· · · · · · · · · · · · · · · · · · ·		
(8)							
(9)				1.			
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18) BAA							

Schedule F				Center
Part IV	Fore	ign Form	S	

94-	-32	131	00
	14	エーエ	00

Ρ	age	4

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If 'Yes,' the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see instructions for Form 926)</i>	Yes	XNo
2	Did the organization have an interest in a foreign trust during the tax year? If 'Yes,' the organization may be required to file Form 3520, Annual Return To Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A Annual Information Return of Foreign Trust With a U.S. Owner (see instructions for Forms 3520 and 3520-A).	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471).	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? <i>If 'Yes,' the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)</i> .	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If 'Yes,' the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign 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 'Yes,' the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713)	Yes	X No

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TEEA3505L 10/27/10

Schedule F (Form 990) 2010

Part V Supplemental Information Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete t his part to provide any additional information (see instructions).

Part I, Line 2 - Grantmakers Explanation For Grants Outside US
Thorough due diligence is conducted in advance of funding to determine whether a
group will be an appropriate grantee. We require groups to provide proof of tax
status_and/or_registration_documents_and_their_organizational_documentsAll
international grants are restricted to a clearly charitable purpose and must be used
exclusively_for_activities_conducted_outside_of_the_U.SAll_grantees_receive_a
written grant agreement, and by accepting payment the grantee agrees to the
conditions_of_the_award, which_provides_assurance_that_funds_will_not_be_used_for_any
prohibited_purpose

Continuation Sheet for Schedule F (Form 990)

*

 Attach to Form 990 to list additional information for Schedule F (Form 990)Part I, line 3; Part II, line 1; or Part III.
 See instructions for Schedule F (Form 990) 2010

Continuation Page 1 of 1

Name of the organization					Employer identifi	cation number
Tides Center					94-32131	00
Part I Continuation of A	Activities per R	egion. (Sched	dule F (Form 990), Part I,	line 3)		**************************************
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type (i.e., fundraising, program services, grants to recipients located in the region)	(e) If acti (d) is a service specif service(ivity listed in a program e, describe ic type of s) in region	(f) Total expenditures in region
				Health	ssues,	
South Asia			Program Services	Educat Human	Rights	176,531.
Sub-Saharan Africa			Program Services/Grant	AIDS H Care/E		1,140,218.

						······································
		······				
·····						
						·····
Totals ►	0	0				1,316,749.

SCH	EDL	ILE	G	
(Form	990	or 9	90-I	EZ)

Department of the Treasury

Supplemental Information Regarding Fundraising or Gaming Activities

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.

				Employer identifica	ition number
				94-321310	0
lete if the organ	nization an	iswered 'Y	es' to Form 990, Part	IV, line 17.	***************************************
aised funds th or oral agreer t VII) or entity dividuals or ent	nough any nent with a in connect tities (fund	of the follo e f g any individ ion with pr	X Solicitation of non- X Solicitation of gove X Special fundraising lual (including officers, refessional fundraising	government grants ernment grants g events directors, trustees or ke services?	X Yes No
(ii) Activity	have custod	y or control	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization
	Yes	No			
Planning		x		30,560.	
Grant research		x		29,516.	
Consulting		X		20,100.	111 100
Consulting		X		20,000.	
Consulting		x		16,000.	
Consulting		x		15,000.	
Consulting		x		14,644.	
Grant Writing		x		11,456.	
Consulting		x		10,500.	
Applicatio ns		x		10,400.	
				170 176	0.
ation is register	ed or licer	ised to sol	<u>a me md ma mi i</u>	s been notified it is exe	mpt from registration
	n or oral agreen to or oral agreen to VII) or entity dividuals or en e organization. (ii) Activity Planning Grant research Consulting Consulting Consulting Consulting Grant Writing Consulting	avired to complete this paraised funds through any any and the complete this paraised funds through any any and the organization. (ii) Activity (iii) Did for the custod of contribution of c	quired to complete this part. raised funds through any of the following and the following of t	nuired to complete this part. raised funds through any of the following activities. Check e X Solicitation of non- f is Solicitation of gove g Solicitation of gove g is or oral agreement with any individual (including officers, tvill) or entity in connection with professional fundraising dividuals or entities (fundraiser) pursuant to agreements e organization. (ii) Activity (iii) Did fundraiser have custody or control of contributions? (iv) Gross receipts from activity Planning X Image: solid	94-321310 Idea if the organization answered 'Yes' to Form 990, Part IV, line 17. naised funds through any of the following activities. Check all that apply. e X Solicitation of non-government grants g X Solicitation of government grants g X Gin activity (iii) Did fundraiser from activity (v) Amount paid to for retained by) fundraiser listed in colsuiting X 20,100. Consulting X

OMB No. 1545-0047

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Schedule G (Form 990 or 990-EZ) 2010 Tides Center

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Page 2

94-3213100

Pa	1 11	Fundraising Events. Complete if reported more than \$15,000 of fu and 6a. List events with gross red	indraising event co	ntributions and gros	orm 990, Part IV, li ss income on Form	ne 18, or 1 990-EZ, lines 1		
RE			(a) Event #1 Conferences (event type)	(b) Event #2 Conferences (event type)	(c) Other events 11 (total number)	(d) Total events (add column (a) through column (c))		
REVENUE	1	Gross receipts	140,850.	124,174.	368,673.	633,697.		
Ĕ	2	Less: Charitable contributions	122,910.	105,412.	224,814.	453,136.		
	3	Gross income (line 1 minus line 2)	17,940.	18,762.	143,859.	180,561.		
	4	Cash prizes						
P	5	Noncash prizes		6,470.		6,470.		
D I RECT	6	Rent/facility costs	33,031.		30,311.	63,342.		
	7	Food and beverages			5,286.	5,374.		
EXP	8	Entertainment			5,500.	5,500.		
EXPENSES	9	Other direct expenses	69,208.	6,323.	66,778.	142,309.		
	 Direct expense summary. Add lines 4- through 9 in column (d). Net income summary. Combine line 3, column (d), and line 10. Part III Gaming. Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or report \$15,000 on Form 990-EZ, line 6a. 							
REVENUE	1	Gross revenue	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))		
Ę	2	Cash prizes						
	3	Non-cash prizes						
C S T E S	4	Rent/facility costs						
	5	Other direct expenses				NO LONG OF THE DESCRIPTION OF THE OWNER OF THE OWNER OF THE		
	6	Volunteer labor	Yes% No	Yes% No	Yes [%] No			
	7 Direct expense summary. Add lines 2 through 5 in column (d)							
	8	Net gaming income summary. Combine l	ines 1, column (d) and	line 7	▶			
	 9 Enter the state(s) in which the organization operates gaming activities: a Is the organization licensed to operate gaming activities in each of these states? b If 'No,' explain: 							
	10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No b If 'Yes,' explain:							

Schedule G (Form 990 or 990-EZ) 2010

Sche	dule G (Form 990 or 990-EZ) 2010 Tides Center	94-3213	100	Page 3
	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 f administer charitable gaming?		Yes	No
a b	Indicate the percentage of gaming activity operated in: The organization's facility An outside facility Enter the name and address of the person who prepares the organization's gaming/special events books a	13b		00 00
	Name ►			
	Address ►			
b	Does the organization have a contact with a third party from whom the organization receives gaming reven If 'Yes,' enter the amount of gaming revenue received by the organization \succ \$ and of gaming revenue retained by the third party \succ \$ If 'Yes,' enter name and address of the third party:			No
	Name ►			
	Address ►			
16	Gaming manager information:			
	Name ►			
	Gaming manager compensation 🕨 \$			
	Description of services provided			
	Director/officer			
17	Mandatory distributions			
b	Is the organization required under state law to make charitable distributions from the gaming proceeds to restate gaming license? Enter the amount of distributions required under state law to be distributed to other exempt organizations of		h	No
Part	organization's own exempt activities during the tax year ► \$ Supplemental Information. Complete this part to provide the explanations requir columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as app this part to provide any additional information (see instructions).	ed by Pa licable. A	rt I, line Also com	2b, plete
		•••••••••••••••••••••••••••••••••••••••		

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SCHEDULE I Form 990)	Gr Gov	ants and Ot vernments a	her Assistance t nd Individuals ir	o Organization the United Sta	is, ates	_	OMB No. 1545-0047
lepartment of the Treasury Internal Revenue Service	Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22. ► Attatch to Form 990.						Open to Public Inspection
lame of the organization Tides Center Part I General Information on G	rants and Assist					Employer identific 94-321310	
 Does the organization maintain recorr the selection criteria used to award th Describe in Part IV the organization's Part II Grants and Other Assistant 	ds to substantiate the he grants or assistand s procedures for moni	e amount of the gr ce?	rant funds in the United	States. See Pa	urt IV		X Yes No
Form 990, Part IV, line 21 Part II can be duplicated if	for any recipient	that received r					
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) See Attached Statement	See Stmt	See Stmt	17,133,395.	0.	FMV	See Attached Statement	Various - See Attached Statement
(2)							
(3)							
(4)							
(5)							
(6)							
Ø			1				-
(8)							
2 Enter total number of section 501(c)(3 Enter total number of other organization						****	94

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Tides Center

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1(a)-Name and address of organization or government 1(a)-Name and address of organization or government A J. Muste Memorial Institute 339 Lafayette Street, New York, New York 10012 39-06 62nd Street, #BL, Woodside, New York 11377 Adhikaar African Hope Committee 441 Convent Avenue Suite #4D, New York, New York 10031 After Hours Project, Inc. 1204 Broadway, Brooklyn, New York 11221 1907 Mermaid Avenue, Brooklyn, New York 11224 Amethyst Women's Project Art Works for Change 6 Hillwood Place, Oakland, California 94610 Brandworkers International P.O. Box 1257, Long Island, NY 11101 Brave New Foundation 10510 Culver Blvd, Culver City, California 90232 Bronx Academy of Arts and Dance (B.A.A.D!) 841 Barretto Street, 2nd Floor, Bronx, New York 10474 Brooklyn Arts Council 55 Washington Street, Suite 218, Brooklyn, New York 11201 Brooklyn Botanic Garden 1000 Washington Avenue, Brooklyn, New York 11225 Bushwick Housing Independence Project 144 Bleecker Street, Brooklyn, New York 11221 CAAAV Organizing Asian Communities 2473 Valentine Avenue, Bronx, New York 10458 Calpulli Mexican Dance Company 91-10 34th Avenue, 5B, Jackson Heights, New York 11372 Campaign for America's Future, Inc 1825 K Street, NW, Suite 400, Washington, District of Columbia 20006 Careers Through Culinary Arts Program 250 West 57th Street, Suite 2015, New York, New York 10107 Causa Justa :: Just Cause P.O. Box 3596, Oakland, California 94609 Center for Arts Education 225 West 34th Street, Suite 1112, New York, New York 10122 Centro Hispano Cuzcatlan 148-13 Hillside Avenue, Jamaica, New York 11435 55 West 125th Street, 10th Floor, New York, New York 10027 Changer, Inc. Choice USA 1317 F Street, NW, Suite 501, Washington, District of Columbia 20007 Clean Water Fund 741 Westminster Street, Providence, Rhode Island 02903 53-22 Roosevelt Avenue 2nd Floor, Woodside, New York 11377 Common Law, Inc. Coro New York Leadership Center 42 Broadway, Suite 1827-35, New York, New York 10004 Cypress Hills Local Development Corporation 625 Jamaica Avenue, Brooklyn, New York 11208 Democracia USA 2915 Biscavne Blvd, Suite 210, Miami, Florida 33137 Desis Rising Up and Moving (DRUM) 72-18 Roosevelt Ave, 2nd Floor, Jackson Heights, New York 11372 East Side House Settlement 337 Alexander Avenue, Bronx, New York 10454-1119 Environmental Defender Law Center 407 W Koch Street, Bozeman, Montana 59715 Families United for Raclal & Economic Equality (FUREE) 81 Willoughby Street Suite #701, Brooklyn, New York 11201 Fractured Atlas Productions Fund for the City of New York, Inc. Futures and Options Inc. Garifuna Coalition USA Gbetto Film School Inc. Girls for Gender Equity Global Action Project (GAP) Good Shepherd Services Greater Everett Community Foundation Groundswell Community Mural Project Inc. Hester Street Collaborative Hip-Hop Theater Festival, Inc. Human Impact Partners La Union de la Comunidad Latina (UCL) Latin American Workers Project (LAWP) Mama Foundation for the Arts (MFA) Maysles institute MinKwon Center for Community Action Missionary Sisters of the Holy Rosary Mixteca Organization, Inc. Museum of Contemporary African Diasporan Arts Natural Resources Council of Maine New Era Colorado Foundation New Victory Theater New York City AIDS Housing Network New York City College of Technology New York Taxi Workers Alliance New York Writer's Coalition Obio State University Foundation/Kirwan Institute Opportunity Network Pachamama Peruvian Arts People's Theatre Project Policy Consensus Initiative Prospect Park Alliance PTA Hawaii Congress Hanalei PTA Purelements: An Evolution in Dance Queens Community House, Inc. Oueens Congregations United for Action (OCUA) Queens Library Foundation Queens Museum of Art Sadie Nash Leadership Project San Francisco Parks Trust Social & Environmental Entrepreneurs SEE, Inc. Sponsoring Committee for a Queens Citizen Organization, Inc. Staten Island Childrens Museum The Advocacy Fund The Bridge School The Colin Higgins Foundation The Jewish Home and Hospital The League of Young Voters Education Fund The New Organizing Institute Education Fund The Sikh Coalition The Town Hall Foundation **Tides Foundation** TORCH

248 W 35th Street, 10th Floor, New York, New York 10001 c/o IDP 3 West 29th Street #803 New York, New York 10001 120 Broadway, Suite 913, New York, New York 10271 391 East 149th Street, Bronx, NY 10455 79 Alexander Avenue, 4th Floor, Bronx, New York 10454 1360 Fulton Street, Suite 314, Brooklyn, New York 11216 4 W. 37th Street, 2nd Floor, New York, New York 10018 305 Seventh Avenue, 9th Floor, New York, New York 10001 2823 Rockfeller Avenue, Everett, Washington 98206 339 Douglass Street, Brooklyn, New York 11217 113 Hester Street, New York, New York 10002 442D Lorimer Street, #195, Brooklyn, New York 11206 274 14th Street, Oakland, California 94612 621 DeGraw Street, Brooklyn, New York 11217 79-09 Roosevelt Ave, 2nd Floor, Jackson Heights, New York 11372 149 West 126th Street, New York, New York 10027 343 Lenox Avenue, New York, New York 10027 136-19 41st Avenue, Flushing, New York 11355 741 Polo Road, Bryn Mawr, Pennsylvania 19010 245 23rd Street, 2nd Floor, Brooklyn, New York 11215 80 Hanson Place, Brooklyn, New York 11217 3 Wade Street, Augusta, Maine 04330 PO Box 4274, Boulder, Colorado 80306 c/o The New 42nd Street 229 West 42nd Street, 10th Floor, New York, N 80-A Fourth Avenue, Brooklyn, New York 11217 300 Jay Street, Room 320, Brooklyn, New York 11201 250 Fifth Ave, Suite 310, New York, New York 10001 80 Hanson Place, #603, New York, New York 11217 433 Mendenhall Laboratory 125 S Oval Mall Columbus, Ohio 43210 381 Park Ave South, Suite 1401, New York, New York 10016 35 E 35th Street, #3D, New York, New York 10016 715 W. 172nd Street, Suite 64, New York, New York 10032 P.O. Box 1762, Portland, Oregon 97207 95 Prospect Park West, Brooklyn, New York 11215 PO Box 1396, Hanalei, Hawaii 96714 1958 Fulton Street, Suite 409, Brooklyn, New York 11233 108-25 62nd Drive, Forest Hills, New York 11375 103-04 39th Avenue, #105, Corona, New York 11368 261 Madison Avenue, New York, New York 10014 New York City Building Flushing Meadows Corona Park, Queens, New 157 Montague Street, 4th Floor, Brooklyn, New York 11201 McLaren Lodge in GG Park 501 Stanyan Street, San Francisco, Californ 22231 Mulholland Hwy., Ste. 209, Calabasas, California 91302 85-18 61st Road, Rego Park, New York 11374 1000 Richmond Terrace, Staten Island, New York 10301 P.O. Box 29229, San Francisco, California 94129 545 Eucalyptus Avenue, Hillsborough, California 94010 P.O. Box 29903, San Francisco, California 94129 120 West 106th Street, New York, New York 10025 310 Atlantic Avenue, 2nd Floor, Brooklyn, New York 11201 1850 M Street, NW, Suite 1100, Washington, District of Columbia 20036 40 Exchange Place, Suite 728, New York, New York 10005 123 West 43rd Street, New York, New York 10036 P. O. Box 29903, San Francisco, California 94129 80 Eighth Avenue - Mezz B, New York, New York 10011 P.O. Box 670086, Flushing, New York 11367

	1(b)-EIN	1c-IRS section	1(d)-Cash Grant	(e) non- cash	(f) method valuation	of (g) description of non-cash	(h) Purpose of grant or assistance
	23-7379088	501(c)(3)	\$50,000.00	\$0.00		N/A	Social Justice Grants-General Operating Support for Vamos Unide
	20-3384725	501(c)(3)	\$25,000.00	\$0.00		N/A	Social Justice Grants-General Operating Support
	04-3784718	501(c)(3)	\$25,000.00	\$0.00		N/A	Social Justice Grants-General Operating Support
	33-1007278	501(c)(3)	\$25,000.00	\$0.00		N/A	Social Justice Project Grants-Renewal
	11-3505513	501(c)(3)	\$25,000.00	\$0.00		N/A	Social Justice Grants-General Operating Support
	27-2306583	501(c)(3)	\$5,799.19	\$0.00		N/A N/A	Spin & Close Grant
	26-0798625 94-3209789	501(c)(3) 501(c)(3)	\$25,000.00 \$50.000.00	\$0.00 \$0.00		N/A	Social Justice Grants - Second Installment Stop Global Warming-General Operations
	13-3997265	501(c)(3)	\$25,000.00	\$0.00		N/A	Arts Project Grants - Renewal
	23-7072915	501(c)(3)	\$35,000.00	\$0.00		N/A	Arts - Initial Award-Haiti Cultural Exchange
	11-2417338	501(c)(3)	\$25,000.00	\$0.00		N/A	Career Internship Network
	20-1510204	501(c)(3)	\$25,000.00	\$0.00		N/A	Social Justice Project Grants-Renewal
	13-3526938	501(c)(3)	\$25,000.00	\$0.00	N/A	N/A	Social Justice Project Grants-Renewal
	20-0642440	501(c)(3)	\$25,000.00	\$0.00		N/A	Arts - General Operating Support
	52-1971942	501(c)(3)	\$24,000.00	\$0.00		N/A	Apollo Alliance-General Operations
	13-3662917	501(c)(3)	\$30.000.00			N/A	Career Internship Network
	26-3289261	501(c)(3)	\$35,285.47	\$0.00		N/A	Spin & Close Grant
	13-3938080	501(c)(3)	\$25,000.00	\$0.00		N/A	Career Internship Network
	11-3559496 16-1764680	501(c)(3)	\$25,000.00 \$25,000.00	\$0.00 \$0.00		N/A N/A	Social Justice Grants-General Operating Support Social Justice Grants-General Operating Support
	52-1772575	501(c)(3) 501(c)(3)	\$32,000.00	\$0.00		N/A	Generational Alliance -Programmatic -General
	52-1043444	501(c)(3)	\$13,390.00			N/A	The Mercury Policy Project-General Operations
	26-3382144	501(c)(3)	\$50,000.00	\$0.00		N/A	Social Justice Grants - Initial Award
	13-3571610	501(c)(3)	\$25,000.00			N/A	Career Internship Network
	11-2683663	501(c)(3)	\$25,000.00	\$0.00		N/A	College Access
	41-2278788	501(c)(3)	\$72,213.00	\$0.00		N/A	Generational Alliance -Programmatic -General
	38-3652741	501(c)(3)	\$25,000.00			N/A	Social Justice Grants-General Operating Support
	13-1623989	501(c)(3)	\$16,000.00	\$0.00		N/A	Community Education Pathways to Success - Kellogg
	27-0772454	501(c)(3)	\$342,402.45			N/A	Spin & Close Grant
	20-0092728	501(c)(3)	\$25,000.00	\$0.00		N/A	Social Justice Grants-General Operating Support
	11-3451703 13-2612524	501(c)(3)	\$35,000.00 \$100,000.00	\$0.00 \$0.00		N/A N/A	Arts - Initial Award-Rebel Diaz Arts Collection Social Justice Grants-General Operating Support
	13-4063658	501(c)(3) 501(c)(3)	\$100,000.00			N/A	Career Internship Network
	22-3690931	501(c)(3)	\$25,000.00			N/A	Social Justice Grants - Second Installment
	13-4127229	501(c)(3)	\$25,000.00			N/A	Arts - General Operating Support
	04-3697166	501(c)(3)	\$25,000.00		N/A	N/A	Social Justice Project Grants-Renewal
	11-3425000	501(c)(3)	\$25,000.00		N/A	N/A	Arts - General Operating Support
	13-5598710	501(c)(3)	\$30,000.00	\$0.00	N/A	N/A	College Access
	94-3188703	501(c)(3)	\$25,000.00			N/A	Stephen Stills Children's Music Project-General Operations
	11-3427213	501(c)(3)	\$25,000.00			N/A	Social Justice Grants-General Operating Support
	20-0774906	501(c)(3)	\$35,000.00			N/A	Arts - Initial Award
	42-1642691	501(c)(3)	\$25,000.00			N/A	Arts - General Operating Support
	27-0193587 26-3319323	501(c)(3)	\$242,761.57 \$25,000.00	\$0.00 \$0.00		N/A N/A	Spin & Close Grant Social Justice Grants-General Operating Support
	26-3319323 14-1812487	501(c)(3) 501(c)(3)	\$25,000.00	\$0.00		N/A N/A	Social Justice Grants-General Operating Support
	31-1614732	501(c)(3)	\$25,000.00			N/A	Arts - General Operating Support
	20-2545574	501(c)(3)	\$35,000.00			N/A	Arts - Initial Award
	11-2710506	501(c)(3)	\$50,000.00			N/A	Social Justice Grants - Initial Award
	23-2683208	501(c)(3)	\$5,000.00	\$0.00	N/A	N/A	Missing the Target
	11-3561651	501(c)(3)	\$25,000.00			N/A	Social Justice Project Grants-Renewal
	11-3526774	501(c)(3)	\$25,000.00			N/A	Arts - General Operating Support
	01-0270690	501(c)(3)	\$15,167.00			N/A	Health
	26-1389272	501(c)(3)	\$17,645.00			N/A	Generational Alliance -Programmatic -General
New York 10036-7299	13-3584032	501(c)(3)	\$20,000.00	\$0.00		N/A	Career Internship Network
	13-4094385 11-2529356	501(c)(3)	\$25,000.00 \$25,000.00			N/A N/A	Social Justice Project Grants-Renewal College Access
	13-4000097	501(c)(3)	\$25,000.00			N/A	Social Justice Grants-General Operating Support
	11-3604970	501(c)(3) 501(c)(3)	\$25,000.00			N/A	Arts Project Grants - Renewal
	31-1145986	501(c)(3)	\$9,500.00			N/A	Philanthropic Initiative for Racial Equity-General
	43-1984494	501(c)(3)	\$20,000.00			N/A	Career Internship Network
	26-4064685	501(c)(3)	\$35,000.00			N/A	Arts - Initial Award
	26-4705999	501(c)(3)	\$35,000.00	\$0.00	N/A	N/A	Arts - Initial Award
	91-1807304	501(c)(3)	\$5,750.00	\$0.00		N/A	Community Focus-General Operations
	11-2843763	501(c)(3)	\$20,000.00			N/A	Career Internship Network
	99-0305469	501(c)(3)	\$8,988.44			N/A	Stephen Stills Children's Music Project-General Operations
	20-5332584	501(c)(3)	\$35,000.00	\$0.00	N/A	N/A	Arts - Initial Award
	11-2375583	501(c)(3)	\$25,000.00			N/A	Social Justice Grants - Initial Award Alianza Ecuatoriana
	80-0122559	501(c)(3)	\$25,000.00			N/A	Social Justice Grants-General Operating Support
	11-3009405	501(c)(3)	\$25,000.00			N/A N/A	Career Internship Network
York 11368-3398	11-2278998 11-3633912	501(c)(3) 501(c)(3)	\$25,000.00 \$25,000.00		NIA	N/A N/A	Career Internship Network Social Justice Project Grants-Renewal
nia 94117-1989	23-7131784		\$150,000.00			N/A	City Guides-General Operations
AG 97())-(003	95-4116679	501(c)(3) 501(c)(3)	\$150,000.00			N/A	Responsible Purchasing Network
	11-2409395	501(c)(3)	\$25,000.00			N/A	Social Justice Grants - Initial Award
	23-7379930	501(c)(3)	\$25,000.00			N/A	Career Internship Network
	94-3153687	501(c)(4)	\$121,694.79			N/A	Voices for Progress Education Fund (VPEF)-General Operations
	95-4068784	501(c)(3)	\$10,000.00			N/A	Stephen Stills Children's Music Project-General Operations
	95-4089610	501(c)(3)	\$24,555.47	\$0.00	N/A	N/A	Equality Across America-General Operations
	23-7071900	501(c)(3)	\$30,000.00			N/A	Career Internship Network
	76-0744153	501(c)(3)	\$49,550.00			N/A	Generational Alliance -Programmatic -General
6	56-2538200	501(c)(3)	\$24,555.47			N/A	Equality Across America-CEL/GetEQUAL
	22-3834037	501(c)(3)	\$25,000.00			N/A	Social Justice Grants-General Operating Support
	23-7296167	501(c)(3)	\$25,000.00			N/A	Career Internship Network
	51-0198509	501(c)(3)	\$13,816,600.46			N/A	Reproductive Justice Fund-Direct Expenses
	13-4083242	501(c)(3)		\$0.00		N/A	Career Internship Network
	54-2177390	501(c)(3)	\$25,000.00	\$0.00		N/A	Social Justice Project Grants-Renewal

Turning Point for Women and Families

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1c-IRS (e) non- (f) method of (g) description 1(a)-Name and address of organization or government 1(a)-Name and address of organization or government 1(b)-EIN section 1(d)-Cash Grant cash valuation of non-cash (h) Purpose of grant or assistance 1211 Connecticut Avenue, NW Suite 406, Washington, District of Columbia 20036 184 Eldridge Street, New York, New York 10002 401 1st Street, Suite 215, Richmond, California 94801 23-7211922 501(c)(3) 13-5562374 501(c)(3) 20-4124161 501(c)(3) \$0.00 N/A United States Student Association Foundation \$72,150.00 N/A Generational Alliance -Programmatic -General University Settlement Society of New York Urban Tilth \$5,000.00 \$9,953.13 \$0.00 N/A \$0.00 N/A N/A N/A Beacons YA Spin & Close Grant Spin & Close Grant Spin & Close Grant Arts Project Grants - Renewal Social Justice Project Grants-Renewal Social Justice Project Grants-Renewal 225 S 200 East, Ste. 250, Salt Lake Catly, Utah 84111 P.O. Box 1478, New York, New York 10027 37-63C 83rd Street, Suite 1B, Jackson Heights, New York 11372 \$52,433.25 \$25,000.00 \$25,000.00 N/A N/A N/A N/A Utah Health & Human Rights Project 20-3901845 501(c)(3) \$0.00 N/A Vibe Theater Experience Voces Latinas Corporation 20-0482372 501(c)(3) 20-2312651 501(c)(3) \$0.00 N/A \$0.00 N/A Voices UnBroken 1414 Metropolitan Avenue 2nd Floor, Bronx, New York 10462 158-24 73rd Avenue, Fresh Meadows, New York 11366 75-3077676 501(c)(3) \$25,000.00 \$0.00 N/A Women for Afghan Women Grand Total 02-0539734 501(c)(3) \$25,000 00 \$17,133,394.69 \$0.00 N/A N/A Social Justice Grants-General Operating Support

2010

Schedule | Grants and Other Assistance to Organizations, Governments and Individuals in the US

Schedule | (Form 990) 2010 Tides Center Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990. Part IV, line 22.

94-3213100

Part III can be duplicated if additional space is needed. (b) Number of (c) Amount of cash grant (e) Method of valuation (book, FMV, appraisal, other) (a) Type of grant or assistance (d) Amount of (f) Description of non-cash assistance recipients non-cash assistance 1 Fellowship, Sponsorship 125 163,011 N/A N/A 2 3 4 5 6 7 Supplemental Information. Complete this part to provide the information required in Part I. line 2, and any other additional information. Part IV Part I. Line 2 - Procedures for Monitoring Use of Grants Funds in U.S. Thorough due diligence is conducted in advance of funding to determine the group's tax-exempt status and whether the group is appropriate from a mission perspective. All grantees receive a written grant agreement which indicates whether lobbying is permissible and by accepting payment, the grantee agrees to the conditions of the award, which provide assurance that funds will not be used for any prohibited purpose. If a grant is restricted to a particular non-lobbying purpose, organizations further agree that (i) any portion of the grant not used for the stated purpose must be repaid, (ii) any change of purpose must be requested and approved in advance, in BAA Schedule | (Form 990) 2010 2010

Schedule I, Part IV - Supplemental Information

Tides Center

Page 3 94-3213100

Part I, Line 2 - Procedures for Monitoring Use of Grants Funds in U.S. (continued)

writing and (iii) not to use any portion of the grant to carry on propaganda or to attempt to influence specific legislation either by direct or grassroots lobbying.

Based on a risk assessment, a progress report may be required for certain grants nine months after the grant award. The grantee is asked to submit a two page narrative describing the use of the funds and activities undertaken as a result of the grant (including lobbying activity, if permitted), along with a financial report.

SCHEDULE J	Com	pensation Information	OMB No.	1545-004	47		
(Form 990)	For certain Officers, Di	rectors, Trustees, Key Employees, and Highest Compensated Employees	2010				
Department of the Treasury Internal Revenue Service	Complete if the organized	zation answered 'Yes' to Form 990, Part IV, line 23. orm 990. ► See separate instructions.					
Name of the organization		Employer identification	number		_		
Tides Center		94-3213100	1.1				
Part I Questions Re	garding Compensation				-		
1 a Check the appropriate I VII, Section A, line 1a	pox(es) if the organization provided a. Complete Part III to provide an	any of the following to or for a person listed in Form 990, Part y relevant information regarding these items.		Yes	No		
First-class or chain Travel for compar Tax indemnification Discretionary spe	nions on and gross-up payments	 Housing allowance or residence for personal use Payments for business use of personal residence Health or social club dues or initiation fees Personal services (e.g., maid, chauffeur, chef) 					
b If any of the boxes or reimbursement or pro	line 1a are checked, did the org vision of all of the expenses des	anization follow a written policy regarding payment or cribed above? If 'No,' complete Part III to explain	16				
2 Did the organization r trustees, and the CEC	equire substantiation prior to rein D/Executive Director, regarding th	mbursing or allowing expenses incurred by all officers, directors, ine items checked in line 1a?	2				
3 Indicate which, if any, CEO/Executive Direct	, of the following the organization or. Check all that apply.	n uses to establish the compensation of the organization's					
X Compensation co Independent com Form 990 of other	pensation consultant	X Written employment contract X Compensation survey or study X Approval by the board or compensation committee					
4 During the year, did a or a related organizat	ny person listed in Form 990, Pa ion:	art VII, Section A, line 1a with respect to the filing organization					
a Receive a severance	payment or change-of-control pa	yment from the organization or a related organization?			Х		
		al nonqualified retirement plan?			Х		
		ed compensation arrangement? de the applicable amounts for each item in Part III.	4c	100	Х		
		est complete lines 5-9.					
and the second second second second second			. 5a		х		
				1	Х		
	b, describe in Part III.						
contingent on the net	earnings of:	ne Ta, did the organization pay or accrue any compensation					
			-		X		
		***************************************	6b	-	Х		
7 For persons listed in f	b, describe in Part III. Form 990, Part VII, Section A, Iir	e 1a, did the organization provide any non-fixed payments not	1.0				
described in lines 5 ar	nd 6? If 'Yes,' describe in Part III	d or accrued pursuant to a contract that was subject to the initial	1.1		X		
contract exception de	scribed in Regulations section 53	3.4958-4(a)(3)? If 'Yes,' describe in Part III	. 8		X		
9 If 'Yes' to line 8, did th section 53,4958-6(c)?	ne organization also follow the re	ebuttable presumption procedure described in Regulations	9				

Schedule J (Form 990) 2010 Tides Center

94-3213100

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

	- 1	(B) Breakdown c	of W-2 and/or 1099-MISC	compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name			(ii) Bonus and incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	reported in prior Form 990 or Form 990-EZ
Drummond Pike	(i)	0.	0.	0.	0.	0.	0.	0.
1	(ii)	240,000.	0.	0.	12,000.	16,636.	268,636.	0
Carla Dartis	(i)	175,632.	0.	0.	5,104.	16,425.	197,161.	0
2	(ii)	0.	0.	0.	0.	0.	0.	0.
Thomas G. Davi	(i)	154,848.	0.	0.	4,645.	16,982.	176,475.	0
3	(ii)	0.	0.	0.	0.	0.	0.	0
Giovanna Taorm	(i)	157,500.	0.	0.	2,888.	8,170.	168,558.	0
4	(ii)	0.	0.	0.	0.	0.	0.	0
Daniel Weintra	(i)	170,000.	0.	0.	567.	9,181.	179,748.	0
5	(ii)	0.	0.	0.	0.	0.	0.	0
Alan Jenkins	(i)	184,363.	0.	0.	7,230.	23,796.	215,389.	0
6	(ii)	0.	0.	0.	0.	0.	0.	0
Nancy Soderber	(i)	154,500.	0.	0.	1,288.	836.	156,624.	0
7	(ii)	0.	0.	0.	0.	0.	0.	0
	(i)							
8	(ii)							
	(i)	and the second sec	and the second second		and the second	munter poor	And a second	A
9	(ii)							
	(i)							
10	(ii)							
	(i)			1	1.120-01-1-1-1-1-1		No. of Concession, No. 1	and the second s
11	(ii)							
	(1)	ber all and a set	Contraction of the	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	27010105.00000	7.1 55.000	150.00.0000000	67775777777
12	(i)							
	(i)	horana da mai	and the second s	states and the state			he no market	
13	(ii)							
2.7	(i)		the second s			Constant and	and the second second	A State of the second
14	(ii)							
	(1)			and a transfer				
15	(ii)							
	(i)			and an exchanged		a francisco de la sella sel		
16	Gi							
BAA				TEEA4102L 11	/15/10		Scher	dule J (Form 990) 201

Page 2

Schedule J (Form 990) 2010 Tides Center	94-3213100	Page
Part III Supplemental Information		
Complete this part to provide the information, explanation, or descriptions required for F this part for any additional information.	Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also co	omplete
BAA	Sahadula J	(Form 990) 201

Schedule J (Form 990) 2010

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SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

Complete if the organization answered
 'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
 Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No. 1545-0047 2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

Tides Center

94-3213100

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Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

-1	(a) Name of disqualified person	(b) Description of transaction		
1	(a) Name of disqualmed person		Yes	No
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

Enter the amount of tax imposed on the organization managers or disqualified persons during the year under 2 ►Ś section 4958

3	Enter the amount of tax, if any, on line 2, above, reimbursed by the organization	►

Part II Loans to and/or From Interested Persons.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 26 or Form 990-EZ, Part V, line 38a.

(a) Name of interested person and purpose	(b) Loan the orga	to or from inization?	(c) Original principal amount	(d) Balance due	(e) in c	lefault?	(f) App by boa commi	roved ard or ittee?	(g) Writter agreement	
	То	From			Yes	No	Yes	No	Yes	No
(1)										
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
10)										
otal			►\$	5		a a chuir a ch				

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance		
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

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

Schedule L (Form 990 or 990-EZ) 2010

				Yes	No
(1) Stephanie Clohesy	Director	13,800.	Consulting Fee		X
(2)					
(3)					
(4)	1				
(5)	····				
(6)					
(7)			***************************************		
(8)					
(9)					
(10)					
Part V Supplemental Information		L			
	nation for some on	aa ta guaatiana an Caba			
Complete this part to provide additio	nal information for respons	es to questions on Sche	dule L (see instructions).		

Part IV Business Transactions Involving Interested Persons. Complete if the organization answered 'Yes' on Form 990, Part IV, line 28a, 28b, or 28c.

(b) Relationship between interested person and the organization (c) Amount of transaction

Schedule L (Form 990 or 990-EZ) 2010

(a) Name of interested person

(e) Sharing of organization's revenues?

T

(d) Description of transaction

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047 2010

Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

Open To Public Inspection Employer identification number

94-3213100

Department of the Treasury Internal Revenue Service Name of the organization

Tides Center Part | Types of Property

га	rt i Al Types of Property	1	1	I	
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art-Works of art				
2	Art—Historical treasures.				
3	Art-Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes.				
8	Intellectual property				
9	Securities-Publicly traded	Х	58	268,181.	FMV
10	Securities-Closely held stock				
11	Securities-Partnership, LLC, or trust interests				
12	Securities-Miscellaneous				
13	Qualified conservation contribution– Historic structures				
14	Qualified conservation contribution-Other			· · · · · · · · · · · · · · · · · · ·	
15	Real estate–Residential				
16	Real estate-Commercial				
17	Real estate–Other			· · · · · · · · · · · · · · · · · · ·	
18	Collectibles				
19	Food inventory				-
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ► (Goods_In_Kind)	Х	25	21,248.	FMV
26	Other ► ()				
27	Other ► ()				
28	Other ► ()				
29	Number of Forms 8283 received by the organization completed Form 8283, Part IV, Done	on during th e Acknowled	e tax year for contributi dgement	ons for which the	29Yes No
30 a	During the year, did the organization receive by con- hold for at least three years from the date of the in purposes for the entire holding period?	nitial contrib	oution, and which is not	required to be used for	exempt
b	If 'Yes,' describe the arrangement in Part II.				
31	Does the organization have a gift acceptance polic	cy that requ	ires the review of any n	on-standard contributio	ns? 31 X
32 a	Does the organization hire or use third parties or r noncash contributions?	elated orga	nizations to solicit, proc	cess, or sell	32a X
b	If 'Yes,' describe in Part II.				

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

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

Schedule M (Form 990) 2010

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Schedule M (Form 990) 2010 Tides Center

Page 2

Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered 'Yes' to Form 990, Part IV, line 33, 34, 35, 36, or 37.
 ► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization

Tides Center

Part I Identification of Disregarded Entities (Complete if the organization answered 'Yes' to Form 990, Part IV, line 33.)

Grantmaking

(a) Name, address, and EIN of disregarded entit	y Primary ad	ctivity Legal dor	(c) nicile (state n country)	То	(d) tal income	End-c	(e) of-year assets	Direc	(f) entity	lling
(1) The Pathway Home, LLC 1014 Torney Avenue									6.75	
(2) San Francisco, CA 94129 26-1640175	Vetera Assista		CA		826,954.		316,591.	Tide	es Cei	nter
(3)										
(4)					T	T.				
(6)										
Part II Identification of Related Tax-Exempt one or more related tax-exempt organ	Organizations (Complete izations during the tax ye	l e if the organizatio ear.)	n answered	'Yes	' to Form 990), Part	IV, line 34 b	ecaus	e it ha	d
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Co section		(e) Public charity (if section 501	status (c)(3))	(f) Direct contro entity	olling	Sec 512 controlle	(b)(13) d entity?
(1) Tides Inc. PO Box 29907	- Exec/Admin Svcs for Related Orgs								Yes	No
(2) San Francisco, CA 94129 57-113809	_ & Facilities Mgt & Ops	CA	7	24	509(a)((1)	N/A			x
(3) Tides Two Rivers Fund PO Box 29198	- Dev & Operate						Tides			
(4) San Francisco, CA 94129 20-1588459	_ Multi-Tenant Non Profit Centers	CA	11, Typ	еI	509(a)((3)	Foundatic des Cen			х
(5) Tides Foundation PO Box 29903	-	1				-				

CA

(6) San Francisco, CA 94129

51-0198509

(7)

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509(a)(1)

Schedule R (Form 990) 2010

N/A

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OMB No. 1545-0047

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2010 Open to Public Inspection

Employer identification number 94-3213100

Schedule R (Form 990) 2010 Tides Center

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Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under	(f) Share of total income	(g) Share of end-of-year assets	Dispr	h) ropor- nate ntions?	K-1	Gene	i) ral or aging ner?	(k) Percentage ownership
		country)		sections 512-514)			Yes	No	(Form 1065)	Yes	No	
(1)												
]											
(2)												
	-											
(3)												
~	1											
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Part IV Identification of Related Organizations T line 34 because it had one or more related	axable as a Co d organizations	rporation or T treated as a c	rust (Complete corporation or	e if the organiz trust during th	ation answered 'Ye e tax year.)	es' to Form 990, Pa	art IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile	(d)	(e) Type of entity	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
<u>(1)</u>							
(2)							
						Sabadula D (Far	000) 0010

Page 3

Part V Transactions With Related Organizations (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34, 35, 35a, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Ye	s No
1 During the tax year did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		11	
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		X
b Gift, grant, or capital contribution to other organization(s)		b X	
c Gift, grant, or capital contribution from other organization(s)	10	X	
d Loans or loan guarantees to or for other organization(s)		1	X
e Loans or loan guarantees by other organization(s)		-	X
f Sale of assets to other organization(s)			X
g Purchase of assets from other organization(s)	1.	1	X
h Exchange of assets	1H	1	X
i Lease of facilities, equipment, or other assets to other organization(s).			X
j Lease of facilities, equipment, or other assets from other organization(s)	1j	X	
k Performance of services or membership or fundraising solicitations for other organization(s)		<	X
I Performance of services or membership or fundraising solicitations by other organization(s)	1		X
m Sharing of facilities, equipment, mailing lists, or other assets		n X	
n Sharing of paid employees		n X	
o Reimbursement paid to other organization for expenses		o X	
p Reimbursement paid by other organization for expenses.	1	p X	
q Other transfer of cash or property to other organization(s)		9	X
r Other transfer of cash or property from other organization(s).		r	X

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) Tides Inc.	t	405,683.	Cash
(2) Tides Inc.	m	559,448.	Cash
(3) Tides Inc.	n	1,816,688.	Cash
(4) Tides Inc.	0	393,122.	Cash
(5) Tides Inc.	q	657,475.	Cash
(6) Tides Two Rivers Fund	t l	196,496.	Cash
BAA TEEA5003L 12/23	/10	Sche	dule R (Form 990) 2010

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Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered 'Yes' to Form 990, Part IV, line 37.)

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	Are all sec 501(organiz	d) partners tion c)(3) rations?	(e) Share of end-of-year assets	(Dispr tior alloca	f) opor- nate tions?	in box 20 of	(h Gener mana partr	ral or
			Yes	No		Yes	No		Yes	No
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(2)										1
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										1
<u>(3)</u>							<u> </u>			
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Part VII Supplemental Information

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

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94-3213100 Continuation Page 1 of 1

Part II Continuation of Identification of Related Tax-Exempt Organizations

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity	Controlle	G) 2(b)(13) ed entity?
						Yes	No
Tides_Center_PA Box 29907							
San Francisco, CA 94129	Program						
94-3349769	Management	PA	11, Type I	509(a)3	Tides Center	<u></u>	X
Tides_Network	Support Tides						
PO Box 29198	Foundation, The						
San Francisco, CA 94129	Tides Center,						
20-3395198	and Tides, Inc	CA	11, Type II	509(a)3	N/A		Х
The Advocacy Fund PO Box 29229							
San Francisco, CA 94-3153687	Grantmaking, Project Services	СА	501(c)4	N/A	N/A		X
	·						
	-						
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Schedule R Cont (Form 990) 2010 Tides Center

94-3213100 Continuation Page 1 of 1

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(A) Name of other organization	(B) Transaction type (a-r)	(C) Amount involved	(d) Method of determining amount involved
Tides Foundation	b	13,892,265.	Cash
Tides Foundation	с	4,866,220.	Cash
Tides Foundation	n	33,339.	Cash
Tides Foundation	0	8,569.	Cash
Tides Foundation	p	469,474.	Cash
	;		
		-	

SCHI (Form	EDU	JLE	0	
(Form	990	or 9	90-E	Z)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ. OMB No. 1545-0047 2010 Open to Public Inspection

Name of the organization Tides Center

Department of the Treasury Internal Revenue Service

Employer identification number 94-3213100

Form 990. Part III. Line 1 - Organization Mission
The Tides Center operates projects promoting shared principles of social justice and
a_sustainable,_healthy_society
The Center's work is organized in three main issue_areas / programs: Community
Development & Services, Environment & Health, and Policy, Strategy & Global
Initiatives. We supported a total of 226 projects with more than 500 employees and
hundreds of grants_that_do_work_in_the_following_areas
Form 990, Part III, Line 4b - Program Service Accomplishments
The Environment & Health program engages in a wide spectrum of activities to promote
a healthy, just, and sustainable world locally and globallyThe environmental
component promotes_integrated_approaches_to_sustainability_that_combine_or_cross
issues_of_environmental_protection,_sustainable_resource_use,_green_jobs_and
economies, and environmental justice. Programmatic activities include working to
combat_global_warming, promoting alternative energies, establishing_environmentally
sustainable business practices, encouraging voter participation on environmental
issues, and educating the publicThe health component works across the full
spectrum of health-related issues, from increasing healthcare access for underserved
populations to health care reform and policy, and from reproductive justice to
providing research and resources on specific health issues including HIV/AIDS,
schizophrenia, hepatitis C, and cancer.
Form 990, Part III, Line 4c - Program Service Accomplishments
The Community Development & Services program works to reestablish the social,
economic, spiritual, and cultural foundations of community by creating new and
creative solutions and working to combat structural inequalities at the local level
to positively impact society at large. This program aims to promote localization,

rm 990, Part III, Line 4c - Program Service Accomplishments claim control of community resources, establish participatory de chanisms, and achieve improvements in livelihoods, social infras- cal environment. While the strategies to achieve these goals van ojects deliver or improve direct services; provide education and critical issues; engage in grassroots organizing; build capacit cations or populations; and promote problem-solving that support rtnership and collaboration. Populations that benefit from the v velopment & Services projects range from youth, the LGBT communi derly to the incarcerated, victims of domestic abuse, and the form rtnewy Home provides a residential recovery program specifically dicated to serve veterans who have served in areas of the world ghanistan and Iraq. The goal of Pathway is to provide a comprefi- eatment and support for its warriors so that they can continue to ressors of war or combat or other traumatic military-related str	tructure, and the ies, most often training programs y in specific s local ork of Community ty, and the
claim control of community resources, establish participatory de chanisms, and achieve improvements in livelihoods, social infras cal environment. While the strategies to achieve these goals van ojects deliver or improve direct services; provide education and critical issues; engage in grassroots organizing; build capacit cations or populations; and promote problem-solving that support rtnership and collaboration. Populations that benefit from the v velopment & Services projects range from youth, the LGBT communi derly to the incarcerated, victims of domestic abuse, and the for rm 990, Part III, Line 4d - Other Program Services Description thway Home provides a residential recovery program specifically dicated to serve veterans who have served in areas of the world ghanistan and Iraq. The goal of Pathway is to provide a compref eatment and support for its warriors so that they can continue to ressors of war or combat or other traumatic military-related str	tructure, and the ies, most often training programs y in specific s local ork of Community ty, and the
chanisms, and achieve improvements in livelihoods, social infras cal environment. While the strategies to achieve these goals van ojects deliver or improve direct services; provide education and critical issues; engage in grassroots organizing; build capacit cations or populations; and promote problem-solving that support rtnership and collaboration. Populations that benefit from the v velopment & Services projects range from youth, the LGBT communi derly to the incarcerated, victims of domestic abuse, and the for rm 990, Part III, Line 4d - Other Program Services Description thway Home provides a residential recovery program specifically dicated to serve veterans who have served in areas of the world ghanistan and Iraq. The goal of Pathway is to provide a compref eatment and support for its warriors so that they can continue to ressors of war or combat or other traumatic military-related str ressors of war or combat or other traumatic military-related str	tructure, and the ies, most often training programs y in specific s local ork of Community ty, and the
cal environment. While the strategies to achieve these goals van ojects deliver or improve direct services; provide education and critical issues; engage in grassroots organizing; build capacit cations or populations; and promote problem-solving that support rtnership and collaboration. Populations that benefit from the v velopment & Services projects range from youth, the LGBT communi derly to the incarcerated, victims of domestic abuse, and the for rm 990, Part III, Line 4d - Other Program Services Description thway Home provides a residential recovery program specifically dicated to serve veterans who have served in areas of the world ghanistan and Iraq. The goal of Pathway is to provide a compreh eatment and support for its warriors so that they can continue to ressors of war or combat or other traumatic military-related str rm 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder	ies, most often training programs y in specific s local ork of Community ty, and the
ojects deliver or improve direct services; provide education and critical issues; engage in grassroots organizing; build capacit cations or populations; and promote problem-solving that support rtnership and collaboration. Populations that benefit from the v velopment & Services projects range from youth, the LGBT communi derly to the incarcerated, victims of domestic abuse, and the for rm 990, Part III, Line 4d - Other Program Services Description thway Home provides a residential recovery program specifically dicated to serve veterans who have served in areas of the world ghanistan and Iraq. The goal of Pathway is to provide a compref eatment and support for its warriors so that they can continue to ressors of war or combat or other traumatic military-related str	training programs y in specific s local ork of Community ty, and the
critical issues; engage in grassroots organizing; build capacit cations or populations; and promote problem-solving that support rtnership and collaboration. Populations that benefit from the v velopment & Services projects range from youth, the LGBT communi derly to the incarcerated, victims of domestic abuse, and the for rm 990, Part III, Line 4d - Other Program Services Description thway Home provides a residential recovery program specifically dicated to serve veterans who have served in areas of the world ghanistan and Iraq. The goal of Pathway is to provide a compref eatment and support for its warriors so that they can continue to ressors of war or combat or other traumatic military-related str	y in specific s local ork of Community ty, and the
cations or populations; and promote problem-solving that support rtnership and collaboration. Populations that benefit from the v velopment & Services projects range from youth, the LGBT communi derly to the incarcerated, victims of domestic abuse, and the for rm 990, Part III, Line 4d - Other Program Services Description thway Home provides a residential recovery program specifically dicated to serve veterans who have served in areas of the world ghanistan and Iraq. The goal of Pathway is to provide a compret eatment and support for its warriors so that they can continue to ressors of war or combat or other traumatic military-related str rm 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder	s local ork of Community ty, and the
rtnership and collaboration. Populations that benefit from the v velopment & Services projects range from youth, the LGBT communi derly to the incarcerated, victims of domestic abuse, and the for rm 990, Part III, Line 4d - Other Program Services Description thway Home provides a residential recovery program specifically dicated to serve veterans who have served in areas of the world ghanistan and Iraq. The goal of Pathway is to provide a compref eatment and support for its warriors so that they can continue to ressors of war or combat or other traumatic military-related str rm 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder	ork of Community
velopment & Services projects range from youth, the LGBT communi derly to the incarcerated, victims of domestic abuse, and the for rm 990, Part III, Line 4d - Other Program Services Description thway Home provides a residential recovery program specifically dicated to serve veterans who have served in areas of the world ghanistan and Iraq. The goal of Pathway is to provide a compref eatment and support for its warriors so that they can continue t ressors of war or combat or other traumatic military-related str rm 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder	ty, and the
derly to the incarcerated, victims of domestic abuse, and the form 990, Part III, Line 4d - Other Program Services Description thway Home provides a residential recovery program specifically dicated to serve veterans who have served in areas of the world ghanistan and Iraq. The goal of Pathway is to provide a compret eatment and support for its warriors so that they can continue to ressors of war or combat or other traumatic military-related str mm 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder	
rm 990, Part III, Line 4d - Other Program Services Description thway Home provides a residential recovery program specifically dicated to serve veterans who have served in areas of the world ghanistan and Iraq. The goal of Pathway is to provide a compreh eatment and support for its warriors so that they can continue t ressors of war or combat or other traumatic military-related str rm 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder	
thway Home provides a residential recovery program specifically dicated to serve veterans who have served in areas of the world ghanistan and Iraq. The goal of Pathway is to provide a compreh eatment and support for its warriors so that they can continue t ressors of war or combat or other traumatic military-related str rm 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder	rmerly homeless.
dicated to serve veterans who have served in areas of the world ghanistan and Iraq. The goal of Pathway is to provide a compre- eatment and support for its warriors so that they can continue t ressors of war or combat or other traumatic military-related str rm 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder	
ghanistan and Iraq. The goal of Pathway is to provide a compreheatment and support for its warriors so that they can continue to ressors of war or combat or other traumatic military-related strong ressons of war or combat or other traumatic military-related strong ressons of war or combat or other traumatic military-related strong ressons of war or combat or other traumatic military-related strong ressons of war or combat or other traumatic military-related strong ressons of war or combat or other traumatic military-related strong ressons of war or combat or other traumatic military-related strong ressons of the strong ressons respectively. The strong ressons respectively are strong respectively and the strong ressons respectively are strong respectively. The strong ressons respectively are strong respectively are strong respectively are strong respectively are strong respectively. The strong respectively are strong respectively are strong respectively are strong respectively. The strong respectively are strong r	created for, and
eatment and support for its warriors so that they can continue t ressors of war or combat or other traumatic military-related str rm 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder	such as
ressors of war or combat or other traumatic military-related str rm 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder	ensive program of
rm 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder	o recover from the
	essors
rm 990, Part VI, Line 7b - Decisions of Governing Body Approval by Members or Sha	
rtain decisions of the Tides Center are subject to the approval	
rm 990, Part VI, Line 11b - Form 990 Review Process	
e Form 990 is made available to the full Board, and the Audit Co	
unsel review prior to submission.	

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Schedule 0 (Form 990 or 990-EZ) 2010		Page 2
Name of the organization Tides Center	Employer identification number 94-3213100	
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Cor	nflicts	
On an annual basis, the directors, officers and key employees a	are requested to	
complete a conflict of interest disclosure survey		
Form 990, Part VI, Line 15a - Compensation Review & Approval Process for CEO, E	xec. Dir., or Top Mgtment	t
The Tides Network Board of Directors personnel committee is tag	sked with reviewing	
the CEO performance and compensation annually. Compensation st	udies are used for	
top management and other officers and employees.		
Form 990, Part VI, Line 15b - Compensation Review & Approval Process for Officer	s & Key Employees	
The Tides Network Board of Directors personnel committee is tag	sked with reviewing	
the CEO performance and compensation annually. Compensation st	udies are used for	
top management and other officers and employees.		
Form 990 , Part VI, Line 17 - List of States which this Return is Filed		
AL AK AZ AR CA CO CT DC FL GA HI IL KS KY LA ME MD MA MI MN MO	MS NH NM NJ NY NC	
ND OH OK OR PA RI SC TN UT VA WA WV WI		
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available		
The Organization's federal exemption application, each year's H	Form 990 and audited	1
financial statements are available to the public upon request.		

1 8

2010	Schedule O - Supplemental Information	Page 2
	Tides Center	94-3213100
Form 990, Parl Other Change	t XI, Line 5 s in Net Assets or Fund Balances	
Net Unreali:	zed Gains or Losses on Investments	254,146. 254,146.

Form	990

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)

OMB	No.	154	5-004	\$7
2	20	0	9	

Open to Public Inspection	in

Form 990 (2009)

TEEA0113L 12/29/09

Dep Inte	artment rnal Rev	of the Treasury enue Service		The organization may have to use a contract of the organization may h	opy of this return to sati	sfy state report	ing requirements.	Open	to Public Inspection
	For th	ne 2009 calenda	r year, o	r tax year beginning	, 200	9, and endir	g	1	
в		f applicable:		С				ployer Identific	cation Number
	Ad		lease use IRS label	Tides Center			94	4-32131	00
		ame change	or print or type.	PO Box 29907			E Tele	ephone numbe	r
	Н	tial return	See specific	San Francisco, CA 941	L29-0907		(4	415) 56	1-6300
	H	ermination	Instruc- tions.						
		nended return					G Gro	ss receipts \$	74,223,034.
			F Name a	nd address of principal officer: Lori	Eason		H(a) Is this a group r		
				As C Above	habon		H(b) Are all affiliates		Yes No
-	Tax	-exempt status			4947(a)(1) or	527	If 'No,' attach a	list. (see instru	uctions)
-		of the local data is the subscription of the local data is t		s.org	4947(a)(1) U	527			
J		in the second	and the second se				H(c) Group exemption		
K		of organization:		tion Trust Association Oth	her ► L	. Year of Forma	tion: 1994	VI State of leg	al domicile: CA
l.st.	art I	Summar							
				anization's mission or most signifi					
ee		<u>social ch</u>	<u>ange</u>	and_educational_progr	ams				
nan									
ver									
ŝ				if the organization discontinued its bers of the governing body (Part V					7
8			-	t voting members of the governing					7
Activities & Governance			-	/ees (Part V, line 2a)					847
tivi				eers (estimate if necessary).					0
ĕ				usiness revenue from Part VIII, co					0.
	b	Net unrelated b	ousiness	taxable income from Form 990-T,	line 34			7b	0.
							Prior Ye	ar	Current Year
	8	Contributions a	nd grant	is (Part VIII, line 1h)			. 88,985	,021.	60,111,511.
Revenue				ue (Part VIII, line 2g)					8,109,291.
evel				rt VIII, column (A), lines 3, 4, and					863,463.
ď	11	Other revenue	(Part VI	II, column (A), lines 5, 6d, 8c, 9c,	10c, and 11e)		. 129	,693.	-112,697.
	12	Total revenue -	– add lir	es 8 through 11 (must equal Part	VIII, column (A), li	ne 12)	. 97,956	,171.	68,971,568.
	13	Grants and sim	ilar amo	unts paid (Part IX, column (A), lin	es 1-3)		17,919	,104.	5,959,805.
	14	Benefits paid to	o or fo <mark>r r</mark>	nembers (Part IX, column (A), line	e 4)				
	15	Salaries, other	compen	sation, employee benefits (Part IX	, column (A), lines	s 5-10)	. 34,635	,038.	37,463,055.
Expenses	16a	Professional fu	ndraisin	g fees (Part IX, column (A), line 1	le)		. 232	,916.	197,706.
ben				ses (Part IX, column (D), line 25)				<u> </u>	
ŭ								166	24 200 624
	ł	-		X, column (A), lines 11a-11d, 11f-2					34,298,634.
	1	-		ies 13-17 (must equal Part IX, colu					77,919,200.
_	19	Revenue less e	expenses	s. Subtract line 18 from line 12			11,761	,947.	-8,947,632.
Net Assets or Fund Balances							Beginning o		End of Year
aset 3alai	1	•		ne 16)			86,708		77,764,176.
et A	21	Total liabilities	(Part X,	line 26)		• • • • • • • • • • •	6,612		8,207,246.
				nces. Subtract line 21 from line 20) <u></u>		80,096	,490.	69,556,930.
L.	irt II	Signatur	re Bloc	k					
		Under penalties (true,	of periury	L declare that I have examined this return, in r) i	cluding accompanying so	chedules and st	atements, and to the l	pest of my kno	wledge and belief, it is
		uue,			s based on an informatio	on or which pre	parer has any knowled	.ge.	
Sig								_	
He	re	Signature of	officer		· .		Date	1	1.
		Lori	EO	uson Dir. of	tinan	ce	/	1/13	10
		Type or print	t name and	1 title.					
						Date	Check if	Prep	parer's identifying number instructions)
Pa		Preparer's				11/13/	self- employed	► [(000	
Pr		signature	Card	ol Duffield 🗸 🗸		ן כין יי			A
pa	rer's	Firm's name (or		anello, Duffield & Of	take, LLP				
Us Or		yours if self- employed),		Montgomery Street, Su:	the second s		EIN ►	N/A	
Ur	''Y	address, and ZIP + 4		Francisco, CA 94104			Phone no.	1	983-0200
Ma	the II			vith the preparer shown above? (se	ee instructions)		17 10000 110.	(110)	Yes X No

BAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

1	990 (2009) Tides Center III Statement of Program S	Service Accompl	ishments		94-3	3213100	Page
	Briefly describe the organization's miss		ISIIIIeiits	18 m x			
	See Schedule O						
-							
ł	Did the organization undertake any sigr Form 990 or 990-EZ?					Yes	X No
	f 'Yes,' describe these new services on		· · · · · · · · · · · · · · · · · · ·			Yes	X No
	Did the organization cease conducting, f 'Yes,' describe these changes on Sch		hanges in now it co	nducts, any proj		i res	
4 1	Assoribe the exempt purpose achievem	ents for each of the o	rganization's three	largest program	services by expenses	Section 501(c)	(3)
;	and 501(c)(4) organizations and section expenses, and revenue, if any, for each) 4947(a)(1) trusts are	e required to report	the amount of g	rants and allocations	to others, the tot	aĺ
	Code:) (Expenses \$ See_Schedule_0						
_							
_			_				
_			_			-	
-							
-				_			
-		_					
-							
-		_			_		
-		_					
-							
	Code:) (Expenses \$	19,349,224. in	cluding grants of	\$1,008	<u>, 410.</u>) (Revenue	\$1,409	,908
	Code:) (Expenses \$ See_Schedule_O				<u>, 410.</u>) (Revenue		<u>, 908</u>
							<u>, 908</u>
- - - - - - - - - - - - - - - - - - -		<u>17,735,276.</u> in		\$ <u>1,004</u>	<u>, 723.</u>) (Revenue	\$ 4,150	, 420
- - - - - - - - - - - - - - - - - - -	See_Schedule_O	<u>17,735,276.</u> in		\$ <u>1,004</u>	<u>, 723.</u>) (Revenue	\$ 4,150	, 420
	See_Schedule_O	<u>17,735,276.</u> in		\$ <u>1,004</u>	<u>, 723.</u>) (Revenue	\$ 4,150	, 420
- - - - - - - - - - - - - - - - - - -	See_Schedule_O	<u>17,735,276.</u> in		\$ <u>1,004</u>	<u>, 723.</u>) (Revenue	\$ 4,150	, 420
	See_Schedule_O	<u>17,735,276.</u> in	cluding grants of	\$ <u>1,004</u>	<u>, 723.</u>) (Revenue	\$, 420
	See_Schedule_O	<u>17,735,276.</u> in	cluding grants of	\$ <u>1,004</u>	<u>, 723.</u>) (Revenue	\$, 420
	See_Schedule_O	<u>17,735,276.</u> in	cluding grants of	\$ <u>1,004</u>	<u>, 723.</u>) (Revenue	\$, 420
<u>c</u>	See_Schedule_O	<u>17,735,276.</u> in	cluding grants of	\$ <u>1,004</u>	<u>, 723.</u>) (Revenue	\$, 420
<u>c</u>	See_Schedule_O	<u>17,735,276.</u> in	cluding grants of	\$ <u>1,004</u>	<u>, 723.</u>) (Revenue	\$, 420 .
<u>c</u>	See_Schedule_O	<u>17,735,276.</u> in	cluding grants of	\$ <u>1,004</u>	<u>, 723.</u>) (Revenue	\$, 420 .
	See_Schedule_O		cluding grants of	\$ <u>1,004</u>	<u>, 723.</u>) (Revenue	\$, 420 .

Form 990 (2009) Tides Center Part IV Checklist of Required Schedules

94-3213100	Page 3
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II.	4	x	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I.	6	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If 'Yes,' complete Schedule D, Part IV</i> .	9		x
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If</i> 'Yes,' complete Schedule D, Part V	10		Х
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.	11	x	
•	Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI.			
•	Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII			
•	Did the organization report an amount for investments- program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII.			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organizaiton's liability for uncertain tax positions under FIN 48? If 'Yes,' complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII.	12		<u> </u>
12/	Was the organization included in consolidated, independent audited financial statement for the tax Yes No year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional 12 A X			
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E.	13		Х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If 'Yes,' complete Schedule F, Part L</i>	14b	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If 'Yes,' complete Schedule F, Part II</i>	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If 'Yes,' complete Schedule F, Part III.</i>	16		X
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? <i>If 'Yes,' complete Schedule G, Part I</i>	17	Х	
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.	18	X	<u></u>
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		Х
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		Х

Form 990 (2009) Tides Center Part IV Checklist of Required Schedules (continued)

ra	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and IL	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	Х	
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete</i>	23	х	
	Schedule J.	23	-	
24	a 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, and that was issued after December 31, 2002? <i>If 'Yes,' answer lines 24b through 24d and</i> <i>complete Schedule K. If 'No,'go to line 25</i>	24a		x
t	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24 c		
c	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a 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		<u>x</u>
ł	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
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? <i>If 'Yes,' complete Schedule L, Part III</i>	27		<u> </u>
28	Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
ā	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV.	28a		Χ
ł	A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28 c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M.	29	_X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I</i>	33	x	
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34	х	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI.	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.	38	X	

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Form 990 (2009)

Form 990 (2009) Tides Center 94-321310	<u>)0</u>	Page 5
Part V Statements Regarding Other IRS Filings and Tax Compliance		
		Yes No
1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	3	
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	_1c	X
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 84 ⁻	7	
2b 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 this return. (see instructions)		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	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)?	4 a	X
b If 'Yes,' enter the name of the foreign country: ►	_	
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		<u> </u>
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	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 deductible?	6Ь	
7 Organizations that may receive deductible contributions under section 170(c).		
a 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
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		X
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X
d If 'Yes,' indicate the number of Forms 8282 filed during the year		
 e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 	7e	X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	Х
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	x
9 Sponsoring organizations maintaining donor advised funds.		
a Did the organization make any taxable distributions under section 4966?	9a	X
b Did the organization make any distribution to a donor, donor advisor, or related person?	9b	X
10 Section 501(c)(7) organizations. Enter:		
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 10 b	1	
11 Section 501(c)(12) organizations. Enter:	7	
a Gross income from other members or shareholders		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	1	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year		

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Form 990 (2009)

Form 990 (2009) Tides Center

Part VI

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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.

Section A. Governing Body and Management			
		Yes	No
1a Enter the number of voting members of the governing body 1a 7			
b Enter the number of voting members that are independent			
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?See. Schedule .0.	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 organizational documents	4		X
since the prior Form 990 was filed?	5		x
6 Does the organization have members or stockholders? See . Schedule . 0	6	Х	
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Х	
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?. See Sch. 0	7 b	Х	
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a The governing body?	8a	Х	
b Each committee with authority to act on behalf of the governing body?	8 b	Х	
9 Is there any officer, director or 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

Revenue	Code.)

		Yes	No
10 a Does the organization have local chapters, branches, or affiliates?			Х
b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	X	
11ADescribe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O			
12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13.	12a	Х	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	х	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is doneSee.Schedule O	12c	x	
13 Does the organization have a written whistleblower policy?	13	X	
14 Does the organization have a written document retention and destruction policy?	14	Х	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a The organization's CEO, Executive Director, or top management official	15a	Х	
b Other officers of key employees of the organizationSee.Schedule.0	15b	Х	
If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		<u>X</u>
b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Section C. Disclosures			

17	List the states	with which a copy	of this Form 9	190 is required to be	e filed ► <u>See</u>	<u>Schedule_0</u>
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			90-T (501(c)(3)s only) available for public
inspection. Indicate h	ow you make these available. Ch		
Own website	X Another's website	X Upon request	

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

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

► Lori Eason PO Box 29907 San Francisco, CA 94129-0907 (415) 561-6300

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations's tax year. Use Schedule J-2 if additional space is needed.

• 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. See instructions for definition of 'key employees.'

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did not compensate any current officer, director, or trustee.

(A)	(B)			(c)			(D)	(E)	(F)
Name and Title	Average hours		T			that app		Reportable compensation from	Reportable compensation from	Estimated amount of other
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
Drummond Pike										
CEO/Ex Officio	2	X		X				0.	216,960.	27,741.
Dan Carol										
Director	1	X			ļ			0.	0.	0.
John O'Neil	_							_		
Director	1	X						0.	0.	0.
Lawrence Litvak	_									0
Dir./Vice Chair	1	X		X				0.	0.	0.
<u>Maya Wiley</u>	-							100.000		5 0 7 6
Director	40	X						120,000.	0.	5,076.
Noa Emmett Aluli, MD	4									0
Director	1	X						0.	0.	0.
Stephanie Clohesy	_								0	0
Director/Chair	1	X		X				0.	0.	0.
Kim Sarnecki				37				0		0 600
Secretary	0.5			Х		ļ		0.	65,501.	8,620.
Lori Eason	- 40			v				120 202	0.	7 400
Treasurer	40			Х				126,263.	0.	7,498.
Ellen_Friedman	-			v				0.	178,630.	20 707
Executive VP	8			Х				0.	1/8,030.	29,797.
Carla_Dartis	- 40				х			150 200	0.	17 064
Managing Director	40							158,200.		17,964.
Thomas G. David	24					x		168,300.	0.	19,087.
Proj Sr Strtgst	24							100,300.	0.	19,007.
Giovanna Taormina	40					x		166,875.	0.	4,831.
Project Dir.	40	-				~		100,075.	0.	4,031.
Shamil Idriss	40					х		175,234.	0.	5,721.
Project Dir.	40							115,254.		5,721.
Alan Jenkins	40					Х		173,880.	0.	24,398.
Project Dir. Jane Stafford	40					^		,000.		24,330.
Managing Dir	40					Х		144,834.	0.	24,563.
Manaying Dii	40							111,004.		24,000.
	-									
		L					Ì			

Form 990 (2009) Tides Center									94-3213	100 Page 8
Part VII Section A. Officers, Directors, Trus	tees, l	Key	Er	npl	oye	ees,	ar	nd Highest Co	mpensated E	mployees (cont.)
(A)	(B)			(((D)	(E)	(F)
Name and Title	Average hours per week	L	io Institutional trustee	check Officer	T	at Highest compensation employee	ply) Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation fror related organization (W-2/1099-MISC)	Estimated amount of other organization and related organizations
						ted				
1 b Total							•	1,233,586.	461,09	1. 175,296.
2 Total number of individuals (including but not limited from the organization ► 39	to thos	e list	ted :	abov	ve) \	who	rece	eived more than \$	100,000 in repor	table compensation
3 Did the organization list any former officer, director of on line 1a? If 'Yes,' complete Schedule J for such ind	dividual	• • • •		· · ·						3 X
4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater th individual.						• • • •				<u>4 X</u>
5 Did any person listed on line 1a receive or accrue co rendered to the organization? If 'Yes,' complete Scherendered	mpensa edule J	ation <i>for s</i>	fror such	m ar 1 <i>per</i>	ny u rson	nrela	ated	organization for s	services	5 X
Section B. Independent Contractors 1 Complete this table for your five highest compensate compensation from the organization.	d indep	ende	ento	cont	ract	ors t	hat	received more that	an \$100,000 of	
(A) Name and business address			010	12				(B) Description c Socl Media Re	of Services	(C) Compensation 204, 557.
Jeffrey B Reifman 700 North 67th Street, Seat Participata, LLC 1707 Eye Street, Bakersfield					5			Consulting Sv		196,695.
Manatt Health Solutions 11355 West Olympic Bl						1614		Consulting Sv		183,629.
CMP Group, LLC 25 Fifth Avenue, New York, NY							-	Consulting Sv		155,798.
Hood & Strong, LLP 100 First Street, 14th Flo		F, C	CA S	9410	05-4	4631		Audit Service	S	144,100.
2 Total number of independent contractors (including b \$100,000 in compensation from the organization ►		imite	d to	tho	se l	istec	l ab	ove) who received	d more than	

\$100,000 in compensation from the organization ► 5

Form 990 (2009) Tides Center Part VIII Statement of Revenue

Page 9

1.54						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
s o	1a	Federated campaigns.		1a					
ANT	b	Membership dues		1 b					
MOL	с	Fundraising events		1c	274,720.]			
FTS R A		Related organizations.		1 d	5,395,390.				
ULA CI		Government grants (contributi	_	1 e	7,783,723.	1			
		•			· · · · ·	1			
HEF	t	All other contributions, gifts, similar amounts not included		1f	46,657,678.				
TRIE	a	Noncash contribns included in				1			
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS		Total. Add lines 1a-1f				60,111,511.			
				T	Business Code				
ENU	2 a	Program Revenu	es	F	900099	8,109,291.	8,109,291.		
REV	b					,			
PROGRAM SERVICE REVENUE	c								
ERV	d								
S M	e								
GRA		All other program service							
PRO	q	Total. Add lines 2a-2f.			· · · · · · · · · · · · · · · · · · ·	8,109,291.			
		Investment income (incl	luding divid	ends	, interest and	930,343.			930,343.
		other similar amounts). Income from investmen							550, 545.
	4	Royalties		•	•				· · · · · · · · · · · · · · · · · · ·
ĺ	5	Royallies	(i) Rea		(ii) Personal				
	<i>c</i> -	Gross Rents	() ()		(ii) Fersoniai				
		Less: rental expenses Rental income or (loss)							
		. ,							
		Net rental income or (lo	(i) Securit		(ii) Other				
[7a	Gross amount from sales of assets other than inventory .	4,897,4						
			4,057,-	11/.	•				
	b	Less: cost or other basis and sales expenses.	4,964,3	327					
	~	Gain or (loss)							
		Net gain or (loss)				-66,880.			-66,880.
ĺ									
IUE	8a	Gross income from function (not including. \$	274.72	nts 0.					
VENI		of contributions reported							
OTHER REVEN		See Part IV, line 18			174,442.				
HER	Ь	Less: direct expenses.							
5		Net income or (loss) fro				-112,697.			-112,697.
		Gross income from gam	ning activitie	es.		,			,
		See Part IV, line 19							
		Less: direct expenses Net income or (loss) fro							
			-			l	l		
	10 a	Gross sales of inventory and allowances							
	b	Less: cost of goods sold	1	b					
		Net income or (loss) from							
		Miscellaneous Reven	ue		Business Code				
	11 a								
	b								
	с								
		All other revenue							
		Total. Add lines 11a-11c							
	12	Total revenue. See instr	uctions	<u></u>		68,971,568.	8,109,291.	0.	750,766.

Part IX Statement of Functional LApenses

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

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

Do 1 6b, 1	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	5,773,915.	5,773,915.		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	157,430.	157,430.		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	28,460.	28,460.		
4	Benefits paid to or for members	20,100.	20,1001		
5	Compensation of current officers, directors, trustees, and key employees.	435,001.	435,001.	0.	0
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0
7	Other salaries and wages	30,042,642.	24,281,086.	2,973,203.	2,788,353
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	608,380.	476,851.	77,538.	53,991
9	Other employee benefits	3,888,383.	3,022,609.	523,436.	342,338
10	Payroll taxes.	2,488,649.	2,046,902.	210,623.	231,124
11	Fees for services (non-employees).	,,,	, , , , , , , , , , , , , , , , , , , ,	,	
	Management.				
	Legal	332,924.	290,994.	41,930.	
	Accounting	181,779.	27,697.	154,082.	
	Lobbying				
	Prof fundraising svcs. See Part IV, In 17	197,706.			197,706
	Investment management fees	95,631.	8,843.	86,788.	
	Other				
-	Advertising and promotion	1,228,347.	1,097,531.	6,145.	124,671
13	Office expenses	2,808,284.	2,356,165.	186,559.	265,560
14	Information technology	682,092.	509,727.	114,681.	57,684
15	Royalties				
16	Occupancy	4,275,580.	3,631,913.	518,414.	125,253
17	Travel	3,133,958.	2,725,413.	99,377.	309,168
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,071,831.	923,572.	43,386.	104,873
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	468,562.	402,342.	66,220.	
23	Insurance	407,320.	403,858.	3,462.	
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25				
	below.).		10 405 000	210 016	1 410 100
	Consultants & Contractors	14,065,567.	12,435,368.	218,016.	1,412,183
	Shared Services	2,572,293.	<u> </u>	2,223,711. 79,370.	
	P/Y & C/Y Write-offs	<u>994,381</u> . 923,843.	817,863.	12,840.	93,140
	Other Professional Services	516,037.	454,813.	9,623.	51,601
	Other Project Expenses	516,037.	454,813.	75,980.	20,071
	All other expenses.	77,919,200.	64,016,100.	7,725,384.	6,177,716.
	Total functional expenses. Add lines 1 through 24f.	11, 313, 200.	04,010,100.	1,123,304.	
2b	Joint costs. Check here ► if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Form 990 (2009) Tides Center Part X Balance Sheet

	чX	Balance Sheet			·	
				(A) Beginning of year		(B) End of year
Т	1	Cash – non-interest-bearing.		1,148,664.	1	265,844
		Savings and temporary cash investments		21,082,474.	2	10,548,394
		Pledges and grants receivable, net.		34,049,475.	3	22,477,922
		Accounts receivable, net.		551,877.	4	443,002
	5	Receivables from current and former officers, directors, truste	es, kev employees,			
	5	Receivables from current and former officers, directors, truste and highest compensated employees. Complete Part II of Sch	nedule L		5	
	6	Receivables from other disqualified persons (as defined under	r section 4958(f)(1))			
		and persons described in section 4958(c)(3)(B). Complete Par			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
		Prepaid expenses and deferred charges		27 <u>6,774</u> .	9	280,004
	10 a	Land, buildings, and equipment: cost or other basis. 10a	5,240,212.			
		Complete Part VI of Schedule D				
	b	Less: accumulated depreciation. 10b	2,699,280.	2,128,369.	10 c	2,540,932
	11	Investments – publicly-traded securities.		26,993,559.	11	40,693,376
	12	Investments – other securities. See Part IV, line 11			12	
	13	Investments – program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		477,473.	15	514,702
	16	Total assets. Add lines 1 through 15 (must equal line 34)		86,708,665.	16	77,764,176
1	17	Accounts payable and accrued expenses		4,922,925.	17	5,479,020
	18	Grants payable		950,124.	18	941,588
	19	Deferred revenue			19	<u></u>
	20	Tax-exempt bond liabilities			20	
		Escrow or custodial account liability. Complete Part IV of Sch			21	
-		Payables to current and former officers, directors, trustees, ken highest compensated employees, and disqualified persons. C				
		of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parti		82,300.	23	15,300
		Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities. Complete Part X of Schedule D		656,826.	25	1,771,338
	26	Total liabilities. Add lines 17 through 25		6,612,175.	26	<u> </u>
		Organizations that follow SFAS 117, check here ► X and	d complete lines			
		27 through 29 and lines 33 and 34.				
	27	Unrestricted net assets		24,197,468.		12,024,841
		Temporarily restricted net assets.		55,899,022.	28	57,532,089
	28	remperany restricted not assets in the internet of the			~~	
		Permanently restricted net assets.			29	
		Permanently restricted net assets.	and complete		29	
					29	
	29	Permanently restricted net assets. Organizations that do not follow SFAS 117, check here ►	and complete		<u>29</u> <u>30</u>	
	29 30	Permanently restricted net assets. Organizations that do not follow SFAS 117, check here ► lines 30 through 34.	and complete			
	29 30 31	Permanently restricted net assets. Organizations that do not follow SFAS 117, check here ► lines 30 through 34. Capital stock or trust principal, or current funds. Paid-in or capital surplus, or land, building, and equipment fu	and complete		30	
	29 30 31 32	Permanently restricted net assets. Organizations that do not follow SFAS 117, check here ► lines 30 through 34. Capital stock or trust principal, or current funds	and complete	80,096,490.	<u>30</u> 31	69,556,930

BAA

Form 990 (2009) Tides Center	94-3213100	F	age 12
Part XI Financial Statements and Reporting			
	PD03466	Yes	No
1 Accounting method used to prepare the Form 990: 🗌 Cash 🛛 🕅 Accrual 📃 Other			
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		a	X
b Were the organization's financial statements audited by an independent accountant?		ьΧ	
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh review, or compilation of its financial statements and selection of an independent accountant?	t of the audit,	c X	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were consolidated basis, separate basis, or both:	issued on a		
Separate basis X Consolidated basis Both consolidated and separate basis			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Audit Act and OMB Circular A-133?	the Single 3	a X	
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits	e required audit	ь Х	

BAA

SCHEDULE A (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.

OMB No. 1545-0047	
2009	
	333
Open to Public	
Inspection	

Department of the Treas Internal Revenue Servic		► Attach to	Form 990 or Form 990-E	Z.►Se	e separa	te instr	uctions			Insp	ection	
Name of the organizatio	n	· · · · · · · · · · · · · · · · · · ·						1		ion number		
Tides Cente							_		213100			
			us (All organizations					.) See	instruc	tions		
			se it is: (For lines 1 throu									
1 A church	i, co <mark>nven</mark> t	ion of churches or ass	ociation of churches desc	ribed in	section	1 70(b)(1)(A)(i).					
			A)(ii). (Attach Schedule E									
			e organization described									
	al researc ty, and st	•	d in conjunction with a he	ospital d	escribed	l in sect	ion 170	(b)(1)(A)	(iii) . Ente	er the hosp	⊮ital's	
5 🗌 An organ	nization or	perated for the benefit Complete Part II.)	of a college or university	owned	or opera	ted by a	govern	mental	unit desc	ribed in se	ction	
7 Y An organ	nization th	r local government or at normally receives a I)(A)(vi). (Complete Pa	governmental unit describ substantial part of its sup	oed in se oport fro	ection 17 m a gov	7 0(b)(1)(ernmen	A)(v). tal unit	or from	the gene	ral public o	descrit	bed
			1 70(b)(1)(A)(vi). (Complete	● Part II)							
9 An orgar from act investme	nization th vities rela	at normally receives: (1) more than 33-1/3 % of ions — subject to certain ss taxable income (less s	its supp exception	oort fro n	(2) no i	more th	an 33-1/	'3 % of it	s support f	rom ai	ross
10 An organ	nization or	ganized and operated	exclusively to test for pul	blic safe	ty. See	section	509(a)(4	1).				
11 An organ	nization or	ganized and operated	exclusively for the benefi escribed in section 509(a ation and complete lines	it of, to p .)(1) or s	perform ection 5	the func 09(a)(2)	tions of	, or carr	y out the 09(a)(3).	purposes Check the	of one box t	e or hat
a Typ		b Type II		I — Fund			ed		d 🗌	Type III—	Other	r
	ina this h	ox. L certify that the or	ganization is not controlle	ed direct	lv or ind	irectly b	v one o	r more o	ىت tisqualifie	ed person:	s othe	
than four 509(a)(2)	ndation m	anagers and other that	n one or more publicly su	pported	organiz	ations d	éscribe	d in sect	ion 509(a	a)(1) or sea	ction	
f If the org	anization		ermination from the IRS t				or Type	III supp	orting or	ganization,		
g Since Au	gust 17, 2	2006, has the organiza	tion accepted any gift or	contribu	ition froi	n any o	f the fol	lowing p	ersons?			
-	-										Yes	No
(i) a p	erson whe	o directly or indirectly of	controls, either alone or to upported organization?	ogether	with per	sons de	scribed	in (ii) ar	nd (iii)	11 g (i)	1	
	· •		ribed in (i) above?									
• •	-	•	described in (i) or (ii) ab									
• •			he supported organization								L	1
(i) Name of Si Organiza	pported	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) organizat (i) listed gove	s the ion in col. t in your rning nent?	(v) Did y the organ col. your st	ization in (i) of	organizat (i) organi:	s the ion in col. zed in the S.?	(vii) Amour	it of Sup	oport
				Yes	No	Yes	No	Yes	No			
11.000												
						····						
Total												

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

Schedule A (Form 990 or 990-EZ) 2009

46,100,749.

269565363.

Sch	edule A (Form 990 or 990-EZ) 2009	9 'i⊥des Ce	nter			94-321310	0 Page 2
Pa	rt II Support Schedule for	Organizations	s Described in	Sections 170	(b)(1)(A)(iv) a	nd 170(b)(1)(A	.)(vi)
	(Complete only if you checke	ed the box on line	5, 7, or 8 of Part	1.)		<u></u>	
Se	ction A. Public Support					· ··= - ···	
Cale beg	endar year (or fiscal year inning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')	44203617.	49859754.	72506209.	88985021.	60111511.	315666112.
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge						0.
4		44203617.	49859754.	72506209.	88985021.	60111511.	315666112.

- 4 Total. Add lines 1-through 3....
- 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)....
- 6 Public support. Subtract line 5 from line 4

Section B Total Support

500	tion D. Total Support						
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	44203617.	49859754.	72506209.	88985021.	60111511.	315666112.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	912,453.	1,468,532.	1,709,489.	1,524,288.	930,343.	6,545,105.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0.
11	Total support. Add lines 7 through 10						322211217.
12	Gross receipts from related activi	ities, etc. (see ins	tructions)				32,484,952.
	First five years. If the Form 990 is organization, check this box and	stop here		d, third, fourth, or	r fifth tax year as a	a section 501(c)(3))
Sec	tion C. Computation of Pu	blic Support I	Percentage				
	Public support percentage for 200						83.7%
15	Public support percentage from 2	2008 Schedule A,	Part II, line 14				77.7%
16 a	33-1/3 support test – 2009. If the and stop here. The organization of	organization did i qualifies as a pub	not check the box licly supported org	on line 13, and t ganization	he line 14 is 33-1/	3 % or more, che	ck this box ······ ► X
b	33-1/3 support test – 2008. If the and stop here. The organization of	organization did u qualifies as a publ	not check a box of icly supported org	n line 13, or 16a, ganization	and line 15 is 33-	1/3% or more, che	eck this box
17 a	10%-facts-and-circumstances tes or more, and if the organization r the organization meets the 'facts-	neets the 'facts-ai	nd-circumstances'	' test, check this b	ox and stop here.	. Explain in Part IV	/how
	10%-facts-and-circumstances tes or more, and if the organization r organization meets the 'facts-and	neets the 'facts-ai -circumstances'	nd-circumstances' test. The organiza	test, check this b ation qualifies as a	oox and stop here a publicly support	. Explain in Part IN ed organization	/ how the ►
18	Private foundation. If the organiz	ation did not chec	k a box on line, 1	3, 16a, 16b <u>, 17a,</u>	or 17b, check this	box and see inst	ructions P

Page 3

Conocació , (
a succession reason					locaribod in	Contin	a E00(a)(2)
Part III	sunnorf	Schedul	e for Urda	inizations L	Jescribed III	Secuor	IJUJUANZI
	Jupport	O onicuui	0 101 0 190		Described in	-	

Part III Support Schedule for Organizations Described (Complete only if you checked the box on line 9 of Part I.)

-	tion A. Public Support	4 2 0005	(1-) 0000	(-) 2007	(d) 2008	(e) 200	a	(f) Total
Cale 1	ndar year (or fiscal yr beginning in)► Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 200		
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose							
4	under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on							
5	its behalf The value of services or facilities furnished by a governmental unit to the organization without charge							
7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, 3 received from disqualified persons							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year							
с	Add lines 7a and 7b.							
8	Public support (Subtract line							
U	7c from line 6.)							
500	tion B. Total Support					<u> </u>		
		(0) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 200	9	(f) Total
	ndar year (or fiscal yr beginning in) ►	(a) 2005	(b) 2006	(0) 2007	(d) 2000	(e) 200		
-	Amounts from line 6.							
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form							
	similar sources							
	similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
c	similar sources Unrelated business taxable income (less section 511 taxes) from businesses							
с 11	similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is							
11 12 13 14	similar sources			d, third, fourth, o	r fifth tax year as a	a section 50	1(c)(3)	
11 12 13 14	similar sources			d, third, fourth, o	r fifth tax year as a	a section 50	1(c)(3)	► []
11 12 13 14 Sec	similar sources	blic Support	Percentage				1(c)(3)	····· ► [] %
11 12 13 14 <u>Sec</u> 15 16	similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.). Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pu Public support percentage for 20 Public support percentage from 2	Iblic Support 09 (line 8, column 2008 Schedule A,	Percentage (f) divided by line Part III, line 15	e 13, column (f)).				
11 12 13 14 <u>Sec</u> 15 16 <u>Sec</u>	similar sources	Iblic Support 109 (line 8, column 2008 Schedule A, vestment Inco	Percentage (f) divided by line Part III, line 15. me Percentag	e 13, column (f)). je			15	%
c 11 12 13 14 <u>Sec</u> 15 16 <u>Sec</u> 17	similar sources	Iblic Support 1 09 (line 8, column 2008 Schedule A, vestment Inco or 2009 (line 10c,	Percentage (f) divided by lin Part III, line 15. me Percentag column (f) divided	e 13, column (f)). je I by line 13, colun	חר (f)).		15 16	% %
c 11 12 13 14 <u>Sec</u> 15 16 <u>Sec</u> 17 18	similar sources	Iblic Support 09 (line 8, column 2008 Schedule A, vestment Inco or 2009 (line 10c, rom 2008 Schedul e organization dic	Percentage (f) divided by lin Part III, line 15. me Percentag column (f) divided e A, Part III, line	e 13, column (f)). je 1 by line 13, colun 17 25. on line 14, and	nn (f)).	an 33-1/3%	15 16 17 18 and line	% % %
c 11 12 13 14 <u>Sec</u> 15 <u>16</u> <u>Sec</u> 17 18 19a	similar sources	Iblic Support 09 (line 8, column 2008 Schedule A, vestment Inco or 2009 (line 10c, rom 2008 Schedul re organization dic ox and stop here.	Percentage (f) divided by line Part III, line 15 me Percentage column (f) divided e A, Part III, line I not check the bo The organization	e 13, column (f)). Je 1 by line 13, colun 17. 17. 17. 17. 17. 17. 17. 17.	nn (f)). I line 15 is more th Dicly supported or and line 16 is mo	an 33-1/3% ganization re than 33-1	15 16 17 18 and line /3%, and	% % % 17 is not Uline 18

Part IV Supplemental Information. Complete this part	t to provide the explanations required by Part II, line 10;
Part II, line 17a or 17b; and Part III, line 12. P	rovide any other additional information. See instructions.

Schedule of Contributors

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

2009

Department of the Treasury Internal Revenue Service

Name of the o	organization
---------------	--------------

Name of the organization	Employer identification number	
Tides Center	94-3213100	
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(<u>3</u>) (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	

Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule -

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts | and II.)

Special Rules -

X For a section 501(c)(3) organization filing Form 990 or 990-EZ, that met the 33-1/3% support test of the regulations under sections 509(a)(1)/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% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year contributions for use exclusively for religious, charitable, etc, purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc, purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively

►Ś religious, charitable, etc, contributions of \$5,000 or more during the year.....

Caution: An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-FF) but it **must** answer 'No' on Part IV, line 2 of their Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-FF) but it must answer 'No' on Part IV, line 2 of their Form 990, or check the box on line H of its Form 990-EZ, or on 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).

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)	Page 1	of 2	of Part I
Name of organization		yer identification number	
Tides Center	94-	3213100	

Part I Contributors (see instructions.)

(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$ <u>5,395,390</u> .	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2		\$2,101,704.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	· · · · · · · · · · · · · · · · · · ·	\$1,951,400.	Person X Payroll
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4		\$1,697,145.	Person X Payroll Image: Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5		\$1,223,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
6		\$1,807,359.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)	Page 2	of 2	of Part I
Name of organization	Employer id	entification number	r
Tidoc Conter	94-321	3100	

Tides Center

Partl	Contributors (see instructions.)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7		\$2, <u>170,673.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2009) Name of organization	Page	1 of 1	of Part II
		Employer identification	n number
Tides Center		94-3213100	

Part II Noncash Property (see instructions.)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
N/A			
		\$	
(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) lo. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	

Schedule E	3 (Form 990, 990-EZ, or 990-PF) (2009)		Page 1	of <u>1</u>	of Part III
Name of organ				Employer identificati	
Tides (Center			94-3213100	
Part III	organizations aggregating more th	an \$1,000 for the year.(Com	plete cols (a) through	c)(7), (8), or (10 (e) and the following) ng line entry.)
	For organizations completing Part III, enter to contributions of \$1,000 or less for the year. (I	otal of <i>exclusively</i> religious, charita Enter this information once – see	able, etc, instructions.)	►\$	N/A
(a)	(b)	(c)		(d)	
No. from Part I	Purpose of gift	Purpose of gift Use of gift		cription of how gift	is held
Parti	N/A				
		(e)			
	Transferee's name, address	Transfer of gift	Relationship of	f transferor to trans	feree
(a)	(b)	(c)		(d)	
No. from	Purpose of gift	Use of gift	Des	cription of how gift	is held
Part I		· · · · · · · · · · · · · · · · · · ·			
		(e)			
		Transfer of gift			
	Transferee's name, address	, and ZIP + 4	Relationship of	transferor to trans	feree
(a)	(b)	(c)	Dat	(d)	:
No. from Part I	Purpose of gift	Use of gift	Des	cription of how gift	is neid
					· · · · · _ ·
		,			
		(e)			
	Transferee's name, address	Transfer of gift	Relationshin of	transferor to trans	feree
			······································		
(0)	(b)	(c)		(d)	
(a) No. from	Purpose of gift	Use of gift	Des	cription of how gift	is held
Part I				•	
	(e) Transfer of gift Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		feree
				000 000 57	00 DE) (2000)

SCHEDULE C Political Campaign and Lobbying Activities		OMB No. 1545-0047			
(Form 990 or 990-EZ)	For Organizations Exempt From Income Tax Under section 501(c) and section 527			2009	
Department of the Treasury		► Complete if the organization is described below.			Open to Public Inspection
Department of the Treasury Internat Revenue Service ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Active)					
 Section 501(c)(3) o Section 501(c) (oth Section 527 organization 	rganizations: er than sectic zations: comp	complete Parts I-A and B. Do not compl on 501(c)(3)) organizations: complete Par plete Part I-A only.	ete Part I-C. rts I-A and C below. D	o not complete Part I-B	
• Section 501(c)(3) o	rganizations t	o Form 990, Part IV, line 4, or Form 990-I that have filed Form 5768 (election under	r section 501(h)): Com	plete Part II-A. Do not o	
Part II-A.		that have NOT filed Form 5768 (election		: Complete Part II-B. Do	not complete
If the organization answ • Section 501(c)(4). (wered 'Yes,' t 5). or (6) ora	o Form 990, Part IV, line 5 (Proxy Tax), t anizations: Complete Part III.	hen		
Name of organization				Employer identific	ation number
Tidoc Center				94-321310	
Part - A Complet	e if the or	ganization is exempt under sec	tion 501(c) or is a	section 527 organ	nization.
1 Provide a descrip	tion of the or	ganization's direct and indirect political c	ampaign activities in I	Part IV.	
2 Political expendit				►\$	5
2 Yoluptoor bours	ules				
5 Volunteer nours.	e if the or	ganization is exempt under sec	tion 501(c)(3).		
		e tax incurred by the organization under	section 4955	►ŝ	0
1 Enter the amount	of any excision	e tax incurred by organization managers	under section 4955	► ś	
2 Enter the amount		section 4955 tax, did it file Form 4720 for	this year?		Yes No
3 If the organization	n incurreu a s				Yes No
b If 'Yes,' describe	in Part IV.	the strengt and an age		nt caction 501(c)(3	1
Part I-C Complet	e if the or	ganization is exempt under sec		nactivities	· · · · · · · · · · · · · · · · · · ·
		ended by the filing organization for section			
2 Enter the amount function activities	t of the filing o	organization's funds contributed to other	organizations for sect	tion 527 exempt ► \$	3
line 17b		nditures. Add lines 1 and 2. Enter here a			
4 Did the filing orga	anization file	Form 1120-POL for this year?			Ves No
made. For each (organization li	nd employer identification number (EIN) isted, enter the amount paid from the fili re promptly and directly delivered to a se (PAC). If additional space is needed, pr	ng organization s junu eparate political organi	ization, such as a separ	
(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
			_		
			_		
			_		
			-		
			_	and the second sec	
	-		_		
BAA For Privacy Act a	and Paperwor	k Reduction Act Notice, see the Instruct	ions for Form 990.	Schedule C (Fo	orm 990 or 990-EZ) 200

OMB No. 1545-0047

94-3213100 Page 2

Schedule C (For	m 990 or 9	90-F7) 2009	Tides	Center
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	Letter F01(-)(2) and filed Form F769 (election under
Part II-A Complete if the organization is	exempt under section 501(c)(3) and filed Form 5768 (election under
section 501(h)).	

A Check 🕨	if the filing organization be	elongs to an affiliated group.		
B Check 🕨	if the filing organization ch	necked box A and 'limited control' provisions apply.		
	Limits on Lobb (The term 'expenditures' m	(a) Filing organization's totals	(b) Affiliated group totals	
1a Total lobbyin	ig expenditures to influence (public opinion (grass roots lobbying)		
		a legislative body (direct lobbying)		
c Total lobbyin	ig expenditures (add lines 1a	and 1b)		
d Other exemp	ot purpose expenditures			
		lines 1c and 1d)		
f Lobbying nor both columns	ntaxable amount. Enter the a	mount from the following table in		
If the amount o	on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
Not over \$500,00		20% of the amount on line 1e.		
Over \$500,000 b	ut not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
Over \$1,000,000	but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
Over \$1,500,000	but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
Over \$17,000,000	0	\$1,000,000.		
g Grassroots n	ontaxable amount (enter 25°	% of line 1f)		
h Subtract line	1g from line 1a. If zero or le	ss, enter -0		
	•	ss, enter -0		

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?.....

Yes No

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period						
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total	
2a Lobbying non-taxable amount						
b Lobbying ceiling amount (150% of line 2a, column (e))						
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount (150% of line 2d, column (e))						
f Grassroots lobbying expenditures						

BAA

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 2009 Tides Center

94-3213100

Page 3

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)).

	(a	a)	_(b)
	Yes	No	Amount
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 Volunteers?	X		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
c Media advertisements?	X		9,442.
d Mailings to members, legislators, or the public?	X		10,139.
e Publications, or published or broadcast statements?	Х		56,153.
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	Х		<u>177,283.</u>
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х	
i Other activities? If 'Yes,' describe in Part IV		Х	
j Total. Add lines 1c through 1i			253,017.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х	
b If 'Yes,' enter the amount of any tax incurred under section 4912			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		Х	
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501		i), or	section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		

- I	were substantially all (90% of more) dues received hondeductible by members	•	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III-A, line 3 is answered 'Yes.'

1	Dues, assessments and similar amounts from members	1
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	
i	a Current year	2a
	b Carryover from last year	
	c Total	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4
5	Taxable amount of lobbying and political expenditures (see instructions).	5
Pa	t IV Supplemental Information	
Com	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part , complete this part for any additional information.	

Schedule C (Form 990 or 990-EZ) 2009 Tides Center Part IV Supplemental Information (continued)

SCHEDU	LE D
(Form 99	0)

Supplemental Financial Statements
 Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.
 ► Attach to Form 990.
 ► See separate instructions

2009 Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer Identification number

Tid	les Center			94-3213100
-	t Organizations Maintaining Donor	Advised Funds or Other S	imilar Fu	
Par	the organization answered 'Yes' to	Form 990. Part IV. line 6.	initian i u	
	the organization answered res to	(a) Donor advised funds		(b) Funds and other accounts
	The subscription of yoor		1	
-	Total number at end of year.	20)2,704.	
2	Aggregate contributions to (during year)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
3	Aggregate grants from (during year)		18,721.	
4	Aggregate value at end of year			
	Did the organization inform all donors and dono funds are the organization's property, subject to	the organization's exclusive legal	control:	
	Did the organization inform all grantees, donors used only for charitable purposes and not for th purpose conferring impermissible private benefi	t??		XYes No
Par	til Conservation Easements Comple	te if the organization answe	ered 'Yes'	to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by	the organization (check all that app	ly).	
'	Preservation of land for public use (e.g., re	creation or pleasure)	eservation d	of an historically important land area
	Protection of natural habitat		eservation o	of certified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization	held a qualified conservation cont	ribution in t	he form of a conservation easement on the
2	last day of the tax year.			
				Held at the End of the Year
а	Total number of conservation easements			<u>2a</u>
b	Total acreage restricted by conservation easem	ents		2b
c	Number of conservation easements on a certific	ed historic structure included in (a).		<u>2c</u>
	Number of conservation easements included in	(c) acquired after 8/17/06		2d
3	Number of conservation easements modified, tr	ansferred, released, extinguished,	or terminate	ed by the organization during the tax
	year 🏲			
4	Number of states where property subject to cor	servation easement is located 🕨 _		_
5	Does the organization have a written policy reg and enforcement of the conservation easement	it holds?		
6	Staff and volunteer hours devoted to monitoring during the year	, inspecting, and enforcing conserv	vation ease	ments
7	Amount of expenses incurred in monitoring, ins during the year ►			ې
8	Does each conservation easement reported on 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?			
9	In Part XIV, describe how the organization report include, if applicable, the text of the footnote to	rts conservation easements in its r the organization's financial statem	evenue and ents that de	expense statement, and balance sheet, and escribes the organization's accounting for
D	conservation easements. till Organizations Maintaining Colle	ctions of Art Historical Tre	asures. C	or Other Similar Assets
	Complete if the organization ansi	wered Yes to Form 990, Pa	art IV, inte	
	a If the organization elected, as permitted under treasures, or other similar assets held for publi- the text of the footnote to its financial statemen	ts that describes these items.	munera	
ł	If the organization elected, as permitted under treasures, or other similar assets held for publi- amounts relating to these items:	c exhibition, education, or research	murmera	ice of public service, provide the following
	(i) Revenues included in Form 990, Part VIII, I	ine 1		······ ► ♀
				· · · · · · · · · · · · · · · · · · ·
	If the organization received or held works of an amounts required to be reported under SFAS 1	, historical treasures, or other simil 16 relating to these items:	lar assets to	r mancial gain, provide the following
â	Revenues included in Form 990, Part VIII, line	1		····· • • •

b Assets included in Form 990, Part X

►\$

Schedule D (Form 990) 2009 Tides Cence	r		94-321		Page 2
Part III Organizations Maintaining Co	llections of Art, Hist	orical Treasures, o	or Other Similar As	sets (conti	nued)
 Using the organization's acquisition accession items (check all that apply): 					
a Public exhibition		or exchange programs			
b Scholarly research	e Other				
c Preservation for future generations					
 Provide a description of the organization's c Part XIV. 					
5 During the year, did the organization solicit assets to be sold to raise funds rather than	or receive donations of art, to be maintained as part o	, historical treasures, or f the organization's coll	other similar	Yes	No
Part IV Escrow and Custodial Arrang 9, or reported an amount on F	ements Complete if a	organization answe	ered 'Yes' to Form S	Ĵ90, Part I∖	/, line
1a Is the organization an agent, trustee, custoc included on Form 990, Part X?	ian, or other intermediary	for contributions or othe	er assets not	Yes	No
b If 'Yes,' explain the arrangement in Part XIV	and complete the followin	ig table:			
				Amount	
c Beginning balance			1c		
d Additions during the year					
e Distributions during the year.					
f Ending balance					
2a Did the organization include an amount on F				Yes	No
b If 'Yes,' explain the arrangement in Part XIV			I		
Part V Endowment Funds Complete in	organization answer	red 'Yes' to Form 9	90, Part IV, line 10).	
(a) Curr		_		(e) Four yea	ars back
b Contributions					
		-		1	
c Net Investment earnings, gains, and losses					
d Grants or scholarships					<u></u>
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					<u></u>
2 Provide the estimated percentage of the yea	r end balance held as:				
a Board designated or quasi-endowment 🔸 _	%				
b Permanent endowment ►	°				
c Term endowment ►%					
3a Are there endowment funds not in the posse	ssion of the organization t	hat are held and admin	istered for the		
organization by:				Yes	No
(i) unrelated organizations				3a(i)	
(ii). related organizations				. 3a(ii)	
b If 'Yes' to 3a(ii), are the related organization	s listed as required on Sch	nedule R?		3b	
4 Describe in Part XIV the intended uses of th					
Part VI Investments-Land, Buildings	, and Equipment. Se	e Form 990, Part >	K, line 10.		
Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated Depreciation	(d) Book ∨	/alue
1a Land					
b Buildings		1,168,130.			3,130.
c Leasehold improvements		424,043.	210,878.		3 <u>,165.</u>
d Equipment		3,189,493.	2,173,405.	1,016	5,088.
e Other		458,546.	314,997.	143	8,549.
Total. Add lines 1a through 1e (Column (d) must e	and the second				,932.
BAA			Sched	lule D (Form 9	90) 2009

94-3213100	Page 3

Fart VIII Investments - Other Securities See Form 990. Part X, line 12. N/A (a) Description of security) (b) Book value Cost of end-drypart model value Cost of end-drypart of security) (b) Book value Cost of end-drypart model value Cost of end-drypart of security) (c) Book value Cost of end-drypart model value Cost of end-drypart of security) (c) Book value Cost of end-drypart model value Cost of end-drypart of security) (c) Book value Cost of end-drypart model value Cost of end-drypart of security (c) Book value Cost of end-drypart model value Cost of end-drypart of security (c) Book value Cost of end-drypart model value Cost of end-drypart of end drypart of end drypar	Schedule D (Form 990) 2009 Tides Center		94-3213100 Page 3
(a) Description of security or category (b) Block value (c) Method of valuation Cost of encodyper material value (c) Method of valuation Cost of encodyper material value (c) Method of valuation Cost of encodyper material value (c) Method of valuation (c) Method o	Part VII Investments-Other Securities See F	orm 990, Part X, li	ne 12. N/A
Total (Column (2) must equal form \$90, Part X, col.(8), Ime 15) N/A Total, (Column (2) must equal form \$90, Part X, col.(8), Ime 15) N/A Total, (Column (2) must equal form \$90, Part X, col.(8), Ime 15) N/A Total, (Column (2) must equal form \$90, Part X, col.(8), Ime 15) N/A Total, (Column (2) must equal form \$90, Part X, col.(8), Ime 15) N/A Total, (Column (2) must equal form \$90, Part X, col.(8), Ime 15) N/A Total, (Column (2) must equal form \$90, Part X, col.(8), Ime 15) N/A Total, (Column (2) must equal form \$90, Part X, col.(8), Ime 15) N/A Total, (Column (2) must equal form \$90, Part X, col.(8), Ime 15) N/A Total, (Column (2) must equal form \$90, Part X, col.(8), Ime 15) N/A Total, (Column (2) must equal form \$90, Part X, col.(8), Ime 15) N/A Total, (Column (2) must equal form \$90, Part X, col.(8), Ime 15) N/A Total, (Column (2) must equal form \$90, Part X, col.(8), Ime 15) • Total, (Column (2) must equal form \$90, Part X, col.(8), Ime 15) • Total, (Column (2) must equal form \$90, Part X, col.(8), Ime 15) • Total, (Column (2) must equal form \$90, Part X, col.(8), Ime 15) • Total, (Column (2) must equal form \$90, Part X, col.(8), Ime 15) • Total, (Column (2) m			(c) Method of valuation
Other	Financial derivatives.	l l l l l l l l l l l l l l l l l l l	
Tetal. (Columer (b) most equal Form 990, Part X, col. (b) line 12) Image: Column C			
Part VIII Investments – Program Related (See Form 990, Part X, line 13) V/A (a) Description of investment type (b) Book value (c) Method of valuation Cost or end-of-year market value Tatal (Column (b) must equal Form 990, Part X, Coll (B) line 13) • Part IX: Other Assets (See Form 990, Part X, line 15) N/A (a) Description (b) Book value (b) Book value (b) Book value (c) Must equal Form 990, Part X, line 15) N/A (b) Description (b) Book value (c) Book value (c) Description (b) Book value (c) Book value (c) Description (b) Book value (c) Book value (c) Description (c) Book value (c) Book value (c) Description (c) Book value (c) Book value (c) Description of Liability (c) Amount (c) Amount Federal income Taxes 1, 771, 338. (c) Amount Liability - Agency Transactions 1, 771, 338. (c) Amount Tatal. (Column (b) must equal Form 990, Part X, col. (B) Ine 25) • 1, 771, 338.			
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Part X Other Liabilities (See Form 990, Part X, line 25) (a) Description of Liability (b) Amount Federal Income Taxes			
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Part X Other Liabilities (See Form 990, Part X, line 25) (a) Description of Liability (b) Amount Federal Income Taxes			
(a) Description of Liability (b) Amount Federal Income Taxes	Total. (Column (b) must equal Form 990, Part X, col.(B), li	ne 15)	·····
Federal Income Taxes			
Liability - Agency Transactions 1,771,338.		(b) Amount	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) ► 1, 771, 338.	Federal Income Taxes	1.771.3	38
	Liability Agency Hansactions		
	Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) ►	1,771,3	38.

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48. See Part XIV

Schedule D (Form 990) 2009 Tides Center	94-321310	0 Page 4
Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	ts	
1 Total revenue (Form 990, Part VIII, column (A), line 12)		<u>58,971,568.</u>
 2 Total expenses (Form 990, Part IX, column (A), line 25). 		77,919,200.
3 Excess or (deficit) for the year. Subtract line 2 from line 1		-8,947,632.
4 Net unrealized gains (losses) on investments		9,929.
5 Donated services and use of facilities		
6 Investment expenses.		
		9,929.
the state of the s		-8,937,703.
10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 3. Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue p		i
1 Total revenue, gains, and other support per audited financial statements	1 6	69,268,636.
 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: 		
a Net unrealized gains on investments	29.	
b Donated services and use of facilities		
c Recoveries of prior year grants.		
d Other (Describe in Part XIV)		
e Add lines 2a through 2d	2e	9,929.
a Add lines 2a through 20	3 (69,258,707.
		<u></u> , <u>.</u>
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a investments expenses not meladed on reministration and the second	39	
b Other (Describe in Part XIV)See. Part XIV		-287,139
c Add lines 4a and 4b.	5 (68,971,568.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.). Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
1 Total expenses and losses per audited financial statements		78,206,339.
1 Total expenses and losses per audited financial statements		
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Dollateu services and use of lacintes		
	2e	
e Add lines 2a through 2d	3	78,206,339
3 Subtract line 2e from line 1		10,200,339.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investments expenses not included on Form 990, Part VIII, line 7b	20	
b Other (Describe in Part XIV) See. Part .XIV		207 120
c Add lines 4a and 4b		-287,139.
5 Total expenses. Add lines 3 and 4c (This must equal Form 990, Part I, line 18.).	5	77,919,200.
Part XIV Supplemental Information		

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

Part X - FIN 48 Footnote

N/A

2009	Schedule D, Part XIV - Supplemental Information	Page 6
	Tides Center	94-3213100
	hedule D, Part XII, Line 4b her Revenue Included On Form 990 But Not Included In F/S ndraising Event Exp	\$ -287,139. \$ -287,139.
Scl Otł	hedule D, Part XIII, Line 4b her Revenue Included On Form 990 But Not Included In F/S	
Fui	ndraising Event Exp	<u>\$ -287,139.</u> <u>\$ -287,139.</u>

Part General Informat to Form 990, Par	tion on Activiti	es Outside th	e United States. Comple	ete if the organization	on answered 'Yes'
		ntain records to su ce, and the select	ubstantiate the amount of the g ion criteria used to award the g	rants or assistance, the rants or assistance?	X Yes No
2 For grantmakers. Describe	in Part IV the org	anization's proced	dures for monitoring the use of	grant funds outside the	United States.
3 Activities per Region. (Use	Schedule F-1 (For	rm 990) if additior	nal space is needed.)		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
Central America and the	0	0	Program Services	AIDS Health Care	57,376.
Caribbean				Issues, Health	
				Education, Human	
				Rights	
East Asia and the	0	0	Program Services	AIDS Health Care	400,808.
Pacific				Issues, Health	
				Education, Human	
				Rights	
Europe	0	0	Program Services	AIDS Health Care	544,351.
				Issues, Health	
				Education, Human	
				Rights	
Middle East and North	0	0	Program Services	Community	14,571.
Africa				Outreach, Human	
				Rights	
North America	0	0	Program Services	AIDS Health Care	642,096.
				Issues, Health	
Totals	0	0			3,482,556.

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.

Schedule F

Department of the Treasury Internal Revenue Service

Name of the organization

Tides Center

(Form 990)

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) (2009)

OMB No. 1545-0047

2009

Open to Public

Inspection

Employer identification number

94-3213100

(a) Name of arganization (b) Rescription of arganization (b) Name of arganization (b) Name of arganization (b) Name of arganization (b) Name of arganization (a) Spin (a) (b) (b) (b) (b) (b) (b) (b) (b) (b) (b	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. Use Schedule F-1 (Form 990) if additional space is needed.	for any recipient 0) if additional s	who received n pace is needed	nore than \$5,	000. Check this	box if no one	recipient rece	ived more than :	₿2,000. ►
Europe Image Image Image Image Care Transfer N/A Care Transfer N/A South Asia AIDS 20,000 AIDE South Asia AIDS 20,000 AIDE Care Transfer N/A Care 13sues 20,000 AIDE Care 13sues 100 AIDE Care		(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		(j) Method of valuation (book, FMV, appraisal, other)
Care Transfer Transfer Issues 1ssues 1ssues South Asia AIDS 20,000 kite Kita Realth Issues Care 1ssues 20,000 kite Rise 20,000 kite Kita Rise 1ssues 1ssues 1ssues			Europe	Health	5, 800.	Wire		N/A	N/A
Issues Issues Issues N/A South Asia AIDS 20,000 WIE N/A Issues Realth Transfer N/A Issues Issues Issues Issues				Care		Transfer			
South Asia AIDS 20,000 Wire W/A Family of the state Health Transfer M/A Family of the state East East East East Family of the state 1ssues 1ssues East East Family of the state 1ssues East East East Family of the state 1ssues East East East				Issues					
Health Transfer Cate Cate Issues Cate Issues Issues Issues Issues <t< td=""><td></td><td></td><td>South Asia</td><td>AIDS</td><td>20,000.</td><td>Wire</td><td></td><td>N/A</td><td>N/A</td></t<>			South Asia	AIDS	20,000.	Wire		N/A	N/A
Care Care				Health		Transfer			
Issues Issues Issues Issues Interview Issues Issues Issues Interview Issues Issues Issues Interview Issues Issues Issues Interview Issues Issues Issues				Care					
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the				Issues					
Enter total number of racipient organizations listed above that are recognized as charities by the foreign country. recognized as tax exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency lefter									
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as fax-exempt by the IRS, or for which the									
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the									
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the									
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter									
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter									
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter									
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter									
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter									
		tations listed above th tion 501(c)(3) equival	at are recognized a	s charities by the	foreign country, re	cognized as tax-ex	empt by the IRS, o		0
Enter total number of other organizations or entities		ons or entities			-		-	Schedule	Schedule F (Form 990) 2009

TEEA3502L 07/06/09

e F (Form 990) 2009 Tides C	enter			1	64-5	94-3213100	Page 3
Part II Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed.	ice to Individuals O lule F-1 (Form 990)	utside the Unit if additional sp	ted States. Compleace is needed.	ete if the organ	zation answered '	res' to Form 990,	
(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)
				-			
						Schedule	Schedule F (Form 990) 2009

TEEA3503L 07/06/09

 Schedule F (Form 990) 2009
 Tides Center

 Part IV
 Supplemental Information

Complete this part to provide the information required in Part I, line 2, and any additional information.
Part I, Line 2 - Grantmakers Explanation For Grants Outside US
Thorough due diligence is conducted in advance of funding to determine whether a
group will be an appropriate grantee. We require groups to provide proof of tax
status and/or registration documents and their organizational documents. All
international grants are restricted to a clearly charitable purpose and must be used
exclusively for activities conducted outside of the U.S. All grantees receive a
written grant agreement, and by accepting payment the grantee agrees to the
conditions of the award, which provides assurance that funds will not be used for any
prohibited purpose.

SCHEDULE F-1 (Form 990)

Continuation Sheet for Schedule F (Form 990)

 Attach to Form 990 to list additional information for Schedule F (Form 990)Part I, line 3; Part II, line 1; or Part III.
 See instructions for Schedule F (Form 990)

Open to Public Inspection

Employer identification number

OMB No. 1545-0047

2009

Department of the Treasury Internal Revenue Service Name of the organization

Tides Center			94-3213100				
Part Continuation of	f Activities per F	Region. (Sche	dule F (Form 990), Part	I, line <u>3)</u>			
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region		
				Education, Human			
				Rights			
Russia and the Newly	0		Program Services	AIDS Health Care	65,642.		
Independent States				Issues, Health			
				Education, Human			
				Rights			
South America	0		Program Services	AIDS Health Care	167,759.		
				Issues, Health			
				Education, Human			
				Rights			
South Asia	0		Program Services	AIDS Health Care	335,470.		
				Issues, Health			
				Education, Human			
				Rights			
Sub-Saharan Africa	0	() Program Services	AIDS Health Care	1,254,483.		
				Issues, Health			
				Education, Human			
				Rights			
Totals	▶						

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F-1 (Form 990) (2009)

1								OMB No. 1545-0047
SCHEDULE G (Form 990 or 990-EZ) Supplemental Information Regarding Fundraising or Gaming Activities 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.							2009	
		Open to Public						
Department of the Treasury Internal Revenue Service	▶	Attach to Forn	1990 or Fo	rm 990-EZ	. ► See separate instr	uctions	•	Inspection
Name of the organization							Employer identifica	
Tides Center	Activities Comple	te if the organi	zation ans	wered 'Ye	s' to Form 990, Part IV	', line 17		·
Part Form 990EZ 1	filers are not requ	lired to complet	e this part					
X Mail solicitatio X Internet and e X Phone solicita X In-person soli 2a Did the organizati employees listed i	ns mail solicitations tions citations on have written o n Form 990, Part	r oral agreemer VII) or entity in	nt with any	r individual on with pro	wing activities. Check a X Solicitation of non- X Solicitation of gove X Special fundraising (including officers, dir fessional fundraising s	governn rnment events ectors, f ervices	nent grants grants trustees or key ?	XYes No
b If 'Yes,' list the te	n highest paid ind	lividuals or entit	ties (fundra	aisers) pui	rsuant to agreements u	inder wh	nich the fundrais	er is to be
(i) Name of in or entity (fund	dividual	(ii) Activity	(iii) Did f have custod of contri	y or control	(iv) Gross receipts from activity	(or	mount paid to retained by) raiser listed in col.(i)	(vi) Amount paid to (or retained by) organization
			Yes	No				
Carrie Brogott	4	Consulta nt						
	L	Consulta		X			25,800.	
Further the Wo	rk	nt Consulta		х			23,854.	
Mahnaz A. Fanc	У	nt		х			18,400.	
Peter Fugazzot	to	Consulta nt		x			14,850.	
Tracy Nichole	Argo	Consulta nt		x			13,340.	
Mordecai Cohen	Ettin	Consulta nt		х			11,875.	
Christopher Tr	ull	Consulta nt		x			10,900.	
Joe Trippi		Consulta nt					10,000.	
<u> </u>		Consulta		X			10,000.	
Gina Belafonte		nt		x			8,850.	
		Consulta						
Theodore G. Sm		nt		X			5,500.	
Total				►			143,369.	0.
3 List all states in w or licensing. <u>AL_AK_AZ_AI</u> <u>ND_OH_OK_OI</u>			ed or licen		cit funds or has been r		N MS MO NH	<u>NJ_NM_NY_NC</u>

Schedule G (Form 990 or 990-EZ) 2009 Trues Center

94-3213100 Page **2** answered 'Yes' to Form 990. Part IV. line 18. or

Par	tII	Fundraising Events. Complete if reported more than \$15,000 on F	the organization a	answered 'Yes' to F ba. List events with	orm 990, Part IV, gross receipts gre	line 18, or ater than \$5,000.
R			(a) Event #1 Conferences (event type)	(b) Event #2 Conferences (event type)	(c) Other Events 7 (total number)	(d) Total Events (Add col. (a) through col. (c))
R E V E N U	1	Gross receipts	135,185.	82,805.	231,172.	449,162.
U E	2	Less: Charitable contributions	57,300.	82,805.	134,615.	274,720.
	3	Gross income (line 1 minus line 2)	77,885.		96,557.	174,442.
	4	Cash prizes				
	5	Noncash prizes				
D R F	6	Rent/facility costs	33,749.		9,652.	43,401.
R E C T	7	Food and beverages				
E X P	8	Entertainment				
EXPENSES	9	Other direct expenses	63,438.	82,805.	97,495.	243,738.
-	10 11	Direct expense summary. Add lines 4- th Net income summary. Combine lines 3, c Gaming. Complete if the organiz	olumn (d) and line 10.		••••••	===/ ==
		\$15,000 on Form 990-EZ, line 6a				
REVE⊼UE			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col. (a) through col. (c))
Ĕ	1	Gross revenue				
D X	2	Cash prizes				
DIRECT	3	Non-cash prizes				
ŝ	4	Rent/facility costs				
	5	Other direct expenses	Yes %	Yes %	Yes %	
	6	Volunteer labor	No		No	
	7	Direct expense summary. Add lines 2 thre	ough 5 in column (d)	· · · · · · · · · · · · · · · · · · ·	•••••••••••••••••••••••••••••••••••••••	
	8	Net gaming income summary. Combine li	nes 1, column (d) and l	ine 7	>	
9	Ente Lott	er the state(s) in which the organization op ne organization licensed to operate gaming	erates gaming activities activities in each of the	s: ese states?		YES NO 9a
ł	olf'N 	lo,' explain: 				
		e any of the organization's gaming license es,' explain:	s revoked, suspended (tax year :	<u>10a</u>
11 12	ls tł	es the organization operate gaming activitie ne organization a grantor, beneficiary or tru ninister charitable gaming?	istee of a trust or a mer	mber of a partnership or	other entity formed to	

13 indicate the percentage of gaming activity operated in: 13a % 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records: 13b % 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records: 15a 15a Name: •	Schedule G (Form 990 or 990-EZ) 2009 Tiues Center	94-32	213100	P	'age 3
a The organization's facility				YES	NO
a The organization's facility	13 Indicate the percentage of gaming activity operated in:				
b An outside facility	a The organization's facility	<u>13a</u>			
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records: Name: ►	b An outside facility	13b	•		
Name: •	14 Enter the name and address of the person who prepares the organization's gaming/specia	l events books and recor	ds:		
Address:					
Address:	Name: ►				
15a Does the organization have a contact with a third party from whom the organization receives gaming revenue? 15a b If 'Yes,' enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$ and the amount c If 'Yes,' enter name and address of the third party: Name: ▶					
15a Does the organization have a contact with a third party from whom the organization receives gaming revenue? 15a b If 'Yes,' enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$ and the amount c If 'Yes,' enter name and address of the third party: Name: ▶	Address: ►				
 b If 'Yes,' enter the amount of gaming revenue received by the organization \$and the amount of gaming revenue retained by the third party \$ c If 'Yes,' enter name and address of the third party: Name: ▶ Address: ▶ If Gaming manager information Name: ▶ Gaming manager compensation ▶ \$ 					
of gaming revenue retained by the third party \$ c If 'Yes,' enter name and address of the third party: Name: ▶Address: ▶	15a Does the organization have a contact with a third party from whom the organization receive	es gaming revenue?	15a	3	
of gaming revenue retained by the third party \$ c If 'Yes,' enter name and address of the third party: Name: ▶Address: ▶	b If 'Yes,' enter the amount of gaming revenue received by the organization \$	and the amou	nt		
Name: ▶ Address: ▶ Address: ▶ Gaming manager information Name: ▶ Gaming manager compensation ▶ \$					
Address: ▶	c If 'Yes,' enter name and address of the third party:				
Address: ▶					
16 Gaming manager information Name: ▶ Gaming manager compensation ▶ \$	Name: ▶				
16 Gaming manager information Name: ▶ Gaming manager compensation ▶ \$					
Name: ▶ Gaming manager compensation ▶ \$	Address: ►				
Name: ▶ Gaming manager compensation ▶ \$					
Gaming manager compensation ► \$	16 Gaming manager information				
Gaming manager compensation ► \$					
	Name: ►				
	Gaming manager compensation 🕨 Ş				
Description of services provided:	Description of services provided:				
Director/officer Employee Independent contractor		tor			
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 retain the state gaming license?	a is the organization required under state law to make charitable distributions from the gamin	ng proceeds to retain the		a	
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	state gaming license?	t organizations or spent i			
organization's own exempt activities during the tax year: \$					
BAA TEEA3703L 02/05/10 Schedule G (Form 990 or 990-EZ) 200		Schedule G (F	orm 990 or 9	990-EZ) 2009

SCHEDULE I (Form 990)	GG	ants and Oth ernments an	Grants and Other Assistance to Organizations, Governments and Individuals in the United States	o Organizations the United Sta	s, tes	<u> </u>	OMB No. 1545-0047
Department of the Treasury Internal Revenue Service	Comple	ste if the organization	Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22. ► Attatch to Form 990.	m 990, Part IV, lines 21	or 22.		Open to Public Inspection
Name of the organization Tides Center						Employer identification number 94-3213100	tion number
	General Information on Grants and Assistance	lance				24 24 24 24 24 24 24 24 24 24 24 24 24 2	
1 Does the organiza the selection criter	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	amount of the grants	or assistance, the gran	tees' eligibility for the gr	ants or assistance, ar	· · · · · · · · · · · · · · · · · · ·	X Yes
2 Describe in Part IV	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	oring the use of gran	t funds in the United Sta	tes. See Part IV	ct IV]
Part II Grants and 990, Part I Part IV and	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	ents and Organ received more th ditional space is	Organizations in the United States. Complete if the organization answered 'Yes' to F more than \$5,000. Check this box if no one recipient received more than \$5,000. Use case is needed	ted States. Complethis box if no one	ete if the organiza recipient received	ation answered ¹ d more than \$5,0	res' to Form 00. Use
1 (a) Name and address of organization or government	es of organization (b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Attached Statement		See Stmt See Stmt	5,710,768.	. 0	FMV	See Attached Statement	Various - See Attached Statement
	Enter total number of section 501(c)(3) and government organizations	ganizations					
3 Enter total numbe	Enter total number of other organizations						0
BAA For Privacy Act a	BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	e the Instructions for	r Form 990.	TEEA3901L 02/10/10	02/10/10	Scheo	Schedule I (Form 990) 2009

2009

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- 30

94-3213100

1(g) & 1(h)- Description of non-cash assistance or purpose h Grant	to support the development of Ingonyana Dance and Drama \$5,000.00 Group in Zimbabwe	to be used in connection with expanding mobile outreach \$25,000.00 services in East NYC and Brownsville, Brooklyn \$5,719.50 Spin & Close Grant	\$25,000.00 performance textualized and youth activities in the Bronk activities to the Bronk activities to the Bronk activities and youth activities activities and activities a	o support young people participation in Garden reprendences \$20,000.00 to support young people' participation in Apprentices Program constributes in 20 huidinge	\$25,000.00 in Bushwick Brooking with extransion and strengthening to be a second	to be a set in your expansion of affordable housing and strengtherming the Chinatown Tenants Union to support affordable housing \$25,000.00 campaigns in New York City	to support young people' participation in Arts Education Career \$100,000.00 Development Program	in support of your organization's participation in beacons Young \$10,000.00 Adolescent Initiative (BYA)	to be used for general operating support to assist with carrying \$35,000.00 out the programs and activities of the CUP in NYC	to be used for general operating support to assist with carrying \$35,000.00 out the programs and activities of the CDC in NYC \$55,000.00 oneneral operating support	acc.ouc.ou support anouation anouating campaigning in MTC in support of organization's participation in Beacons Young \$40.000.00 Addusteent Initiative (RYA)			\$35,000.00 Manhattan Junior Staff Internship Program	in support of organizations participation in beacons Young \$40,000.00 Adolescent Initiative (BYA)	wenner equication, organizing, and readership training to \$25,000.00 strengthen domestic worker campaigns in New York City.	presenting and preserving the rich folkionc art of Puerto Recan \$35,000.00 and Latin American theatrical dance \$5,000.00 Grant TC 1261 \$15,000.00 Grant	Continuation of (org's) work to expand and enhance day laborer \$25,000.00 services in New York City.	to defray expenses of presenting Conressional briefing on \$5,000.00 CSBE report \$5,000.00 for joint curriculum project	Continuation of (orgis) work to expand and enhance day laborer \$25,000,00 services in New York City.	255,000.00 NVPS stipend	\$27,894.43 Spin & Close Grant	\$53,000.00 Spin & Close Grant to be used for general oneration support to assist with narrying	\$25,000.00 out the programs and activities of the Garfuna Coalition in NYC S25,000.00 out the programs and activities of the Garfuna Coalition in NYC Sisteria in Stremativity campaign to address sexual harassment in	 S25,000.00 NYC public schools S25,000.00 general operating support S27,214.51 Spin & Close Grant S37,214.51 Spin & Close Grant S880,000.00 Spin & Close Grant
1(d)- Cash Grant	5	\$25	\$2	\$ 4(\$ 2(\$2	\$2	\$10	\$1	\$3	\$3 \$2	 7 95	9 6 9	\$2	\$3	\$4	\$2	69 69 69 69 69	\$2	69 69	\$3	8 6	3	33	ŝ	89.28
1c- IRS Section if applicable	501(c) (3)	501(c) (3) 501(c) (3)	501(c) (3)	501(c) (3) 501(c) (3)	501(c) (3)	501(c) (3)	501(c) (3)	501(c) (3)	501(c) (3)	501(c) (3) 501(c) (3)	501(c) (3)	501(c) (3)	501(c) (3)	501(c) (3)	501(c) (3)	501(c) (3)	501(c) (3) 501(c) (3) 501(c) (3)	501(c) (3)	501(c) (3) 501(c) (3)	501(c) (3)	501(c) (3) 501(c) (3)	501(c) (3)	501(c) (3)	501(c) (3)	501(c) (3) 501(c) (3) 501(c) (3) 501(c) (3) 501(c) (3)
1(b)- EIN	68-0509385	33-1007278	13-3997265	13-3938080 11-1672743	20-8034010		13-3938080	11-2777066	11-3625306	26-4222895 16-1764680	000000-11	13-2761376	31-1720017	13-3571610	13-2761376	06-1629188	56-2545700 13-1623989 13-1623989	13-4178608	52-1268030 91-1678158		03-0518774 11-3451703	20-8967664	20-8967664	22-3690931	68-0509385 54-2115054
1(a) Cont Address of organization or government	392 41st Street Oakland, CA 94609	1204 Broadway, Brooklyn, New York 11221 409 Broad Street, Suite 206A, Sewickley, PA15143	841 Barretto Street, 2nd Floor, Bronx, New York 10474	225 West 34th Street, Suite 1112 New York, NY 10122 300 Jay Street, Room 320 Brooklyn, NY 11201	342 Broadway New York, NY 10013	2473 Valentine Avenue, Bronx, NY 10458	225 West 34th Street, Suite 1112, New York, New York 10122	345 43rd Street, Brooklyn, NY11232	310 Bowery New York, NY 10012	1360 Futton Street, Suite 314 Brooklyn, NY 11216 55 West 125th Street, 10th Floor, New York, NY 10027	091 Edst 14941 Street, Suite 210 Blonx, NT 10400 1000 Washington Avenue Recoklyn NY 11025	212 W 83rd Street, New York, NY 10024		42 Broadway, Suite 1827-35 New York, NY 10004	212 W 83rd Street New York, NT 10024	618 W. 142nd Street New York, NY 10031	64 Fulton Street, Suite 403 New York, NY 10038-2734 337 Alexander Avenue, Bronx, NY 10454 337 Alexander Avenue, Bronx, NY 10454	37-41 77th Street, 2nd Floor Jackson Heights, NY 11372	1112 16th Street, Suite 300 Washington DC, 20036 811 First Avenue, Suite 454 Seattle, WA 98104	322 8th Avenue, 3rd Floor New York, NY 10001	166-A 22nd Street Brooklyn, NY 11232 248 W 35th Street, Room 1202, New York, New York 10001-2505	up open society institute 400 w soun street, 4th Floor, New York, 10019 York, 10019 of 0.00000 Screety Institute 400 W 50th Street, 4th Floor, New York, New		ניט דיטפטר ויטסאומוויץ, וווט. זעט דמוג איינוטב טומונון ואמווט, אי 10302	382 41st Street Oakland, CA 94609 P.O. Box 3112 New York, NY 10163 PO Box 3723, Oakland, CA 94609 PO Box 3723, Oakland, CA 94609 PO Box 3723, Oakland, CA 94609
1(a)- Name of organization or government	1 Africa Matters	2 After Hours Project 3 Allegheny Land Trust	4 Bronx Academy of Arts and Dance (B.A.A.D!))	5 Brooklyn Botanic Garden 6 Brooklyn Museu m	7 Bushwick Housing Independence Project	8 CAAAV: Organizing Asian Communities	9 Center for Arts Education	10 Center for Family Life	11 Center for Urban Pedagogy (CUP)	12 Century Dance Complex 13 Changer, Inc.	14 Child Contractor New York	16 Children's Museum of Manhattan	17 College and Community	18 Coro New York Leadership Center	19 Cypress Hills Local Development Corporation	20 Damayan Migrant Workers' Association	 Diversity in Arts and Nations for Cultural Education (DANCE) East Side House, Inc East Side House, Inc 	23 El Centro de Hospitalidad	24 Environmental and Energy Study Institute 25 Facing the Future	26 Families for Freedom	27 FIERCE! 28 Fractured Atlas Prod	29 Friends of Fokal	Friends of Fokal	30 Garifuna Coalition USA (GCU)	31 Girls for Gender Equity32 Girls Write Now33 Global Pediatric AllianceGlobal Pediatric AllianceGlobal Pediatric Alliance

TIDES CENTER

34 Good Shepherd Services 35 Hanalei School PTSA Hanalei School PTSA	305 Seventh Avenue, 9th Floor, NY 10001 P.O. Box 1396 Hanalei, HI 96714 P.O. Box 1396 Hanalei, HI 96714	13-5598710 99-0305469 99-0305469	501(c) (3) 501(c) (3) 501(c) (3)	in support of organization's participation in Beacons Young \$10,000.00 Adolescent Initiative (BYA) \$5,000.00 To complete educational music program for Hanalei Schoot \$11,500.00 2008-2009 School year music program funding
36 Harlem Live 37 Commonweal. Inc 38 Jewish Home and Hospital	3075 Stone Oak Drive Douglasville, GA 30135 Attn: Vanessa Marcotte, CFO P.O. Box 316, Bolinas, California 94924 120 West 106th Street, New York, NY 10025	94-2366094 23-7071900	501(c) (3) 501(c) (3) 501(c) (3)	225,000.00 train youth in media and technology in New York. City \$24,640.05 Spin & Close Grant \$24,640.00 in support of participation in the Career Internship Nework (CIN) \$59,000.00 in support of participation in the Career Internship Nework (CIN)
39 Latin American and Caribbean Community Center, Inc. 40 Learning Disabilities Association of Michigan Learning Disabilities Association of Minnesota Learning Disabilities Association of New York 41 Mano a Mano: Mexican Culture Without Borders	3 West 29th Street, Suite #1030 New York, NY 10001 200 Museum Drive, Suite 101, Lansing, Mi 48933 6100 Golden Valley Road, Golden Valley, Minnesota 55422 1190 Trov- Schenectady Road, Latham, New York 12110 P.O. Box 670086 Flushing, NY 11367	20-040935 38-5144641 36-2545700	501(c) (3) 501(c) (3) 501(c) (3) 501(c) (3) 501(c) (3)	 \$25,000.00 out the program of activities of the Cidadao Global in NYC \$5,000.00 beldon State - based initiative Grant of 2009 \$5,000.00 beldon State - based Initiative grant of 2009 \$5,000.00 beldon State - based initiative grant of 2009 \$5,000.00 beldon State - based initiative grant of 2009 \$25,000.00 general support
42 Mirabal Sisters Cultural & Community Center	232 Third Street, #B402B Brooklyn, NY 11215	06-1629188	501(c) (3)	Campaign to ensure safe and affordable housing for low-income \$25,000.00 residents in West Harlem.
43 Mixteca Organization, Inc. 44 Multicultural Music Group	144 Bleecker Street Brooklyn, NY 11221 '43-22 50th Street, Suite 2E Woodside, NY 11377	11-3561651 13-3894314	501(c) (3) 501(c) (3)	Promoting Family Health education and prevention activities in \$25,000,00 New York City \$25,000,00 general support
45 Museum of Jewish Heritage	342 Madison Avenue, Suite 717, New York, New York 10017	13-3376265	501(c) (3)	for young people who participate in A Living Memorial to the \$25,000.00 Holocaust's High School Apprediceship Program
46 Natural Resources Council of Maine	3 Wade Street Augusta, ME 04330	01-0270690	501(c) (3)	in support of the Heaking Mas, Safer Froducts Campaign, o \$7,583.50 payments. Bis instruction of the Healihov Kide. Sefer Divoluter Commission 6
Natural Resources Council of Maine	3 Wade Street Augusta, ME 04330	01-0270690	501(c) (3)	
47 New York City AIDS Housing Network	2473 Valentine Avenue Bronx, NY 10458	13-4094385	501(c) (3)	\$25,000.00 NYC
48 New York City College of Technology 49 New York Foundation For the Arts 50 New York Historical Society		11-2529356 13-3376265	501(c) (3) 501(c) (3) 501(c) (3)	to provide college access and success services for older \$20,000.00 disconnected youth who have a desire to pursue their education \$15,000.00 2 ad Installment \$25,000.00 (CIN)
51 New York Writers Coalition 52 NICE (New Immigrant Community Empowerment)	I ne Graduate Center, CUNY 365 Fith Ave, Suite 5113 New York NY 10016 568 Bay Street, 2nd Floor Staten Island, NY 10304	31-1720017 11-3560625	501(c) (3) 501(c) (3)	to be used in connection with the Youth Writers' Program \$25,000.00 workshops, readings and publications in New York City \$25,000.00 Transition to a membership-led organization in New York City.
53 Opening Act 54 Pro-Choice Public Education Project	601 Waiton Avenue Bronx, NY 10451 165 Broadway 29th Floor, New York, NY 10038	13-3894314	501(c) (3) 501(c) (3)	to be used for general operating support to assist with carrying \$35,000.00 out the programs and activities of Opening Act in NYC \$6,000.00 Grants Out - Rench Deposit (spun)
55 Queens Community House 56 Queens Library Foundation	108-25 62nd Drive Forest Hills, NY 11375 261 Madison Avenue New York, NY 10014	11-2375583 11-3009405	501(c) (3) 501(c) (3)	\$10,000.00 Adolescent Initiative (BYA) \$30,000.00 Adolescent Initiative (BYA) \$30,000.00 to support Teen Net Mentor Program in support of rorazization's participation in the Career Internshin
57 Queens Museum of Art	at Snug Harbor Cultural Center 1000 Richmond Terrace Staten Islanc 23-7379930	nc 23-7379930	501(c) (3)	\$25,000.00 Network (CIN) (CIN) to be used for general operating support to assist with carrying
58 Restaurant Opportunities Center of NY	147 West 24th Street, 6th Floor New York, NY 10011	03-0522321	501(c) (3)	out the programs and activities of Brandworkers International of \$25,000.00 New York
59 RightRides for Women's Safety	76 Wadsworth Avenue Ground Floor New York, NY 10033	84-1668109	501(c) (3)	to be used on general operation support to assist with carrying \$50,000.00 out the programs and activities of the RightRides in NYC
60 Sadie Nash Leadership Project	37-43 77th Street, 2nd Floor Jackson Heights, NY 11372	11-3633912	501(c) (3)	\$25,000.00 programs for examination group women in YC. Systems for low-income young women in YC.
61 San Francisco School Alliance	220 Montgomery Street, Suite 1050, San Francisco, California 94104	94-3222869	501(c) (3)	\$145,000.00 participation of the output participation of the output of t
62 Sauti-Yetu Center for African Women 63 Social & Environmental Entrepreneurs	1360 Fulton Street, Suite 314 Brooklyn, NY 11216 11948 West Washington Blvd. Suite 201, Los Angeles, California 90066	20-1209795 95-4116679	501(c) (3) 501(c) (3)	
ocual a cinnominental cintepreneurs-091113 64 St. Cecilia's Church	11946 West Washington BWG. Sulle 201 Los Angeles, CA 90066 125 East 105th Street, New York, NY 10025	90-41100/9	501(c) (3) 501(c) (3)	521,500.00 repensionment of ideas Foundation GAP fund for granting \$25,000.00 one year general operating support To support the Global Health Fellowship at St. Luke's Rousevelt Uncerted Doce Tel.
65 St. Luke's Rooseveit Hospital Center	1111 Amsterdam Avenue New York, NY 10025	13-2997301	501(c) (3)	rospital center, inits grant is only to be used for starty support and/or protected time for the Director to work with CGCHI and \$7,500.00 not for travel related or other expenses.
St. Luke's Roosevelt Hospital Center		13-2997301	501(c) (3)	\$7,500.00 to support the Global Health Fellowship. in support of organization's participation in Beacons Young
66 St. Nicholas Neighborhood Preservation Services	80 Eighth Avenue - Mezz B New York, NY 10011		501(c) (3)	\$40,000.00 Adolescent Initiative (BYA) support the mercury reduction efforts of the Multi-Star Mercury
67 State Environmental Leadership Program	612 W Main Street, #302 Madison, WI 53703	02-0695647	501(c) (3)	\$18,500.00 Product Campain related activities

68 Staten Island Children's Museum	at Snug Harbor Cultural Center 1000 Richmond Terrace, Staten Island, New 23-737993	w 23-737993	501(c) (3)	for young people who participate in Staten Island Children's \$25,000.00 Museum
69 Success A New Beginning, Inc	10630 Haas Avenue Los Angeles, CA 90047	95-4089076	501(c) (3)	Awareness of the 2010 Census, Resource Development and Gather Data via Technology & Community Survey for Future \$15,000.00 Civic Engagement
70 The Nature Conservancy 71 The New York Botanical Garden 72 The News Literacy Project	322 Eight Avenue, 16th Floor, New York, New York 10001 Bronk River Parkway at Fordham Road, Bronx, NY 10458 The Poytner Institut-090212	13-1693134	501(c) (3) 501(c) (3) 501(c) (3)	 \$25,000.00 Youth \$25,000.00 (CIN) \$25,000.00 (CIN) \$6,214.23 Sin & Close Grant \$6,214.29 Sin & Close Grant
 The Northern Manhattan Arts Alliance (NoMAA) The Poytner Institute The Poytner Institute The Pro-Choice Public Education Project, Inc. 	242 W 27th Street. Suite 3B New York. NY 10001 801 Third Street South, St. Petersburg, Florida 33701 801 Third Street South, St. Petersburg, Florida 33701 P.O. Box 3952, New York, NY 10163	32-0250944	501(c) (3) 501(c) (3) 501(c) (3) 501(c) (3)	\$35,000.00 out the programs and activities of the NoMAA in NYC \$200,000.00 Spin & Close Grant \$5,053.49 Spin & Close Grant \$10,061.51 Spin & Close Grant Productions and durantities for hourisman
76 The Sylvia Rivera Law Project (SRLP) 77 Tides Foundation Tides Foundation Tides Foundation	1408 Commonwealth Avenue Bronx, NY 10472 P. O. Box 29903 San Francisco, CA 94129 P. O. Box 29903 San Francisco, CA 94129 P. O. Box 29903 San Francisco, CA 94129	51-0198509 51-0198509 51-0198509	501(c) (3) 501(c) (3) 501(c) (3) 501(c) (3)	 \$25,000.00 transpender communities in New York City. \$10,000.00 to support Hill Snowden Youth Grantmaking Funds \$12,182.74 general support \$12,500.00 to support Chicken and Egg Pictures Fund \$12,500.00 to support Chicken and Egg Pictures Fund
Tides Foundation Tides Foundation Tides Foundation Tides Foundation	P. O. Box 29903 San Francisco, CA 94129 P. O. Box 29903 San Francisco, CA 94129 P. O. Box 29903 San Francisco, CA 94129 P. O. Box 29903 San Francisco, CA 94129	51-0198509 51-0198509 51-0198509 51-0198509	501(c) (3) 501(c) (3) 501(c) (3) 501(c) (3)	 \$15,228.43 Foundation \$15,228.43 Foundation \$15,228.43 to support Alston Bannerman Fund \$15,228.43 to support Alston Bannerman Fund \$15,228.43 to support Chicken and Egg Pictures Fund \$20,000.00 to support Chicken and Egg Pictures Fund The Shared client is to support the Chicken and Egg
Tides Foundation Tides Foundation Tides Foundation Tides Foundation Tides Foundation Tides Foundation	 P. O. Box 29903 San Francisco. CA 94129 	51-0198509 51-0198509 51-0198509 51-0198509 51-0198509 51-0198509 51-0198509	501(c) (3) 501(c) (3) 501(c) (3) 501(c) (3) 501(c) (3) 501(c) (3) 501(c) (3)	 \$25,000.00 Philanthropic Fund of the Jewish Communal Fund \$25,380.71 Io support Fellow Stipend of Alston Bannerman Fund \$25,380.71 Io support Fellow Stipend of Alston Bannerman Fund \$25,773.00 To support Alston Bannerman Scholarship Fund \$27,500.00 to support Chicken and Egg Pictures Fund \$50,000.00 General support \$50,000.00 transfer of funds to grant making account
Tides Foundation Tides Foundation Tides Foundation-090108 Tides Foundation-090108 Tides Foundation-090108 Tides Foundation-090410 Tides Foundation-090410 Tides Foundation-090713 Tides Foundation-090713 Tides Foundation-090730 Tides Foundation-090730 Tides Foundation-090730 Tides Foundation-091014	Box 29903 San Francisco, CA Box 29903 San Francisco, CA	51-0198509 51-0198509 51-0198509 51-0198509 51-0198509 51-0198509 51-0198509 51-0198509 51-0198509 51-0198509 51-0198509 51-0198509 51-0198509	801(0) 80	
Tides Foundation-5494 Tides Foundation-5494 Tides Foundation-5494	P. O. Box 29903 San Francisco, CA 94129 P. O. Box 29903 San Francisco, CA 94129 P. O. Box 29903 San Francisco, CA 94129 Bot Einhit Austria, Mazzi B. Mani Vodi, NY 10011	51-0198509 51-0198509 51-0198509	501(c) (3) 501(c) (3) 501(c) (3) 501(c) (3)	\$185,133.00 Grant #1C1128-09-947 \$218,674.00 Grant #TC1128-09-847 \$251,721.00 Grant #TC1128-09-847 for young people who participate in the TORCH Internship \$40 000 00 Proversam
 24 LUNCH 29 Turning Point for Women and Families 80 United Sikhs in Service of America 81 University Settlement 	ed Eignin Avenue - mezz b, new York, ny 10011 245 23rd Sireet, 2nd Floor Brooklyn, NY 11215 P.O. Box 7203, New York, NY 10116 184 Eidnidge Street, New York, NY 10002	54-2177390 11-3483921 13-5562374	501(c) (3) 501(c) (3) 501(c) (3)	
82 UPROSE, Inc. 83 Urban Justice Center 84 Urban Word NYC 85 Vibe Theater Experience 86 Voces Latinas Corporation	P.O. Box 20178 Greeley Square Station New York, NY 10001 248 W 35th Street, Room 1202 New York, NY 10001-2505 242 W 27th Street, Suite 38, New York, New York 10001 123 William Street, 16th Floor New York, NY 10038 80A Fourth Avenue Brooklyn, NY 11217	11-2496531 13-342022 32-0250944non-profit 13-3442022 13-2312651	501(c) (3) 501(c) (3) 501(c) (3) 501(c) (3) 501(c) (3)	Youth leadership development around environmental \$25,000.00 2nd installment \$25,000.00 2nd installment \$25,000.00 to be used for programs in NY City \$25,000.00 to be used for programs in NY City ewpanding the Promotoras peer service delivery program and training immigrant Latinas from Queens as HIV educators and \$25,000.00 advocates

2009

Voices UnBroken
 Washington Heights CORNER Project (WHCP)
 Wallie Mae Rock Camp for Girls
 The Nation Institute
 Youth Represent Inc.
 Youth United For Community Action
 Youth United For Community Action

 157 Montague Street, 4th Floor Brooklyn, NY 11201
 501(c) (3)

 26 Court Street, Suite #505 Brooklyn, NY 11242
 84-1668109
 501(c) (3)

 26 Court Street, Suite #505 Brooklyn, NY 11242
 84-1668109
 501(c) (3)

 26 Metro Baptist Church 406 W. 40th Street New York, NY 10018
 03-0481206
 501(c) (3)

 115 East 15th Street, 8th Floor, New York, NW 10013-1507
 20-8034010
 501(c) (3)

 155 Avenue of The Americas 6th Floor New York, NY 10013-1507
 20-8034010
 501(c) (3)

 2135 Clarke Avenue, East Palo Alto, California 94303
 5013-1507
 501(c) (3)

 2135 Clarke Avenue, East Palo Alto, California 94303
 501(c) (3)
 501(c) (3)

 Write
 Your Way curriculum distribution, creative writing workshops for youth in alternative settings, and youth service \$25,000.00 provider trainings in NYC

 \$25,000.00 provider trainings in NYC
 \$25,000.00 provider trainings in NYC

 \$55,000.00 provider trainings in NYC
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Schedule I (Form 990) 2009 Tides Center				6	94-3213100 Page 2
Othe and	Individuals in the orm 990) if addition	United States. Colnal space is neede	mplete if the orga d.	anization answered 'Yes'	to Form 990, Part IV, line 22.
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Client Support, DPF, Sponsorship					
Contribution, Fellowship	61	157,430.			
Part IV Supplemental Information. Complete this part to		provide the information required in Part I, line	l ation required in F	2, and	any other additional information.
<u> </u>	tion of <u>How Grant</u>	<u>s are Used</u>			
Thorough due diligence is con	conducted in advance of	nce_of_funding_	funding to determine the group's	the_group's	
tax-exempt_status_and_whether_the_group_is		appropriate_from_a_mission_perspective.	<u>m_a_mission_p</u>	erspective.	
All_grantees receive a written grant agreement which indicates whether lobbying is	n_grant_agreem	ent_which_indic	cates_whether_	lobbying_is	
<u>permissible_and_by_accepting_payment,_the_g</u>		rantee	agrees to the conditions of the	ons of the	
award, which provide assurance	e_that_funds_w	<u>that funds will not be used</u>	l_for_any_prohibited	ibited	
purpose					
If_a grant_is_restricted_to_a_	L particular no	particular non-lobbying purpose, organizations	p <u>ose, organiz</u> a	itions further	
agree_that_(i)_any_portion_of_	<u>the grant not</u>	used for the	stated purpose must	e_must_be	
repaid, (ii) any change of purpose must	be	requested and approved in advance,	pproved in adv	vance, in	Schedule I (Form 990) 2009
DAA					

TEEA3902L 02/10/10

2009

Tides Center

94-3213100

Part I, Line 2 - Grantmaker's Description of How Grants are Used (continued)

writing and (ii) not to use any portion of the grant carry on propaganda or to attempt to influence specific legislation either by direct or grassroots lobbying.

Based on a risk assessment, we may require a progress report for certain grants nine months after the grant award. We ask the grantee to submit a two page narrative describing the use of the funds and activities undertaken as a result of the grant (including lobbying activity, if permitted), along with a financial report.

	Compens	sation Information	1	OMB No.	1545-004	47
SCHEDULE J (Form 990)	For certain Officers, Directo	rs, Trustees, Key Employees, and Highes ensated Employees	;t	20	09	
Department of the Treasury Internal Revenue Service	 Complete if the organization Attach to Form 9 	answered 'Yes' to Form 990, Part IV, line 90. ▶ See separate instructions.	∌ 23 .	Open to Inspe	o Publi	ŀC
Name of the organization			Employer identification r	number		
Tides Center			94-3213100			
Part Questions	Regarding Compensation				<u> </u>	
					Yes	No
1a Check the approp VII, Section A, lin	riate box(es) if the organization provided a e 1a. Complete Part III to provide any relev	valit intornation regarding these itemer				
First-class or	charter travel	Housing allowance or residence for				
Travel for cor	npanions	Payments for business use of pers				
Tax indemnifi	cation and gross-up payments	Health or social club dues or initiat				
Discretionary	spending account	Personal services (e.g., maid, cha	uffeur, chef)			
b If any of the boxe reimbursement of	s on line 1a are checked, did the organizat provision of all of the expenses described	tion follow a written policy regarding payn above? If 'No,' complete Part III to expla	nent or ain	. <u>1b</u>		
• • • • • • • • • • • • • • • • • • •	on require substantiation prior to reimbursi CEO/Executive Director, regarding the iten	ing or allowing expenses incurred by all o	officers, directors,			
3 Indicate which, if	any, of the following the organization uses	to establish the compensation of the org	anization's			
CEO/Executive D	irector. Check all that apply.					
X Compensatio	n committee	Written employment contract				
	compensation consultant	X Compensation survey or study				
	other organizations	X Approval by the board or compens	ation committee			
	5					
4 During the year,	did any person listed in Form 990, Part VII,	Section A, line 1a with respect to the fili	ng organization			
or a related organ	nce payment or change-of-control paymen	17		. 4a		Х
a Receive a Severa	receive payment from, a supplemental non	qualified retirement plan?		. 4b		Х
Denticipate in, or	receive payment from, a supplemental ner	mpensation arrangement?		4c		X
c Participate In, or	lines 4a-c, list the persons and provide the	applicable amounts for each item in Parl	t .			
If Yes to any of	ines 4a-c, list the persons and provide the	applicable anitotino for each termine an				
o I I [.] 501	(c)(3) and 501(c)(4) organizations must con	nnlete lines 5-9				
5 For persons lister	d in Form 990, Part VII, Section A, line 1a,	did the organization pay or accrue any c	ompensation			
contingent on the	• revenues of: ?			5a		X
a the organization	nization?			5b		X
	or 5b, describe in Part III.					
contingent on the	d in Form 990, Part VII, Section A, line 1a, enet earnings of:					
a The organization	?			. <u>6a</u>	ļ	X
b Any related organ	nization?			6b		X
	or 6b, describe in Part III.					
The second listed	in Form 990, Part VII, Section A, line 1a, o 5 5 and 6? If 'Yes,' describe in Part III	did the organization provide any non-fixed	1 payments not	. 7		x_
0 11/2	ts reported in Form 990, Part VII, paid or a n described in Regs. section 53.4958-4(a)(accrued pursuant to a contract that was si	ubject to the initial			x
If 'Ves' to line 8	did the organization also follow the rebutta	ble presumption procedure described in F	Regulations	_		x

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2009

		s, IIUSIGES, NEY I	ran II OIIICERS, DIFECTORS, ITUSTEES, NEY EITIPIOYEES, AITU III		Ica Linuvesi Voo		י אוואוואו איז	
For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations described in the instructions on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.	compe	insation must be report s that are not listed on	ed in Schedule J, report Form 990, Part VII.	compensation from th	e organization on row (i) a	and from related organi	zations described in the	instructions on
Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or	(B)(j).	(iii) must equal the ap		olumn (E) amounts on	column (E) amounts on Form 990, Part VII, line 1a.	a.		
		(B) Breakdown ((B) Breakdown of W-2 and/or 1099-MISC	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name	I	(i) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(D)-(I)(B)	Form 990 or Form 990-EZ
Drummond Pike	Θ	0.	0.	0.				
	€		0.	0	10, 8	16,893.	244,701.	0.
Ellen Friedman	Ξ	0.	.0					0.
	3		0.	0	8,93	20,865.	208,427.	0.
Carla Dartis	Ξ	158,200.	.0	0.	$\frac{1}{2} = \frac{2}{2}, \frac{168}{2}$	15,196	${176,164}$	
	0	0		0.		0.	0.	0.
Thomas G. David	Ξ	168,300.	0.	0.	. 4, 801.	14,286.	$\frac{187}{2}$	0.
	•		- 	0		0.	0.	0.
Giovanna Taormina	Ξ	166,875.	0.	0	0.	4, 831	${171}^{171}, \overline{706}$	
				0		0.	0.	0.
Shamil Idriss	Ξ	175,234.	0.	0	0.		180, 955.1	0.
						0.		, i
Alan Jenkins	Ξ	173,880.	0.	0	0. 4,782.	19,616.		0.
	€			0		0.	0.	0.
Jane Stafford	Ξ	144,834.	0.		557.	19,006.	169, 397.	0.
	(ii)		0.	0	.0.	0.	0.	0.
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	(ij)							
	Ξ			 				
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BAA				TEEA4102L	02/02/10		Sche	Schedule J (Form 990) 2009

Page 2

94-3213100

Schedule J (Form 990) 2009 Tides Center Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

BAA

TEEA4102L 02/02/10

Schedule J (Form 990) 2009 Tides Center	94-3213100 Page 3	е 3
Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.	a, 5b, 6a, 6b, 7, and 8. Also complete	
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BAA	Schedule J (Form 990) 2009	2009

TEEA4103L 06/23/09

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047 2009

Open To Public Inspection

Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number 94-3213100

Tides Center

Par	t Types of Property						
		(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	Meth	(d) od of determ revenues	iining
1 2 3 4	Art–Works of art. Art–Historical treasures Art–Fractional interests. Books and publications						
5 6 7 8	Clothing and household goods Cars and other vehicles Boats and planes Intellectual property		1	12,832.	FMV		
9 10 11 12	Securities—Publicly traded Securities—Closely held stock Securities—Partnership, LLC, or trust interests Securities—Miscellaneous	X	1	12,032.			
13 14	Qualified conservation contribution— Historic structures Qualified conservation contribution—Other						
15 16 17 18	Real estate Residential Real estate Commercial Real estate Other Collectibles Collectibles						
19 20 21	Food inventory Drugs and medical supplies Taxidermy						
22 23 24	Historical artifacts. Scientific specimens. Archeological artifacts.		3	4,537.	FMV		
25 26 27 28	Other ► (Computer Equip.) Other ► (L/H Improvement) Other ► () Other ► ()	X 	1	101,057.			
29	Number of Forms 8283 received by the organization organization completed Form 8283, Part IV, Done	on during the e Acknowled	e tax year for contributio Igement	ons for which the	29	Yes	s No
	During the year, did the organization receive by co hold for at least three years from the date of the in purposes for the entire holding period?					30 a	<u> </u>
31	 If 'Yes,' describe the arrangement in Part II. Does the organization have a gift acceptance polic Does the organization hire or use third parties or r 				ns?	31	<u>X</u>
1	noncash contributions? If 'Yes.' describe in Part II.					<u>32a</u>	X
	If the organization did not report revenues in colur describe in Part II. For Privacy Act and Paperwork Reduction Act No					ule M (Form	990) 2009

Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

	Related Organizations and Unrelated Partnerships	Inrelated Partne	erships		OMB No. 1545-0047 2009 Obert to Public
Department of the Treasury Internal Revenue Service Mame of the organization	Complete if the organization answered tes to Form 250, Fartry, miles 33, 34, 33, 39, 01 37.	eparate instructions.	יור וח יחר ירר ידר יבר	Employer identification number	Inspection ation number
Tides Center				94-3213100	00
Part I Identification of Disregarded Entities (Complete if the organization answered	plete if the organization ans	vered 'Yes' to Form	n 990, Part IV, line	33.)	
(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity
The Pathway Home, LLC					
San Francisco, CA 94129 26-1640175	Veteran's Assistance	CA	2,072,174.	1,125,921.	Tides Center
Part II Identification of Related Tax-Exempt Organizations (Complete if the one or more related tax-exempt organizations during the tax year.)	izations (Complete if the organization answered ns during the tax year.)	ganization answer	ed 'Yes' to Form 9	'Yes' to Form 990, Part IV, line 34	34 because it had
(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity
Tides Inc.	Exec/Admin Svcs				
PO Box 29907	for Related Orgs				
San Francisco, CA 94129	& Facilities Mgt		I		
809	& Ops	CA	-	(T) (A) (J)	N/A
Tides Two Rivers Fund	Dev & Omerate				Tides
LELA	Multi-Tenant Non				Foundation/Ti
	Profit Centers	CA	11, Type I	509(a) (3)	des Center
Tides Foundation					
San Francisco, CA 94129					
51-0198509	Grantmaking	CA	2	509(a) (1)	N/A
BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	the Instructions for Form 990.	E	TEEA5001L 02/05/10	Sched	Schedule R (Form 990) (2009)

Ч	Schedule R (Form 990) 2009 Tides Center							94-3213100	Page 2
Related (Orgal re re	lated orde	Identification of Related Organizations Taxable as a F because it had one or more related organizations treat	Partnership (Com ted as a partnersh	Part II Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)	ation answered 'Y ear.)	es' to Forn	n 990, Part IV,	line 34
(B) Primary Activity	ctivity	(C) Legal domicile (state or	(D) Direct controlling entity	(E) Predominant income (related, unrelated, excluded	(F) Share of total income	(G) Share of end-of-year assets	(H) Dispropor- tionate allocations?	Code V-UBI amount in box 20 of Schedule	(J) General or managing partner?
		roreign country)		sections 512-514)			Yes No	(Form 1065)	Yes No
				_					

Schedule R (Form 990) 2009 Tides Center Part V Transactions With Related Organizations (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34,	94-3213100 34, 35, or 36.)	Page 3
		Yes No
 c Gift, grant, or capital contribution from other organization(s) d Loans or loan guarantees to or for other organization(s) e Loans or loan guarantees by other organization(s) 		
 f Sale of assets to other organization(s) g Purchase of assets from other organization(s) h Exchange of assets i Lease of facilities, equipment, or other organization(s) 		1f X 1g X 1i X X X
 J Lease of facilities, equipment, or other assets from other organization(s) k Performance of services or membership or fundraising solicitations for other organization(s) l Performance of services or membership or fundraising solicitations by other organization(s) m Sharing of facilities, equipment, mailing lists, or other assets n Sharing of paid employees 		1j X 1k X 1l X 1m X 1n X 1n X
 A Reimbursement paid to other organization for expenses P Reimbursement paid by other organization for expenses G Other transfer of cash or property to other organization(s) Other transfer of cash or property from other organization(s) 		10 X 1p X 1q X 1r X
is for information on who must complete this line, including covered relationships and transe of other organization		(C) Amount involved
(1) Tides Inc.	٩	45,000.
(2) Tides Inc.		326,880.
(3) Tides Inc.(4) Tides Inc.	×е	46,331. 75,355.
	ч	1,851,155.
(6) Tides Inc. BAA TEEA5003L 02/05/10	o Schedule R	465, 085. Schedule R (Form 990) (2009)

Schedule R (Form 990) 2009 Tides Center						94-3213100	Ч	Page 4
ganizatio		te if the organiza	ation ansv	(Complete if the organization answered 'Yes' to Form 990, Part IV, line 37.)	990, Part	IV, line 37.)		
Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total asset or gross revenue) that was not a related organization. See Instructions regarding exclusion for certain investment partnerships.	ip through which the ing exclusion for cert	organization conduct tain investment partr	ed more tha erships.	n five percent of its activit	ies (measur	ed by total asset or gros	ss	
(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	Are all partners section 501(c)(3) organizations?	IS Share of end-of-year assets	(F) Dispropor- tionate allocations?	(G) Code V-UBI amount in box 20 of Schedule K-1 Form (1065)	(H) General or managing partner?	er?
			Yes No		Yes No	1 1	Yes	No No
						_		
	- -							
					-			
							_	
						4		
	T	_						
					. <u> </u>			
				-	-			
	- -							
BAA		TEEA5004L 02/05/10		-		Schedule R (Form 990) (2009)	rm 990)	(2009)

Schedule R-1 (Form 990) 2009 Tides Center				94-3213100	3100 Page 2
≚	empt Organizations				
(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	Public charity status (if section 501(c)(3))	(F) Direct controlling entity
Tides Center PA 5700 Forbes Avenue					
<u>Pittsburgh, PA 15217</u>	-				
94-3349769	Program Management	PA	11, Type I	509 (a) 3	Tides Center
Tides Network	Support Tides				
PO Box 29198	Foundation, The Tides				
<u>San Francisco, CA 94129</u>	Center, and Tides,				
20-3395198	Inc	CA	11 Type II	509(a)3	N/A
<u>Tides Advocacy Fund</u>					
o, cA	Grantmaking, Project				
	Services	CA	501 (c) 4	N/A	N/A
ВАА	TEEA5102L 02/02/10	2/02/10		Schedu	Schedule R-1 (Form 990) 2009

Schedule R-1 (Form 990) 2009 Tides Center	94-3213100	13100 Page 5
Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)		
(A) Name of other organization	(B) Transaction type (a-r)	(C) Amount involved
Tides Inc.	<u>р</u> ,	13,761.
Tides Two Rivers Fund	·~~	45,094.
Tides Two Rivers Fund	0	3, 679.
Tides Foundation	g	2,981,442.
Tides Foundation	U	5,771,687.
Tides Foundation	ц	18,651.
Tides Foundation	0	36,761.
Tides Foundation	۵,	549,879.
Tides Foundation	ч	8,000.
BAA TEEA5105L 07/06/09	Sche	Schedule R-1 (Form 990) 2009

SCHEDULE	0
(Form 990)	

Supplemental Information to Form 990

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

OMB No. 1545-0047 2009

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															ļ						

Department of the Treasury Internal Revenue Service	Form 990 or to provide any additional information. ► Attach to Form 990.	inspection					
Name of the organization Tides Center		Employer identification number 94-3213100					
Form 990, Part	III, Line 1 - Organization Mission						
	nter operates projects promoting shared principles	of social justice and					
	e,_healthy_society						
The_Center's	work is organized in three main issue areas / prog	rams: Community					
Development	& Services, Environment & Health, and Policy, Strat	.egy_&_Global					
Initiatives.	We supported a total of 226 projects with more that	n 500 employees_and					
hundreds_of_	grantees that do work in the following_areas						
Form 990, Part	III, Line 4a - Program Service Accomplishments						
Policy_Strate	egy and Global Initiative Projects: 85+ Projects in	clude projects that					
work in the areas of Social Justice- Ethnic & Racial, LGBTQ, Government Reform,							
Religion, Eth	hics and Conscience, Human Rights, International De	velopment,					
Reproductive	Justice, Economic Opportunity, Activities: Civic E	ngagement, Advocacy,					
Leadership_De	evelopment, Think Tanks. We resettled Iraqi Refugee	s. We made grants to					
organizations	s in New York that focus on community development,	grassroots_activism,					
arts_and_cult	ture and social change and in support of HIV preven	tion around the world.					
We_published	reports including findings from a media analysis o	f_coverage_of					
immigration_i	issues in broadcast news and talk radio, by ideolog	y and region We					
produced an _i	international traveling exhibition of 30 renowned a	nd emerging					
contemporary	artists from 24 countries addressing violence agai	nst women and girls					
globally_and	their basic human rights to a safe life and securi	ty. We installed a					
scale_model_c	of our solar system on the National Mall in Washing	ton DC, providing					
visitors_a_po	owerful understanding of Earth's place in space.						
Form 990, Part I	II, Line 4b - Program Service Accomplishments						

Schedule O (Form 990) 2009	Page 2
Name of the organization	Employer identification number
Tides Center	94-3213100

Environment & Health Projects: 65+ projects working in the areas of Climate Change, Environmental Sustainability, Sustainable Food / Agriculture, Prevention Programs, HIV/AIDS Programs, Health Services / Healthcare Reform. Our work in 2009 included the following: We published reports and held summits on green jobs, we granted out funds to support "Green Technology" for clinics. We provided free sexual and reproductive health services to women and girls with insurance-related barriers through clinical visits; provided outreach services to homeless and marginally housed women in the Mission District. We promoted neighborhoods designed and operated to make it easy and convenient for ordinary people to live a healthier, high-quality lifestyle within our fair share of our planet's resources, and produced free mass-distributed videos explaining the perils of over-consumption. Form 990, Partill, Line 4c - Program Service Accomplishments Community Development & Services: 67+ projects working in the areas of Education and Training, Youth Development / Organizing, Human Services / Social Services, Women's Empowerment, Income Enhancement / Workforce Development, Homelessness / Housing Services, Violence / Crime Prevention, Education Reform and Leadership Development. In 2009 we provided free online bankruptcy counseling; we provided self-esteem trainings for providers working with challenged youth in the juvenile justice system. We held a conference for the exchange of ideas about urban policy strategies in the Great Lakes Region, convened providers of services for youth focusing on the connection between health & violence, and supported provision of innovative supportive services for veterans and Bay Area residents transitioning from living on the streets. We had a successful National Conference in NYC in May and will have a Men's Training institute coming up this fall. We collaborated with other organizations to present a series of Domestic	Form 990, Part III, Line 4b - Program Service Accomplishments (continued)
HIV/AIDS Programs, Health Services / Healthcare Reform. Our work in 2009 included the following: We published reports and held summits on green jobs, we granted out funds to support "Green Technology" for clinics. We provided free sexual and reproductive health services to women and girls with insurance-related barriers through clinical visits; provided outreach services to homeless and marginally housed women in the Mission District. We promoted neighborhoods designed and operated to make it easy and convenient for ordinary people to live a healthier, high-quality lifestyle within our fair share of our planet's resources, and produced free mass-distributed videos explaining the perils of over-consumption. Form 990, PartIII, Line 4c - Program Service Accomplishments Community Development & Services: 67+ projects working in the areas of Education and Training, Youth Development / Organizing, Human Services / Social Services, Women's Empowerment, Income Enhancement / Workforce Development, Homelessness / Housing Services, Violence / Crime Prevention, Education Reform and Leadership Development. In 2009 we provided free online barkruptcy counseling: we provided self-esteem trainings for providers working with challenged youth in the juvenile justice system. We held a conference for the exchange of ideas about urban policy strategies in the Great Lakes Region, convened providers of services for youth focusing on the connection between health & violence, and supported provision of innovative supportive services for veterans and Bay Area residents transitioning from living on the streets. We had a successful National Conference in NYC in May and will have a Men's Training institute coming up	Environment & Health Projects: 65+ projects working in the areas of Climate Change,
<pre>the following: We published reports and held summits on green jobs, we granted out funds to support "Green Technology" for clinics. We provided free sexual and reproductive health services to women and girls with insurance-related barriers through clinical visits; provided outreach services to homeless and marginally housed women in the Mission District. We promoted neighborhoods designed and operated to make it easy and convenient for ordinary people to live a healthier, high-guality lifestyle within our fair share of our planet's resources, and produced free mass-distributed videos explaining the perils of over-consumption. Form 990, Part III, Line 4c - Program Service Accomplishments Community Development & Services: 67+ projects working in the areas of Education and Training, Youth Development / Organizing, Human Services / Social Services, Women's Empowerment, Income Enhancement / Workforce Development, Homelessness / Housing Services, Violence / Crime Prevention, Education Reform and Leadership Development. In 2009 we provided free online bankruptcy counseling; we provided self-esteem trainings for providers working with challenged youth in the juvenile justice system. We held a Conference for the exchange of ideas about urban policy strategies in the Great Lakes Region, convened providers of services for youth focusing on the connection between health & violence, and supported provision of innovative supportive services for veterans and Bay Area residents transitioning from living on the streets. We had a successful National Conference in NYC in May and will have a Men's Training institute coming up</pre>	Environmental Sustainability, Sustainable Food / Agriculture, Prevention Programs,
<pre>funds to support "Green Technology" for clinics. We provided free sexual and reproductive health services to women and girls with insurance-related barriers through clinical visits; provided outreach services to homeless and marginally housed women in the Mission District. We promoted neighborhoods designed and operated to make it easy and convenient for ordinary people to live a healthier, high-guality lifestyle within our fair share of our planet's resources, and produced free mass-distributed videos explaining the perils of over-consumption. Form 990, PartIII, Line 4c - Program Service Accomplishments Community Development & Services: 67+ projects working in the areas of Education and Training, Youth Development / Organizing, Human Services / Social Services, Women's Empowerment, Income Enhancement / Workforce Development, Homelessness / Housing Services, Violence / Crime Prevention, Education Reform and Leadership Development. In 2009 we provided free online bankruptcy counseling; we provided self-esteem trainings for providers working with challenged youth in the juvenile justice system. We held a conference for the exchange of ideas about urban policy strategies in the Great Lakes Region, convened providers of services for youth focusing on the connection between health & violence, and supported provision of innovative supportive services for veterans and Bay Area residents transitioning from living on the streets. We had a successful National Conference in NYC in May and will have a Men's Training institute coming up</pre>	HIV/AIDS Programs, Health Services / Healthcare Reform. Our work in 2009 included
reproductive health services to women and girls with insurance-related barriers through clinical visits; provided outreach services to homeless and marginally housed women in the Mission District. We promoted neighborhoods designed and operated to make it easy and convenient for ordinary people to live a healthier, high-guality lifestyle within our fair share of our planet's resources, and produced free mass-distributed videos explaining the perils of over-consumption. Form 990, PartIII, Line 4c - Program Service Accomplishments Community Development & Services: 67+ projects working in the areas of Education and Training, Youth Development / Organizing, Human Services / Social Services, Women's Empowerment, Income Enhancement / Workforce Development, Homelessness / Housing Services, Violence / Crime Prevention, Education Reform and Leadership Development. In 2009 we provided free online bankruptcy counseling; we provided self-esteem trainings for providers working with challenged youth in the juvenile justice system. We held a conference for the exchange of ideas about urban policy strategies in the Great Lakes Region, convened providers of services for youth focusing on the connection between health & violence, and supported provision of innovative supportive services for veterans and Bay Area residents transitioning from living on the streets. We had a successful National Conference in NYC in May and will have a Men's Training institute coming up	the following: We published reports and held summits on green jobs, we granted out
<pre>through clinical visits; provided outreach services to homeless and marginally housed women in the Mission District. We promoted neighborhoods designed and operated to make it easy and convenient for ordinary people to live a healthier, high-guality lifestyle within our fair share of our planet's resources, and produced free mass-distributed videos explaining the perils of over-consumption. Form 990, Part III, Line 4c - Program Service Accomplishments Community Development & Services: 67+ projects working in the areas of Education and Training, Youth Development / Organizing, Human Services / Social Services, Women's Empowerment, Income Enhancement / Workforce Development, Homelessness / Housing Services, Violence / Crime Prevention, Education Reform and Leadership Development. In 2009 we provided free online bankruptcy counseling; we provided self-esteem trainings for providers working with challenged youth in the juvenile justice system. We held a conference for the exchange of ideas about urban policy strategies in the Great Lakes Region, convened providers of services for youth focusing on the connection between health & violence, and supported provision of innovative supportive services for veterans and Bay Area residents transitioning from living on the streets. We had a successful National Conference in NYC in May and will have a Men's Training institute coming up</pre>	funds to support "Green Technology" for clinics. We provided free sexual and
<pre>housed women in the Mission District. We promoted neighborhoods designed and operated to make it easy and convenient for ordinary people to live a healthier, high-guality lifestyle within our fair share of our planet's resources, and produced free mass-distributed videos explaining the perils of over-consumption. Form 990, Parl III, Line 4c - Program Service Accomplishments Community Development & Services: 67+ projects working in the areas of Education and Training, Youth Development / Organizing, Human Services / Social Services, Women's Empowerment, Income Enhancement / Workforce Development, Homelessness / Housing Services, Violence / Crime Prevention, Education Reform and Leadership Development. In 2009 we provided free online bankruptcy counseling; we provided self-esteem trainings for providers working with challenged youth in the juvenile justice system. We held a conference for the exchange of ideas about urban policy strategies in the Great Lakes Region, convened providers of services for youth focusing on the connection between health & violence, and supported provision of innovative supportive services for veterans and Bay Area residents transitioning from living on the streets. We had a successful National Conference in NYC in May and will have a Men's Training institute coming up</pre>	reproductive health services to women and girls with insurance-related barriers
<pre>operated to make it easy and convenient for ordinary people to live a healthier, high-guality lifestyle within our fair share of our planet's resources, and produced free mass-distributed videos explaining the perils of over-consumption. Form 990, Part III, Line 4c - Program Service Accomplishments Community Development & Services: 67+ projects working in the areas of Education and Training, Youth Development / Organizing, Human Services / Social Services, Women's Empowerment, Income Enhancement / Workforce Development, Homelessness / Housing Services, Violence / Crime Prevention, Education Reform and Leadership Development. In 2009 we provided free online bankruptcy counseling; we provided self-esteem trainings for providers working with challenged youth in the juvenile justice system. We held a conference for the exchange of ideas about urban policy strategies in the Great Lakes Region, convened providers of services for youth focusing on the connection between health & violence, and supported provision of innovative supportive services for veterans and Eay Area residents transitioning from living on the streets. We had a successful National Conference in NYC in May and will have a Men's Training institute coming up</pre>	through clinical visits; provided outreach services to homeless and marginally
high-quality lifestyle within our fair share of our planet's resources, and produced free mass-distributed videos explaining the perils of over-consumption. Form 990, Part III, Line Ac - Program Service Accomplishments Community Development & Services: 67+ projects working in the areas of Education and Training, Youth Development / Organizing, Human Services / Social Services, Women's Empowerment, Income Enhancement / Workforce Development, Homelessness / Housing Services, Violence / Crime Prevention, Education Reform and Leadership Development. In 2009 we provided free online bankruptcy counseling; we provided self-esteem trainings for providers working with challenged youth in the juvenile justice system. We held a conference for the exchange of ideas about urban policy strategies in the Great Lakes Region, convened providers of services for youth focusing on the connection between health & violence, and supported provision of innovative supportive services for veterans and Bay Area residents transitioning from living on the streets. We had a successful National Conference in NYC in May and will have a Men's Training institute coming up	housed women in the Mission District. We promoted neighborhoods designed and
free mass-distributed videos explaining the perils of over-consumption. Form 990, Part III, Line 4c - Program Service Accomplishments Community Development & Services: 67+ projects working in the areas of Education and Training, Youth Development / Organizing, Human Services / Social Services, Women's Empowerment, Income Enhancement / Workforce Development, Homelessness / Housing Services, Violence / Crime Prevention, Education Reform and Leadership Development. In 2009 we provided free online bankruptcy counseling; we provided self-esteem trainings for providers working with challenged youth in the juvenile justice system. We held a conference for the exchange of ideas about urban policy strategies in the Great Lakes Region, convened providers of services for youth focusing on the connection between health & violence, and supported provision of innovative supportive services for veterans and Bay Area residents transitioning from living on the streets. We had a successful National Conference in NYC in May and will have a Men's Training institute coming up	operated to make it easy and convenient for ordinary people to live a healthier,
Form 990, Part III, Line 4c - Program Service Accomplishments Community Development & Services: 67+ projects working in the areas of Education and Training, Youth Development / Organizing, Human Services / Social Services, Women's Empowerment, Income Enhancement / Workforce Development, Homelessness / Housing Services, Violence / Crime Prevention, Education Reform and Leadership Development. In 2009 we provided free online bankruptcy counseling; we provided self-esteem trainings for providers working with challenged youth in the juvenile justice system. We held a conference for the exchange of ideas about urban policy strategies in the Great Lakes Region, convened providers of services for youth focusing on the connection between health & violence, and supported provision of innovative supportive services for veterans and Bay Area residents transitioning from living on the streets. We had a successful National Conference in NYC in May and will have a Men's Training institute coming up	high-quality lifestyle within our fair share of our planet's resources, and produced
Community Development & Services: 67+ projects working in the areas of Education and Training, Youth Development / Organizing, Human Services / Social Services, Women's Empowerment, Income Enhancement / Workforce Development, Homelessness / Housing Services, Violence / Crime Prevention, Education Reform and Leadership Development. In 2009 we provided free online bankruptcy counseling; we provided self-esteem trainings for providers working with challenged youth in the juvenile justice system. We held a conference for the exchange of ideas about urban policy strategies in the Great Lakes Region, convened providers of services for youth focusing on the connection between health & violence, and supported provision of innovative supportive services for veterans and Bay Area residents transitioning from living on the streets. We had a successful National Conference in NYC in May and will have a Men's Training institute coming up	free mass-distributed videos explaining the perils of over-consumption.
67+ projects working in the areas of Education and Training, Youth Development / Organizing, Human Services / Social Services, Women's Empowerment, Income Enhancement / Workforce Development, Homelessness / Housing Services, Violence / Crime Prevention, Education Reform and Leadership Development. In 2009 we provided free online bankruptcy counseling; we provided self-esteem trainings for providers working with challenged youth in the juvenile justice system. We held a conference for the exchange of ideas about urban policy strategies in the Great Lakes Region, convened providers of services for youth focusing on the connection between health & violence, and supported provision of innovative supportive services for veterans and Bay Area residents transitioning from living on the streets. We had a successful National Conference in NYC in May and will have a Men's Training institute coming up	Form 990, Part III, Line 4c - Program Service Accomplishments
Organizing, Human Services / Social Services, Women's Empowerment, Income Enhancement / Workforce Development, Homelessness / Housing Services, Violence / Crime Prevention, Education Reform and Leadership Development. In 2009 we provided free online bankruptcy counseling; we provided self-esteem trainings for providers working with challenged youth in the juvenile justice system. We held a conference for the exchange of ideas about urban policy strategies in the Great Lakes Region, convened providers of services for youth focusing on the connection between health & violence, and supported provision of innovative supportive services for veterans and Bay Area residents transitioning from living on the streets. We had a successful National Conference in NYC in May and will have a Men's Training institute coming up	Community Development & Services:
Enhancement / Workforce Development, Homelessness / Housing Services, Violence / Crime Prevention, Education Reform and Leadership Development. In 2009 we provided free online bankruptcy counseling; we provided self-esteem trainings for providers working with challenged youth in the juvenile justice system. We held a conference for the exchange of ideas about urban policy strategies in the Great Lakes Region, convened providers of services for youth focusing on the connection between health & violence, and supported provision of innovative supportive services for veterans and Bay Area residents transitioning from living on the streets. We had a successful National Conference in NYC in May and will have a Men's Training institute coming up	67+ projects working in the areas of Education and Training, Youth Development /
Crime Prevention, Education Reform and Leadership Development. In 2009 we provided free online bankruptcy counseling; we provided self-esteem trainings for providers working with challenged youth in the juvenile justice system. We held a conference for the exchange of ideas about urban policy strategies in the Great Lakes Region, convened providers of services for youth focusing on the connection between health & violence, and supported provision of innovative supportive services for veterans and Bay Area residents transitioning from living on the streets. We had a successful National Conference in NYC in May and will have a Men's Training institute coming up	Organizing, Human Services / Social Services, Women's Empowerment, Income
free online bankruptcy counseling; we provided self-esteem trainings for providers working with challenged youth in the juvenile justice system. We held a conference for the exchange of ideas about urban policy strategies in the Great Lakes Region, convened providers of services for youth focusing on the connection between health & violence, and supported provision of innovative supportive services for veterans and Bay Area residents transitioning from living on the streets. We had a successful National Conference in NYC in May and will have a Men's Training institute coming up	Enhancement / Workforce Development, Homelessness / Housing Services, Violence /
<pre>working with challenged youth in the juvenile justice system. We held a conference for the exchange of ideas about urban policy strategies in the Great Lakes Region, convened providers of services for youth focusing on the connection between health & violence, and supported provision of innovative supportive services for veterans and Bay Area residents transitioning from living on the streets. We had a successful National Conference in NYC in May and will have a Men's Training institute coming up</pre>	Crime Prevention, Education Reform and Leadership Development. In 2009 we provided
for the exchange of ideas about urban policy strategies in the Great Lakes Region, convened providers of services for youth focusing on the connection between health & violence, and supported provision of innovative supportive services for veterans and Bay Area residents transitioning from living on the streets. We had a successful National Conference in NYC in May and will have a Men's Training institute coming up	free online bankruptcy counseling; we provided self-esteem trainings for providers
convened providers of services for youth focusing on the connection between health & violence, and supported provision of innovative supportive services for veterans and Bay Area residents transitioning from living on the streets. We had a successful National Conference in NYC in May and will have a Men's Training institute coming up	working with challenged youth in the juvenile justice system. We held a conference
violence, and supported provision of innovative supportive services for veterans and Bay Area residents transitioning from living on the streets. We had a successful National Conference in NYC in May and will have a Men's Training institute coming up	for the exchange of ideas about urban policy strategies in the Great Lakes Region,
Bay Area residents transitioning from living on the streets. We had a successful National Conference in NYC in May and will have a Men's Training institute coming up	convened providers of services for youth focusing on the connection between health &
National Conference in NYC in May and will have a Men's Training institute coming up	violence, and supported provision of innovative supportive services for veterans and
	Bay Area residents transitioning from living on the streets. We had a successful
this fall. We collaborated with other organizations to present a series of Domestic	National Conference in NYC in May and will have a Men's Training institute coming up
	this fall. We collaborated with other organizations to present a series of Domestic
Violence Leadership Forums, bringing together nonprofit and city government leaders.	Violence Leadership Forums, bringing together nonprofit and city government leaders.

Schedule O (Form 990) 2009	Page 2
Name of the organization Tides Center	Employer identification number 94-3213100
Form 990, Part III, Line 4d - Other Program Services Description	
Pathway Home provides a residential recovery program spec	ifically_created_for,_and
dedicated to serve veterans who have served in areas of th	he world such as
Afghanistan and Iraq. The goal of Pathway is to provide a	a comprehensive program of
	ontinue to recover from the
stressors of war or combat or other traumatic military-rel	lated stressors.
Form 990, Part VI, Line 6 - Explanation of Classes of Members or Shareh	nolder
Tides Network is the sole member.	
Form 990, Part VI, Line 7b - Decisions of Governing Body Approval by Memb	ers or Shareholders
Certain decisions of the Tides Center are subject to the a	approval power of Tides
Network.	
Form 990, Part VI, Line 11 - Form 990 Review Process	
The Form 990 is made available to the full Board, and the	Audit Committee and Legal
Counsel review prior to submission.	
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcemen	t of Conflicts
On an annual basis, the directors, officers and key employ	yees are requested to
complete a conflict of interest disclosure survey.	·
Form 990, Part VI, Line 15b - Compensation Review & Approval Process for C	Officers & Key Employees
The Tides Network Board of Directors personnel committee i	is tasked with reviewing
the CEO performance and compensation annually. Historical	lly, compensation studies
have been used for top management and other officers and k	key employees. In 2009,
due to the economic downturn, salaries were reduced for mo	ost cental office staff and
all of top management, so no compensation analysis was dom	ne.
Form 990 , Part VI, Line 17 - List of States which this Return is Filed	
AL AK AZ AR CA CO CT DC FL GA IL KS KY ME MD MA MI MN MO	MS NH NM NJ NY NC ND OH
OK OR PA RI SC TN UT VA WA WV WI	

Schedule **O** (Form 990) 2009

Schedule 0 (Form 990) 2009	Page 2
Name of the organization	Employer identification number
Tides Center	94-3213100
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available	
The Organization's federal exemption application, each year's l	Form 990 and audited
financial statements are available to the public upon request.	

Schedule 0 (Form 990) 2009	Page 2
Schedule 0 (Form 990) 2009 Name of the organization	Employer identification number
Tides Center	94-3213100
· ·	

Form 886	8 (Rev 4-2009)	Page
,	are filing for an Additional (Not Automatic) 3-Month Extension, complete	
Note. Only	y completé Part II if you have already been granted an automatic 3-month	extension on a previously filed Form 8868.
• If you	are filing for an Automatic 3-Month Extension, complete only Part I (on pa	
Part II	Additional (Not Automatic) 3-Month Extension of Time.	
	Name of Exempt Organization	Employer identification number
Type or print	Tides Center	94-3213100
The backs	Number, street, and room or suite number. If a P.O. box, see instructions.	For IRS use only
File by the extended due date for filing the	PO Box 29907	
return. See instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	San Francisco, CA 94129-0907	
Check type	e of return to be filed (File a separate application for each return):	
X Form 9		Form 1041-A Form 6069
Form 9	990-BL Form 990-T (section 401(a) or 408(a) trust)	Form 4720 Form 8870
Form 9	P90-EZ Form 990-T (trust other than above)	Form 5227
STOP! Do	not complete Part II if you were not already granted an automatic 3-month	extension on a previously filed Form 8868.
The bo	ooks are in care of <pre>Lori Eason</pre>	
Teleph	one No. ► (415) 561-6300 FAX No. ►	
	organization does not have an office or place of business in the United Stat	es, check this box
• If this is	s for a Group Return, enter the organization's four digit Group Exemption N	Number (GEN) If this is for the
	ıp, check this box► 🦳 . If it is for part of the group, check this box ►	
-	the extension is for.	
	uest an additional 3-month extension of time until $11/15$, 2	0 10.
5 For c	alendar year 2009 , or other tax year beginning,	20 , and ending , 20 .
6 If this	s tax year is for less than 12 months, check reason:	
	in detail why you need the extension The Organization re	
	formation necessary to file a complete and accu	
	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the ter fundable credits. See instructions.	
payme	application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable ents made. Include any prior year overpayment allowed as a credit and any form 8868	v amount paid previously
	ce Due. Subtract line 8b from line 8a. Include your payment with this form, TD coupon or, if required, by using EFTPS (Electronic Federal Tax Payme	
	/ Signature and Verificat	tion
Inder penalties orrect, and co	s of perjuly, I deverte that have examined this form including accompanying schedules and state ender and that am authorized to prepare this form.	ments, and to the best of my knowledge and belief, it is true,
ignature 🏲/	//////////////////////////////////////	Date ► UIII

BAA

FIFZ0502L 03/11/09

Form 8868 (Rev 4-2009)

Application for Extension of Time To File an Exempt Organization Return

X

Department of the Treasury Internal Revenue Service

File a separate application for each return.

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box.

• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension – check this box and complete Part I only.....

All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing *(e-file).* Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit *www.irs.gov/efile* and click on *e-file for Charities & Nonprofits.*

	Name of Exempt Organization			Employer identification	on number
Type or print	Tides Conton			94-3213100	
File by the	Tides Center Number, street, and room or suite numb	an If a B.O. have eas instructions		94-3213100	
due date for	, ,	er. If a P.O. box, see instituctions.			
filing your return. See	PO Box 29907				
instructions.		code. For a foreign address, see instructions.			
	San Francisco, CA 9	4129-0907			
	f return to be filed (file a separa		_		
X Form 990		Form 990-⊤ (corporation)	Form 472	0	
Form 990	-BL	Form 990-⊤ (section 401(a) or 408(a) trust)	Form 522	7	
Form 990	-EZ	Form 990-T (trust other than above)	Form 606	9	
Form 990	-PF	Form 1041-A	Form 887	0	<u></u>
Telephone If the orga If this is for check this the extense 1 I request until _ The extor ▼ X	No \blacktriangleright (415) 561-6300 anization does not have an office or a Group Return, enter the org box \blacktriangleright . If it is for part of sion will cover. it an automatic 3-month (6 mont 8/15 , 20 10 , to file ension is for the organization's r calendar year 20 09 or		box	this is for the who	ble group,
▶ □	tax year beginning	, 20, and ending, 20			
2 If this ta	x year is for less than 12 month	s, check reason: 🗌 Initial return 🗌 Final re	turn Cl	nange in accounti	ng period
3a If this a <u>nonrefu</u>	pplication is for Form 990-BL, 99 ndable credits. See instructions.	0-PF, 990-T, 4720, or 6069, enter the tentative tax, le	ss any	3a \$	0.
b If this ap made. I	pplication is for Form 990-PF or hclude any prior year overpayme	990-T, enter any refundable credits and estimated tax ent allowed as a credit.	payments	3b\$	0.
c Balance deposit See inst	Due. Subtract line 3b from line with FTD coupon or, if required, ructions	3a. Include your payment with this form, or, if required by using EFTPS (Electronic Federal Tax Payment Sy	d, stem).	3c \$	0.
Caution. If yo payment instr		ic fund withdrawal with this Form 8868, see Form 845	3-EO and Form	8879-EO for	
BAA For Priv	acy Act and Paperwork Reducti	on Act Notice, see instructions.		Form 8868	(Rev. 4-2009)



Form	990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) OMB No. 1545-0047

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

	For th	e 2008 calend	ar year, c	or tax year beginning		, 2008, and ending	g	,	
в	Check if	f applicable:					D Employ	/er Identifi	cation Number
	Add	dress change	Please use IRS label	Tides Center			94-	32131	.00
	Na	me change	or print or type.	PO Box 29907			E Teleph	one numbe	er
		tial return	See specific	San Francisco, CA	94129-0907		(41	5) 56	51-6300
	\vdash		Instruc					<u> </u>	
		mination	tions.				C •		106 664 012
		nended return	Γ		mmond Dilro		H(a) Is this a group retu		106,664,812. ates? Yes X No
	Apj	plication pending		and address of principal officer: Dr			H(b) Are all affiliates inc		
				As C Above	F		If 'No,' attach a list		ructions) Yes No
<u> </u>	Tax	exempt status			4947(a)(1)	or 527			
<u> </u>	Web		w.tide		4		H(c) Group exemption n	umber 🕨	
K			X Corpora	ation Trust Association	Other►	L Year of Format	ion: 1994 M :	State of leg	gal domicile: CA
Pa	irt I	Summa							
	1			ganization's mission or most si					
ø	-	<u>social_cl</u>	<u>hange</u>	and educational pr	ograms				
Governance	-								
ern	-								
3oV		Check this bo		if the organization discontinue					<i>c</i>
				bers of the governing body (P					6
es				t voting members of the gover				4	6
viti				yees (Part V, line 2a)				6	814
Activities &	1			eers (estimate if necessary) ousiness revenue from Part VI					0.
	1	<u> </u>		s taxable income from Form 99				7b	0.
	U U	inet unierateu	Dusiness		0*1, III 6 04		1		
		o					Prior Year	200	Current Year
e	1			ts (Part VIII, line 1h)					88,985,021.
Revenue	E Contraction of the second se			ue (Part VIII, line 2g)					7,333,213.
Rev	1		•	art VIII, column (A), lines 3, 4,					1,508,244.
				II, column (A), lines 5, 6d, 8c,					<u>129,693.</u> 97,956,171.
				nes 8 through 11 (must equal					
	1			ounts paid (Part IX, column (A				120.	17,919,104.
				members (Part IX, column (A)					
S	15	Salaries, othe	r comper	nsation, employee benefits (Pa	rt IX, column (A),	lines 5-10)			34,635,038.
Expenses	16a	Professional f	undraisin	ig fees (Part IX, column (A), lii	ne 11e)		. 89,5	508.	232,916.
xpe	b	Total fundrais	ing exper	nses (Part IX, column (D), line	25) ►	7,819,205.			
ш				X, column (A), lines 11a-11d,				949.	33,407,166.
		•	•	nes 13-17 (must equal Part IX,	•				86,194,224.
				s. Subtract line 18 from line 12					11,761,947.
* 8		rice ress	CAPCINSC.	3. Oubtract fine to it off fine 12					End of Year
Net Assets or -und Balances	20	Total acceta (Dert V li	no 16)			Beginning of Y 73, 382, 7		86,708,665.
Ass. Bal		,		ne 16)					6,612,175.
und			•						
hereninin				ances. Subtract line 21 from lin	ne 20		68,306,9	168.	80,096,490.
Pe	irt II	Signatı							
		Under penalties true, correct, a	s of perjury, nd complete	I declare that I have examined this reture. Declaration of preparer (other than of	rn, including accompan icer) is based on all inf	ying schedules and sta prmation of which prep	itements, and to the bes arer has any knowledge.	of my kno	owledge and belief, it is
~ .							1 1/ . /	a.a	a
Sig							Date	(0	<u> </u>
He	re	S G II	OL NY	Friendline	- C. c.	· the			
		- 711	ent	triedwar	YXP	where I	/P		
		iype or pr	nt name án	a uue.				10.	
_						Date	Check if self-	(see	parer's identifying number instructions)
Pa		Preparer's				- 11/1/0/	employed		_
Pro	e- rer's	signature		ol Duffield		1.1.21	<u></u>	N/	Α
Us		Firm's name (o	~~~~~~	tanello, Duffield &)			
On	-	yours if self- employed),	▶ 44	Montgomery Street,	Suite 2019		EIN 🕨 🕅	I/A	
	.,	address, and ZIP + 4	San	Francisco, CA 9410)4		Phone no. 🕨	(415) 983-0200
Ma	/ the IF	RS discuss thi	s return v	with the preparer shown above	? (see instruction:	s)			Yes X No

BAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2008) Tides Center	94-3213100	Page 2
Part III Statement of Program Service Accomplishments (see instructions)		
1 Briefly describe the organization's mission:		
The Tides Center operates projects promoting shared principles of	of social justice	and
a sustainable, healthy society.		
2 Did the organization undertake any significant program services during the year which were not listed on the	-	
Form 990 or 990-EZ?	Yes X	No
If 'Yes,' describe these new services on Schedule O.	,	
3 Did the organization cease conducting, or make significant changes in how it conducts, any program service	es?Yes 🛛	No
If 'Yes,' describe these changes on Schedule O.		
4 Describe the exempt purpose achievements for each of the organization's three largest program services by and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and a expenses, and revenue, if any, for each program service reported.	expenses. Section 501(c)(3) llocations to others, the total)
4a (Code:) (Expenses \$ 22,265,990. including grants of \$ 1,250,220.) See_Schedule_0	\$3,728,	<u>705.</u>)
4b (Code:) (Expenses \$18,547,639 including grants of \$11,936,526.) (See Schedule 0		
4c (Code:) (Expenses \$, 28,871,435. including grants of \$, 4,732,358.) (I See Schedule 0	Revenue \$ <u>2,359,5</u>	5 <u>48.</u>)
4d Other program services. (Describe in Schedule O.)		
(Expenses \$ including grants of \$) (Revenue \$)	
4e Total program service expenses ► \$ 69, 685, 064. (Must equal Part IX, Line 25, column (B)		

Form 990 (2008) Tides Center

BAA

Pai	t IV Checklist of Required Schedules		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4	Х	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If 'Yes,' complete</i> <i>Schedule D, Part IV</i>	9		X
10	The second s	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	X	
	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII.	12	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If 'Yes,' complete Schedule F, Part I	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If 'Yes,' complete Schedule F, Part II</i> .	15	X	
16	individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16	V	x
17		17	X X	+
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18 19	<u>^</u>	X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X
20	and the second provide the second sec	21	X	+
21	Did the organization report more than \$5,000 on Part IX, column (A), the P if Pes, complete Schedule I, Parts I and III	22	X	1
23	The second	23	X	
24	 a 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, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No,'go to question 25. 	24a		X
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	c 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	ļ	
25	a 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		X
	b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III.	27		X

Form 990 (2008)

Form	n 990 (2008) Tides Center 94	-3213100	F	age 4
Par	t IV Checklist of Required Schedules (continued)			
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		Yes	No
a	a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employe or an indirect business relationship through ownership of more than 35% in another entity (individually or collec with other person(s) listed in Part VII, Section A)? <i>If 'Yes,' complete Schedule L, Part IV</i>	tively		X
Ł	• Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' comple Schedule L, Part IV	ete 28b		X
c	c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a pro corporation) doing business with the organization? <i>If 'Yes,' complete Schedule L, Part IV</i>			X
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M		X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conse contributions? If 'Yes,' complete Schedule M.	rvation		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Par	rt I		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.			X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations s 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I.	ections	X	
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV line 1	V, and V, 34	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Sche Part V, line 2	edule R,35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2			X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization a treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI.	and that is		X
BAA		Forr	n 990 i	(2008)

Form 990 (2008) Tides Center	94-3213100	Pag	ge 5
Part V Statements Regarding Other IRS Filings and Tax Compliance			
		Yes I	No
1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable.	a 1,102		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	b 0		
c Did the organization comply with backup withholding rules for reportable payments to vendors ar (gambling) winnings to prize winners?	d reportable gaming	1c X	1999299 1999299
calendar year enumer of writing the year covered by this return	2a 814		
2b 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 this return.	(see instructions)		333333
3a Did the organization have unrelated business gross income of \$1,000 or more during the year co this return?		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 financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account).	other authority over, a	4a	X
h If 'Yes' enter the name of the foreign country: ►			
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Fore Financial Accounts.	1000		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax ye	ar?	5a	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter tr	ansaction?	5b	Х
c If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt E Prohibited Tax Shelter Transaction?	ntity Regarding	5c	
6a Did the organization solicit any contributions that were not tax deductible?		6a	Х
 b If 'Yes,' did the organization include with every solicitation an express statement that such contr deductible?	butions or gifts were not	6b	
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization provide goods or services in exchange for any quid pro quo contribution of	more than \$75?	7a X	
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7b X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which Form 8282?	it was required to file	7c	X
d If 'Yes,' indicate the number of Forms 8282 filed during the year	7d		
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums benefit contract?	on a personal	7e	Х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit	contract?	7f	Х
g For all contributions of qualified intellectual property, did the organization file Form 8899 as requ	iired?	7g	X
h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a For	n 1098-C as required?	7h	X
 8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sec supporting organizations. Did the supporting organization, or a fund maintained by a sponsorin excess business holdings at any time during the year?	:tion 509(a)(3) 📖	8	X
 9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. 			
a Did the organization make any taxable distributions under section 4966?		9a	Х
b Did the organization make any distribution to a donor, donor advisor, or related person?		9b	X
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12.	0a		
	0b		
11 Section 501(c)(12) organizations. Enter:			
	1a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	16		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Fo	rm 1041?	12a	
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	2b		
BAA	F	⁼ orm 990 (2	2008

San	۵	6
~aq	e.	ю

Form	90 (2008) Tides Center 94-3213100			'age
Parl	Governance, Management and Disclosure (Sections A, B, and C request information abo	ut po	licies	; <i>п</i> от
Editoria	required by the Internal Revenue Code.)			
Sect	on A. Governing Body and Management			
	or each 'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, describe the circumstances, rocesses, or changes in Schedule O. See instructions.		Yes	No
1a	nter the number of voting members of the governing body	5		
b	nter the number of voting members that are independent	5		
2	id any officer, director, trustee, or key employee have a family relationship or a business relationship with any other fficer, director, trustee or key employee?See. Schedule 0	2	X	
3	id the organization delegate control over management duties customarily performed by or under the direct supervision f officers, directors or trustees, or key employees to a management company or other person?	3		X
4	id the organization make any significant changes to its organizational documents	4		X
	ince the prior Form 990 was filed?			
5)id the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	loes the organization have members or stockholders?	6		X
	loes the organization have members, stockholders, or other persons who may elect one or more members of the poverning body?	7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X	
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	he aoverning body?	8a		ļ
b	each committee with authority to act on behalf of the governing body?	8b	X	
9 a	Does the organization have local chapters, branches, or affiliates?	9a	L	X
b	f 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?			
10	Nas a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990 See . Schedule. O		X	
11	s there any officer, director or 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	11		X
Sec	on B. Policies		T	
		r	Yes	No
12 a	Does the organization have a written conflict of interest policy? If 'No,' go to line 13.	12a	X	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule 0.	. 12 c		
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	. 14	X	
	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?	. 15 a		
، ا	Other officers of key employees of the organization?See. Schedule .0.	. 15E	X	
	Describe the process in Schedule O. (see instructions)			
10	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable			
	entity during the year?	. <u>16</u> a	1	X
I	If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?)	
Sec	ion C. Disclosures			
17	List the states with which a copy of this Form 990 is required to be filed ► See Schedule 0			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) av inspection. Indicate how you make these available. Check all that apply.	ailable	for p	Jildu

inspection. Indicate how you X Another's website Own website

X Upon request

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

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

Lori Eason PO Box 29907 San Francisco, CA 94129-0907 (415) 561-6300 _____ Form 990 (2008)

Page 7

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List 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) or more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did not compensate any officer, director, trustee, or key employee.

Check this box if the organization did no (A)	(B)		<u>y</u> 01	(c)			,	(D)	(E)	(F)
	Average	Posil	tion (nat appl	y)	Reportable	Reportable	Estimated amount of other
Name and Title	hours per week	Individual or directo	Institutional trustee	T	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
		r trustee r	al trustee		yee	npensated				
Drummond Pike									240,000.	35,566.
CEO/Ex Officio	1	X	ļ	X				0.	240,000.	
Dan Carol		X						0.	0.	0.
Director	1			$\left - \right $			┼──	<u>.</u>		
John O'Neil		X						0.	0.	0.
Director/Treas.	1		+				+			
Lawrence Litvak	+ 1	X		X				0.	0.	0.
Dir./Vice Chair	_ <u></u>									
Maya Wiley	1	X						0.	0.	0.
Director	- <u> </u>		+				+			
Noa Emmett Aluli, MD	1	X						0.	0.	0.
Director	L		+							
Stephanie Clohesy	+ 1	X		X				0.	0.	0.
Director/Chair	_ <u>_</u>		+	1	<u> </u>		+			
Martha_Jimenez	1 1	X						0.	0.	0.
Director	<u>⊥</u>					+				
Wade Rathke	1				X			0.	0.	0.
Director		-		+	+		-			
Kim Sarnecki	1			X				0.	60,040.	2,400.
Secretary			-	+	+		-			
Ellen_Friedman Executive VP	30			X				0.	194,433.	28,525.
Carla Dartis		-	-			-	1			
Key Employee	40				X	ζ		153,658.	0.	10,867.
Thomas G. David		-								
Proj Sr Strtgst	24					X		196,191.	0.	15,950.
Eric P. Schwartz		-	-							
Project Dir.	40					X		200,272.	0.	23,552.
Peter Kleinbard			-							
Project Dir.	40					X		161,200.	0.	8,444.
Alan Jenkins										
Project Dir.	40					X		173,880.	0.	24,327.
Jane Levikow										_
Dir Ext Relations	35					X		132,144	. 0.	0.
						0.4.10.4.10				Form 990 (2008)

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m 990 (2008) Tides Center									94-321310	0 Page
n 990 (2008) Tides Center nt VII Section A. Officers, Directors, Trus	tees, I	Key	En	npl	oye	es,	anc	l Highest Co	mpensated Em	ployees (cont.)
(A)	(B)	1		(0	:)			(D)	(-)	
Name and Title	Average hours per week			Officer	T. T.		ply) Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
	-									
	•									
	-									
	_			+						
	_			_						
	_									
	-									
	_									
	-									
	_							1,017,345	. 494,473	149,63
 I b Total 2 Total number of individuals (including those in 1a) 			 	ore	thar	\$10		0 in reportable of		
 organization ► 39 3 Did the organization list any former officer, directo on line 1a? If 'Yes,' complete Schedule J for such 4 For any individual listed on line 1a, is the sum of r the organization and related organizations greater individual. 5 Did any person listed on line 1a receive or accrue rendered to the organization? If 'Yes,' complete S 	r or tru: individu eportat than \$	stee, ual. ile co 150,0	key omp)00?	ensi	iploy ation Yes'	ee, i and corr	or high	ghest compensa er compensation e Schedule J for	ted employee from such	Yes I 3 4 X
Complete this table for your five highest compensation from the organization.										
(A) Name and business addr								Descriptio	(B) n of Services	(C) Compensation 159,60
hoebe Eng 55 East 9th Street, #3K, New Yo oblentz, Patch, Duffy & Bass, LLP One Fer	ry Bui	ldiı	ng,	Su	ite	200	Sai	Cnslt-Media n Legal Svcs Contractor	370	148,8
articipata, LLC 1707 Eye Street Bakersfie anatt Health Solutions 11355 West Olympic Joi, LLC 17 East 80th Street, Suite 10 N	Blvd.	Lo	s A	nge	les, 21	CA	. 90			274,9 272,5
2 Total number of independent contractors (includir						ved r	nore	 than \$100,000 i	n	

2 Total number of independent contractors (including those in 1) compensation from the organization ► 11

	990 (2008) Tides Center				94-3213100	Page 9
	VIII Statement of Revenue	I			I	(D)
			(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	1a Federated campaigns. 1a b Membership dues 1b c Fundraising events 1c d Related organizations. 1d e Government grants (contributions). 1e f All other contributions, gifts, grants, and similar amounts not included above. 1f g Noncash contribus included in Ins 1a-1f: \$ h Total. Add lines 1a-1f. \$	230,528. 3,696,458. 8,505,795. 76,552,240. 616,842. ►	88,985,021.			
PROGRAM SERVICE REVENUE	2a Program Revenues b cd	Business Code	7,333,213.	7,333,213.		
PROGRAM :	 e f All other program service revenue g Total. Add lines 2a-2f	► interest and				1 504 000
	 other similar amounts)	oond proceeds .	1,524,288.			1,524,288.
	6a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss)					
	7a Gross amount from sales of assets other than inventory. b Less: cost or other basis	(ii) Other	-			
	and sales expenses. 8,700,536. c Gain or (loss). -7,939. d Net gain or (loss).	-8,105.	-	-7,939.		-8,105.
OTHER REVENUE	 8a Gross income from fundraising events (not including. \$ 230, 528.) of contributions reported on line 1c). See Part IV, line 18	>	129,693.			129,693.
	See Part IV, line 19 b Less: direct expenses	a	-			
	10 a Gross sales of inventory, less returns and allowances	a	-			
	c Net income or (loss) from sales of inver Miscellaneous Revenue	Business Code				
	cd All other revenue.		•			
	12 Total Revenue. Add lines 1h, 2g, 3, 4, 5	5, 6d, 7d, 8c, 9c,	97.956,171	7,325,274	. 0.	1,645,876.

94-3213100

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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).

	All other organizations must com	(A)	(B)	(C)	(D)
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	17,672,148.	17,672,148.		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	176,956.	176,956.		
3	Grants and other assistance to governments, organizations, and individuals outside the	70,000	70,000		
4	U.S. See Part IV, lines 15 and 16 Benefits paid to or for members	70,000.	70,000.		
5	Compensation of current officers, directors, trustees, and key employees.	164,525.	131,620.	32,905.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	27,612,035.	21,577,145.	3,235,739.	2,799,151.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits.	6,858,478.	5,153,489.	1,030,783.	674,206.
10	Payroll taxes.				
	Fees for services (non-employees)				
	Management	0.01.1.50			
	Legal	381,173.	314,682.	66,491.	
	Accounting	394,597.	219,775.	174,822.	
	Lobbying	222 016			222 016
	Prof fundraising svcs. See Part IV, In 17	232,916. 82,064.	12 006	<u> </u>	232,916.
	Investment management fees	82,084.	<u> 13,896.</u> 68,539.	68,168.	
	other	04,293.	00,039.	15,754.	
13	Office expenses.				
14	Information technology				
15	Royalties				
16	Occupancy	3,522,246.	2,816,396.	323,212.	382,638.
17	Travel.	3,147,296.	2,689,554.	93,905.	363,837.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials		2,003,004.		
19	Conferences, conventions, and meetings	1,274,820.	1,087,855.	38,355.	148,610.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	419,541.	364,282.	55,259.	
23	Insurance.	436,890.	428,864.	8,026.	
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.).				
	Consultants	15,701,055.	12,105,131.	910,960.	2,684,964.
	Shared Services	2,153,189.	76,553.	2,076,636.	
	Supplies	1,701,626.	1,482,618.	60,601.	158,407.
	Other Project Expenses	888,500.	729,872.	35,718.	122,910.
	Telephone	870,847.	725,396.	48,275.	97,176.
	All other expenses.	2,349,029.	1,780,293.	414,346.	154,390.
	Total functional expenses. Add lines 1 through 24f	86,194,224.	69,685,064.	8,689,955.	7,819,205.
26	Joint Costs. Check here ► if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				E 000 (2000)

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Form 990 (2008)

Form 990 (2008) Tides Center Part X Balance Sheet

Par					(A) Beginning of year		(B) End of year
					621,720.	1	1,148,664.
	1	Cash - non-interest-bearing			26,771,057.	2	21,082,474.
	2	Savings and temporary cash investments			20,183,880.	3	34,049,475.
	3	Pledges and grants receivable, net.			1,012,892.	4	551,877.
	4	Accounts receivable, net.			1,012,052.		
	5	Receivables from current and former officers, directors or other related parties. Complete Part II of Schedule I				5	
	6	Receivables from other disqualified persons (as define	d under	section 4958(f)(1))		8888888	
		and persons described in section 4958(c)(3)(B). Comp	lete Par	t II of Schedule L		6	
AS	7	Notes and loans receivable, net				7	
SF	8	Inventories for sale or use				8	076 774
A S S E T S	9	Prepaid expenses and deferred charges			299,958.	9	276,774.
3	10 2	Land, buildings, and equipment: cost basis	10 a	4,408,347.			
	10a	Less: accumulated depreciation. Complete Part VI of					
	N	Schedule D.	10b	2,279,978.	2,311,937.	10 c	2,128,369.
	11	Investments – publicly-traded securities			21,825,682.	11	26,993,559.
	11	Investments – other securities. See Part IV, line 11.				12	
	12	Investments – program-related. See Part IV, line 11.				13	
	13	Intengible assets				14	
	14	Other assets. See Part IV, line 11.			355,606.	15	477,473.
	15	Total assets. Add lines 1 through 15 (must equal line	34)		73,382,732.	16	86,708,665.
	16	Accounts payable and accrued expenses	0.01.11		4,268,422.	17	4,922,925.
	17	Grants payable			772,342.	18	950,124.
	18	Deferred revenue				19	
,	19	Tax-exempt bond liabilities				20	
Ĩ	20	Escrow account liabilities.	а П			21	
A B I L	21 22	i i finanzi dianatara tru	stees, k rsons. C	ey employees, complete Part II			
Ť		of Schedule L.				22	
ES	22	the second	hird part	ies	35,000.	23	82,300.
5	23	a da da contra contra da contra				24	
	24	Other liabilities. Complete Part X of Schedule D				25	656,826.
	25				5,075,764.	26	6,612,175.
	26	Organizations that follow SFAS 117, check here ►	X an	d complete lines			
N E T		27 through 29 and lines 33 and 34.	<u> </u>				
					22,248,380	. 27	24,197,468.
ASSE	27	Unrestricted het assets			16 050 500		55,899,022.
E T S		Temporarily restricted net assets				29	
	29	Permanently restricted net assets.	ro 🕨	and complete			
0 R		Organizations that do not follow SFAS 117, check he	ic .				
F U N D		lines 30 through 34.				30	
D	30	Capital stock or trust principal, or current funds.	 			31	
B	31	Paid-in or capital surplus, or land, building, and equi		anu		32	
Å	32	Retained earnings, endowment, accumulated income	e, or our		68,306,968	. 33	80,096,490.
BALANCES	33	Total net assets or fund balances.			72 000 700		86,708,665.
	34		<u></u>		10,002,102	<u> </u>	<u></u>
Ρ	art	XI Financial Statements and Reporting					Yes No
	1 A	Accounting method used to prepare the Form 990:	Cash	X Accrual	Other		
	n - 14	Vere the ergenization's financial statements compiled of	review	ed by an independent	accountant?		
	ь٧	Vere the organization's financial statements audited by	an indep	pendent accountant?.			2b X
	cl	f 'Yes' to 2a or 2b, does the organization have a commi	ttee tha ection o	t assumes responsibil f an independent acc	ountant?	iuun,	2c X
	3a /	As a result of a federal award, was the organization required to the second of the second s	uired to	undergo an audit or a	audits as set forth in the	Single	3a X
	b	f 'Yes,' did the organization undergo the required audit	or audit	<u>s?</u>			Form 990 (2008

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501 (c χ 3) organizations and section 4947(a χ 1) nonexempt charitable trusts.

OMB No. 1545-0047
2008
Open to Public
Inspection

Departm Internal I	ent of the Treasury Revenue Service	 Attach to F 	orm 990 or Form 990-EZ	► See s	eparate	instruc				Паресной	
	f the organization							• •	lentificatio	n number	
Tide	es Center					L. Main		94-32		tions	
Part	I Reason for I	Public Charity Status	s (All organizations i	must c	omple	te this	part.)	(See I	IIStruct	.10115)	
The or	manization is not a t	private foundation because	e it is: (Please check only	one org	anizatio	in.)					
1	A church, conve	ntion of churches or asso	ciation of churches descri	bed in s	ection 1	/0(b)(1)	(A)(I).				
2	A school describ	oed in section 170(b)(1)(A)	(ii). (Attach Schedule E.)				(4+++++++++++++++++++++++++++++++++++++	h Cabad			
3	A hospital or co	operative hospital service	organization described in	section)(a)0\1	I)(A)(III)	. (Allac		in Enter	the hospital's	
4	A medical resea	rch organization operated	in conjunction with a hos	spital des	scribed i	n secuo		× • • • • • •		the hospital s	
5	170(bY1)(A)(iv).	operated for the benefit o (Complete Part II.)						nental ur	nit descr	ibed in section	
6	F******	a a second second second second	overnmental unit describe	ed in sec	tion 170	(b)(1)(A)(v)	. fuence the	a gapar	al public descri	ihed
7	X An organization	that normally receives a s (Complete Par	substantial part of its supp rt II.)	Sort iron	i a gove	rnmenta	ai unit o	r irotti u	le gener	al public descri	ibeu
8		ust described in section 17 that normally receives: (1			rt from	contribu	itions n	nembers	hip fees	, and gross red	ceipts
9	from activities r investment inco	elated to its exempt function me and unrelated busines See section 509(a)(2). (Co	s taxable income (less se mplete Part III.)	ection 51	1 tax) fr	om busi	nesses	acquire	d by the	organization a	gróss fter
10		argonized and operated (exclusively to test for pub	lic safety	v. See s	ection 5	09(a)(4)	. (see ir	nstructio	ns)	
11	An organization	organized and operated o upported organizations de period supporting organizations de	exclusively for the benefit	of, to pe (1) or se	erform t ction 50	ne funct 19(a)(2).	ione of	or carry	OUT THE	numbers of ut	that
		h Typell	c Type III	- Funct	ionally I	ntegrate	ed		d 🗌	Type III- Oth	
			anization is not controlle	d directly	/ or indi	rectly by	one or	more d	isqualifie	ed persons oth	er
e	than foundation	managers and other that	Torie of more publicly so	sported .	Jigainea				•		
f	check this hox	ion received a written dete									Ц
g	Since August 1	7, 2006, has the organizat	tion accepted any gift or	continuu		ir any or	010100	o		Ye	s No
	helow th	who directly or indirectly o e governing body of the st								11g(i)	
	(ii) a family r	member of a person desc	ribed in (i) above?							11g (ii)	
	(iii) a 35% co	ntrolled entity of a person	described in (i) or (ii) abo	ove?		· · · · · · ·				11 g (iii)	l
ŀ	Provide the fol	lowing information about t	he organizations the orga	nization	support	s.		[
	(i) Name of Supported Organization		(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) I organizati (i) listed gove docur	s the on in col. in your	(v) Did y	ization in (i) of	(vi) I: organizati (i) organiz U.S	on in col. ed in the	(vii) Amount of S	Support
				Yes	No	Yes	No	Yes	No		
							ļ				
						ļ		<u> </u>			
Tota				1			1			<u> </u>	

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule A (Form 990 or 990-EZ) 2008

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.)

Sect	ion A. Public Support	T	1				
begin	dar year (or fiscal year ning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')	56544831.	44203617.	49859754.	72506209.	88985021.	312099432.
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.
	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge			40050754	72506209.	88985021.	0.
4	Total. Add lines 1-3	56544831.	44203617.	49859754.	12506209.	88983021.	5120551021
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)						64,693,532.
6	Public support. Subtract line 5 from line 4						247405900.
Sec	tion B. Total Support			T	T	Т	<u> </u>
Cale	ndar year (or fiscal year nning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total 312099432.
-	Amounts from line 4.	56544831.	44203617.	49859754.	72506209.	88985021.	312099432.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	694,961.	912,453.	1,468,532.	1,709,489	1,524,288.	6,309,723.
9							0.
10	Other income. Do not include gain or loss form the sale of capital assets (Explain in Part IV.)						0.
11	Total support. Add lines 7 through 10					12	318409155.
12	Gross receipts from related acti	vities, etc. (see in	structions)				
	First five years. If the Form 990 organization, check this box an	u stop nere		nd, third, fourth, i	or fifth tax year a	s a section 501(c)(▶□
Se	ction C. Computation of P	ublic Support	Percentage				
14	Public support percentage for 2	2008 (line 6, colum	n (f) divided by lir	ne 11, column (r).		15	
15	Public support percentage for 2 Public support percentage for 2	2007 Schedule A, H	Part IV-A, line 201			L	
16	5a 33-1/3 support test – 2008. If the and stop here. The organization	n quaimes as a pu	blicity supported o	gaine			
	 b 33-1/3 support test – 2007. If the and stop here. The organization 	n quaimes as a pu	Differy Supported o	gamzatorn			
17	7 a 10%-facts-and-circumstances f or more, and if the organization the organization meets the 'fac	ts-and-circumstan	ces' test. The org	ganization qualifie	s as a publicly su	pported organizat	ion ►
	b 10%-facts-and-circumstances or more, and if the organization organization meets the 'facts-a	n meets the lacts	test. The organ	ization qualifies a	as a publicly supp	orted organization	
1	8 Private foundation. If the organization	nization did not ch	eck a box on line,	, 10, 100, 100, 17	<u>, , , , , , , , , , , , , , , , , , , </u>	Schedule A (Forn	n 990 or 990-EZ) 2008

	d the box on lin			(a)(2)		
ection A. Public Support				(I) 0007	(2) 2009	(f) Total
lendar year (or fiscal yr beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	() / Ottai
 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.') 						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose.						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
 6 Total. Add lines 1-5 7a Amounts included on lines 1, 2, 3 received from disqualified persons 						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000.						
c Add lines 7a and 7b						
				1	1	
8 Public support (Subtract line						
8 Public support (Subtract line 7c from line 6.)						
7c from line 6.)	-		4.1.2006	(d) 2007	(e) 2008	(f) Total
	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7c from line 6.) Section B. Total Support Calendar year (or fiscal yr beginning in) ► 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form	-	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7c from line 6.) Section B. Total Support Calendar year (or fiscal yr beginning in) ► 9 Amounts from line 6	-	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7c from line 6.) Section B. Total Support Calendar year (or fiscal yr beginning in) ► 9 Amounts from line 6	-	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7c from line 6.) Section B. Total Support Calendar year (or fiscal yr beginning in) ► 9 Amounts from line 6. 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 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 inline 10b,	-	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7c from line 6.) Section B. Total Support Calendar year (or fiscal yr beginning in) ► 9 Amounts from line 6	(a) 2004	zation's first, seco	and third fourth	or fifth tax year as	a section 501(c)(3)
7c from line 6.) Section B. Total Support Calendar year (or fiscal yr beginning in) ► 9 Amounts from line 6. 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 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 inline 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 his 9, 10c, 11, and 12.) 14 First five years. If the Form 990 organization, check this box and	(a) 2004	zation's first, seco	ind, third, fourth,	or fifth tax year as	s a section 501(c)(3)
7c from line 6.) Section B. Total Support Calendar year (or fiscal yr beginning in) ► 9 Amounts from line 6. 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b	(a) 2004 (a) 2004 (a) 2004 (c)	zation's first, seco t Percentage mn (f) divided by li	ind, third, fourth,	or fifth tax year as	s a section 501(c)(3)
7c from line 6.) Section B. Total Support Calendar year (or fiscal yr beginning in) ► 9 Amounts from line 6. 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 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 inline 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 Ins 9, 10c, 11, and 12.) 14 First five years. If the Form 990 organization, check this box and Section C. Computation of Pu 15 Public support percentage for 20	(a) 2004 (a) 2004 (b) 2004 (c) 20	zation's first, seco t Percentage mn (f) divided by li A, Part IV-A, line 2	ind, third, fourth, ine 13, column (f)	or fifth tax year as	s a section 501(c)(3)
7c from line 6.) Section B. Total Support Calendar year (or fiscal yr beginning in) ► 9 Amounts from line 6. 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 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 inline 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 Ins 9, 10c, 11, and 12.) 14 First five years. If the Form 990 organization, check this box and Section C. Computation of Pu 15 Public support percentage for 20 16 Public support percentage from	(a) 2004 is for the organi stop here Iblic Suppor 008 (line 8, colur 2007 Schedule	zation's first, seco t Percentage mn (f) divided by li A, Part IV-A, line 2 come Percenta	ind, third, fourth, ine 13, column (f) 27g	or fifth tax year as	s a section 501(c)(15 16	3)
7c from line 6.) Section B. Total Support calendar year (or fiscal yr beginning in) ► 9 Amounts from line 6. 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 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 inline 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 lns 9, 10c, 11, and 12.) 14 First five years. If the Form 990 organization, check this box and Section C. Computation of Pu 15 Public support percentage for 20	(a) 2004 is for the organi stop here iblic Suppol 08 (line 8, colur 2007 Schedule vestment Inc or 2008 (line 10	zation's first, seco t Percentage mn (f) divided by li A, Part IV-A, line 2 come Percenta c, column (f) divid	ind, third, fourth, 	or fifth tax year as)	s a section 501(c)(15 16 	3)

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

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Page 4

Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part IV II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

	PUBLIC DISCLOSURE COPY		OMB No. 1545-0047
Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury	 Schedule of Contributors Attach to Form 990, 990-EZ and 990-PF See separate instructions. 	nedule of Contributors ach to Form 990, 990-EZ and 990-PF	
Internal Revenue Service		Employer id	lentification number
Name of the organization		94-321	L3100
Tides Center Organization type (check one): Filers of: Form 990 or 990-EZ	Section: X 501(c)(3) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a p 527 political organization	private fou	ndation
Form 990-PF	501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a priva 501(c)(3) taxable private foundation	ate f oundat	tion

Check if your organization is covered by the General Rule or a Special Rule. (Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.)

General Rule -

For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules -

X For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33-1/3% support test of the regulations under sections 509(a)(1)/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% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc, purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, the part of et, purpose. Do not complete any of the Parts unless the General Rule applies to this organization because it received nonexclusively ►\$

religious, charitable, etc, contributions of \$5,000 or more during the year.)....

Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF) but they **must** answer 'No' on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately.

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

Schedule B (Form 9	90, 990-EZ, or 990-PF) (2008)	Page 1	of 1 of Part I Identification number
Name of organization		94-32	
Tides Center			
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$3,696,450.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2		\$ <u>18,375,781</u> .	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3		\$ 4,978,150.	Person X Payroll Image: Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4		\$2,118,406.	Person X Payroll Image: Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5		\$\$2,570,035	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

2 (, , , , , , , , , , , , , , , , , ,	Page	1	of 1	of Part II
Schedule B (Form 990, 990-EZ, or 990-PF) (2008)		Emp	oloyer identificatio	n number
Name of organization		94	-3213100	

Part II Noncash Property (see instructions.)

(a) Io. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
N/A			
		\$\$	
(a) o. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) Io. 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
		\$	
		Schedule B (Form 990, 990-	

TEEA0703L 08/05/08

ala anto dia 🗖	(Form 990, 990-EZ, or 990-PF) (2008)		Page 1	of 1 of Part III				
nedule B ne of organia				Employer identification number				
				94 - 3213100				
	enter <i>Exclusively</i> religious, charitable, et organizations aggregating more the	c, individual contributions	to section 501(C lete cols (a) through ((e) and the following line entry.)				
	organizations aggregating more the	all \$1,000 for the year.(comp	le etc					
	For organizations completing Part III, enter to contributions of \$1,000 or less for the year. (E	tal of <i>exclusively</i> religious, chantal inter this information once – see in	structions.)	►\$ N/I				
(a)	(b)	(c)		(4)				
o. from	Purpose of gift	Use of gift	Desc	cription of how gift is held				
Part I	N/A							
			Av					
		(e)						
	Transfer of gift							
	Transferee's name, address	s, and ZIP + 4	Relationship of					
				(-1)				
(a)	(b)	(c)	Dec	(d) cription of how gift is held				
No. from	Purpose of gift	Use of gift	Des	scription of now gire o note				
Part I								
Construction of the second second								
		(e) Transfer of gift						
		Relationship of transferor to transferee						
	Transferee's name, addres	s, and ZIP + 4	iterationer i					
			1	(d)				
(a)	(b)	(c) Use of gift	De	scription of how gift is held				
No. from Part I	Purpose of gift			•				
		(e) T						
	Transferee's name, addres	Transfer of gift	Relationship	of transferor to transferee				
	Transieree's name, addre							
		(c)		(d)				
(a) No. fron	(b) n Purpose of gift	Use of gift	De	escription of how gift is held				
Part I								
	_							
		(e) Transfer of gift						
	Transferee's name, addre		Relationship	of transferor to transferee				
				000 000 F7 000 DE) (2				

1				.itia a	OMB No. 1545-0047
SCHEDULE C Form 990 or 990-EZ)	000 000 E7			2008	
For Organizations Exempt From Income T			nder section 501(c) a	and section 527	
		► To be completed by organizat	ions described below	۷.	Open to Public Inspection
epartment of the Treasury nternal Revenue Service		► Attach to Form 990 or	Form 990-EZ.	litical Campaign Activitie	
the organization answ	wered 'Yes,' t	o Form 990, Part IV, line 3, or Form 990-E2	te Part I-C	ilitical Campaign Activitie	<i>3)</i> , then
 Section 501(c)(3) or Section 501(c) (3) 	rganizations:	complete Parts I-A and B. Do not complet n 501(c)(3)) organizations: complete Parts	s I-A and C below. D	o not complete Part I-B.	
· Castian EOT argonit	ations: comp	late Part I-A only			
	1.157	o Form 990, Part IV, line 4, or Form 990-E2 that have filed Form 5768 (election under	Z, Part VI, line 47 (Lo section 501(h)): Com	bbying Activities), then plete Part II-A. Do not co	omplete Part II-B.
 Section 501(c)(3) of Part II-A. 	rganizations f	that have NOT filed Form 5768 (election u	nder section 501(h)):	Complete Part II-B. Do i	not complete
f the organization ans	wered 'Yes,' t	o Form 990, Part IV, line 5 (Proxy Tax), the	en		
	(5), or (6) org	anizations: Complete Part III.		Employer identifica	tion number
Name of organization				94-321310	0
Tides Center Part I-A To be co	instruction	by all organizations exempt unden s for Schedule C for details.	er section 501(c)	and section 527 or	ganizations.
1 Drovido o doscrit	tion of the or	ganization's direct and indirect political ca	ampaign activities in l	Part IV.	
2 Political expendit	hures			▶\$	
• Malumbear bourg					
Part I-B To be co	ompleted I	by all organizations exempt under some the second s	er section sur(c)	(3).	
	1 . 6	to the industrial by the organization under s	section 4955	▶\$	
2 Enter the omoup	t of any evris	e tay incurred by organization managers	Under Section 4955.		
2 If the organization	n incurred a	section 4955 tax, did it file Form 4720 for t	this year?		
4a Was a correction	made?				Yes No
b If 'Yes,' describe	e in Part IV.		ex caption E01(c)	excent section 50	1(c)(3)
See the	instruction	by all organizations exempt und ns for Schedule C for details.			
1 Enter the amour	nt directly exp	ended by the filing organization for section	n 527 exempt functio		
2 Enter the amour function activitie	nt of the filing	organization's funds contributed to other	organizations for sec	tion 527 exempt ► \$	
Form 1120-PO	line 17b	empt function expenditures. Add lines 1 a			
 PS1 Ellips Allips and 	anization filo	Form 1120-POL for this year?			
made. Enter the	e amount paic	and employer identification number (EIN) I and indicate if the amount was paid from rectly delivered to a separate political organization in	anization, such as a	itical organizations to wri n's funds or were politic: separate segregated fun	al contributions d or a political action
(a) Name		(b) Address	(c) EIN	(d) Amount paid from filing organization's own internal 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
			_		
			-		
			_		
			_		
			_		

hedule C (Form 990 or 990-EZ) 2008 art II-A To be comple					0 /alastian
under section	tod by organiza	tions exempt under e instructions for Scl	hedule C for deta) that filed Form 576 ils.	8 (election
A Check ► if the filing	organization belong	s to an affiliated group.			
B Check ► if the filing	organization checke	d box A and 'limited contr	rol' provisions apply.	Т	
		amounts paid or incurre		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditur	es to influence public	c opinion (grass roots lobb	oying)		
b Total lobbying expenditur	es to influence a legi	slative body (direct lobbyi	ing)		
c Total lobbying expenditur	es (add lines 1a and	1b)			
d Other exempt purpose ex	penditures				
e Total exempt purpose ex					
f Lobbying nontaxable amo both columns.					
If the amount on line 1e, colur		e lobbying nontaxable an	nount is:		
Not over \$500,000		% of the amount on line 1e.	A 500 000		
Over \$500,000 but not over \$1,0		0,000 plus 15% of the excess ov			
Over \$1,000,000 but not over \$1	, ,	75,000 plus 10% of the excess ov			
Over \$1,500,000 but not over \$1	, ,	25,000 plus 5% of the excess ove			
0ver \$17,000,000 g Grassroots nontaxable a		000,000.			
g Grassroots nontaxable a h Subtract line 1g from line	a la Enter A if line	g is more than line a			
i Subtract line 1f from line	a 1c. Enter -0- if line	f is more than line c			
		11 11		m 4720 reporting	
If there is an amount otr			e organization tile For		
section 4911 tax for this	year?	er line 1h or line 1i, did the	e organization file For		Yes No
section 4911 tax for tills	year:	V A	Inder Section 501(b)		Yes No
section 4911 tax for tills	ne organizations that columns		Inder Section 501(h) ection do not have to ons for lines 2a throug	complete all of the five gh 2f.)	Yes No
section 4911 tax for tills	ne organizations that columns	-Year Averaging Period U made a section 501(h) el below. See the instruction	Inder Section 501(h) ection do not have to ons for lines 2a throug	complete all of the five gh 2f.)	Yes No No (e) Total
(Son Calendar year (or fiscal	4 ne organizations that columns Lobby	Year Averaging Period U made a section 501(h) ele s below. See the instructio ying Expenditures During	Inder Section 501(h) ection do not have to ons for lines 2a throug 4-Year Averaging Per	complete all of the five gh 2f.) riod	
Calendar year (or fiscal year beginning in) 2a Lobbying non-taxable amount	4 ne organizations that columns Lobby	Year Averaging Period U made a section 501(h) ele s below. See the instructio ying Expenditures During	Inder Section 501(h) ection do not have to ons for lines 2a throug 4-Year Averaging Per	complete all of the five gh 2f.) riod	
Calendar year (or fiscal year beginning in) 2a Lobbying non-taxable amount	4 ne organizations that columns Lobby	Year Averaging Period U made a section 501(h) ele s below. See the instructio ying Expenditures During	Inder Section 501(h) ection do not have to ons for lines 2a throug 4-Year Averaging Per	complete all of the five gh 2f.) riod	
Calendar year (or fiscal year beginning in) 2a Lobbying non-taxable amount b Lobbying ceiling amount (150% of line 2a, column (e)) c Total lobbying	4 ne organizations that columns Lobby	Year Averaging Period U made a section 501(h) ele s below. See the instructio ying Expenditures During	Inder Section 501(h) ection do not have to ons for lines 2a throug 4-Year Averaging Per	complete all of the five gh 2f.) riod	
Calendar year (or fiscal year beginning in) 2a Lobbying non-taxable amount b Lobbying ceiling amount (150% of line 2a, column (e)) c Total lobbying expenditures d Grassroots non-taxable	4 ne organizations that columns Lobby	Year Averaging Period U made a section 501(h) ele s below. See the instructio ying Expenditures During	Inder Section 501(h) ection do not have to ons for lines 2a throug 4-Year Averaging Per	complete all of the five gh 2f.) riod	

BAA

Schedule C (Form	990 or 990	-EZ) 2008	Tides	Center

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94-3213100

Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768

(election under section 501(h)). See the instructions for Schedule C for deta		a)	(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local			
legislation, including any attempt to initialice public opinion on a logislation method.			
through the use of:	X	00000000	
a Volunteers?	X		
 b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? 	X		59,592.
c Media advertisements?		1	56.
d Mailings to members, legislators, or the public?			9,000.
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?	X	+ **	86,622.
g Direct contact with legislators, their staffs, government officials, or a legislative body?			4,798.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?		X	
i Other activities? If 'Yes,' describe in Part IV			160,068.
j Total lines 1c through 1i		X	100/0001
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If 'Yes,' enter the amount of any tax incurred under section 4912			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912	00000000	9000000	3
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	tion	501(c	V5) or section
d If the filing organization incurred a section 4912 tax, did it life Form 4720 for diffs year. Part III-A To be completed by all organizations exempt under section 501(c)(4), sec 501(c)(6). See the instructions for Schedule C for details.			
			Yes No
1 Were substantially all (90% or more) dues received nondeductible by members?			1
2. Bid the ergenization make only in-house lobbying expenditures of \$2,000 or less?			
 2 Did the organization make only in risks lobbying and political expenditures from the prior year? 3 Did the organization agree to carryover lobbying and political expenditures from the prior year? Part III B To be completed by all organizations exempt under section 501(c)(4), sec Part III B To be completed by all organizations and 2 are answered 'No' OR if Part 			
answered 'Yes.' See Schedule C Instructions for details.		1	
1 Dues, assessments and similar amounts from members			
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		28	
a Current year.		21	
h Carryover from last year			
c Total		·	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		·	
the excession of the ex	s		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exces does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and poli	tical		8
evenenditure poyt vear		4	
5 Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)		. 3	
Developmental Information			
Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; ar Also, complete this part for any additional information.	nd Par	t II-B,	Ine II.
	·		

Schedule C (Form 990 or 990-EZ) 2008 Tides Center Part IV Supplemental Information (continued)

SCH	EDULE D			Chatamanta				1545-0047
	n 990)	Supp	lemental Financial	Statements				
Departm	nent of the Treasury Revenue Service	Attach to answered 'Y	Form 990. To be completed b es,' to Form 990, Part IV, line	oy organizations that s 6, 7, 8, 9, 10, 11, or	t · 12.		Inspec	
	f the organization						dentification	number
Tide	es Center					94-321		<u>o if</u>
Part	I Organizat	ions Maintaining Donor	Advised Funds or Otl	her Similar Fund	as or AC	counts	Jonipier	en
	the organ	ization answered 'Yes' to	(a) Donor advised		(b)	Funds and	other acco	ounts
				1	<u>``````</u>			
		end of year		500.				
		butions to (during year)		1				
		s from (during year)		18,937.				
	00 0		the second second the second sec	assets held in dono	r advised	-	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
	funds are the ord	tion inform all donors and dono ganization's property, subject t	J life of garnzadori 5 okolaoria	109-01-01		[X Yes	No
6	Did the organiza	tion inform all grantees, donor: aritable purposes and not for the	he benefit of the donor or dor	nor advisor or other		Γ	XYes	No
	impermissible pr	ivate benefit??		anguarad 'Vac' t	o Form			
Par	t II Conserva	ivate benefit?? ation Easements Comple	ete if the organization a	answereu res (.010111	<u>, , , , , , , , , , , , , , , , , , , </u>	(10, 111)	
1	Purpose(s) of co	onservation easements held by	the organization (check all t	Preservation of	an histori	cally impor	tant land a	area
		n of land for public use (e.g., re	ecreation or pleasure)	Preservation of				
		f natural habitat			cor anou i			
	Preservation	n of open space 2a-2d if the organization held a		ibution in the form o	f a conser	vation ease	ement on t	he last day
2	Complete lines 2 of the tax year.	2a-2d if the organization held a	quaimed conservation contai					
						Held at	the End o	f the Year
a	Total number of	conservation easements			2a			
ŀ	Total acreage re	estricted by conservation easer	nents		. 20			
	Number of cons	ervation easements on a certif	ied historic structure included	з In (а)				
		the second included it	 (c) acquired after 8/17/06 		. 20	unanimation	during the	a tavahle
3	Number of cons	servation easements included in servation easements modified,	transferred, released, exting	uished, or terminate	d by the o	rganization	auring th	e laxable
	vear 🕨							
4	Number of state	es where property subject to co	inservation easement is local	ted •				
5	Does the organ enforcement of	ization have a written policy re the conservation easement it t	garding the periodic monitori	ng, inspection, viola	tions, and	[Yes	No
6	Staff or volunta	er hours devoted to monitoring	i, inspecting, and enforcing e	asements during the	e year -			
7	Amount of expe	enses incurred in monitoring, ir	specting, and enforcing ease	ements during the ye	ear► २_			
8	Does each con	servation easement reported o	n line 2(d) above satisfy the r	requirements of sect	ion	[Yes	No
9	In Part XIV, de include, if appli	scribe how the organization rep cable, the text of the footnote	ports conservation easement to the organization's financial	s in its revenue and I statements that de:	expense s scribes the			ce sheet, and unting for
	rt III Organiz	zations Maintaining Coll	Sweled les toronno	50, 1 are 17, mile				
	a If the organizat	tion elected, as permitted unde ther similar assets held for put footnote to its financial statem	r SFAS 116, not to report in lic exhibition, education, or r ents that describes these iten	its revenue statemei esearch in furtherar ns.	nt and bal ice of publ			
	b If the organizative treasures, or o	tion elected, as permitted unde ther similar assets held for put	r SFAS 116, not to report in blic exhibition, education, or r	its revenue stateme research in furtherar				art, historical ie following
		000 Dart V/III	, line 1				\$	
		L L E OOD Dort V					Y	lowing
	If the organiza	tion received or held works of a	art, historical treasures, or ot	her similar assets fo	ir inanciai	yain, prov	100 010 101	io miligi

	amounts required to be reported under SFAS 116 relating to these items:	*
	Revenues included in Form 990, Part VIII, line 1	 · ኦ
I	b Assets included in Form 990, Part X	 · Ŷ

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Schedule **D** (Form 990) 2008

Tides	Center			94-3213	100		age 2
hedule D (Form 990) 2008 Tides art III Organizations Maintair	ning Collecti	ons of Art, Histor	ical Treasures, or	Other Similar Ass	ets (co	ontinu	ed)
the second se	and other recor	ds. check any of the fo	bllowing that are a signi	ficant use of its collecti	on items	s (check	< all
3 Using the organization's accession that apply):							
a Public exhibition		d Loan or e	exchange programs				
b Scholarly research		e Other					
Duranteen for future conora	tions						
4 Provide a description of the organi	ization's collection	ons and explain how th	ey further the organizat	tion's exempt purpose I	n		
Part XIV.5 During the year, did the organization	on colicit or recu	aive donations of art. h	istorical treasures, or o	ther similar	٦.,		
5 During the year, did the organization assets to be sold to raise funds raise	ther than to be r	naintained as part of t	ne organization's collec	tion?	Yes		No
assets to be sold to raise tunds raise art IV Trust, Escrow and Cus IV, line 9, or reported a	ctodial Δrrar	n gements Complet	te if organization a	inswered Yes to r	-0111 5	90, Fa	
	م سماليند .	r other intermediary for	r contributions or other	assets not		r	1
1a Is the organization an agent, trust included on Form 990, Part X?					Yes	L	No
b If 'Yes,' explain the arrangement i	in Part XIV and	complete the following	table:	r			
					Amount		
c Beginning balance				. <u>1c</u>			
Additions during the year				. 14			
 Distributions during the year 				· [
C T . C In stance			a a a a a a a a a a a a a a a a a a a				٦
2 a Did the organization include an ar	mount on Form (990, Part X, line 21?		· · · · · · · · · · · · · · · · · · ·	Yes	L	No
	In Doub VIV						
b If 'Yes,' explain the arrangement Part V Endowment Funds Co	mplete if orc	anization answere	ed 'Yes' to Form 99	<u> 90, Part IV, line 10</u>	· · ·		
	(a) Current yea	r (b) Prior year	(c) Two years back	(d) Three years back	(e) F	our years	back
1 a Beginning of year balance						<u></u>	
b Contributions					1		
c Investment earnings or losses.					ļ		
d Grants or scholarships	1						<u></u>
e Other expenditures for facilities							
and programs							
f Administrative expenses							
g End of year balance							<u>9000000000000000000000000000000000000</u>
2 Provide the estimated percentage	e of the year en	d balance held as:					
a Board designated or quasi-endov	wment 🕨	00					
b Permanent endowment							
c Term endowment							
3a Are there endowment funds not i	in the possessio	n of the organization th	nat are held and admini	stered for the	Г	Vee	No
organization by:					2.0	Yes	No
(i) unrelated organizations					3a(i)		
m label examinations					. 3a(ii)		
b If 'Yes' to 3a(ii), are the related of	organizations lis	ted as required on Sch	edule R?		3b		<u> </u>
• • · · · · · · · · · · · · · · · · · ·	duces of the or	nanization's endowmer	nt tunas.				
Part VI Investments-Land, E	Buildings, ar	nd Equipment. Ser	e Form 990, Part /	(, line 10.			
Description of investmen	nt (a) Cost or other basis	(b) Cost or other 1	(c) Depreciation	(d) t	Book Va	alue
Description of artoeunen		(investment)	basis (other)				
1 a Land			1 154 000		1	,154	860
b Buildings.			1,154,860.	100 005	L	186	
			322,985.	136,925.			,832
c Leasehold improvements			Construction of the second	1 070 001			
c Leasehold improvements			2,473,653.	1,876,821.			
c Leasehold improvements d Equipment e Other Total. Add lines 1a-1e (Column (d) sh			2,473,653. 456,849.	266,232.			,61

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chedule D (Form 990) 2008 Tides Center		94-321.	5100 Fage 5
Part VII Investments-Other Securities See For	<u>m 990, Part X, Iır</u>	ne 12. N/A	00
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuati Cost or end-of-year mark	et value
Financial derivatives and other financial products. Closely-held equity interests. Other			
Total. (Column (b) should equal Form 990 Part X, col. (B) line 12.) Part VIII Investments—Program Related (See F	orm 990, Part X, (b) Book value	line 13) N/A (c) Method of valua Cost or end-of-year mar	tion
(a) Description of investment type		Cost or end-of-year mar	ket value
Total. Column (b)(should equal Form 990, Part X, Col. (B) line 13.) Part IX Other Assets (See Form 990, Part X, (a) Destination)	line 15) N/.	A	(b) Book value
Total. Column (b) Total (should equal Form 990, Part X, col	(B), line 15)	· · · · · · · · · · · · · · · · · · ·	
Part X Other Liabilities (See Form 990, Part	X, line 25)		
(a) Description of Liability	(b) Amount		
Federal Income Taxes Liability - Agency Transactions	656,	826.	

	656,826.	
Total. Column (b) Total (should equal Form 990, Part X, col. (B) line 25) ►		the experization's liability for uncertain tax

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48. See Part XIV

Schedule D (Form 990) 2008 Tides Center Part XI Reconciliation of Change in Net Assets from Form 990 to Fi 1 Total revenue (Form 990, Part VIII,column (A), line 12)	inancial	CL Luna and			<u>je 4</u>
		Statements			
1 Total revenue (Form 990) Part VIII column (A), Ine 121,				97,956,17	
				86,194,22	.4.
Out the Albert Line Officers line 1				11,761,94	7.
				2,35	53.
Car Dant VIV				-336,43	\$4.
				-334,08	31.
9 bdg 2 and 3 and 9				11,427,86	56.
10 Excess or (deficit) for the year per financial statements. Combine lines 5 and 5	c With I	Revenue per Re	turn		
Part XII Reconciliation of Revenue per Audited Financial Statement	13 771111		1	97,988,95	55.
1 Total revenue, gains, and other support per audited financial statements					
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	2a	30,431.			
a Net unrealized gains on investments	2b	2,353.			
b Donated services and use of facilities		2,333.			
c Recoveries of prior year grants	2c 2d				
d Other (Describe in Part XIV)			2e	32,78	R4
e Add lines 2a through 2d			3	97,956,17	
3 Subtract line 2e from line 1.		,	3	91,950,11	/
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	-				
a Investments expenses not included on Form 990, Part VIII, line 7b	4a				
b Other (Describe in Part XIV).	4b				
c Add lines 4a and 4b.			4c	07 056 17	71
5 Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)			5	97,956,1	/1.
Part XIII Reconciliation of Expenses per Audited Financial Statements	With Ex	penses per Retu	rn		
1 Total expenses and losses per audited financial statements			1	86,561,08	89.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	,				
a Donated services and use of facilities	2a	2,353.			
b Prior year adjustments	2b		. (****)		
c Losses reported on Form 990, Part IX, line 25	2c				
d Other (Describe in Part XIV) See. Part. XIV	2d	364,512.			
e Add línes 2a through 2d			2e	366,8	
3 Subtract line 2e from line 1.			3	86,194,2	24.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:					
a Investments expenses not included on Form 990, Part VIII, line 7b.	4a				
b Other (Describe in Part XIV)	4b				
c Add lines 4a and 4b.			4c		
 5 Total expenses. Add lines 3 and 4c (This should equal Form 990, Part I, line 18.) 			5	86,194,2	24.
Part XIV Supplemental Information					

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

Part X - FIN 48 Footnote		
<u>N/A</u>		

Schedule D (Form 990) 2008 Part XIV Supplemental Information (continued)

800	Schedule D, Part XIV - Supplemental Information	Page
	Tides Center	94-32131
	, Part XI, Line 8 Iges In Net Assets Or Fund Balances	
FMV Adjus	tment of Investments\$ ter PA	25,609. -362,043. -336,434.
TIUES CON	Iotal <u>s</u>	-330,434
Schedule [), Part XIII, Line 2d enses And Losses Per Audited F/S	
		364,512.
Expenses	from Supporting Organization	364,512. 364,512.

				Chatas	OMB No. 1545-0047
Sorm 990)			s Outside the United		2008
epartment of the Treasury ternal Revenue Service	► Attach to F F	orm 990. Complet orm 990, Part IV,	te if the organization answered line 14b, line 15, or line 16.		Open to Public Inspection
ame of the organization				Employer identifica	
				94-321310	0
to Form 990, P	art IV, line 14b.		e United States. Complet		n answered Tes
grantees' eligibility for th	te grants or assistance	e, and the sciect	bstantiate the amount of the gr on criteria used to award the gr		
			lures for monitoring the use of g	grant funds outside the c	Milleu States.
3 Activities per Region. (U	Jse Schedule F-1 (For		al space is needed.)	• N Is - which clipton in	(f) Total
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	expenditures in region
Central America & the	Caribbean				
	0	0	Grantmaking	See Column D	70,000.
Central America and th	o Caribbean				
Central America and ch	e caribbean				
	0	0	Program Services: AIDS He	alth Care Issues	
				See Column D	163,995
East Asia and the Paci	fic				
	C	C	Program Services: Labor	Rights	
				See Column D	650,134
Europe	C) (Program Services: Health	Services, Gay Right	.s
				See Column D	705,389
Middle East and North	Africa				
	(0	O Program Services: Humar	n Rights	
				See Column D	57,190
North America		0	0 Program Services: AIDS	Issues, Recycling,	Public Policy
				See Column D	834,647
Russia and the Newly	Independent Stat	es			
			0 Program Services: AIDS 1	Health Care Issues	88,384
Totals	F	0	0		3,788,899

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Schedule F

Schedule F (Form 990) (2008)

OMB No. 1545-0047

	(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, othe
			Central Americ	a and the Ca	ibbean				
					nsion, Science	Materials, Sc	nolarships		
<u></u>						Wire Transfer		N/A	N/A
			8						
			×						
			·····						
	Enter total number of organizations t								

Page 2

94-3213100

Schedule F (Form 990) 2008

ule F (Form 990) 2008 Tides C	enter				94-	3213100 Yos' to Form 99
ule F (Form 990) 2008 Tides C III Grants and Other Assistar Part IV, line 16. Use Schee	tule 5 1 (Form 99)	Outside the Uni	ted States. Comp bace is needed.	lete if the organ	ization answered	res to ronn 99
(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 c non-cash assistar

BAA

(h) Method of valuation (book, FMV, appraisal, other)

Page 4

Complete this part to provide the information required in Part I, line 2, and any other additional information.
Part I, Line 2 - Grantmakers Explanation For Grants Outside US
Thorough due diligence is conducted in advance of funding to determine whether a
group will be an appropriate grantee. We require groups to provide proof of tax
status and/or registration documents and their organizational documents. All
international grants are restricted to a clearly charitable purpose and must be used
exclusively for activities conducted outside of the U.S. All grantees receive a
written grant agreement, and by accepting payment the grantee agrees to the
conditions of the award, which provides assurance that funds will not be used for any
prohibited purpose.

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047 2008

Must be completed by organizations that answer 'Yes' to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a. ٠

,	Open to Public Inspection
ntifica	ation number
310	0

Department of the Treasury or 19, a	nd by organizatio	ns that e	nter more t	nan \$15,000 on Form 99	0-EZ, line 6a.	Inspection
Internal Revenue Service 01 15, 4 Name of the organization					Employer identificat	
					94-3213100	
D. H. Lundraicing Activities	. Complete if I	the orga	anization	answered 'Yes' to	Form 990, Part IV	, line 17.
1 Indicate whether the organization X Mail solicitations X Email solicitations X Phone solicitations X In-person solicitations	raised funds thro	ugh any (of the follow	\overline{X} Solicitation of non-gr \overline{X} Solicitation of govern \overline{X} Solicitation of govern \overline{X} Special fundraising of	overnment grants nment grants events	
2a Did the organization have written employees listed in Form 990, Pa						Yes XNo
 b If 'Yes,' list the ten highest paid i compensated at least \$5,000 by 	ndividuals or entit	ties (fundt Form 990	raisers) pur F7 filers ar	e not required to compl	ete this table.	
(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did have custo	fundraiser dy or control ributions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col.(i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Carrie Brogotti	Consulta nt		X		49,339.	
Gina Belafonte	Dvmt Fundrais		X	151,250.	28,450.	122,800.
RWB Writing Resource	Gt Writing		X		22,500.	
Peter Fugazzotto	Gt Writing		X		21,281.	
Joanne B Wright	Consulta nt		X		15,975.	
Richard Eidin	Donor Research		X		15,803.	
Christopher Trull	Gt Writing		X	302,500.	14,450.	288,050.
Sustainable Business	Consulta nt		X		12,000	
LaMoore Catering	Event		X		9,049	s
KMB Consulting	Communic ation		X		8,960	•
Total			•	453,750.		
3 List all states in which the orga or licensing. AL AK AZ AR CA CO C OR PA RI SC TN UT V	T DC FL GA		Emsed to so KY ME - - - - - - - - - - - - - - - - - - - - - -	Iicit funds or has been r MD MA MI MN MO	notified it is exempt fro	

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rt II	Fundraising Events. Complete if reported more than \$15,000 on Fo	JITT 990-EZ, THE O	nswered 'Yes' to Fo a. List events with (b) Event #2	gross receipts gre (c) Other Events	ater than \$5,000 (d) Total Events
		(a) Event #1 Conferences	(b) Event #2		(Add col. (a) throu col. (c))
		(event type)	(event type)	(total number)	
1	Gross receipts	360,221.			360,22
2	Less: Charitable contributions	230,528.			230,52
3	Gross revenue (line 1 minus line 2)	129,693.			129,69
4	Cash prizes				
5	Non-cash prizes				
6	Rent/facility costs				
7	Other direct expenses				
8	Direct expense summary. Add lines 4- th	d 8 in column (d)			
8 9 art III	Direct expense summary. Add lines 4- th	nd 8 in column (d) ation answered 'Y			eported more th
8 9 art III	Direct expense summary. Add lines 4- th Net income summary. Combine lines 3 ar Gaming. Complete if the organiz	nd 8 in column (d) ation answered 'Y I. I	es' to Form 990, Pa (b) Pull tabs/Instant bingo/progressive	art IV, line 19, or r	eported more th (d) Total gamin (Add col. (a) thro
8 9 urt III 1	 Direct expense summary. Add lines 4- th Net income summary. Combine lines 3 ar Gaming. Complete if the organiz \$15,000 on Form 990-EZ, line 6a 	nd 8 in column (d) ation answered 'Yr (a) Bingo	es' to Form 990, Pa (b) Pull tabs/Instant bingo/progressive	art IV, line 19, or r	eported more th (d) Total gamin (Add col. (a) thro
8 9 art III 1 EXPE	Direct expense summary. Add lines 4- th Net income summary. Combine lines 3 ar Gaming. Complete if the organiz \$15,000 on Form 990-EZ, line 6a Gross revenue	nd 8 in column (d) ation answered 'Yr (a) Bingo	es' to Form 990, Pa (b) Pull tabs/Instant bingo/progressive	art IV, line 19, or r	eported more th (d) Total gamin (Add col. (a) thro
8 9 11 1	 Direct expense summary. Add lines 4- th Net income summary. Combine lines 3 ar Gaming. Complete if the organiz \$15,000 on Form 990-EZ, line 6a Gross revenue. Cash prizes. 	nd 8 in column (d) ation answered 'Yr (a) Bingo	es' to Form 990, Pa (b) Pull tabs/Instant bingo/progressive	art IV, line 19, or r	eported more th (d) Total gamin (Add col. (a) thro
8 9 9 rt III	 Direct expense summary. Add lines 4- th Net income summary. Combine lines 3 ar Gaming. Complete if the organiz \$15,000 on Form 990-EZ, line 6a Gross revenue	ation answered 'Yı ation answered 'Yı 	es' to Form 990, Pa	art IV, line 19, or r	eported more th (d) Total gamin (Add col. (a) thro
8 9 9 1 1 1 2 2 2 2 2 3 1 1 1 2 2 2 3 1 2 2 2 3 1 2 2 3 1 1 1 1	 Direct expense summary. Add lines 4- th Net income summary. Combine lines 3 ar Gaming. Complete if the organiz \$15,000 on Form 990-EZ, line 6a Gross revenue. Cash prizes. Non-cash prizes. Rent/facility costs 	nd 8 in column (d) ation answered 'Yr (a) Bingo	es' to Form 990, Pa (b) Pull tabs/Instant bingo/progressive	art IV, line 19, or r	(d) Total gamin (Add col. (a) thro
8 9 9 1 1 1 2 2 5 2 1 1 1 1 2 2 1 1 1 1 1 1 1	 Direct expense summary. Add lines 4- th Net income summary. Combine lines 3 ar Gaming. Complete if the organiz \$15,000 on Form 990-EZ, line 6a Gross revenue	ation answered 'Yr (a) Bingo (a) Bingo Yes%	es' to Form 990, Pa (b) Pull tabs/Instant bingo/progressive bingo Yes% No	(c) Other gaming	eported more th (d) Total gamin (Add col. (a) thro
8 9 9 1 1 1 2 2 2 2 9 9 9 9 9 9 9 9 9 9 9	 Direct expense summary. Add lines 4- the Net income summary. Combine lines 3 ar Gaming. Complete if the organiz \$15,000 on Form 990-EZ, line 6a Gross revenue. Cash prizes. Non-cash prizes. Non-cash prizes. Cother direct expenses Volunteer labor. 	ation answered 'Yn (a) Bingo (a) Bingo Yes% No rough 5 in column (d).	es' to Form 990, Pa	art IV, line 19, or r (c) Other gaming	eported more th (d) Total gamin (Add col. (a) thro

11	Does the organization operate gaming activities with nonmembers?	11		
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to	12		
<u></u>	administer charitable gaming?	0 or 99	90-EZ) 2008

2008

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Schedule G (Form 990 or 990-EZ) 2008 Tides Center	94-3213100			aye J
Schedule G (Form 990 of 990-EZ) 2008 TIRES CERCER			YES	NO
13 Indicate the percentage of gaming activity operated in:				
a The organization's facility.	3a 😵			
	30			
the parson who prepares the organization's damind/special evenu	s books and records:			
14 Provide the name and address of the person who prepares the digulation of galagements of the				
Name: ►				
Address: ►				
15a Does the organization have a contact with a third party from whom the organization receives gamin	g revenue?	15a	oonoonaa.	10000000
b If 'Yes,' enter the amount of gaming revenue received by the organization \$	and the amount			
of gaming revenue retained by the third party \$				
c If 'Yes,' enter name and address:				
Name: ►				
Address: ►			÷.	
16 Gaming manager information				
Name: ►				
Gaming manager compensation ► \$				
-				
Description of services provided: 🔸				
Director/officer Employee Independent contractor				
17 Mandatory distributions				
- A second s	eeds to retain the	17.	8989888	888888
		17 a	1	
b Enter the amount of distributions required under state law distributed to other exempt organization	is or spent in the			
organization's own exempt activities during the tax year: 🕨 \$	Schedule G (Form 9	00 or 1	1. 00 200 E	71 200
BAA TEEA3703L 07/18/08	Schedule G (Form 9	50 01	590°L.	

Internal Revenue Service Name of the organization Tides Center Part General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	.5.	Employer identific	2008 Open to Public Inspection
Department of the Treasury Internal Revenue Service Name of the organization Tides Center Part Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility f the selection criteria used to award the grants or assistance?	lines 21 or 22.		Open to Public Inspection
Internal Revenue Service Name of the organization Tides Center Part I General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.			
Tides Center Part I General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.			ation number
 Part I General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 		94-321310	00
 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 			
 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 	c	and	
- I Other Assistance to Covernments and Organizations in the United States.		, ditu	X Yes No
D THE Quarte and Other Assistance to Governments and Organizations in the United States. U	See Part IV	ation answered	'Yes' on Form
990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no Part IV and Schedule I-1 (Form 990) if additional space is needed	one recipient receive	u more than ψ_0 ,	
1 (a) Name and address of organization or government (b) EIN (c) IRC section if applicable (d) Amount of cash grant (e) Amount of non- assistance		(g) Description of non-cash assistance	(h) Purpose of grant or assistance
	,781. FMV	See Attached Statement	Various - See Attached Statement
			► 14
 2 Enter total number of section 501(c)(3) and government organizations. 3 Enter total number of other organizations. 			L - 3

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

TEEA3901L 12/19/08

Schedule I (Form 990) 2000

94-3213100

Page 2

Tides Center Schedule I (Form 990) 2008

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Honoraruim, Research Stdy, Summer Intern	Stipends,Fellowsh	ip			
	97	176,956.			
					the undefitional information
Part IV Supplemental Information. Com	plete this part to	provide the inform	ation required in F	Part I, line 2, and any o	other additional mormation.
Part I, Line 2 - Grantmaker's Descript	ion of How Grant	s are Used			
Thorough_due_diligence_is_cond	<u>ducted in adva</u>	nce_of_funding_	to determine	the_group's	
tax-exempt status and whether	the group is	appropriate fro	om a mission p	erspective	
All grantees receive a writte	n grant agreem	ent which indi	cates_whether_	lobbying is	
permissible and by accepting	payment, the g	rantee_agrees_	to the conditi	ons_of_the	
award, which provide assuranc	e_that_funds_w	ill_not_be_use	d_for_any_proh	ibited	
purpose.					
	na ana ana ana ana ana ana ana ana ana				
If a grant_is_restricted_to_a	particular no	n-lobbying pur			
agree that (i) any portion of					
repaid, (ii) any change of pur					
RAA repaid, (II) any change of put	pose muse de 1	equebeeu anu u	pprovod in dav		Schedule I (Form 990) 2008

94-3213100

Part I, Line 2 - Grantmaker's Description of How Grants are Used (continued)

writing and (ii) not to use any portion of the grant carry on propaganda or to attempt to influence specific legislation either by direct or grassroots lobbying.

Based on a risk assessment, we may require a progress report for certain grants nine months after the grant award. We ask the grantee to submit a two page narrative describing the use of the funds and activities undertaken as a result of the grant (including lobbying activity, if permitted), along with a financial report.

(a)1 Organization/Fiscal Sponsor Name: Organization Name	(a)2 Organization/Fiscal Sponsor Name: Main Office Address	(b) EIN from FE	(c) IRS Code Section	(d) Amount of cash grant	(e) Amount of non- cash	(g + h) Purpose
Dror for the Wounded	PO Box 7668 New York, NY 10150	20-5220752	501(c)(3)	\$28,041.60		Designated purpose funds
Declaration of Independence, Inc.	100 N Crescent Drive, Beverly Hills, CA 90210	95-4811249	501(c)(3)	\$16,000.00		to support the groups PSAs
Hanalei School PTSA	P.O. Box 1396, Hanalei, Hl 96714	99-0305469	501(c)(3)	\$12,500.00		general support
Grantmakers Without Borders	1009 General Kennedy Ave., #2 San Francisco, CA 94129 1009 General Kennedy	20-8211195	501(c)(3)	\$25,000.00		Spin Grant - general support
Grantmakers Without Borders	Ave., #2 San Francisco, CA 94129	20-8211195	501(c)(3)	\$16,621.57		Spin Grant - general support
Learning Disabilities Association of Michigan	200 Museum Drive. Suite 101, Lansing, MI 48933	38-6144641	501(c)(3)	\$5,000.00	•	to regrant under Beldon grant for state-based Learning and Developmental Disabilities Initiative work in Michigan.
Learning Disabilities Association of Minnesota	6100 Golden Valley Road Golden Valley, MN 55422			\$5,000.00)	regrant under Beldon grant for state-based Learning and Developmental Disabilities Initiative work in Minnesota
Learning Disabilities Association of New York	1202 Troy-Schenectady Rd., West Latham, NY 12110	13-1990148	501(c)(3)	\$5,000.00)	to regrant under Beldon grant for state-based Learning and Developmental Disabilities Initiative work in New York
Tides Foundation	P.O. Box 29903, San Francisco, CA 94129-090 1776 Massachussetts	3 51-0198509	501(c)(3)	\$32,488.2	3	to use for the domestic violence programs which serve survivors of domestic violence in San Francisco and their children
American Councils for International Conservation	Avenue NW #700 Washington DC 20036			\$5,350.1	6	Close grant - general support
Gay Straight Alliance Network	1550 Bryant St. Suite 80 San Francisco, CA 94103		501(c)(3) \$7,639.8	9	Spin Grant - general support
Gay Straight Alliance Network	1550 Bryant St. Suite 80 San Francisco, CA 9410 111 West St John Street	3 20-5367752	501(c)(3) \$46,482.4	16	Spin Grant - general support
Opportunity Fund	Suite 800, San Jose, CA 95113	31-1719434	501(c)(3	\$10,192.0	00	To support the TeamWorks Capital Fund
Tides Foundation Attachment	P.O. Box 29903, 5an Francisco, CA 94129-09	03 51-0198509	501(c)(3	\$) \$4,000,000.0	00	to support the Community Clinics Initiative Network for Community Health Grants - RFP 11
Schedule I, Part II						
Grants and Other Assistance to Governme	nts and Other Organiza	ations in the US				

Tides Center

Tides Foundation	P.O. Box 29903, San Francisco, CA 94129-0903 51-0198509	501(c)(3)	\$3,000,000.00	for CCI grants - Networking for Community Health
Tides Foundation	P.O. Box 29903, San Francisco, CA 94129-0903 51-0198509	501(c)(3)	\$25,773.20	To support Alston Banneman Scholarship Fund
Tides Foundation	P.O. Box 29903, 5an Francisco, CA 94129-0903 S1-0198509	501(c)(3)	\$25,380.71	general support of The Alston/Bannerman Fund for general operating support to assist with Carrying out the
A. J. Muste Memorial Institute	339 Lafayette Street, New York, NY 10012 23-7379088	501(c)(3)	\$50,000.00	programs and activities To be used for general support to assist with carrying out the
Adhikaar	39-06 62nd Street, #BL, Woodside, NY 11377 20-3384725	501(c)(3)	\$50,000.00	programs and activities of Adhikaar
African Hope Committee	African Hope Committee 441 Convent Avenue, Suite 4D, New York, NY 10031 04-3784718 Alwan for the Arts 16	501(c)(3)	\$25,000.00	General operating support
Alwan Foundation Inc.	Beaver Street, 4th Floor, New York, NY 10004 81-0643585	501(c)(3)	\$25,000.00	General operating support
Arab American Association of NY	7111 5th Avenue Brooklyn, NY 11209 11-3604756	501(c)(3)	\$50,000.00	General operating support
Bowery Arts & Science	310 Bowery, New York, NY 10012 13-3859496 446 16th Street, #3,	501(c)(3)	\$35,000.00	2008 Arts Initiative grants.
Brooklyn Young Mothers' Collective	Brooklyn, NY 11215 91-10 34th Avenue, 58,		\$25,000.00	General operating support
Calpulli Mexican Dance Company	Jackson Heights, NY 11372 20-0642440 163 Amsterdam Avenue,	501(c)(3)	\$25,000.00	one year general operating support
Children's Press Line	#149, New York, NY 10023 City at Peace - New York 104 West 27th Street,		\$25,000.00	one year general operating support
Cities at Peace, Inc.	12th Floor, New York, NY 10001 13-4134366	501(c)(3)	\$25,000.00	one year general operating support
	The Graduate Center, CUNY 365 Fifth Avenue, Suite 5113, New York, NY 10016 31-1720017	501(c)(3)	\$50,000.00	for general operating support to assist with carrying out the programs and activities of CCF in New York City. This is a two- installments award.
College and Community Fellowship (CCF)		501(0)(5)	\$30,000,00	
Cool Culture	80 Hanson Place Suite 604, Brooklyn, NY 11217 16-1636968	501(c)(3)	\$35,000.00	2008 Arts Initiative grants
Damayan Migrant Workers' Association	c/o Metro Baptist Church 410 W. 40th Street, New York, NY 10018 03-0481206 c/o Project Hospitality 100 Park Ave., Staten	501(c)(3)	\$25,000.00	2008 initiative grant
Altackindent ospitalidad	Island, NY 10302 13-4178608	501(c)(3)	\$25,000.00	2008 Initiated grant
Schedule I, Part II	to and Other Opportunities in the US			

	2290 Second Avenue, South Store, Ground				
	Floor, New York, NY				
Esperanza del Barrio	10035	75-3128396	501(c)(3)	\$25,000.00	2008 initiated grant
	147 West 24th Street, 6th				
	Floor, New York, NY				
FIERCE	10011	03-0518774	501(c)(3)	\$25,000.00	2008 initiative grants
	248 W. 35th Street, Suite				
	1202, New York, NY				
Fractured Atlas Productions	10001-2505	11-3451703	501(c)(3)	\$35,000.00	2008 Arts Initiative grants
	248 W. 35th Street, Suite				
Freeduned Atlan Draductions	1202, New York, NY 10001-2505	11-3451703	501(c)(3)	\$35,000.00	2008 Arts Initiative grants
Fractured Atlas Productions	10001~2505	11-3431703	501(0)(5)	<i>\$33,</i> 000.00	for general operating support to assist with carrying out the
	121 6th Avenue, #6, New				programs and activities of the DNNYC. This is two-installments
Fund for the City of New York	York, NY 10013	13-2612524	501(c)(3)	\$\$0,000.00	grant
	,		() ()		
	1360 Fulton Street, Suite				
Girls for Gender Equity	314, Brooklyn, NY 11216	04-3697166	501(c)(3)	\$25,000.00	General operating support
	520 Eight Ave., Suite				
	2020, New York, NY	F 4 0445054	F01/->/>>	éar 000 00	2008 Arte Initiativo grante
Girls Write Now	10018 235 Fact 172nd Street	54-2115054	501(c)(3)	\$35,000.00	2008 Arts Initiative grants
Grassroots Artists Movement	235 East 172nd Street Bronx, NY 10021	34-1975159	501(c)(3)	\$50,000.00	General operating support
Grassroots Artists Movement	DIONA, NT 10021	54-1575155	501(0)(5)	\$50,000.00	
	1230 Lafayette Avenue,				
Green Worker Cooperatives (GWC)		20-1828936	501(c)(3)	\$25,000.00	General operating support
	70 E. 3rd Street, #9, New				
Groove with Me, Inc.	York, NY 10003	13-3919147	501(c)(3)	\$25,000.00	one year general operating support
	36-11 A 12th Street		504()(3)	¢102.000.00	Converting support
Hour Children	Long Island City, NY 1110	5 13-364/412	501(c)(3)	\$100,000.00	General operating support.
	104 East 126th Street,				
	Suite 4D				
In the Spirit of the Children		13-4000928	501(c)(3)	\$50,000.00	General operating support.
	1080 Willoughby Avenue,				
	2nd Floor., Brooklyn, NY				
Latin American Workers Project(LAWP)	11221	14-1812487	501(c)(3)	\$25,000.00	2008 initiated grant
	301 Grove Street				
Make the Road New York	Brooklyn, NY 11237	11-3344389	501(c)(3)	\$100,000.00	General operating support.
	CA Fulton Streat Suite				
Mano a Mano: Mexican Culture Without Borders	64 Fulton Street, Suite 403, New York, NY 10038	EC 2545700	501(c)(3)	\$35,000.00	2008 Arts Initiative grants
Mano a Mano. Mexican culture without borders	Dept. of Emergency	50-2545700	501(c)(5)	<i>933,000.00</i>	2000 Mills Millative Branco
	Medicine				
	Rosenthal SE-RM 201				
	111 East 210th Street				
Mentoring in Medicine	Bronx, NY 10467	26-0306309	501(c)(3)	\$50,000.00	General support.
	P.O. Box 536, New York,				
Mirabal Sisters Cultural & Community Center	NY 10031	06-1629188	501(c)(3)	\$25,000.00	2008 initiated grant
Attachment	601 Walton Avenue,	10 0000014	F01(a)(2)	¢35,000,00	2008 Arts Initiative Grants
Schedule I, Part if roup	Bronx, NY 10451	13-3894314	501(c)(3)	\$35,000.00	2000 ALLS INITIALIVE OF AILS
Grants and Other Assistance to Governme	ents and Other Organizat	tions in the US			

Tides Center

Museum of Contemporary African Diasporan Arts (MoCADA)	MoCADA 80 Hanson Place, Brooklyn, NY 11217			\$25,000.00	one year general operating support
Nah We Yone	·= · ,	13-4026142	501(c)(3)	\$25,000.00	2008 initiate grant
New York Foundation for the Arts, Inc.	155 Avenue of Americas, 6th Floor, New York, NY 10013 155 Avenue of Americas,	23-7129564	501(c)(3)	\$35,000.00	2008 Arts Initiative grants
New York Foundation for the Arts, Inc.	6th Floor, New York, NY	23-7129564	501(c)(3)	\$35,000.00	2008 Arts Initiative grants
NICE (New Immigrant Community Empowerment)	Floor, Jackson Heights, NY	11-3560625	501(c)(3)	\$25,000.00	2008 initiate grant
Queers for Economic Justice	16 W. 32nd Street, Room 10-H, New York, NY 10001 201 Richards Street, Suite	71-0955732	501(c)(3)	\$25,000.00	2008 initiate grant
Red Hook Initiative	108 Brooklyn, NY 11231	20-3904662	501(c)(3)	\$50,000.00	General operating support
Renaissance E.M.S.	3251 Third Avenue, Bronx, NY 10456	13-4122438	501(c)(3)	\$35,000.00	2008 Arts Initiative grants
Sadie Nash Leadership Project	157 Montague Street, 4th Floor, Brooklyn, NY 11201		501(c)(3)	\$25,000.00	General operating support
Sauti-Yetu Center for African Women	P.O. Box 3112, New York, NY 10163 317 Clermont Avenue,	20-1209795	501(c)(3)	\$25,000.00	General operating support
T.W.W. Inc./Talks with Wolves	Suite 2M, Brooklyn, NY 11205	11-3634316	501(c)(3)	\$35,000.00	2008 Arts Initiative grants
The Brotherhood/SisterSol	512 W. 143rd 5treet New York, NY 10031 125 Maiden Lane , 5th	13-3857387	501(c)(3)	\$100,000.00	General operating support
The Greater New York Labor-Religion Coalition	Floor, New York, NY 10038 D.O. Brin 1181 New York			\$25,000.00	General operating support
The Hip-Hop Association, Inc.	P.O. Box 1181, New York, NY 10035 3041 Broadway, Mailbox	20-1232767	501(c)(3)	\$25,000.00	one year general operating support
The Interfaith Coalition of Advocates for Reentry and Employment (ICARE)	37 New York, NY 10027 137-139 West 25th	30-0469351	501(c)(3)	\$50,000.00	General operating support general operating support to assist with carrying out the programs and activities of the NYSYLC in New York City. This is
The New York Immigration Coalition	Street, 12th Floor, New York, NY 10001-7277	13-3573409	501(c)(3)	\$50,000.00	two-installments grant
The Sikh Coalition	40 Exchange Place, Suite 728, New York, NY 10005 322 8th Avenue, 3rd		501(c)(3)	\$25,000.00	2008 initiate grant
The Sylvia Rivera Law Project (SRLP)	Floor, New York, NY 10001 PO Box 670086, Flushing	81-0640342	501(c)(3)	\$25,000.00	2008 initiate grant
Attaics frentfor Women and Families	NY 11367	54-2177390	501(c)(3)	\$25,000.00	General operating support
Schedule I, Part II		tions in the LIC			

UPROSE, Inc.	166A 22nd Street., Brooklyn, NY 11232 123 William Street 16th	11-2490531	501(c)(3)	\$25,000.00	2008 initiate grant
Urban Justice Center	Floor, New York, NY 10038 123 William Street 16th	13-3442022	501(c)(3)	\$25,000.00	2008 initiated grant for general operating support to assist with carrying out the
Urban Justice Center	Floor, New York, NY 10038	13-3442022	501(c)(3)	\$50,000.00	programs and activities of the RIPPD in New York City. This is a two-installments grant
Voces Latinas Corporation	43-22 50th Street, Ste. 2C, Woodside, NY 11377 c/o Hanna Fox 104	, 20-2312651	501(c)(3)	\$25,000.00	General operating support
Willie Mae Rock Camp for Girls	Lefferts, Brooklyn, NY 11225 1384 Startford Avenue	65-1237021	501(c)(3)	\$35,000.00	2008 Arts Initiative Grants
Youth Ministries for Peace and Justice	Bronx, NY 10472	98-0427000	501(c)(3)	\$100,000.00	General operating support
Youth Represent	342 Broadway, New York, NY 10013 PO Box 29903, San	20-8034010	501(c)(3)	\$50,000.00	for general support. This is a two-installments grant
Tides Foundation/Third Way Fund	Francisco, CA 94129	51-0198509	501(c)(3)	\$170,558.00	General support
Visitacion Valley Community Center, Inc./CLAER Project	1099 Sunnydale Ave San Francisco, CA 94134			\$30,000.00	Spin Grant - general support
Visitacion Valley Community Center, Inc./CLAER Project	1099 Sunnydale Ave San Francisco, CA 94134 PO Box 29242			\$10,402.07	Spin Grant - general support
United Religions	1009 General Kennedy Ave SF CA 94129	20 8008502	501(c)(3)	\$7,200.00	Scholarship support
	SF CA 94129	20-8008593	501(0)(3)	\$7,200.00	
Virginia Organizing Project	703 Concord Avenue Charlottesvle, VA 22903	54-1674992	501(c)(3)	\$300,000.00	Spin Grant - general support
Virginia Organizing Project	703 Concord Avenue Charlottesvle, VA 22903	54-1674992	501(c)(3)	\$161,206.98	Spin Grant - general support Grantmaking (regranting) through Tides Foundation DAF for
Tides Foundation	P.O. Box 29903, San Francisco, CA 94129-090	3 51-0198509	501(c)(3)	\$1,113,211.00	integrated behavioral health projects to California community clinics and health centers
Tides Foundation	P.O. Box 29903, San Francisco, CA 94129-090	3 51-0198509	501(c)(3)	\$20,200.00	To support the Foundation Tools for Community Clinics Project
Tides Foundation	P.O. Box 29903, San Francisco, CA 94129-090	3 \$1-0198509	501(c)(3)	\$417,000.00	to support the Innovations Incubator Tools grantmaking program
	P.O. Box 29903, San				to increase adoption levels and lower adoptions costs of
Tides Foundation	Francisco, CA 94129-090	3 51-0198509	501(c)(3)	\$2,000,000.00	Electronic Health Record in clinics
Attachment Schedule I, Part II					

Tides Center

Tides Foundation	P.O. Box 29903, San Francisco, CA 94129-0903 51-0198509	501(c)(3)	\$400,000.00	to increase adoption levels and lower adortions costs of \$2,867,200.00 Electronic Health Record in clinics
Tides Foundation	444 - 15th Avenue, #101, San Francisco, CA 94118 51-0198509	501(c)(3)	\$30,000.00	for Innovations Incubator Tools Fund to support desease registry technology
Tides Foundation	P.O. Box 29903, San Francisco, CA 94129-0903 51-0198509	501(c)(3)	\$127,230.00	To support treatment access and education efforts in selected funding regions
Tides Foundation	P.O. Box 29903, San Francisco, CA 94129-0903 51-0198509	501(c)(3)	\$329,702.00	To support tratment access and education efforts in selected funding regions
Tides Foundation	P.O. Box 29903, San Francisco, CA 94129-0903 51-0198509	501(c)(3)	\$212,666.50	\$0.74 general support for the HIV Collaborative Fund
Tides Foundation	P.O. Box 29903, San Francisco, CA 94129-0903 51-0198509	501(c)(3)	\$303,417.97	\$1,131,580.66 Grant making for treatment access and education
Tides Foundation	P.O. Box 29903, San Francisco, CA 94129-0903 51-0198509	501(c)(3)	\$158,563.4S	\$1,131,579.92 to support HIV Collaborative Fund
St. Luke's Roosevelt Hospital Center	Department of Emergency Medicine 1111 Amsterdam Avenue, New York, NY 10025 13-2997301	501(c)(3)	\$7,500.00	to support the Global Health Fellowship at St. Luke's Roosevelt Hospital Center. This grant is only to be used for salary support and/or protected time for the Director to work with CGCHI and not for travel related or other expenses.
AMS Women Advocates for Minority Single Women In	2345 Louise Harris Suite F, nc. Cleveland, OH 44104		\$5,000.00	to support YP4 and CPL fellows in Ohio for their "Power at the Polls" statewide coalition, doing GOTV work and E-day parties at HBCUs and other campuses around the state
Asian Communities for Reproductive Justice	310 8th Street, Suite 102, Oakland, CA 94607 94-3311784	501(c)(3)	\$5,000.00	Coordination of an Oakland based Trick or Vote drive and concert event, and support to partners in Los Angeles and Central Valley
Jobs With Justice	2725 Clifton Street, 5t. Louis, MO 63139 43-1864844 45 Main Street Suite 628,	501(c)(3)	\$5,000.00	to support development of training materials and scholarships for genvote members participate in the Youth Voter Collective conference/training in St. Louis Missouri to coordinate/facilitate a voter engagement training tour for African American youth leaders with the NAACP youth and
League of Young Voters Education Fund	Brooklyn, NY 11201 76-0744153	501(c)(3)	\$5,000.00	college division and Black Youth Vote
League of Young Voters Education Fund	45 Main Street Suite 628, Brooklyn, NY 11201 76-0744153	501(c)(3)	\$5,000.00	to support the coordination and promotion of a Milwaukee Trick or Vote Get Out the Vote drive and party
League of Young Voters Education Fund	45 Main Street Suite 628, Brooklyn, NY 11201 76-0744153	501(c)(3)	\$5,000.00	organization to support the collaborative trainings in Philadelphia on electoral skills and election protection information, as well as to produce "Know Your Rights" Election Protection Cards.
League of Young Voters Education Fund	45 Main Street Suite 628, Brooklyn, NY 11201 76-0744153	501(c)(3)	\$5,000.00	to provide early voting and election day transportation to the polls for Milwaukee residents to develop resources and provide technical support to genvote
Attachment Oregon Progress Forum Schedule I, Part II	333 SE 2nd Avenue, Portland, OR 97214 93-1314754	501(c)(3)	\$5,000.00	members for anationally coordinated "Trick or Vote" get out the vote campaign

Oregon Progress Forum	333 SE 2nd Avenue, Portland, OR 97214 93-1314754	501(c)(3)	\$10,000.00	to provide marketing, branding, fundraising, coordination and talent recruitment support as well as to provide promotional materials for GenVote members carrying out local Trick or Vote get-out-the-vote drives and parties
	333 SE 2nd Avenue,	F01(-)(2)	\$10,000.00	to coordinate and promote Portland Trick or Vote drive and party
Oregon Progress Forum	Portland, OR 97214 93-1314754 369 15th Street, Oakland,	501(c)(3)	\$10,000.00	to support trainer costs for trainings at GenVote members'
Ruckus Society	CA 94612 81-0504390	501(c)(3)	\$5,000.00	events and conferences this summer and fall to support development of an election protection direct action guide and support to members for their election protection
Dualua Califata	369 15th Street, Oakland, CA 94612 81-0504390	501(c)(3)	\$5,000.00	activities
Ruckus Society	CA 94612 81-0504390	501(0)(5)	\$3,000.00	
The Center for Civic Policy/New Mexico Youth	1500 Lomas Suite B,			
Organized	Albuquerque, NM 87104 01-0869701 1211 Connecticut Avenue,	501(c)(3)	\$5,000.00	to support a Trick or Vote event in Albuquerque to collaborate with Black Youth Vote to produce and distribute 80,000 California non-partisan voter guides throughout the CSU
11-th of Charles Charles & Association Franchism	NW, Washington, DC 20036 23-7211922	2 501(c)(3)	\$5,000.00	and UC campuses
United States Student Association Foundation	1211 Connecticut Avenue, NW, Washington, DC	501(0)(3)	\$3,000.00	
United States Student Association Foundation	20036 23-7211922	2 501(c)(3)	\$8,000.00	to produce non-partisan national youth voter guides This grant is for the Young Voter Collective (YVC) of Chicago and Milwaukee to support the coordination and promotion of a
	3339 S. Halstead Street,			Chicago-based nonpartisan Trick or Vote Get out the Vote canvas
Workers Education Society, NFP	Chicago, IL 60608 13-0007123	3 501(c)(3)	\$5,000.00	and associated party
	B.O. B			
Tides Foundation	P.O. Box 29903, San Francisco, CA 94129-0903 51-0198509	501(c)(3)	\$170,000.00	General support for Earth grants grantmaking
ndes i oundation		501(0)(0)	+ =	
	P.O. Box 29903, San			
Tides Foundation	Francisco, CA 94129-0903 51-0198509	501(c)(3)	\$170,000.00	General support for Earth grants grantmaking
	P.O. Box 29903, San			
Tides Foundation	Francisco, CA 94129-0903 51-0198509	501(c)(3)	\$332,263.00	general support
and a local	444 - 15th Avenue, #101,	F01(-)(2)	\$50,000.00	To support the AIDS-Free World Fund
Tides Foundation	San Francisco, CA 94118 51-0198509 1825 K Street, NW, Suite	501(c)(3)	\$50,000.00	To support the Aloss feet world fund
	400, Washington, DC			
Institute For America's Future (IAF)	20006 52-197194	2 501(c)(3)	\$50,000.00	to support online advocacy work on green energy issues.
	200 Eastern Parkway,			general operating support for Brooklyn Museum's Apprentices
Brooklyn Museum	Brooklyn, NY 11238 11-167274	3 501(c)(3)	\$20,000.00	Program. To support organization's participation in Beacons Young
Center for Family Life	1 Alexander Place, Glen Cove, NY 11542 11-277706	6 501(c)(3)	\$10,000.00	Adolescent Initiative
Center for Farmy Life	14 E. 60th Street, New	501(0)(5)	<i>Q</i> 10,000.00	For general operating support of Central Park Conservancy Youth
Central Park Conservancy	York, NY 10022 13-302285	5 501(c)(3)	\$45,000.00	Leadership Programs
	60-02 Queens Blvd,			To support organization's participation in Beacons Young
Child Center of New York	Woodside, NY 11377 11-173345	54 501(c)(3)	\$40,000.00	Adolescent Initiative general operating support for Children's Museum of Manhattan
Children's Museum of Manhattan	212 West 83rd Street, New York, NY 10208 13-276137	76 501(c)(3)	\$40,000.00	Junior Staff Internship Program
Children's Museum of Maniattan	10-270137	5 501(0)(5)	Q-0,000.00	· · · · · · · · · · · · · · · · · · ·

Attachment

Schedule I, Part II

itizens Advice Bureau	2054 Morris Avenue, Bronx, NY 10453	13-3254484	501(c)(3)	\$35,000.00
press Hills Local Development Corporation	62S Jamaica Avenue, Brooklyn, NY 11208	11-2683663	501(c)(3)	\$40,000.00
spress hits cocal bevelopment corporation	BIOOKIJI, NI 11200	11 2005000		
	625 Jamaica Avenue,			
Cypress Hills Local Development Corporation	Brooklyn, NY 11208	11-2683663	501(c)(3)	\$50,000.00
	337 Alexander St, Bronx,			
ast Side House Settlement	NY 10454			\$35,000.00
	315 Hudson Street,			
	Seventh Floor, New York,			\$35,000.00
ederation Employment and Quidance Service, Inc.	NY 10013 305 7th Avenue, 9th			\$55,000.00
	Floor, New York, NY	13 5509710	501(c)(3)	\$10,000.00
Good Shepherd Services	10001 305 7th Avenue, 9th Floor, New York, NY	13-5598710	501(c)(5)	\$10,000.00
Good Shepherd Services	10001	13-5598710	501(c)(3)	\$35,000.00
	36 Battery Place, New		504()(3)	éar 000 00
Museum of Jewish Heritage	York, NY 10208	13-3376265	501(c)(3)	\$25,000.00
	716 Fort Washington			
	Avenue, Second Floor,			
New Heights Neighborhood Center	New York, NY 10032	32-0039696	501(c)(3)	\$35,000.00
	1512 Townsend Avenue,			
New Settlement Apartments	Bronx, NY 10452	24-1719016	501(c)(3)	\$35,000.00
New Settlement Apartments	Biolix, 11 10452	24 17 15010		
	300 Jay Street - Room			
New York City College of Technology	320, Brooklyn, NY 11201	11-2529356	501(c)(3)	\$15,000.00
	4701 111th Street,			
New York Hall of Science	Queens, NY 11368 170 Central Park West,	11-2104059	501(c)(3)	\$50,000.00
New York Historical Society	New York, NY 10024 108-25 62nd Drive, Fore	13-1624124 st	501(c)(3)	\$25,000.00
Queens Community House	Hills, NY 11375 89-11 Merrick Blvd,	11-2375583	501(c)(3)	\$10,000.00
Queens Library Foundation	Jamaica, NY 11432	11-3009405	501(c)(3)	\$30,000.00
	220 Montgomery Street			
Attachmiem School Alliance	Suite 1050, San Francisc CA 94104	94-3222869	501(c)(3)	\$145,000.00
Attachment		5. SELLOO 5	00=(0,(0)	

Grants and Other Assistance to Governments and Other Organizations in the US

in support of the organization's participation in Community Education Pathways to Success, an initiative to help participating organizations strenghen their services for returning youth To support organization's participation in Beacons Young Adolescent Initiative

To support Cypress Hill's participation in Community Education Pathways in Success (CEPS), an initiative to help participating organizations strengthen their services for returning youth.

in support of the organization's participation in Community Education Pathways to Success, an initiative to help participating organizations strenghen their services for returning youth

in support of the organization's participation in Community Education Pathways to Success, an initiative to help participating organizations strenghen their services for returning youth

To support organization's participation in Beacons Young Adolescent Initiative

For use in support of your organization's participation in Community Education Pathways to Success (CEPS). general operating support for Museum of Jewish Heritage—A Living Memorial to the Holocaust High School Apprenticeship Program.

in support of the organization's participation in Community Education Pathways to Success, an initiative to help participating organizations strenghen their services for returning youth

in support of the organization's participation in Community Education Pathways to Success, an initiative to help participating organizations strenghen their services for returning youth

to continue to partner with Cypress Hills Local Development Corporation (CHLDC) through its Local Network (LN) of the New York City Partnership for College Access and Success, to provide college access and success services for older disconnected youth who have a desire to pursue their education For general operating support of Science Career Ladder and After-School Science Clubs

Fo general operating support of Hiigh School Internship Program To support organization's participation in Beacons Young Adolescent Initiative general operating support for Queens Library's Teen Net Mentors Program

For support of the San Francisco Beacon Initiative's (SFBI) participation in Beacons Young Adolescent Initiative (BYA)

					in support of the organization's participation in Community
	247 West 37th Street, 4th				Education Pathways to Success, an initiative to help participating
	Floor, New York, NY			63F 000 00	organizations strenghen their services for returning youth
Settlement Housing Fund, Inc.	10018			\$35,000.00	To support organization's participation in Beacons Young
	11-29 Catherine Street,			\$40,000.00	Adolescent Initiative
St. Nicholas Neighborhood Preservation Services	Brooklyn, NY 11211			\$40,000.00	General operating support of Montefiore Carl Sagan Discovery
	111 E. 210th Street,	10 1740114		\$25,000.00	Program
The Children's Hospital at Montefiore	Bronx, New York 10467 322 Eight Avenue, 16th	13-1740114		\$25,000.00	
	-				general operating support for the Nature Conservancy's
	Floor, New York, NY 10001			\$25,000.00	Internship for City Youth
The Nature Conservancy	Bronx River Parkway at				
	Fordham Road, Bronx, NY	,			For general operating support of New York Botanical Garden
The New York Botanical Garden	10458-5126	13-1693134		\$25,000.00	Explainer Program
The New Tork Bolanical Garden	10430 2120	10			
					in support of the organization's participation in Community
	5220 Fourth Avenue,				Education Pathways to Success, an initiative to help participating
Turning Point Educational Center	Brooklyn, NY 11220	11-2838138		\$35,000.00	organizations strenghen their services for returning youth
	184 Eldridge Street, New				to support organization's participation in Beacons Young
University Settlement	York, NY 10002	13-5562374		\$15,000.00	Adolescent Initiative
·					
	675 West 252nd Street,			¢20.000.00	to support participation in the Career Internship Network (CIN)
Wave Hill	Bronx, NY 10471	13-6178903	501(c)(3)	\$30,000.00	to support participation in the career internship recovery (enty
	P.O. Box 29903, San		504()(2)	6550 000 00	To support civic engagement in immigrant communities
Tides Foundation	Francisco, CA 94129	51-0198509	501(c)(3)	\$550,000.00	To support time engagement at many but communities
	PO Box 29903, San	54 0400500	F01(a)(2)	\$5,000.00	general support
Tides Foundation	Francisco, CA 94129	51-0198509	501(c)(3)	\$3,000.00	Beneral autorit
	PO Box 29903, San	S1-0198509	501(c)(3)	\$25,000.00	General Support
Tides Foundation	Francisco, CA 94129 PO Box 29903, San	21-0190209	501(0)(5)	<i>\$23,000.00</i>	
mente a contra	Francisco, CA 94129	51-0198509	501(c)(3)	\$25,000.00	To support Chicken and Egg Pictures Fund
Tides Foundation	PO Box 29903, San	51 0150505	501(0)(0)	,, ,	
Tides Foundation	Francisco, CA 94129	51-0198509	501(c)(3)	\$12,500.00	To support Chicken and Egg Pictures Fund
nues roundation					
	P.O. Box 29903, San				
Tides Foundation	Francisco, CA 94129-090	3 51-0198509	501(c)(3)	\$25,000.00	To support Chicken and Egg Pictures Fund
	PO Box 29903, San				
Tides Foundation	Francisco, CA 94129	51-0198509	501(c)(3)	\$5,000.00	general support
	PO Box 29903, San				Children and Free Distance Fund
Tides Foundation	Francisco, CA 94129	51-0198509	501(c)(3)	\$25,000.00	to support Chicken and Egg Pictures Fund
	P.O. Box 29903, San		F01(-)(2)	\$100,000.00	to create a fund in the Foundation
Tides Foundation	Francisco, CA 94129-090	03 51-0198509	501(c)(3)	\$100,000.00	to create a fund in the Foundation
	801 Third St South			\$45,000.00	Spin Grant - general support
The Poynter Institute	St Petersburg FL 33701			<i>Q</i> 13,000,000	
	P.O. Box 29903, San				
Tides Foundation	Francisco, CA 94129-09	03 51-0198509	501(c)(3)	\$30,000.00	General Support for New Policy Institute Fund
inces i buildation					
	P.O. Box 29903, San				
Tides Foundation	Francisco, CA 94129-09	03 51-0198509	501(c)(3)	\$25,380.71	To support New Policy Institute Fund
Attachment					
Schedule I, Part II					
ourcaule if i are in					

Tides Foundation	P.O. Box 29903, San Francisco, CA 94129-0903 51-0198509	501(c)(3)	\$10,161.43	This grant is for New Policy Institute Fund		
Tides Foundation	PO Box 29903, San Francisco, CA 94129 S1-0198509	501(c)(3)	\$58,000.00	To support the Alliance of Civilizations Media Fund		
Tides Foundation	PO Box 29903, San Francisco, CA 94129 51-0198509	501(c)(3)	\$26,509.64	To support The Alliance of Civilizations Media Fund		

Attachment Schedule I, Part II Grants and Other Assistance to Governments and Other Organizations in the US

1	Compens	ation Information	OMB No. 1	545-0047		
SCHEDULE J Form 990)	For certain Officers, Directors Comper		2008			
Department of the Treasury	Attach to Form 990. To b answered 'Yes' to	Inspe	pen to Public Inspection			
nternal Revenue Service		Employer identificatio	n number			
Name of the organization Tides Center		94-3213100				
Part Questions	Regarding Compensation		T			
			1000	Yes	No	
1a Check the approp VII, Section A, lir	riate box(es) if the organization provided an le 1a. Complete Part III to provide any releva	y of the following to or for a person listed in Form 990, Pa ant information regarding these items.	art			
	charter travel	Housing allowance or residence for personal use				
Travel for co		Payments for business use of personal residence				
	ication and gross-up payments	Health or social club dues or initiation fees				
	spending account	Personal services (e.g., maid, chauffeur, chef)				
	spending debound					
		iou regarding payment or reimbursement or provision of a			38889) (
of the eynenses	Described above: if ito, comprote the time	icy regarding payment or reimbursement or provision of a				
2 Did the organiza	ion require substantiation prior to reimbursin	ng or allowing expenses incurred by all officers, directors, is checked in line 1a?	2			
trustees, and the	CEO/Executive Director, regarding the item	is checked in line 1a?				
		stablish the compensation of the organization's				
3 Indicate which, i	f any, of the following organization uses to e Director. Check all that apply.	stablish the compensation of the organization's	19 19			
		Written employment contract			dynania Gwl	
	on committee					
	compensation consultant					
Form 990 of	other organizations	X Approval by the board or compensation committee				
4 During the year.	did any person listed in Form 990, Part VII,	Section A, line 1a:	8		X	
	ment as shange of control payment		42		<u>л</u> Х	
	in a mont from a supplemental non	invalified retirement plans.	· · · · ·		X	
- Deutisingto in o	r receive navment from, an equity-based cor	mpensation arrangements.	40			
If 'Yes' to any o	f 4a-c, list the persons and provide the applic	cable amounts for each item in Part III.				
Only 501(c)(3) a	nd 501(c)(4) organizations must complete lir	nes 5-8.				
5 For persons list	ed in Form 990, Part VII, Section A, line 1a,	did the organization pay or accrue any compensation	5	a	X	
a The organizatio	n?	·····			X	
b Any related org	anization?			1		
If 'Yes' to line 5	a or 5b, describe in Part III.					
6 For persons lis contingent on t	ed in Form 990, Part VII, Section A, line 1a, ne net earnings of:	did the organization pay or accrue any compensation	6	-	X	
			6		X	
b Any related or	anization?	•••••••••••••••••••••••••••••••••••••••				
If 'Yes' to line (5a or 6b, describe in Part III.		1000000	100000000000000000000000000000000000000	10000	
7 For person list	ed in Form 990, Part VII, Section A, line 1a, les 5 and 6? If 'Yes.' describe in Part III	did the organization provide any non-fixed payments not	7	_	X	
		accrued pursuant to a contract that was subject to the init (3)? If 'Yes,' describe in Part III	ial I		X	

OMB No. 1545-0047

Tides Center

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations described in the instructions on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

		(B) Breakdown o	f W-2 and/or 1099-MISC	compensation	(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)·(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
(A) Name		(i) Base compensation	(ii) Bonus and incentive compensation	(iii) Other compensation	compensation			Form 990-EZ
		0.	0.	0.	0.	0.	0.	0
Drummond Pike	(i)			0.	12,000.	23,566.	275,566.	0
	(ii)	240,000.	0.	0.	0.	0.	0.	0
Ellen Friedman	(i)		0.	0.	9,880.	18,645.	222,958.	(
	(ii)	194,433.	0.	0.	0.	10,867.	164,525.	
Carla Dartis	(i)	153,658.		0.	0.	0.	0.	(
	(ii)	0.	0.	0.	0.	15,950.	212,141.	
Thomas G. David	(i)	196,191.	0.	0.	0.	0.	0.	(
	(ii)	0.	0.	0.	0.	23,552.	223,824.	(
Eric P. Schwartz	(i)	200,272.	0.			<u></u> 0.	0.	(
	(ii)	0.	0.	0.	0.	8,444.	169,644.	
Peter Kleinbard	(i)	161,200.	0.	0.				
	(ii)	0.	0.	0.	0.	24,327.	198,207.	
Alan Jenkins	(i)	173,880.	0.	0.		23,027.	0.	
	(ii)	0.	0.	0.	0.	0.		
	(i)							
	(ii)							
	(i)							+
	(ii)							
	(i)							+
	(ii)							
	(i)							+
	(ii)							
	(i)							
	(ii)							
	(i)						_	+
	(ii)							
nga gana ana amin'ny faritr'o ana amin'ny faritr'o ana amin'ny faritr'o ana amin'ny faritr'o amin'ny faritr'o a	(i)						_	
	(ii)							
	(i)						_	+
	(ii)							
		waye						
	(i)							
PAA	(ii)		1	TEEA4102L C	8/11/08		Sch	nedule J (Form 990)

Part III Supplemental Information
Part III Supplemental Information Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Schedule J (Form 990) 2008

Page 3

94-3213100

Tides Center

Schedule J (Form 990) 2008

Part III Supplemental Information

SCHEDULE M (Form 990)

Non-Cash Contributions

► To be completed by organizations that answered 'Yes' on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

OMB No. 1545-0047

2008 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

94-3213100

Tides	Center	
Part I	Types of	[Property

-ari	I Types of Property	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g		(d) of determinin venues	g
2	Art–Works of art Art–Historical treasures Art–Fractional interests						
4 5	Books and publications						
6 7 8	Cars and other vehicles Boats and planes Intellectual property			<u> </u>			
9 10	Securities—Publicly traded	<u> </u>	31	616,842.			
11 12	Securities—Partnership, LLC, or trust interests Securities—Miscellaneous Qualified conservation contribution (historic structures)						
13 14 15	Qualified conservation contribution (insuite structures) Qualified conservation contribution (other) Real estate–Residential						
16 17	Real estate—Commercial Real estate—Other						
18 19 20	Collectibles Food inventory Drugs and medical supplies		1				
20 21 22	Taxidermy						
23 24	Archeological artifacts						
25 26	Other ► () Other ► ()	·					
27)) Other ► (·	he tax year for contribut	tions for which the	29		
29	organization completed Form 8283, Fail TV, Don			n Dort L lines 1-28 that	it must	Yes	No
	purposes for the entire holding period?					<u>30 a</u>	X
3	 b If 'Yes,' describe the arrangement in Part II. Does the organization have a gift acceptance point of the organizati	r rolated or	ranizations to solicit, pro	ocess, or sell		31 X	X
	noncash contributions?					<u>32 a</u>	
	 If the organization did not report revenues in co describe in Part II. A For Privacy Act and Paperwork Reduction Act 				skea, Schedul	e M (Form 9	 90) 2008

Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► Attach to Form 990. To be completed by organizations that answered 'Yes' to Form 990, Part IV, lines 33, 34, 35, 36, or 37.
► See separate instructions.

Employer identification number

94-3213100

Department of the Treasury Internal Revenue Service

Name of the organization

Tides Center

Part Identification of Disregarded Entities

(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity
Name, address, and EIN of disregarded entry	, , , , , , , , , , , , , , , , , , ,	or foreign country)			c.n.y
The Pathway Home, LLC					
1014 Torney Avenue San Francisco, CA 94129	Veteran's Assistance	CA	653,780.	1,150,117.	Tides Center
26-1640175					
	1				<u> </u>

Part II Identification of Related Tax-Exempt Organizations

(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity
Exec/Admin Svcs for Related Orgs & Facilities Mgt & Ops	СА	501(c)(3)	509(a)(1)	N/A
Dev & Operate Multi-Tenant Non		501(c)(3)	509(a)(3)	Tides Foundation/Ti des Center
Grantmaking	CA	501(c)(3)	509(a)(1)	N/A
	Primary activity Exec/Admin Svcs for Related Orgs & Facilities Mgt & Ops Dev & Operate Multi-Tenant Non Profit Centers	Exec/Admin Svcs for Related Orgs & Facilities Mgt & Ops CA Dev & Operate Multi-Tenant Non Profit Centers	Initial y dotting or foreign country) Exec/Admin Svcs	Primary activityLegal domicile (state or foreign country)Exempt Code sectionPublic charity status (if section 501(c)(3))Exec/Admin Svcs for Related Orgs

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) (4

OMB No. 1545-0047

2008 Open to Public Inspection

Part III Identification of Related Organizations Taxable as a Partnership

(A) Name, address, and EIN of related organization	(B) Primary Activity	(C) Legal domicile (state or foreign	(D) Direct controlling entity	(E) Predominant income (related, investment, unrelated)	(F) Share of total income	(G) Share of end-of-year assets	(F Dispr tion alloca	opor- late	(I) Code V-UBI amount in Box 20 of Schedule K-1	(J Gene mana partr	aging
		country)					Yes	No	(Form 1065)	Yes	No
											*
									Y way was a second s		
	<u> </u>						1	I	L	1	<u> </u>

Part IV Identification of Related Organizations Taxable as a Corporation or Trust

(A) Name, address, and EIN of related organization	(B) Primary Activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Type of entity (C corp, S corp, or trust)	(F) Share of total income	(G) Share of end-of-year assets	(H) Percentage ownership
	-						
	-						

Part V Transactions With Related Organizations

Note. Complete line 1 if any entity is listed in Parts II, III, or IV.	ions listed in Parts II-IV:		
Note. Complete line 1 if any entity is listed in Parts II, III, or IV. During the tax year did the organization engage in any of the following transactions with one or more related organization		1a	X
During the tax year did the organization engage in any of the following transactions with one of more related organization a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		1 b	X
 a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity. b Gift, grant, or capital contribution to other organization(s). 		1c	X
 b Gift, grant, or capital contribution to other organization(s). c Gift, grant, or capital contribution from other organization(s). 		1d	X
 c Gift, grant, or capital contribution from other organization(s). d Loans or Ioan guarantees to or for other organization(s). 		1e	X
 d Loans or loan guarantees to or for other organization(s) e Loans or loan guarantees by other organization(s) 			
		1f	X
f Sale of assets to other organization(s)		1g	X
f Sale of assets to other organization(s)g Purchase of assets from other organization(s)		1h	X
g Purchase of assets from other organization(s)h Exchange of assets.		11	X
 h Exchange of assets i Lease of facilities, equipment, or other assets to other organization(s) 			
			X
j Lease of facilities, equipment, or other assets from other organization(s)		1k	X
			Σ
			X
			X
m Sharing of facilities, equipment, mailing lists, or other assets.n Sharing of paid employees			
			X
o Reimbursement paid to other organization for expenses			X
 o Reimbursement paid to other organization for expenses p Reimbursement paid by other organization for expenses. 		· · · · · · · · · · · · · · · · · · ·	
		1q	2
q Other transfer of cash or property to other organization(s)	·····	<u>1q</u> 1r	
q Other transfer of cash or property to other organization(s)	·····	tion thresholds.	2
 q Other transfer of cash or property to other organization(s) r Other transfer of cash or property from other organization(s) 2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, include 	ing covered relationships and transa	tion thresholds.	2
 q Other transfer of cash or property to other organization(s) r Other transfer of cash or property from other organization(s) 2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, includ (A) 	ing covered relationships and transa	tion thresholds.	
 q Other transfer of cash or property to other organization(s) r Other transfer of cash or property from other organization(s) 2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, include 	ing covered relationships and transa	tion thresholds.	2
 q Other transfer of cash or property to other organization(s) r Other transfer of cash or property from other organization(s) 2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, includ (A) 	ing covered relationships and transa (Trans type	tion thresholds.	C) involved
 q Other transfer of cash or property to other organization(s). r Other transfer of cash or property from other organization(s). 2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, includ (A) Name of other organization 	ing covered relationships and transa (Trans type	tion thresholds.	C) involved
 q Other transfer of cash or property to other organization(s). r Other transfer of cash or property from other organization(s). 2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, includ 	ing covered relationships and transa (Trans type	tion thresholds. action (a-r) 1 q 1 r (1 r (1 r) Amount (a-r)	c) involved
 q Other transfer of cash or property to other organization(s). r Other transfer of cash or property from other organization(s). 2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, includ (A) Name of other organization 1) Tides Inc. 	ing covered relationships and transa (Trans type	tion thresholds. action (a-r) 1 q 1 r (1 r (1 r) Amount (a-r)	c) involved
 q Other transfer of cash or property to other organization(s). r Other transfer of cash or property from other organization(s). 2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, includ (A) Name of other organization 1) Tides Inc. 	ing covered relationships and transa (Trans type	tion thresholds. action (a-r) 1 q 1 r (1 r (1 r) Amount (a-r)	c) involved
 q Other transfer of cash or property to other organization(s). r Other transfer of cash or property from other organization(s). 2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, includ (A) Name of other organization 1) Tides Inc. 	ing covered relationships and transa (Trans type	tion thresholds. 3) (1 action (a-r) Amount b 1 j 2	c) involved 15,15
 q Other transfer of cash or property to other organization(s). r Other transfer of cash or property from other organization(s). 2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, includ (A) Name of other organization 1) Tides Inc. 2) Tides Inc. 	ing covered relationships and transa (Trans type	tion thresholds. 3) (1 action (a-r) Amount b 1 j 2	c) involved 15,15
 q Other transfer of cash or property to other organization(s). r Other transfer of cash or property from other organization(s). 2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, includ (A) Name of other organization 1) Tides Inc. 2) Tides Inc. 	ing covered relationships and transa (Trans type	tion thresholds. 3) (1 action (a-r) Amount b 1 j 2	c) involved
 q Other transfer of cash or property to other organization(s). r Other transfer of cash or property from other organization(s). 2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, includ (A) Name of other organization 1) Tides Inc. 2) Tides Inc. 3) Tides Inc. 	ing covered relationships and transa (Trans type	tion thresholds. 3) (1 action (a-r) Amount b 1 j 2	c) involved
 q Other transfer of cash or property to other organization(s). r Other transfer of cash or property from other organization(s). 2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, includ (A) Name of other organization 1) Tides Inc. 2) Tides Inc. 	ing covered relationships and transa (Trans type	1q 1r in thresholds. in thresholds. <t< td=""><td><pre>c) involved .15,15 290,53 221,55 61,00</pre></td></t<>	<pre>c) involved .15,15 290,53 221,55 61,00</pre>
 q Other transfer of cash or property to other organization(s)	ing covered relationships and transa (Trans type	1q 1r ion thresholds. action (a-r) b j 2 o 2,2	c) involved 15,15 290,53 221,55 61,00
 q Other transfer of cash or property to other organization(s)	ing covered relationships and transa (Trans type	1q1rtion thresholds.3) (action (a-r)b1j2o2, 2jb13, 8	<pre>c) involved 15,15 290,53 221,55 61,00 853,13</pre>
 q Other transfer of cash or property to other organization(s)	ing covered relationships and transa (Trans type	1q1rtion thresholds.3) (action (a-r)b1j2o2, 2jb13, 8	c) involved .15,15 290,53 221,55 61,00 353,13 873,79

Yes No

Schedule R (Form 990) 2008 Tides Center

Part VI Unrelated Organizations Taxable as a Partnership

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

Provide the following information for each entity taxed as a particle of evenue) that was not a related organization. See Instructions regarc (A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal Domicile (State or Foreign Country)	Are all p sect 501(c organiz	artners	(E) Share of end-of-year assets	Dispropor- tionate allocations?		(G) Code V-UBI amount in Box 20 of Schedule K-1 Form (1065)	(F Gene mana parti	aging ner?
			Yes	No		Yes	No		Yes	No
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	-							Schedule <b>R</b> (F		

## Part II Continuation of Identification of Related Tax-Exempt Organizations

(A) Name, address, and EIN of related organization	<b>(B)</b> Primary activity	<b>(C)</b> Legal domicile (State or Foreign Country)	<b>(D)</b> Exempt Code section	<b>(E)</b> Public charity status (if 501(c)(3))	<b>(F)</b> Direct controlling Entity
Tides Center PA					
5700 Forbes Avenue					
Pittsburgh, PA 15217	Program	PA	501(c)3	509(a)3	Tides Center
94-3349769	Management	PA PA	JUI (C) J	000 (0/2	
Tides_Network	Support Tides				Tides
PO Box 29198	Foundation, Ine				Foundation/T
San Francisco, CA 94129	Tides Center,		501(c)3	509(a)3	des Center
20-3395198	and Tides, Inc	CA	501(0)5	<u> </u>	
Tides Advocacy Fund					
PO Box 29229					
San Francisco, CA	Grantmaking,		F01 (a) A		N/A
94-3153687	Project Services	CA	501(c)4		
		_			
					edule <b>R-1</b> (Form 990) 3

Schedule R-1 (Form 990) 2008 Tides Center

Continuation of Transactions With Related Organizations (Schedule R (Form 990), P (A) Name of other organization	(B) Transaction	(C) Amount involve
Name of other organization	type (a-r)	
Tides Foundation	n	68,4
	0	39,9
Tides Foundation	p	417,2
Fides Foundation		89,
Tides Advocacy Fund	p	
		hedule <b>R-1</b> (Form 9

SCHEDULE O (Form 990)

Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information. OMB No. 1545-0047

Open to Public Inspection

Employer identification number 94–3213100

#### Name of the organization Tides Center

Department of the Treasury Internal Revenue Service

THUS COMPT
Form 990, Part III, Line 4a - Program Service Accomplishments
Our work is organized in three main issue areas/ programs: Community Development and
Services (CDS), Environment and Health (EH), and Policy Strategy and Global
Initiatives (PSGI). We support a total of 220 projects with more than 500 employees
and hundreds of grantees that do work in the following areas.
Community Development Services: 65+ Projects that work in the areas of Education and
Empowerment, Income Enhancement/ Workforce Development, Homelessness/Housing
Services, Violence/ Crime Prevention. In the last year, we launched a website and
support counseling system for individuals who face bankruptcy. We've provided more
than 600 homeless individuals with supportive housing (housing is paired with health,
mental health and drug and alcohol addiction recovery programs. We've supported more
than 100 youth in the criminal justice system with mentorship and education programs,
and provided youth development organizations throughout the country with best
practices in the field. We've held conferences on violence prevention and community
development. We've conducted advocacy programs throughout the country on community
helped more than 50 Veterans struggling with Post Traumatic Stress Disorder to cope
with their anxieties. We have provided more than 100 victims of domestic violence
with temporary housing resources and referrals. We've supported refugees in the United
states with counseling, resources and referrals.
Form 990, Part III, Line 4b - Program Service Accomplishments
Environment and Health Projects: 65+ Projects that work in the areas of Climate
Change, Environmental Sustainability, Sustainable Food/ Agriculture, Prevention
Programs, HIV AIDS Programs, Health Services/ Healthcare Reform  EEEA4901L 12/19/08 Schedule <b>O</b> (Form 990) 2008
The Advertise of the Instruction Act Notice see the instructions for Form 990.

Schedule <b>0</b> (Form 990) 2008	Page 2
Name of the organization Tides Center	94-3213100
Form 990, Part III, Line 4b - Program Service Accomplishments (continued)	
We've published reports and held summits on green jobs, We'v	
800,000 new voters in 13 states and over 400 events around the	country. We've granted
out funds to support "Green Technology" for clinics. We've p	
reproductive health services to women and girls with insuran	nce-related barriers
through \$4,773 clinical visits; Provided outreach services t	to homeless and
marginally housed women in the Mission District that include	ed over 2,600 encounters
on the streets in SRO's over 2,000 encounters with 42 women	each week at Ladies
Night, We've conducted 19 health workshops for incarcerated wo	men in SF county jails.
We've produced 55,000 condom cases handed out at the Internati	onal Aids Conference in
Mexico in Aug 08. We've conducted 6 gatherings across the co	ountry of experts from
different disciplines to discuss the genetics and society.	We've convened
communities around the world to discuss human rights and th	e rights of people with
disabilities.	
Form 990, Part III, Line 4c - Program Service Accomplishments	
Policy Strategy and Global Initiative Projects: 80+ Projec	ts include projects that
work in the areas of Social Justice- Ethnic & Racial, LGBTQ	), Government Reform,
Religion, Ethics and Conscience, Human Rights, Internationa	al Development,
Reproductive Justice, Economic Opportunity, Activities: Civ	vic Engagement, Advocacy,
Leadership Development, Think Tanks. We've resettled a grow	ving number of Iraqi
Refugees. We've made grants totaling \$1,435,000 to more th	nan 50 organization in NY
that focus on community development, grassroots activism, a	arts and culture and
social change. We've published reports on healthcare, immigra	tion and education. We've
engaged 82 funders in a conference on grantmaking in Africa	
documentary filmmakers and held exhibits about violence aga	
people internationally. We've provided 1000+ nonprofits with	th communications support

edule <b>0</b> (Form 990) 2008 e of the organization	Employer identification number
des Center	94-3213100
Form 990, Part III, Line 4c - Program Service Accomplishments (continue	ed)
and data. We've provided leadership support to more than 2	200 social justice leaders.
We've engaged leaders, funders and activists in conversat	ions about policy, best
practices in service delivery, community engagement.	
Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, I	Directors, Etc.
Drummond Pike and Lawrence Litvak - Business Relationship	
Form 990, Part VI, Line 10 - Form 990 Review Process	
Audit Committee and Legal Council review prior to submiss	ion
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcemer	nt of Conflicts
On an annual basis, the directors, officers and key emplo	yees are required to
complete a conflict of interest disclosure survey.	
Form 990, Part VI, Line 15b - Compensation Review & Approval Process for	Officers & Key Employees
Tides Network uses a 360 Degree Employee Review process c	conducted by the Human
Resources department for the CEO and for other staff as d	letermined by management.
Tides Network regularly reviews comparability data from t	the following sources: The
Chronicle of Philanthropy, Guidestar, Council on Foundati	ions, and the Compensation
in Nonprofit Organizations report published by Abbot, Lar	nger & Associates, Inc. The
Tides Network Board of Directors Personnel Committee is t	tasked with reviewing the
CEO performance and compensation annually. The Personnel	l Committee meets to review
data collected through the 360 process, and then meets with the second s	ith the CEO individually and
determines compensation by considering comparability data	a, job performance, progress
towards goals, and 360 review assessments.	
Form 990 , Part VI, Line 17 - List of States which this Return is Filed	
AL AK AZ AR CA CO CT DC FL GA IL KS KY ME MD MA MI MN M	O MS NH NJ NM NY NC ND OH
OK OR PA RI SC TN UT VA WA WV WI	

	Page <b>2</b>
Schedule <b>0</b> (Form 990) 2008 Name of the organization	Employer identification number
Name of the organization Tides Center	94-3213100
Form 990, Part VI, Line 19 - Other Organization Documents Pub	blicly Available
The organization's federal exemption application,	
financial statements are available to the public u	

			Page 2
Form 8868	3 (Rev 4-2008)	Part II and check thi	s box ► X
• If you :		sion on a previous	v filed Form 8868.
·	it is part if if you have already been dranted an automatic o month		
• If you	are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)	must file origin	al and one copy.
Part II	are filing for an Automatic 3-Month Extension, complete only Part (on page 1) Additional (Not Automatic) 3-Month Extension of Time. You		Employer identification number
<u></u>	Name of Exempt Organization		
	•		94-3213100
Type or print	Tides Center	: (M. M.,	For IRS use only
princ	Number, street, and room or suite number. If a P.O. box, see instructions.		
File by the extended	· · · · · · · · · · · · · · · · · · ·		
due date for	РО Вох 29907		
filing the return. See	City, town or post office, state, and ZIP code. For a foreign address, see instructions.		
instructions.	San Francisco, CA 94129-0907		
<u> </u>	be of return to be filed (File a separate application for each return):		Form 6069
X Form		Form 1041-A	Form 8870
		Form 4720	Form 8870
		Form 5227	2000
Form	990-EZ Form 990-1 (trust other than above) not complete Part II if you were not already granted an automatic 3-month extern	ension on a previou	isly filed Form 8868.
STOP! Do	ooks are in care of ► Lauren Webster		
• The Di			
Telept	hone No. ► (415) 561-6300 FAX No. ► organization does not have an office or place of business in the United States,	check this box	
<ul> <li>If the</li> </ul>	organization does not have an office or place of business in the United States, is for a Group Return, enter the organization's four digit Group Exemption Num	ber (GEN)	. If this is for the
<ul> <li>If this</li> </ul>	is for a Group Return, enter the organization's four digit Group Exemption Num up, check this box ► []. If it is for part of the group, check this box ► []	and attäch a list w	ith the names and EINs of all
whole gro	up, check this box	· · · · · · · · · · · · · · · · · · ·	
members	the extension is for. quest an additional 3-month extension of time until $11/15$ , 20 (	09.	
4 I rec		, and ending	, 20
5 For	calendar year 2008, or other tax year beginning	Final return	Change in accounting period
6 If th	is tax year is for less than 12 months, check reason:	ires additio	onal time to gather the
7 Stat	is tax year is for less than 12 months, check reason: Initial return to the in detail why you need the extension. The Organization require in detail why you need the extension.	te return.	
in	formation necessary to file a complete and accura		
8a lf th	is application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tenta	tive tax, less any	8a \$
non	refundable credits. See instructions,	odits and estimated	
<b>b</b> If th	refundable credits. See Instructions. is application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable cr ments made. Include any prior year overpayment allowed as a credit and any a	mount paid préviou	sly 8b \$
: payı	ments made, include any prior year every by	<u> </u>	
c Bala			
	Signature and Verificatio	) <b>n</b>	knowledge and belief, it is true,
Under perial	Signature and verniculation	nts, and to the best of my	8/10/09
correct, and	C DA		Date + SILOIO [
Signature 🕨	Title F CITI		Date
Signature			Form 8868 (Rev 4-2008)
	FIFZ0502L 04/16/08		FULL 0000 (IVEV2000)
BAA			

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Fontanello, Duffield & Otake, LLP 44 Montgomery Street, Suite 2019

COPY

San Francisco, CA 94104

Department of the Treasury Internal Revenue Service

#### Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

٠	If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box	Х
۲	If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).	

**Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868.

**Part I** Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension – check this box and complete Part I only..... 🕨

All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns.

**Electronic Filing** *(e-file).* Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit *www.irs.gov/efile* and click on *e-file for Charities & Nonprofits*.

		News of Evenet Organization			Employer identificat	tion number
Туре	o or	Name of Exempt Organization			Employer identificat	ion number
prin		Miles Conton			94-3213100	h
File b	v the	Tides Center Number, street, and room or suite number	r If a P.O. box, see instructions		94-3213100	<u>)</u>
due date for filing your return. See instructions.						
		PO Box 29907	ode. For a foreign address, see instructions.			
Cha	-1	San Francisco, CA 94 f return to be filed (file a separat				
	Form 990	· · ·	Form 990-T (corporation)	Form 472	ſ	
<b>—</b>	Form 990	-	Form 990-T (section 401(a) or 408(a) trust)	Form 522		
<u> </u>			Form 990-T (trust other than above)	Form 606		
	Form 990	F	Form 1041-A	Form 887		
	Form 990	- FF	Form 1041-A	1 0111 007	J	
•	The book	s are in the care of ► Lori Ea	ason			
	THE BOOK					
	Telenhone	No ► (415) 561-6300	FAX №. ►			
			or place of business in the United States, check this bo			
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole g check this box. ► If it is for part of the group, check this box. ► and attach a list with the names and EINs of all member						
		sion will cover.		and thanked at		
			ns for a corporation required to file Form 990-T) extension	on of time		
•			the exempt organization return for the organization nam			
		ension is for the organization's re				
	► X	calendar year 20 $0.8$ or				
	▶	tax vear beginning	, 20, and ending, 20			
-						
2	If this ta	ax year is for less than 12 months	s, check reason: 🔄 Initial return 🔄 Final return	n []Cl	nange in accoun	ting period
2	a If this a	polication is for Form 990-BL 99	0-PF, 990-T, 4720, or 6069, enter the tentative tax, less	any		
	nonrefu	ndable credits. See instructions.			3a \$	0.
1	<b>h</b> If this a	polication is for Form 990-PF or 9	990-T, enter any refundable credits and estimated tax pa	avments		
	made.	nclude any prior year overpayme	ent allowed as a credit.		3b\$	0.
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).						
			······································		3c \$	0.
Cau	tion. If yo	ou are going to make an electroni	ic fund withdrawal with this Form 8868, see Form 8453-E	O and Form	8879-EO for	
	ment inst					
BAA	A For Pri	vacy Act and Paperwork Reduction	on Act Notice, see instructions.		Form <b>886</b>	8 (Rev. 4-2009)