SCANNED APR 16

Form **9**.90

Department of the Freasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

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

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

OMB No 1545-0047

2007

Open to Public Inspection

Address change   Name change   Name change   Name change   Initial return   Initial return   See   Specific   Inatructure   See   Specific   Inatructure   See   Specific   Inatructure   See   See   Specific   Inatructure   See   Specific   Inatructure   See   Specific   Inatructure   See   See   Specific   Inatructure   San Francisco   CA   State or country   ZIP + 4   F Accounting method   Cash   X Accrual   Application pending   Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable   trusts must attach a completed Schedule A (Form 990 or 990-EZ).   Hand   1 are not applicable to section 527 organizations   H(b)   If 'Yes,' enter number of affiliates?   Yes   No   H(b)   If 'Yes,' enter number of affiliates   NIA   H(c)   If 'Yes,' enter number of affiliates   NIA   H(c)   If 'Yes,' enter number of affiliates   NIA   H(c)   If 'Yes,' enter number of affiliates   NIA   H(d)	A	or the 2007 cale	ndar year	, or tax year beginning	1/1/2007	, and	ending		1/2007	
Number eating	В	Check if applicable	Please	C Name of organization				D Employer	identification number	
Number and street (or P 0 bot if mais is not delivered to street address)   Recombination   E Telephonen number   Internation	، ليا	Address change		Center for Resource Solution	ons			94-326556	30	
Termination		Name change		Number and street (or P O box i	mail is not delivered to s	treet address	Room/suite			
Amended return   Amended return   State or country   2/P + 4   F Accounting method   Cash		Initial return		Presidio Building 97 Arque	llo Blvd		1	415-561-2	100	
Amended inture    Amended inture   San Francisco   CA   94129   Other (specify)	Ħ.	Tormination				unto. 7	'IP + 4			<u> </u>
Application pending Section Solic(3) organizations and 4947(a)(1) or contempts the trusts must static a completed Schedule A (Form 990 or 906-E2).  9. Website	$\equiv$			City or town	State or co	unity 2	4		• —	Accrual
Trusts must attach a completed Schedule A (Form 990 or 990-EZ).    High   State   Now William	님!	Amended return	tions	San Francisco	CA		94129	Other	(specify) ►	
No	ا لــا	Application pending					H and I are	not applicable t	o section 527 org <u>aniza</u> tio	
Torgamization type (check only one)		_			e A (Form 990 or 990-E	Z).	H(a) Isth	ns a group retur	n for affiliates?	Yes X No
Contributions gifts, grants, and similar amounts received a Contributions gifts, grants, and similar amounts received an accordance of the complete return in the organization chooses in the organization	G V	<u>Website</u> ► ww	w resour	ce-solutions org			H(p)    1. A	es," enter numb	er of affiliates PN/A	<u></u>
Check here				. L		·	H(c) Are	all affiliates incli	ıded?	Yes No
Contributions, gifts, grants, and similar amounts received a Contributions to drive around funded on line 1a)   1,848,651	J (	Organization type (c	neck only o	ne) ► X 501(c) ( 3 ) <b>4</b> (ir	sert no ) 4947(a)(1	or 527	(lf *I	No," attach a list	See instructions)	
receipts are normally not more than \$25,000 A return is not required, but if the organization chooses to file a complete return    Comparison   Comp	K	Check here	If the	organization is not a 509(a)(3) supp	orting organization and it	gross	H(d) Isth	nis a separate re	tum filed by an organizat	tion
Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12   1,848,634   M   Catach Sch   Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12   1,848,634   M   Catach Sch   Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12   1,848,634   M   Catach Sch   Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12   1,848,634   M   Catach Sch   Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12   M   Catach Sch   Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12   M   Catach Sch   Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12   M   Catach Sch   Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12   M   Catach Sch   Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12   M   Catach Sch   Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12   M   Catach Sch   Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12   M   Catach Sch   Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12   M   Catach Sch   Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12   M   Catach Sch   Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12   M   Catach Sch   Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12   M   Catach Sch   Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12   M   Catach Sch   Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12   M   Catach Sch   Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12   M   Catach Sch   Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12   M   Catach Sch   Gross receipts Add lines 6b, 9b, 9b, 9b, 9b, 9b, 9b, 9b, 9b, 9b, 9			not more th	ian \$25,000 A return is not required.				=	• —	
Reverue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions)   1   Contributions, grifs, grants, and similar amounts received a Contributions (grants) (not included on line 1a)   1   1   1   1   1   1   1   1   1	t	o file a return, be sur	e to file a co	omplete return						
Tontributions, gifts, grants, and similar amounts received a Contributions, gifts, grants, and similar amounts received a Contributions, gifts, grants, and similar amounts received a Contributions of donor advised funds b Direct public support (not included on line 1a) 1b 648,561 1c 1ndirect public support (not included on line 1a) 1c 0 1d 118,767 1d		<u> </u>		<del></del>				<del></del>		required
Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions)  1 Contributions gifts, grants, and similar amounts received a Contributions to donor advised funds b Direct public support (not included on line 1a) 1	L (	Gross receipts Ad	d lines 6b	. 8b. 9b. and 10b to line 12		1 848 63	T			
1   Contributions, gifts, grants, and similar amounts received a Contributions to donor advised funds b Direct public support (not included on line 1a)					ot Accete or Fur		<del>`</del>			
a Contributions to donor advised funds b Direct public support (not included on line 1a) c Indirect public support (not included on line 1a) d Government contributions (grants) (not included on line 1a) e Total (add lines 1a through 1d) (cash \$\frac{7}{3.28}\$ noncash \$\frac{9}{3}\$ 0) 1 e 767,328  2 Program service revente inclosing grants (premises and contracts (from Part VII, line 93) 2 Program service revente inclosing grants (premises and contracts) 3 Membership dues and assessionals 4 Interest on savings and temporary cash investments 5 Dividends and interest (from Part VII, line 93) 2 Dividends and interest (from savings and temporary cash investments) 5 Dividends and interest (from savings and temporary cash investments) 6 a Gross rental expenses c Net rental income or (licks) Subrigating by Subrigating the following securities (from Part VII, line 93) 2 (a) 4 (b) 6 (b) 7 (c) 8 a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) (altach schedule) 1 d Net gain or (loss) Combine line 8c, columns (A) and (B) 9 Special events and activities (altach schedule) If any amount is from gaming, check here 1 a Gross revenue (not included on line 1b) b Less direct expenses other than fundraising expenses b Less cost of goods sold c Gross profit or (loss) from sales of inventory, less returns and allowances b Less cost of goods sold 10 Diplomatical (from line 44, column (B)) 10 Chier revenue (from line 44, column (B)) 11 Other revenue (from line 44, column (C)) 12 Payments to affiliates (attach schedule) 13 1,270,322 14 Excess or (deficit) for the year Subtract line 10 from line 12 15 G4,697 17 Total expenses. Add lines 16 and 44, column (C)) 16 Payments to affiliates (attach schedule) 17 Other changes in net assets or fund balances (attach explanation) 20 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	لنكتا					u Daiaii	es (See a	HE INSTRUCT	1	
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Interest on savings and temporary cash investments   5		3 Members	thin dues	and assessments -	Dees and contrac	ts (nom r	11 VII, IIIIC	33	· · · · · · · · · · · · · · · · · · ·	
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11 Other revenue (from Part VII, line 103) .					•					
12       Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11       12       1,848,634         13       Program services (from line 44, column (B))       13       1,270,322         14       Management and general (from line 44, column (C))       14       391,384         15       Fundraising (from line 44, column (D))       15       64,697         16       Payments to affiliates (attach schedule)       16       0         17       Total expenses. Add lines 16 and 44, column (A)       17       1,726,403         18       Excess or (deficit) for the year Subtract line 17 from line 12       18       12         19       Net assets or fund balances at beginning of year (from line 73, column (A))       19       115,639         20       Other changes in net assets or fund balances (attach explanation)       20       0					schedule) Subtract I	ine 10b from	n line 10a			
13       Program services (from line 44, column (B))       13       1,270,322         14       Management and general (from line 44, column (C))       14       391,384         15       Fundraising (from line 44, column (D))       15       64,697         16       Payments to affiliates (attach schedule)       16       0         17       Total expenses. Add lines 16 and 44, column (A)       17       1,726,403         18       Excess or (deficit) for the year Subtract line 17 from line 12       18       122,231         19       Net assets or fund balances at beginning of year (from line 73, column (A))       19       115,639         20       Other changes in net assets or fund balances (attach explanation)       20       0		11 Other rev	enue (fr	om Part VII, line 103) .						
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17 Total expenses. Add lines 16 and 44, column (A)  18 Excess or (deficit) for the year Subtract line 17 from line 12  19 Net assets or fund balances at beginning of year (from line 73, column (A))  20 Other changes in net assets or fund balances (attach explanation)  17 1,726,403  18 122,231  19 115,639  20 0	28	14 Manager	nent and	general (from line 44, colun	າກ (C)) .					
17 Total expenses. Add lines 16 and 44, column (A)  18 Excess or (deficit) for the year Subtract line 17 from line 12  19 Net assets or fund balances at beginning of year (from line 73, column (A))  20 Other changes in net assets or fund balances (attach explanation)  17 1,726,403  18 122,231  19 115,639  20 0	2									
18 Excess or (deficit) for the year Subtract line 17 from line 12 19 Net assets or fund balances at beginning of year (from line 73, column (A)) 20 Other changes in net assets or fund balances (attach explanation) 20 0	ŭ								ļ	<del></del> -
19 Net assets or fund balances at beginning of year (from line 73, column (A)) 20 Other changes in net assets or fund balances (attach explanation) 20 0									ļ	
20 Other changes in net assets or fund balances (attach explanation)	sta	18 Excess of								
20 Other changes in net assets or fund balances (attach explanation)	Ass	19 Net asse							ļ	
21 Net assets or fund balances at end of year Combine lines 18, 19, and 20   21   237,870	iet ,	120 Other ch								
		21 Net asse	ts or fund	d balances at end of year C	ombine lines 18, 19	, and 20		21	L	237,870

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

Form **990** (2007)

(HTA)

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Part	Statement of All organizations must complete Functional Expenses organizations and section 4947(					
	Do not include amounts reported on line	1 1		(B) Program	(C) Management	<del></del>
	6b, 8b, 9b, 10b, or 16 of Part I	1 1	(A) Total	services	and general	(D) Fundraising
22 a	Grants paid from donor advised funds (attach schedule)	+			· ·	<del></del>
LL U	(cash \$0 noncash \$0					
	·	1 1	o	^		
22 6	If this amount includes foreign grants, check here	22a				
22 D	Other grants and allocations (attach schedule) (cash \$0 noncash \$0	$\backslash     $	}			
		1 1				
	If this amount includes foreign grants, check here	22b	0	0		
23	Specific assistance to individuals (attach schedule)	23	o	٥		
24	Benefits paid to or for members (attach	23	<u>_</u>			
24	schedule)	24	o	0		l
25 a	Compensation of current officers, directors,	<del></del>	<del>-</del>			
20 u	key employees, etc listed in Part V-A	25a	o	0	o	0
b	Compensation of former officers, directors,		<del>-</del>	<u>_</u>		<del></del>
	key employees, etc. listed in Part V-B	25b	163,185	120,669	31,027	11,489
С	Compensation and other distributions, not			· ·		
	included above, to disqualified persons (as		]			
	defined under section 4958(f)(1)) and persons				]	
	described in section 4958(c)(3)(B) .	25c	0	0	0	0
26	Salaries and wages of employees not included					
	on lines 25a, b, and c	26	631,575	490,165	109,821	31,589
27	Pension plan contributions not included on		}			
	lines 25a, b, and c	27	51,801	48,176	2,080	1,545
28	Employee benefits not included on lines		40.000	00.400	0.007	050
00	25a – 27	28	46,699	39,139		953 3,707
29	Payroll taxes	30	60,484	<u>49,419</u> 0		
30 31	Professional fundraising fees	31	0	0		0
32	Accounting fees	32	0			0
33	Supplies	33	304,635	275,741		1,453
34	Telephone	34	19,888	11,613		1,598
35	Postage and shipping	35	2,703	1,499		313
36	Occupancy	36	98,189	0		
37	Equipment rental and maintenance	37	0	0		
38	Printing and publications	38	13,695	5,685	8,010	0
39	Travel	39	38,731	36,928	1,150	653
40	Conferences, conventions, and meetings .	40	0	0	0	0
41	Interest	41	0	0		0
42	Depreciation, depletion, etc. (attach schedule) See Stmt 1	42	1,600	0	1,600	0
43	Other expenses not covered above (itemize)			_		_
	Insurance	43a	17,790	0		
	Professional services	43b	275,428	191,288		
C		43c	0	0		
d		43d	0	<u>0</u> 0		_
e		43e	0 0	0		
T ~		43f		0		
44	Total functional expenses. Add lines 22a	43g				,
44	through 43g. (Organizations completing				-	
	columns (B)–(D), carry these totals to lines					
	13–15)	44	1,726,403	1,270,322	391,384	64,697
lei-t			1,120,400	1,270,022	30.,001	
	Costs. Check ► X if you are following SOP 98-2		reperted in /B\ D	roarom conucco	, <b>_</b> _	Yes X No
	y joint costs from a combined educational campaign and fundraising s ," enter (i) the aggregate amount of these joint costs \$		reported in (Β) P (ii) the amount a			Les VINO
	e amount allocated to Management and general \$		(ii) the amount a d (iv) the amount			
Anny mic	amount anocated to management and general 🌖	, and	TIAL HIE GUIDHIL	anocated to runt		

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Form	954	(2007)

94-3265560

Page 3

# Partell Statement of Program Service Accomplishments (See the instructions)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt pure	oose? ► Promotion of clean and efficient energy use	Program Service Expenses
	achievements in a clear and concise manner. State the number	(Required for 501(c)(3) and
of clients served, publications issued, etc. Discuss ad	chievements that are not measurable (Section 501(c)(3) and (4)	(4) orgs , and 4947(a)(1)
	rusts must also enter the amount of grants and allocations to others )	trusts, but optional for others )
	***************************************	
	***************************************	
		٦)
	0) If this amount includes foreign grants, check here	1,270,322
b		
	***************************************	
(Grants and allocations \$	0) If this amount includes foreign grants, check here	ه اد
_		<del>†</del>
	***************************************	
	***************************************	1
		7
	0) If this amount includes foreign grants, check here	<u> </u>
d	•••••	
		, in
	••••••	
		1
(Grants and allocations \$	0) If this amount includes foreign grants, check here	] 0
e Other program services (attach schedule)	<del></del>	T
(Grants and allocations \$	0) If this amount includes foreign grants, check here	]
f Total of Program Service Expenses (shou	Id equal line 44, column (B), Program services)	1,270,322

Form **990** (2007)

لتكي	ILIV	Dalance Sheets (See the Instructions.)				
	Note:	Where required, attached schedules and amounts with column should be for end-of-year amounts only	in the description	(A) Beginning of year		(B) End of year
	45	Cash—non-interest-bearing	31,892	45	26,267	
	46	Savings and temporary cash investments		89,000		24,000
					1.7 F 16.75	
	47 a	Accounts receivable .	47a 171,03	18		
	b	Less allowance for doubtful accounts	47b	0 234,996	47c	171,038
	]		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1	
	48 a	Pledges receivable .	48a	<u>o</u>	200	
	b	Less allowance for doubtful accounts .	48b	0 (	48c	0
	49	Grants receivable	•	25,000	49	0
	50 a	Receivables from current and former officers, dire		1 1		
	١.	key employees (attach schedule)		<u>C</u>	50a	0
10	þ	Receivables from other disqualified persons (as defined		1	1 }	
Assets		4958(f)(1)) and persons described in section 4958(c)(3)	)(B) (attach schedule) .	<u></u>	50b	0
As	51 a	Other notes and loans receivable (attach	l = a   l		1 " 1	
		schedule)	<del></del>	의	1	
	i .	Less allowance for doubtful accounts Inventories for sale or use	51b	0 0		0
	52 53		• •	7 225	+	0
		Prepaid expenses and deferred charges Investments—publicly-traded securities.	► Cost FM\	7,235		13,193
	ĭ				<del>1                                    </del>	0
	1	Investments—other securities (attach schedule)	► Cost FM\	/	54b	0
	) 55 a	Investments—land, buildings, and	lee l			
		equipment basis .	55a	이		
	D	Less accumulated depreciation (attach	55b		30000	•
	56	schedule) Investments—other (attach schedule)	550	0 0	55c	<u>0</u> 0
	ì	Land, buildings, and equipment basis	57a 46.85	<u> </u>	36	
	1	Less accumulated depreciation (attach	40,00			
		schedule) See Statement 1	<b>57b</b> 43,57	768	57c	3,275
	58	Other assets, including program-related investment		700	0.0	0,270
		(describe ▶ Deposits	)	4,800	58	4,800
	59	Total assets (must equal line 74). Add lines 45 ti	hrough 58	393,691		242,573
	60	Accounts payable and accrued expenses .		278,052		4,703
	61	Grants payable		0	1	0
	62	Deferred revenue		0	62	0
es.	63	Loans from officers, directors, trustees, and key e	employees (attach		1 v v a	
Ξ		schedule)		0		0
Liabilities		Tax-exempt bond liabilities (attach schedule) .		0		0
	Ь	Mortgages and other notes payable (attach sche	dule)	0	-	0
	65	Other liabilities (describe	)	0	65	0
	66	Total liabilities Add loss 60 through 65		070.050		4.700
	66	Total liabilities. Add lines 60 through 65		278,052		4,703
	Orga	nizations that follow SFAS 117, check here	X and complete lines			
8		67 through 69 and lines 73 and 74		4 004		50,000
anc	67	Unrestricted .		-4,984		-59,822
3ali	68	Temporarily restricted .		120,623		297,692 0
Q	69	Permanently restricted nizations that do not follow SFAS 117, check h	ere ► and	<del></del>	03	
ä	orga	complete lines 70 through 74	iere P anu			
7	70	Capital stock, trust principal, or current funds .			70	
ş	71	Paid-in or capital surplus, or land, building, and e		71		
Se	72	Retained earnings, endowment, accumulated inc		72		
As	73	Total net assets or fund balances. Add lines 67				
Net Assets or Fund Balances	'	70 through 72. (Column (A) must equal line 19 a		`		
_		equal line 21)		115,639	73	237,870
	74	Total liabilities and net assets/fund balances.	Add lines 66 and 73	393,691		242,573

	Carto To Tropodice Colditoria	37"02	00000	
Part [	V-A Reconciliation of Revenue per Audited Financial Statements With instructions.)	Revenue per Retu	ırn (See t	he
а	Total revenue, gains, and other support per audited financial statements		a	1,848,634
b	Amounts included on line a but not on Part I, line 12.		77 14 2	
1	Net unrealized gains on investments	b1	1.4.1	
2	Donated services and use of facilities	b2		
3	Recoveries of prior year grants	b3	一(3)到	
4	Other (specify):		$\dashv$	
•		b4	0 .	
	Add lines b1 through b4		- Н	0
С	Subtract line b from line a		С	1,848,634
d	Amounts included on Part I, line 12, but not on line a:		10. 1¢	
1	Investment expenses not included on Part I, line 6b	d1	1 3	
2	Other (specify)	<del></del>	$\dashv : \vdash$	
_		d2	0 1	
	Add lines d1 and d2	[_ <del>v=</del> ]	ď	0
e	Total revenue (Part I, line 12). Add lines c and d	•	e	1,848,634
Part I		h Expenses per Re	eturn	
а	Total expenses and losses per audited financial statements		a	1,726,403
b	Amounts included on line a but not on Part I, line 17	• •	25,21	.,, = 5,, 55
1	Donated services and use of facilities	b1	2 3 3	
2	Prior year adjustments reported on Part I, line 20	b2	176338	
3	Losses reported on Part I, line 20	b3		
4	Other (specify)	-		
7	Other (appears)	b4		
	Add lines b1 through b4		<b>b</b>	0
С	Subtract line b from line a	•	c	1,726,403
ď	Amounts included on Part I, line 17, but not on line a:		,	1,120,100
ŭ <sub>1</sub>	Investment expenses not included on Part I, line 6b	d1	14	
2		-	—; , ; i	
_	Other (specify)	d2	0	
	Add lines d1 and d2		<b>d</b>	Λ
	Total expenses (Part I line 17) Add lines c and d	_	9	1 726 403

Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated) (See the instructions)

(A) Name and address				(B) nd average hours per devoted to position	(C) Compensation (If not paid, enter -0)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Name Janice Hamin		esidio, Bldg 97, Arguello Blvd	1	Executive Director			
City San Francisco	ST CA	ZIP 94129	Hr/WK	40	145,000	18,185	
	Str		Title				
City See Stmt 3	ST	ZIP	Hr∕WK		0	0	
Name N/A	Str		Title		]		
City	ST	ZIP	Hr/WK				
Name N/A	Str		Title		1		
City	ST	ZIP	Hr/WK				
Name N/A	Str		Title				
City	ST	ZIP	Hr/WK				<del></del>
Name N/A	Str		Title				
City	ST	ZIP	Hr/WK				
Name N/A	Str		Title				
City	ST	ZIP	Hr/WK				
Name N/A	Str		Title				
City	ST	ZIP	Hr/WK				
Name N/A	Str		Title	-			
City	ST	ZIP	Hr/WK				
Name N/A	Str		Title				
City	ST	ZIP	Hr/WK		_		

b Did the organization file Form 1120-POL for this year?

	Center for Resource Solutions			94-3203300		_	
Part '		stees, and Key Em	ployees (continue	ed)		Yes	No
75 a	Enter the total number of officers, directors, an	d trustees permitted to	vote on organizat	on business at board	17. 4.3	1	-
	meetings .	•	<b>&gt;</b>	9	7. 持续	1.4.	1,4,7
b	Are any officers, directors, trustees, or key emp	oloyees listed in Form	990. Part V-A. or h	ighest compensated			
	employees listed in Schedule A, Part I, or higher	est compensated profe	essional and other	independent			·
	contractors listed in Schedule A, Part II-A or II-	B, related to each other	er through family or	business			
	relationships? If "Yes," attach a statement that	identifies the individua	als and explains the	relationship(s)	75b		_X
С	Do any officers, directors, trustees, or key emp						
·	compensated employees listed in Schedule A,	Part I or highest com	popostod professio	griesi spol and other	\$ 33	1	
	independent contractors listed in Schedule A,	Part II-A or II-B recent	o componention fro	em any other	14 1 W		
	organizations, whether tax exempt or taxable, t	hat are related to the	e compensation in	the instructions for			
	the definition of "related organization."	nat are related to the	organization / See	the instructions to:	75c	1	
	If "Yes," attach a statement that includes the in	formation described in	the instructions			├──	X
А	Does the organization have a written conflict of		i the instructions		75d		1
						X	L
Part '							
	officer, director, trustee, or key employee						nat
	person below and enter the amount of co	ompensation or other t	benefits in the appr	opriate column. See the ins	struction	ns)	
			(C) Compensation	(D) Contributions to employee	(E)	Expens	<del></del>
	(A) Name and address	(B) Loans and Advances	(if not paid,	benefit plans & deferred		unt and o	
	AUA		enter -0-)	compensation plans	ali	lowances	<u> </u>
Name							
City							
Name							
City		<del>-</del>		<u> </u>			
	N/A Str						
City			ļ				
Name			}				
City							
Name	N/A Ştr						
City							
Name							
City							
Name		· ·					
City		<del></del>					
Name	N/A Str						
Cıty							
Name	N/A Str			ĺ			
City							
Name	N/A Str						
City							
Part \			···		- <del></del>	Yes	No
76	Did the organization make a change in its activ	ities or methods of co	nducting activities?	If "Yes," attach a	],	, " l	
	detailed statement of each change .			•	76	]	X
77	Were any changes made in the organizing or g	overning documents t	out not reported to t	he IRS?	77		Х
	If "Yes," attach a conformed copy of the change	es			7, 7	1 1	1
78 a	Did the organization have unrelated business g		or more during the	e year covered by	" <u></u>	)	
	this return?		3	•	78a	[ ]	Х
h	If "Yes," has it filed a tax return on Form 990-T	for this year?	_		78b	N/A	
79	Was there a liquidation, dissolution, termination	-	action during the ve	ar? If "Yes " attach		الم المراد	, ,
, 5			action during the ye		79	, , ,	X
٥٨ -			or nationwide c	anization) through	10, 12	33.733	<u> </u>
80 a	Is the organization related (other than by associ				137374	137	
	common membership, governing bodies, truste	es, oπicers, etc , to ai	iy other exempt or	nonexempt	4.14	[*: X'.]	
	organization?		•	•	80a	<b> </b>	X
b	If "Yes," enter the name of the organization $\blacktriangleright$		<del></del>		1		
		and check whether	ritis 🔲 exempto	or nonexempt	13		
81 a	Enter direct and indirect political expenditures			81a	1 ''''	۱. " ' ا	-

Par	7	Other Information (continued)		Yes	No
82	а	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge			
		or at substantially less than fair rental value?	82a	х	
1	b	If "Yes," you may indicate the value of these items here. Do not include this amount	020		
		as revenue in Part I or as an expense in Part II			
		(See instructions in Part III )	T. Mile		"t,"
83	а	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	,
		Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	
84	а	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		Х
	b	If "Yes," did the organization include with every solicitation an express statement that such contributions			
		or gifts were not tax deductible?	84b	N/A	
85		501(c)(4), (5), or (6) Were substantially all dues nondeductible by members?	85a	N/A	-
1	b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b	N/A	
		If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the	3.		
		organization received a waiver for proxy tax owed for the prior year	٠.,		
		Dues, assessments, and similar amounts from members  85c N/A			
		Section 162(e) lobbying and political expenditures 85d N/A	a Sala	1	,
		Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices  85e N/A	138,14		,
		Taxable amount of lobbying and political expenditures (line 85d less 85e) . 85f N/A	" " " " C15"	, 4, 4	
		Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? .	85g	N/A	
Į		If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to	19.55	5	
		its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the		٠. :	
		following tax year?	85h	N/A	
86		501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12  86a N/A			
	b	Gross receipts, included on line 12, for public use of club facilities  86b N/A		, ,	
87		501(c)(12) orgs Enter a Gross income from members or shareholders  87a N/A	, a		
		Gross income from other sources. (Do not net amounts due or paid to other			y' 6
00		sources against amounts due or received from them )			ويدرأ والمواطية
88 8		At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or			ilkiett v
		partnership, or an entity disregarded as separate from the organization under Regulations sections	* 24/2/2	र अपूर्वः	', 
		301 7701-2 and 301 7701-3? If "Yes," complete Part IX	88a		<u>X</u>
		At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	006		~
89 :		501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under.	88b		<u>X</u>
00 (			2	į.	
		501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction			,
•		during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach	'		
		a statement explaining each transaction	89b		Х
		Enter Amount of tax imposed on the organization managers or disqualified			
		persons during the year under sections 4912, 4955, and 4958	1 3	4 1	
(		Enter Amount of tax on line 89c, above, reimbursed by the organization		. : - ]	ı
		All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter	137		
		transaction?	89e		Х
f	:	All organizations Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f		X
ç	3	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the	1 1 1/2	r ) (r	,
		supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings		]	
		at any time during the year?	89g		_X
		List the states with which a copy of this return is filed ► CA			
t		Number of employees employed in the pay period that includes March 12, 2007 (See			
		instructions)			12
91 a		The books are in care of ► Name The Organization Telephone no ► 41	5-561-	2100_	
		Located at ► Presidio Bldg. 97 Arguello Blvd City San Francisco ST CA ZIP + 4 ► 94129			
t		At any time during the calendar year, did the organization have an interest in or a signature or other authority	ſ	Yes	No
		over a financial account in a foreign country (such as a bank account, securities account, or other financial	94:	168	
		account)?	91b		_X
		If "Yes," enter the name of the foreign country >	. 1	, 1	
		See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
		and Financial Accounts			

	0 (2007) Center for Resource	Solutions			94-3265560		Page 8
Part \	Other Information (continued)					Yes	No
С	At any time during the calendar year, did the c	rganization mainta	in an office of	utside of the Unite	d States? 9	1c	X
	If "Yes," enter the name of the foreign country	_					
92	Section 4947(a)(1) nonexempt chantable trust	s filing Form 990 in	lieu of Forn	1041 —Check h	ere		▶ □
	and enter the amount of tax-exempt interest re	eceived or accrued	during the tax	x year	▶ 92 N/A		ر
Part \	Analysis of Income-Producing Ac	tivities (See the	instructions	)	1 00 1:00		
	Enter gross amounts unless otherwise	Unrelated busin			on 512, 513, or 514	(E	)
ındıcal	· ·	(A)		<del></del>	1	Relate	-
93	Program service revenue	Business code	(B) Amount	(C) Exclusion code	(D) Amount	exempt f	
	Certification fees			ZXOIGGION GGGG	7 41104111	inco	
	Consulting fees			<del>- </del>			19,781 15,499
	Conference fees			<del></del>	<del> </del>		46,026
d				-	<del> </del>		+0,020
e					<del> </del>		
	Medicare/Medicaid payments						
	Fees and contracts from government agencies						
94	Membership dues and assessments						
95	Interest on savings and temporary cash investments						
96	Dividends and interest from securities			·	<u> </u>		
97	Net rental income or (loss) from real estate	THE STATE OF THE S	(地震)	TO THE PARTY OF TH	The state of the s	AND BUTTON OF HE	N 4
а	debt-financed property		10.00 10.7777 20.00		Ca Span Castly Man 970	<u> </u>	
b	not debt-financed property						
98	Net rental income or (loss) from personal property						
99	Other investment income						
100	Gain or (loss) from sales of assets other than inventory						
101	Net income or (loss) from special events						
102	Gross profit or (loss) from sales of inventory						
103	Other revenue a						
b							
С							
d			···				
е							
104		的机场的特殊的		D TO ACTION THE TOTAL	0	1,08	31,306
105	Total (add line 104, columns (B), (D), and (E))				▶	1,08	31,306
	Line 105 plus line 1e, Part I, should equal the a	· <del>-</del> · · · · · · · · · · · · · · · · · · ·					
Part V							
Line N					ly to the accomplis	hment	
	of the organization's exempt purposes (other						
93a							
93b	······································				of renewable er	ergy pol	cies
<u>93c</u>	Fees received in exchange for attending the	e Renewable Energ	gy Marketing	Conterence			
Part I	Information Regarding Taxable Su	heidiaries and I	Disrogardos	Entition (See f	ho instructions	1	
r all I	(A)	(B)	Jisi egal dec	Littles (See (	ilo ilistructions		
	Name, address, and EIN of corporation,	Percentage	of	(C)	(D)	(E End-of	
	partnership, or disregarded entity	ownership inte	i man	ire of activities	Total income	asse	-
			%		0		0
			%		0		0
			%		0		0
			%		0		0
Part X	Information Regarding Transfers	Associated with		enefit Contract		ructions	_
	<del></del>				· · · · · · · · · · · · · · · · · · ·		<del></del>
	the organization, during the year, receive any funds, dire					= :	¥N∘
	d the organization, during the year, pay premiu f "Yes" to (b) file Form 8870 and Form 4720		ectly, on a pe	rsonai benetit cor	itract /	Yes [	X No

Part	Information Regarding is a controlling organization			Complete only if the	organız	atıon
106	Did the reporting organization mal	ke any transfers to a conf	trolled entity as defined in	section 512(b)(13) of	Yes	No X
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	Amou	(D) nt of trans	sfer
а	N/A					
b						
С						
	Totals					0
107	Did the reporting organization reconstruction of the Code? If "Yes," of the Code?				Yes	No X
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	Amour	(D) nt of trans	sfer
а	N/A					
b						
С						
	Totals					0
108	Did the organization have a bindin rents, royalties, and annuities desc			vering the interest,	Yes	No X
Pleas Sign Here	Signature of officer  Signature of officer  Type or print name and title	Declaration of preparer (other that				ige
Paid Prepar	Preparer's signature Crushy	4 Kaueda	Date Check if self-			en Inst X)
Use Or	of self-employed).	Kaneda, Certified Public egragh Ave , Ste 318 Oal		EIN ► 94-324 Phone no ► 510-83		
					Form 99	0 (2007)

## SCHEDULE A (Form 990, or 990-EZ)

Organization Exempt Under Section 501(c)(3)
(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n),
or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

Department of the Treasury Internal Revenue Service Name of the organization

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB No 1545-0047

Name of the organization			Employer ider	tification number
Center for Resource Solutions			94-3265560	
Part I Compensation of the Five Hig	hest Paid Employees	Other Than Office	ers, Directors, a	nd Trustees
(See page 1 of the instructions.	List each one If there a	are none, enter "N	one ")	
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Jennifer Martin, Presidio Bldg 57 Arguello Blvd San Francisco , CA 94129	Director 28	63,257	14,549	0
Meredith Wingate, Presidio Bldg 57 Arguello Blve San Francisco, CA 94129	Director 40	60,529	13,921	0
Laurel Hilton, Presidio Bldg 57 Arguello Blvd San Francisco, CA 94129	Director 28	50,123	11,528	0
Alex Pennock, Presidio Bldg 57 Arguello Blvd San Francisco, CA 94129	Manager 40	50,500	11,615	0
Total number of other employees paid over \$50,000 >	0			
Part II-A Compensation of the Five Hig	hest Paid Independen	t Contractors fo	r Professional S	ervices
(See page 2 of the instructions	List each one (whether	individuals or firm	s) If there are no	ne, enter "None ")
(a) Name and address of each independent contractor		(b) Type		(c) Compensation
Raymond Dracker, 361 Clorinda Avenue San Rafael , CA 94901		Labor Consultant		69,359
Total number of others receiving over \$50,000 for professional services				
Part II-B Compensation of the Five High				
(List each contractor who perforr			vices, whether inc	lividuals or
firms If there are none, enter "N	one " See page 2 of the	e instructions)		
(a) Name and address of each independent contractor p	paid more than \$50,000	(b) Type o	of service	(c) Compensation
None				
	***************************************			
		- 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Total number of other contractors receiving over \$50,000 for other services	0			Application of the second

Part	Statements About Activities (See page 2 of the instructions.)	Ye	s No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities   (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B)		X
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities		
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
а	Sale, exchange, or leasing of property?	+	x
b	Lending of money or other extension of credit?	4	X
С	Furnishing of goods, services, or facilities?	_	X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? See 990 Part V-A	X	+
e	Transfer of any part of its income or assets?	-	X
3 a	Did the organization make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments )  3a	-	×
b	Did the organization have a section 403(b) annuity plan for its employees?	X	_
С	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement		×
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	ļ	X
4 a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g.		x
b	Did the organization make any taxable distributions under section 4966?	-	X
С	Did the organization make a distribution to a donor, donor advisor, or related person?		X
d	Enter the total number of donor advised funds owned at the end of the tax year  N/A	<u></u>	
е	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year  N/A		
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts  N/A	•	
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year  N/A		·

94-3265560

Part	IV	Reason for Non-Private	Foundation St	tatus (See pages 4 thro	ough 8 of the	instructions.)					
I certif	y that	t the organization is not a private for	oundation because	e it is (Please check only Ol	NE applicable bo	x)					
5		A church, convention of churches	, or association of	churches Section 170(b)(1)	(A)(ı)						
6		A school Section 170(b)(1)(A)(ii)	(Also complete P	art V)							
7		A hospital or a cooperative hospit	al service organiza	ation Section 170(b)(1)(A)(iii	1)						
8		A federal, state, or local government	ent or government	tal unit Section 170(b)(1)(A)	(v)						
9		A medical research organization and state	operated in conju	nction with a hospital Section	on 170(b)(1)(A)( ST	III) Enter the he	ospital's name, city,				
10	An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv)  (Also complete the Support Schedule in Part IV-A)										
11 a	An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)										
11 b		A community trust Section 170(b	)(1)(A)(vi) (Also c	omplete the Support Sched	lule in Part IV-A	)					
12	receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)										
		Туре I Ту	pe II	Type III-Functionally Integra	ated1	ype III-Other					
		Provide the following info	ormation about	the supported organiza	ations. (See p	age 8 of the in	structions)				
Namo	e(s) (	(a) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	ls the su organizatio the sup organiz governing d	pported on listed in porting ation's	(e) Amount of support				
					Yes	No					
							<del></del>	0			
<del></del>								0			
								0 0			
		<del></del>						0			
								0			
Total						<b>•</b>		0			
14		An organization organized and op	erated to test for p	public safety Section 509(a)	(4) (See page 8	of the instruction	ns)				

	t IV-A Support Schedule (Complete only e: You may use the worksheet in the instructions	if you checked a	a box on line 10,	, 11, or 12 ) Use	cash method	of accounting.
	endar year (or fiscal year beginning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15	Gifts, grants, and contributions received (Do				(.,	1
	not include unusual grants. See line 28.)	731,590	1,395,718	1,182,147	1,070,384	4,379,839
16	Membership fees received				1,0,0,00	0
17	Gross receipts from admissions, merchandise					
	sold or services performed, or furnishing of			i		
	facilities in any activity that is related to the					
	organization's charitable, etc., purpose	1,091,002	588,405	503,087	520,19	2,702,690
18	Gross income from interest, dividends,					
	amounts received from payments on securities			,		
	loans (section 512(a)(5)), rents, royalties,					1
	income from similar sources, and unrelated					
	business taxable income (less section 511					
	taxes) from businesses acquired by the					
	organization after June 30, 1975	0	0	0	20	7 207
19	Net income from unrelated business	ļ				
	activities not included in line 18	L				0
20	Tax revenues levied for the organization's	ĺ		'		
	benefit and either paid to it or expended on			i		1
	its behalf					0
21	The value of services or facilities furnished to					1
	the organization by a governmental unit	]				
	without charge. Do not include the value of					
	services or facilities generally furnished to the	ļ				1
	public without charge .					0
22	Other income Attach a schedule Do not					
	include gain or (loss) from sale of capital assets	L				1 0
23	Total of lines 15 through 22	1,822,592	1,984,123		1,590,78	
24	Line 23 minus line 17	731,590			1,070,59	
25	Enter 1% of line 23	18,226	19,841	16,852	15,90	3
26	Organizations described on lines 10 or 11:	a Enter 2% of	amount in column	(e), line 24	▶ _26a	87,601
b	Prepare a list for your records to show the name of ar	nd amount contrib	uted by each pers	on (other than a		The Land of the Party of the Pa
	governmental unit or publicly supported organization)		•	•	<b>●</b>	
	amount shown in line 26a Do not file this list with y	r <mark>our return</mark> . Enter	the total of all the	se excess amoun	its <b>&gt;</b> 26b	1,177,674
С	Total support for section 509(a)(1) test Enter line 24,	column (e)			<b>▶</b> 26c	4,380,046
d	Add Amounts from column (e) for lines 18		)		The sale	file & delige, by the arm to
	22	26	sb 1,177,6	74	▶ _26d	1,177,881
е	Public support (line 26c minus line 26d total)				▶ 26e	3,202,165
f	Public support percentage (line 26e (numerator) d	livided by line 26	c (denominator))	<u> </u>	▶ 26f	73 11%
27	Organizations described on line 12: a For an	nounts included in	lines 15, 16, and	17 that were rece	ived from a "disc	ualified person,"
	prepare a list for your records to show the name of, a			ear from, each "di	squalified perso	n " <b>Do not</b>
	file this list with your return. Enter the sum of such	amounts for each	year			
	(2006) 0 (2005)	0	(2004)	0	(2003)	0
b	For any amount included in line 17 that was received	from each person	(other than "disqu	ualified persons"),	prepare a list for	your records
	to show the name of, and amount received for each y	ear, that was mor	e than the larger	of (1) the amount	on line 25 for the	year or (2)
	\$5,000 (Include in the list organizations described in					
	After computing the difference between the amount re	eceived and the la	rger amount desc	ribed in (1) or (2),	enter the sum of	these
	differences (the excess amounts) for each year					
	(2006) 0 (2005)	0	(2004)	0	(2003)	0
			_			
С	• • • • • • • • • • • • • • • • • • • •		6	<del></del>	- 1	1 .
	17 20	2	1	<del>_</del>	► 27c	<del></del>
d	<del></del>	l line 27b total		<del></del>	▶ 27d	
e	Public support (line 27c total minus line 27d total)			- 1 1	► 27e	0
f	Total support for section 509(a)(2) test Enter amount		• •	▶ 27f	- British	
g	· · · · · · · · · · · · · · · · · · ·	•	•	/	≥ 27g	0 00%
	Investment income percentage (line 18, column (e				<u>▶ 27h</u>	0 00%
28	Unusual Grants: For an organization described in line	e 10, 11, or 12 tha	at received any un	usual grants durin	ig 2003 through	ZUU6, prepare
	a list for your records to show, for each year, the name the nature of the grant. Do not file this list with your				, and a birel des	chption of
	the here of the grant be not me this hat with your	.Starn. Do not iii	cioco ciose gianti			

	lle A (Form 990 or 990-EZ) 2007 Center for Resource Solutions 94-3265560		Р	age 5
Part	Private School Questionnaire (See page 9 of the instructions )  (To be completed ONLY by schools that checked the box on line 6 in Part IV)		N/A	<u> </u>
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	Yes	No
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions,	17		
	programs, and scholarships?	30_	1 1	
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?		ار بند ا العدالة	),  - ^
	If "Yes," please describe; if "No," please explain (If you need more space, attach a separate statement)	31	_	<del> </del>
			, ,	
				1
32	Does the organization maintain the following	[]		ļ
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with			
	student admissions, programs, and scholarships?	32c		1
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d	1. 200 p. r.	2 9171
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)			
		<u>ئى</u> راق		Ï
33	Does the organization discriminate by race in any way with respect to	統。	, i,	
а	Students' rights or privileges?	33a		
b	Admissions policies? .	33b		
С	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d	<u> </u>	-
е	Educational policies?	33e		1
f	Use of facilities?	33f		
g	Athletic programs?	33g		-
h	Other extracurricular activities? .	33h		
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)	 (2) (2) (2) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	, - 1 7 g	35 6
		MA		
		a rice site	ř.	ł
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		_
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
	If you answered "Yes" to either 34a or b, please explain using an attached statement	12.4	, i , i , i , i , i , i , i , i , i , i	
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial pondiscrimination? If "No," attach an explanation	35		,

Sched	fule A (Form 990 or 990-EZ) 2007 Center for R	lesource Solutions		94-32	65560_		Page 6
Pa	t VI-A Lobbying Expenditures by Elect				ctions)		
Char	(To be completed <b>ONLY</b> by an elect when the organization belongs to an affiliated				tod control		
Chec	k >a if the organization belongs to an affiliated	group Check ▶	b if you che	cked "a" and "lim	litea control	provi	
	Limits on Lobbyin (The term "expenditures" mea	•	curred )		(a) Affiliated g totals	roup	(b) To be completed for all electing organizations
36	Total lobbying expenditures to influence public opinio	n (grassroots lobbying	)	36		0	0
37	Total lobbying expenditures to influence a legislative	body (direct lobbying)		37		0	0
38	Total lobbying expenditures (add lines 36 and 37)				0	0	
39	Other exempt purpose expenditures			39 40	Ĺ	0	0
40	Total exempt purpose expenditures (add lines 38 and	•		rodtion the . Taken	0	0	
41	Lobbying nontaxable amount Enter the amount from	-			改加。TY	\$ A.	関語と
		lobbying nontaxable		2 1 1 mg/l			۲,
		of the amount on line 0,000 plus 15% of the		00		ا داد جما	
		5,000 plus 10% of the	•	1 ,	37300 1	0	o
		5,000 plus 5% of the e		13-07	使形式 地上 10	9.342	· 10
		00,000				37. 4	
42	Grassroots nontaxable amount (enter 25% of line 41)	•		42	Security 1 A T A. C.	ີ 0	0
43	Subtract line 42 from line 36 Enter -0- if line 42 is mo	re than line 36		43		0	. 0
44	Subtract line 41 from line 38 Enter -0- if line 41 is mo	ore than line 38		44		0	0
				out in the		Make Barry	
	Caution: If there is an amount on either line 43 or line				g and positional	1 1 1 1 1 1	edite dispersion ( ) in
		eraging Period U		• •			
	(Some organizations that made a sections	for lines 45 through 50			olumns belo	w	
	Oco the mornations					<del></del>	
		Lobb	ying Expenditure	es During 4-Ye	ar Averag	ing F	erioa
	Calendar year (or	(a)	(b)	(c)	(d)		(e)
	fiscal year beginning in)	2007	2006	2005	2004		Total
45	Lobbying nontaxable amount	0	0	0		0	0
46	Lobbying ceiling amount (150% of line 45(e))				ない。 は は は に に に に に に に に に に に に に		0
47	Total lobbying expenditures	0	0	0		0	0
48	Grassroots nontaxable amount	0	o	0		0	0
49	Grassroots ceiling amount (150% of line 48(e))				Mark I	, , , , , , , , , , , , , , , , , , ,	0
50	Grassroots lobbying expenditures	o	o	0		0	0
Pai	t VI-B Lobbying Activity by Nonelectin	g Public Charitie	s				
	(For reporting only by organization	s that did not com	plete Part VI-A)	(See page 14	of the ins	struct	ions)N/A
Durin	g the year, did the organization attempt to influence na	tional, state or local le	gislation, including a	anv	1		
	upt to influence public opinion on a legislative matter or		-	,	Yes	No	Amount
а	Volunteers	_					the walk of the t
b	Paid staff or management (Include compensation in e	expenses reported on l	nes c through h.)				
С	Media advertisements						
d	Mailings to members, legislators, or the public						
е	Publications, or published or broadcast statements						
f	Grants to other organizations for lobbying purposes				<b>-</b>		
9	Direct contact with legislators, their staffs, governmen	_	•				<del></del>
h	Rallies, demonstrations, seminars, conventions, spee	cnes, lectures, or any	other means			799, \$ 3	0
,	Total lobbying expenditures (Add lines c through h.)  If "Yes" to any of the above, also attach a statement of	giving a detailed descri	ption of the lobbying	g activities	167 12 1	<u>, 18</u>	0

Schedule A (Fo	rm 990 or 990-EZ) 2007		Center for Resource Solution	ns	94-3265560		Pá	age 7
Part VII	Information Reg	garding Trans	fers To and Transaction	s and Relationship	s With Nonchar	itable		
	Exempt Organiz	ations (See pa	age 14 of the instructions)	)				
51 Did th	ne reporting organization	on directly or indire	ectly engage in any of the followi	ng with any other organi	zation described in se	ection		
			(3) organizations) or in section 5			,01.011		
			noncharitable exempt organizati		5		Yes	No
	Cash	g organization to a	Thoriciantable exempt organizati	011 01	]	51a(i)	133	X
• •	Other assets				Ì	a(ii)	$\vdash$	X
• •	r transactions				İ	4(11)		<u> </u>
(i)	Sales or exchanges of	of assets with a no	ncharitable exempt organization		ļ	b(i)	} }	Х
			ble exempt organization		ľ	b(ii)		X
	Rental of facilities, eq		=			b(iii)		Х
	Reimbursement arran					b(iv)		Х
(v)	Loans or loan guarant	tees				b(v)		X
(vi)	Performance of service	ces or membershi	p or fundraising solicitations		Î	b(vi)		X
			other assets, or paid employees			С		Х
d If the	answer to any of the a	above is "Yes," co	mplete the following schedule C	olumn (b) should always	show the fair market	value		
of the	goods, other assets,	or services given	by the reporting organization. If t	he organization received	t less than fair market			
ın an	y transaction or sharing	g arrangement, sh	low in column (d) the value of the	goods, other assets, o	r services received			
(a)	(b)		(c)		(d)			
Line no	Amount involved	Name of non	charitable exempt organization	Description of transfer	rs, transactions and shar	ing arranç	jement	S
	- <b> </b>	ļ . <u> </u>		<del> </del>	<del></del>			
					<del>,</del>			
<del></del>		<del> </del>		<del></del>				
	•	<del>                                     </del>				<del></del>		
	<del></del>	<del> </del>			<del> </del>			
	<del></del>							
<del></del>	<del></del>	<del>                                     </del>						
	·							
					·········			
	<del></del>							
		1						
desci		of the Code (othe	ed with, or related to, one or mor r than section 501(c)(3)) or in se		ons ►	Yes	X	] No
	(a)		(b)		(c)			
·	Name of organization	n 	Type of organization	De	escription of relationship			
·				<del></del>				
		·				<del></del>		
·								
				<del></del>				
			<del></del>					
	<del></del>							
	<del></del>	<del></del>						
			<del> </del>					
			<del> </del>					
			<del>                                     </del>					

Schedule A (Form 990 or 990-EZ) 2007

## #94-3265560 Year Ended December 31, 2007

Statement 1
Form 990
Part II, Line 42
Part IV, Line 57b
Fixed Asset Schedule

Acquisition					Д	ΔD @	irrent eciation	,	AD @	
Date	Description	Cost		Lıfe			pense		2/31/07	NBV
Dec-97	Various equipment	\$	1,343	5	\$	1,343	 <u></u>	\$	1,343	\$
05/20/98	MacIntosh Computer		3,498	5		3,498			3,498	-
01/20/99	Furniture		382	5		382			382	
03/31/99	Tiger Direct-computer		1,725	3		1,725			1,725	-
03/31/99	Computown-computers		2,346	3		2,346			2,346	
05/26/99	Computer		720	3		720			720	-
10/27/99	Various equipment		4,462	3		4,462			4,462	
11/24/99	Furniture		5,960	5		5,960			5.960	
10/25/00	MacIntosh Computer		2,375	3		2,375			2,375	
11/15/00	Computer		3,074	3		3,074			3,074	
11/15/00	Furniture		1,648	5		1,648			1,648	-
12/20/00	Computer		495	3		495			495	
10/19/01	Dell		3,021	3		3,021			3,021	-
10/19/01	Dell		3,021	3		3,021			3.021	_
03/21/01	Am Ex - laptop		2,369	3		2,369			2,369	-
07/31/02	Desk		2,348	3		2,348			2,348	-
08/17/04	Laptop		3,956	3		3,187	769		3,956	•
03/18/07	Dell 490 Computer		2,342	3			586		586	1,757
07/17/07	Dell CPU		1,765	3			245		245	1,520
		\$	46,850		\$	41,974	\$ 1,600	\$	43,574	\$ 3,276

#### #94-3265560 Year Ended December 31, 2007

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Part III
Statement of Program Service Accomplishments

## CENTER FOR RESOURCE SOLUTIONS: MISSION STATEMENT

The Center for Resource Solutions (CRS) is a national nonprofit with global impact CRS brings forth expert responses to climate change issues with the speed and effectiveness necessary to provide real-time solutions. Our leadership through collaboration and environmental innovation builds policies and consumer-protection mechanisms in renewable energy, greenhouse gas reductions, and energy efficiency that foster healthy and sustained growth in national and international markets

#### MAJOR ACCOMPLISHMENTS IN 2007 (BY BUSINESS AREA)

#### I. Clean Energy Policy & Expert Assistance

CRS' presence in nearly all policy sectors of the renewable energy and climate

- With support from the Henry P Kendall Foundation, CRS authored a white paper on The Potential for Energy Savings Certificates (ESCs) as a Major Tool for GHG Reductions Programs. This paper is the first investigation of its kind to evaluate the potential for ESCs to help boost energy efficiency's contribution to climate change mitigation.
- The North American Association of Issuing Bodies (NAAIB) became incorporated as a nonprofit organization at the end of 2007. NAAIB recruited two member organizations as of December 2007 and received a grant for continued work in 2008 to build on current efforts.
- CRS completed its seventh year of work in China on renewable energy policy, which has now moved into an implementation phase.
- The Climate Change program refined its focus to assist with the implementation
  of climate change legislation in California, known as Assembly Bill 32. Further,
  CRS staff continued to work regionally and nationally on the inclusion of
  renewable energy and energy efficiency in discussions on climate policy.
- CRS increased its presence in international discussions on renewable energy
  policy through direct participation in meetings in Bangkok, Thailand and the state
  of Bahia in Brazil.

## II. Sustainable Energy Initiatives

CRS works to empower companies, institutions and individuals with the knowledge and opportunity to choose clean renewable energy options that reduce climate change. We cultivate best practices in marketing and education to maximize awareness and understanding of high quality renewable energy

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## #94-3265560 Year Ended December 31, 2007

Statement 2 Form 990 Part III

**Statement of Program Service Accomplishments** 

(Continued)

Green-e Marketplace (formerly Consumer Product Labeling Program)

- In 2007, we revised the program name to include a wide range of companies and organizations that use the program logo in a variety of ways.
- Marketplace adopted a new fee structure in 2007, based on each company's gross annual revenue.
- As of the last quarter of 2007, 58 companies ranging from small individually owned businesses to large multinational companies use the Green-e logo to communicate their procurement of renewable energy.
- CRS solidified a plan to re-launch the program in early 2007, including a new fee structure, new program name, new logo language guidelines, contracts, terms and conditions.

#### Carbon Neutral Alliance

The Carbon Neutral Alliance was established in September 2007 with seed funding from the Rockefeller Brothers Fund and Wolfensohn Family Fund. The Alliance brings together sustainably-minded grant makers to assist them in measuring and reducing the carbon emissions produced in their travel and daily business activities.

- CRS was invited to make a presentation during a call hosted by the
  Environmental Grant makers Association where carbon offset practices was the
  primary topic. Environmental Grant makers Association opened the call to their
  over 600-person membership.
- Created a Web site, fee structure and collateral materials for the program.
- Planned and conducted a program kick off meeting in New York City to launch the program. The meeting was attended by 14 unique foundations and grant making organizations.

#### Marketers' Marketers Group (MMG)

• The MMG has grown to include 80 members.

### The 12th National Renewable Energy Marketing Conference

 CRS hosted the 12th National Renewable Energy Marketing Conference in Philadelphia, PA in mid-November. Strong outreach efforts prior to the conference assured a well-attended event with an increase in first-time attendees and broader participation from non-traditional sectors.

# #94-3265560 Year Ended December 31, 2007

Statement 2 Form 990 Part III

Statement of Program Service Accomplishments

(Continued)

## III. Certification and Analysis

Certification and Analysis works to provide a clear and accurate connection between measurement and verification of renewable energy and greenhouse gas (GHG) reductions in order to accelerate the construction of new renewables, leading to further GHG reductions. The program also serves to incorporate renewabes into GHG restriction program, provide consumer protection services, and help to safeguard the renewable energy market from false claims.

- With support from our Communications department, Green-e renamed and repositioned the Green-e suite of certification programs as Green-e Energy and
  Green-e Climate to differentiate between the services provided through each
  program.
- The group completed the 2006 verification for Green-e Energy, documenting another record year with 9.8 MWh of Green-e certified renewable energy, up nearly 90 percent from 2005.
- The Green-e Governance Board approved the Green-e Climate program Standard and the Green-e Climate Protocol for Renewable energy.
- Hired three new staff members to support program growth in both Green-e energy and Green-e climate.

#### IV. Communications and Public Education

- Re-branded our Green-e programs, modified their logos and created distinct collateral pieces to distinguish between the services offered by each program.
- Revised the language associated with our organizational mission to reflect a shift in priorities to focus more directly on climate change issues.
- Modified the Green-e Web site to better position our program and to include language geared towards the consumer audience.
- Strengthened existing press relationships while establishing new relationships with members of the mainstream press.
- Distributed over 40 press releases between May and December 2007 with significant coverage resulting in local, regional and national press outlets.

# #94-3265560 Year Ended December 31, 2007

Statement 2
Form 990
Part III
Statement of Program Service Accomplishments

(Continued)

# V. Renewable Resource Assessment & Technical Assistance

Within this business area, CRS provides renewable energy <u>technical support services</u> to State Energy Offices, Utilities, Energy Developers, Regulatory Agencies and private sector companies. The services are targeted to support strategic planning, energy development and procurement planning, economic and resource studies, and decision and risk analysis. Mid-way through 2007, existing projects under this business area came to a conclusion and CRS transitioned the services provided under Technical Assistance to our Policy Design program.

# #94-3265560 Year Ended December 31, 2007

Statement 3
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Part V
List of Officers, Directors, Trustee, and Key Employees

Mark Levine, Board Chair

Carl Weinberg

Doug DeNio

Julie Blunden

Karl Rabago

Byron Sher

Claudine Cmarada

Nancy Floyd

Rick Sellers

Jan Hamrin, Ex Officio

All Officers and Directors serve approximately 4-6 hours per week without compensation.

The address for all Officers and Directors is:

Presidio Building 97, Arguello Blvd.

San Francisco, CA 94129