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 1545 0047 2010

Department of the Treasury

Open to Public

inte	mai Re	venue Service		ie organizati	on may have to use	a copy or this return	to satisfy state i	eporti	ng requirements		
<u>A</u>	For	the 2010 calen	dar year, or tax	year begi	nning		, 2010, and e	ndinç	9		_,
В	Check	of applicable							D Emplo	yer iden	tification Number
		Address change			urce Solut				94-	3265	5560
		Name change			. 2nd Floo	r			E Teleph	one nun	nber
		nitial return	San Franc	isco, (CA 94129				415	-561	L-2100
	П	Terminated	1								
		Amended return							G Gross	eceints	1,966,738.
	\vdash	Application pending	F Name and addr	ess of princip	al officer Art	hur O'Donn	ell	T	H(a) Is this a group retu		
	Ш.	pp	Same As C			•	· ·		(b) Are all affiliates inc		Yes No
ī	Tax	c-exempt status	X 501(c)(3)	501(c) () ◀ (inse	rt no.) 4947/	a)(1) or 52	,	If 'No,' attach a list	(see in	structions)
÷			w.resource			1(10) 1347(JZ 17 01 32.	\neg	H(c) Group exemption n		•
K		m of organization	X Corporation	Trust	Association	Other ►	L Year of Fo				
_	art I	Summai		r rușt	Association	Other	L Tear of Fo	ormatic	on 1997 IN	state of	legal domicile CA
<u> </u>	1	Briefly descri	he the organiza	tion's miss	cion or most sig	nificant activitie	CPC cr		es policy a		
	'	solution	e to advar		etainable d	nnicant activitie	2 CV2 CI	<u>ea</u> t	es borred a	<u> </u>	market
Activities & Governance		シロエのエア	P FO GRAST	ICE PRO	ratifabte a	SITET DA					
Ē											
ě.	2	Check this bo	x ► Lif the	organizatio	on discontinued	its operations of	r disposed of	mor	e than 25% of its	net as	sets
ğ	3	Number of us	tina mambasa s	4 the seur	raina hadu /Da	4-\-////:::1-= \			C (11011 25 70 01 103	1 3 I	
6	4	Number of in-	dependent votin	g membe	rs of the govern	ing body (Part^)	Я; IMe=1ЬУ	ŀ		4	9
粪	5	rotar number	or individuals e	impioyea i	n calendar year	2010 (Part V, 1	ne 2a)	7일		5	21
ਰ੍ਹਿੰ	6		of volunteers (I TOO BE	1 2011	181		6	3
•			ed business reve					RS-OSC		7a	0.
	<u> </u>	Net unrelated	business taxab	le income	from Form 990			ا تد	<u> </u>	7b	0.
Revenue		0-4-4-4		-4 \ /// L	161	OGD	EN, UT		Prior Year	40	Current Year
	8		and grants (Pa	574,8		106,698.					
	9 10	_	ice revenue (Pa come (Part VIII			1,459,6		1,859,075.			
ۿ	11		e (Part VIII, colu			3,3	48.	965.			
_	12		- add lines 8 t						2,040,3		1,966,738.
_	13		milar amounts p				(/-), line 12)		2,040,5	73.	1,300,730.
	14		to or for memb								
	15		r compensation			•	lines 5-10\		1,415,4	Q1	1,143,428.
89	_		undraising fees				inics 5-10)		1,415,4		1,143,420.
Expenses			_		· ·	•					
쏬			ıng expenses (F				110,664	<u>1.</u>	· · · · · · · · · · · · · · · · · · ·		w12
	17	•	es (Part IX, colu			•			941,0	\rightarrow	<u>961,390.</u>
	18		s Add lines 13			column (A), line	25)		2,356,4		2,104,818.
	19	Revenue less	expenses Sub	ract line 1	8 from line 12	 			-316,1	09.	<u>−138,080.</u>
5 8									Beginning of Curren		End of Year
Net Assets or Fund Balances	20		Part X, line 16)	- .					357,9	$\overline{}$	<u>153, 150.</u>
42	21		(Part X, line 2	•					291,0		224, 343.
	22		fund balances	Subtract I	ine 21 from line	20			66,8	87.	<u>-71,193.</u>
Pa	<u>rt II</u>	Signatur	e Block								
Unde	er pena	ilties of perjury, I de	clare that I have exa	mined this ret	turn, including accom	panying schedules a	nd statements, and	d to the	e best of my knowledge	and beli	ief, it is true, correct, and
	,,,,,,	IN Prope	1 1	11 1 1		nen preparer nas any	- Kilowicuge		74 ~~	/	
		S	Jewys /	mil						-//	
Sig		Signature	efot officer	. N	1, 4,	6.	1. D)	Date		
He	'e	<u> </u>	Jennite		IAPTIVI	EXPLU	hve D	<u>Ire</u>	iror		
			orint name and title								
		Print/Type pre	eparer's name		Preparer's agnatur		Date	1	Check] if [F	PTIN
Pai					100 M	Tamuco	~ 1712	91	self employe	1	
	pare				eda, CPAs						-
Use	On	y Firm's addres			oh Ave Ste	318			Firm's EIN	N/A	<u> </u>
		l	Oaklan	d, CA	94612-2151				Phone no	(510) 835-2727
May	the I	RS discuss this	s return with the	preparer	shown above?	(see instruction	s)				X Yes No

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

TEEA0113L 12/21/10

Form 990 (2010)

Form 990 (2010) Center for Resource Solutions	94-3265560	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 déscribe the organization's mission		
CRS creates policy and market solutions to advance sustainable	energy.	
		
2 Did the organization undertake any significant program services during the year which were not liste	d on the prior	
Form 990 or 990-EZ?	Yes X	No No
If 'Yes,' describe these new services on Schedule O		<u>.</u>
3 Did the organization cease conducting, or make significant changes in how it conducts, any program	services? Yes X	No No
If 'Yes,' describe these changes on Schedule O	30111003 <u>[]</u> 103 <u>[]</u>	<u>.</u>
4 Describe the exempt purpose achievements for each of the organization's three largest program services.	vices by expenses Section 5	01/6)/3)
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	and allocations to others, th	ne total
4a (Code. (Expenses \$ 860, 504. including grants of \$) (Revenue \$ 1,247,	830.)
See Schedule O	,	 /
4b (Code) (Expenses \$ 438,178. including grants of \$) See Schedule 0	(Revenue \$ 240,	035.)
		
0.70 100		
4c (Code) (Expenses \$ 276,183. including grants of \$)		
CRS organized the annual Renewable Energy Markets conference he		
in Portland, Oregon. The conference was highly successful, wit		
and 97 speakers. The conference also hosted the RPS Collaborat		. <u>. </u>
which attracted increased attendance from officials and stakeho		
various state-level RPS programs and facilitated expansion of t	ne conference sess	<u>lons</u>
to more fully address compliance markets for renewable energy.		
Executive Summit following the conference, which gathered indus		
together to focus on strategic initiatives that will contribute		<u>th</u>
of renewable energy markets.		
		
4d Other program services (Describe in Schedule O) See Schedule O	.	
(Expenses \$ 17,212. including grants of \$) (Revenue	\$ 51,310.)	
4e Total program service expenses ► 1, 592, 077.		

			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	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		Х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
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	į	_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		Х
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		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If Y is Y is Y in the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If Y is Y is Y is Y is Y is Y is Y .	10		Х
11	If the organization's answer to any of the following questions is 'Yes' then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
	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>	11 a	х	
	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	_	Х
1	c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
•	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
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	11 f	Х	
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a	х	
	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	12Ь		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		<u>X</u>
	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	-	X
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15	_	Х
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		X
	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	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	_	<u>x</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		<u>X</u>
20 :	aDid the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		<u>X</u>
Ŀ	of 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		

Form 990 (2010) Center for Resource Solutions

Part IV 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 II	21		х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2° If 'Yes,' complete Schedule I, Parts I and III	22		х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		Х
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 lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25	24a		х
ı	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
	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		
•	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
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		<u>x</u>
-	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		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? If 'Yes,' complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			· '
•	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		<u>X</u>
ı	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	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? If 'Yes,' complete Schedule M	30	\longrightarrow	<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31	\dashv	<u>X</u>
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		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
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		<u>x</u>
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		<u>X</u>
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 Yes X No			
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	$ \bot $	<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	х	
BAA		Form	990 (2	2010)

		4-3265560		Page
Pa	Part V Statements Regarding Other IRS Filings and Tax Compliance			-
	Check if Schedule O contains a response to any question in this Part V			ᆛ
	1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	10	Yes	N
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable (gambling) winnings to prize winners?		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 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	21 2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3a 3b	_	X
4	 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authori financial account in a foreign country (such as a bank account, securities account, or other financial account) b If 'Yes,' enter the name of the foreign country 	ty over, a		х
_	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Account	ŗ	1	
	5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u>		X
	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5b 5c		X
	6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organ 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 contributions or ginot tax deductible? Organizations that may receive deductible contributions under section 170(c). 	fts were 6b	_	_
	· · · · · · · · · · · · · · · · · · ·		1	l
	 a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods a services provided to the payor? b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 	7a	'	X
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required.		t	╁
	Form 8282?	7c		X
	d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d			2
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			X
	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	_ 7g		
	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 1098-C?	7h		_
8	8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess busin holdings at any time during the year?	Did the ness	 	 L
9	9 Sponsoring organizations maintaining donor advised funds.			_
	a Did the organization make any taxable distributions under section 4966?	9a		
	b Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	O Section 501(c)(7) organizations. Enter			
	a Initiation fees and capital contributions included on Part VIII, line 12		: 1	
	b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	1 Section 501(c)(12) organizations. Enter		. 1	l I
	a Gross income from members or shareholders		- 1	
	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b			
	2a 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 2. Section 501(5)(20) qualified personal health insurance issuers.		l	
	3 Section 501(c)(29) qualified nonprofit health insurance issuers.	1::	-	
•	a is the organization licensed to issue qualified health plans in more than one state?	13a		
ŧ	Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b			
(c Enter the amount of reserves on hand		Ī	

14a Did the organization receive any payments for indoor tanning services during the tax year?

14a

14b

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. X Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 1 a **b** Enter the number of voting members included in line 1a, above, who are independent 1 b 8 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X 2 officer, director, trustee or key employee? 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 X Did the organization make any significant changes to its governing documents 4 since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Does the organization have members or stockholders? 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7 a **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 a The governing body? Яa Х Х b Each committee with authority to act on behalf of the governing body? 8b 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No Х 10a Does the organization have local chapters, branches, or affiliates? 10 a 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 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? X 11 a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13 Х 12a b 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 O how this is done See Schedule O 12c X 13 Does the organization have a written whistleblower policy? 13 Х 14 Does the organization have a written document retention and destruction policy? 14 . 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 See Schedule 0 15 a **b** Other officers of key employees of the organization See Schedule O 15b X If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions.) **16a** Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a X b If 'Yes,' 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 16b organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed > CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website 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. Dee Young 1012 Torney Ave. 2nd Floor San Francisco CA 94129 415-561-2100

	~	_	_	
Form 990 (2010)	Center	for	Resource	Solutions

94-3265560

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any See instructions for definition of 'key employee'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.										
(A)	(B)	Į		(C	•			(D)	(E)	(F)
Name and title	Average hours per week (describe hours for related organiza tions in Schedule O)	Individual trustee or director	Institutional trustee		key employee	Highest compensated employee	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) Karl Rabago Board Chair	1	х		Х				0.	0.	0.
(2) Carl Weinberg Vice Chair	1	х		х				0.,	0.	0.
(3) Juile Blunden Sec./Treasurer	1	Х		х				0.	0.	0.
(4) Rick Couhihan Board Member	1	х						0.	0.	0.
(5) Nate Hanson Board Member	1	х						0.	0.	0.
(6) Peter Mostow Board Member	1	х						0.	0.	0.
(7) Elena Schmid Board Member	11	Х						0.	0.	0.
(8) Blair Swezey Board Member	1	Х						0.	0.	0.
(9) Arthur O'Donnell Executive Direc	40			х				122,609.	0.	13,806.
(10)										
(11)										
(12)										
(13)										
(14)										
(15)										
(16)										
ַרַבַּ										•

Page 8

Part VII Section A. Officers, Directors, Trus	tees, k	⟨еу	En	nple	oye	es,	an	d Highest Con	npensated Emp	oloyees (cont)
(A)	(B)	ł		•	c)			(D)	(E)	(F)
Name and title	Average hours	Posi	ition ((chec				compensation from	Reportable compensation from	Estimated amount of other
	hours per week (describe hours for related organi zations in Sch O)	or dire	กรนะ	Officer	Key employee	Highest co employee	Former	the organization (W-2/1099 MISC)	related organizations (W 2/1099 MISC)	compensation from the
	related	dual ector	Tion:		ğ	st co	Œ			organization and related
	zations	trust	al tru		yee	compensa				organizations
	Sch O)	1 %	stee			nsated				ĺ
						٦				
_(18)	•								-	
			_	_	<u> </u>	-	_			
(19)										
(20)		-		\vdash			-			
326	ł	İ					1			
(21)								,		
		Ш			<u> </u>		<u> </u>			
(22)	Ì									ļ
(23)				-	_	-			<u>_</u>	
(23)								i		ļ
(24)										
(25)										
(26)		-	\dashv			-				
(26)										
(27)								-		
			_							
_(28)										
(30)		\dashv	\dashv	\dashv	_		-			
(29)		l		ĺ	Į					
1 b Sub-total	1						▶	122,609.	0.	13,806.
c Total from continuation sheets to Part VII, Section	A						▶ [0.	0.	0.
d Total (add lines 1b and 1c)							>	122,609.	0.	13,806.
2 Total number of individuals (including but not limited	to thos	se lis	sted	abo	ve)	who	rec	ceived more than t	\$100,000 in reporta	able compensation
from the organization 1										I Van I Na
3 Did the organization list any former officer, director	or tructe	a k	·01.4	mn	love		ır bu	abast components	d amalayaa	Yes No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in	dividual	!	Су	cirip	Юус	.e, c	/I / III	gnest compensate	d employee	3 X
4 For any individual listed on line 1a, is the sum of rep	ortable	com	nper	nsati	on a	and	othe	er compensation f	rom	
the organization and related organizations greater th	an \$150	0,000	07 <i>I</i>	f 'Ye	es' c	om	olete	Schedule J for		4 X
5 Did any person listed on line 1a receive or accrue co	mpensa	ation	fro	m a	nv ı	ınrel	late	d organization or i	ndıvıdual	THE PROPERTY OF THE PARTY OF TH
for services rendered to the organization? If 'Yes,' co	omplete	Sch	iedu	ıle J	for	SUC	h pe	erson		5 X
Section B. Independent Contractors 1 Complete this table for your five highest compensate	ed inden	end	ent	cont	ract	ors	that	received more th	an \$100 000 of	
compensation from the organization							1			
(A) Name and business address							1	(B) Description of	Services	(C) Compensation
Ryan Wiser P.O. Box 29512 San Franci		CA	9.4	112	<u>a</u>		+	China Consu		
Man Wiber 1.0. Don 25012 Dan Franci	<u> </u>	<u>UN</u>	<u> </u>				+	Chillia Collau.	Leane	133,406.
			_				\dashv			
							\Box			
							\downarrow	<u> </u>		
7 Talal number of independent and the first transfer			٠ .			l.c.t				The second second
2 Total number of independent contractors (including b	out not li	ımıte	ea to) inc	se	ııste	o at	pove) wno receive	more than	

P	art VIII Statement of Revenue	(A)	(B)	(c)	(D)
	,	Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from ta- under sections 512, 513, or 514
2,4	, 1a Federated campaigns 1a				
RAN	b Membership dues 1b]			
S, G	c Fundraising events. 1c	_]	l		Ì
110	d Related organizations 1d		1		
S, C	e Government grants (contributions) 1e	J			
PROGRAM SERVICE REVENUE AND OTHER SIMILAD AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above 1f 106, 698.				
E C	g Noncash contributions included in lns 1a-1f \$				
8	h Total. Add lines 1a-1f	106,698.			
	Business Code				
VEN	2a Certification fees 900099	1,141,840.	1,141,840	.].	
RE	b Contract fees 900099	396,682.			
7CE	c Conference fees 900099	320,553.			
ÉŖ	d	1			
Æ	e				
Š	f All other program service revenue			-	† <u> </u>
PRC	g Total. Add lines 2a-2f	1,859,075.			
	3 Investment income (including dividends, interest and				
	other similar amounts)	965.			965.
	4 Income from investment of tax-exempt bond proceeds	-			
	5 Royalties	·			
	(i) Real (ii) Personal				
	6a Gross Rents	_}	1	İ	
	b Less. rental expenses	1	1		
	c Rental income or (loss)				
	d Net rental income or (loss)	•			<u> </u>
	7a Gross amount from sales of (i) Securities (ii) Other	4			
	assets other than inventory	4			•
	b Less, cost or other basis		,	ļ	
	and sales expenses		1		
	c Gain or (loss)	J · -			
	d Net gain or (loss)	-			
NUE	8a Gross income from fundraising events (not including \$			<i>'</i>	
2	of contributions reported on line 1c)			,	
OTHER REVEN	See Part IV, line 18	Ţ			
Ĕ	b Less direct expenses b				
0	c Net income or (loss) from fundraising events ▶		,		
	9a Gross income from gaming activities See Part IV, line 19]			
	b Less direct expenses b]		1	1
	c Net income or (loss) from gaming activities				
	10a Gross sales of inventory, less returns and allowances				
	b Less cost of goods sold b	1			1
	c Net income or (loss) from sales of inventory	j i		-	<u> </u>
	Miscellaneous Revenue Business Code				
	11a]			1
	b				
	c		· · · · · · · · · · · · · · · · · · ·		
	d All other revenue				
	e Total. Add lines 11a-11d			•	
	12 Total revenue. See instructions	1,966,738.	1,859,075.	0.	965.

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)

				(2), (3), 27,2	(-)
До 6Ь,	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				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				-
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	136,415.	45,457.	75,832.	15,126.
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	813,876.	633,177.	121,084.	59,615.
8	Pension plan contributions (include section 401(k) and section 403(b)				
	employer contributions)	52,535.	40,614.	8,123.	3,798.
9	Other employee benefits	64,980.	49,355.	10,832.	4,793.
10	Payroll taxes	75,622.	54,432.	15,288.	5,902.
11	Fees for services (non-employees)		İ		
	a Management	Ì]	
	b Legal				
	Accounting	66,351.		66,351.	
	d Lobbying			- 00/001.	
	Professional fundraising services See Part IV, line 17				
	·				
	Investment management fees	442 200	410 CE2	10 420	C 200
	g Other	443,298.	418,652.	18,438.	6,208.
	Advertising and promotion			45.540	
13	Office expenses	79,037.	29,259.	46,519.	3,259.
14	Information technology				
15	Royalties				
16	Occupancy	134,811.	96,951.	27,464.	10,396.
17	Travel	27,488.	27,074.	414.	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	189,260.	185,695.	3,222.	343.
20	Interest			<u>_</u>	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,484.		4,484.	
23	Insurance	15,867.	11,411.	3,232.	1,224.
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
2	Miscellaneous	794.		794.	
ŀ					
					
				· · · · · · · · · · · · · · · · · · ·	
•					
	All other expenses	2 104 010	1 500 077	400 077	110 664
	Total functional expenses. Add lines 1 through 24f	2,104,818.	1,592,077.	402,077.	110,664.
26	Joint costs. Check here ► X 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				
BAA			····		Form 990 (2010)

P	art X	Balance Sheet			
		, ,	(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing	171,276.	1	110,158
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	75,000.	3	
	4	Accounts receivable, net	94,628.	4	30,466
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		_ 5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
A S S E T	7	Notes and loans receivable, net		7	
E	8	Inventories for sale or use		8	
S	9	Prepaid expenses and deferred charges	11,210.	9	11,210
	10 a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 35,877.			
	l t	Less accumulated depreciation 10b 34,561.	5,800.	10c	1,316
	11	Investments – publicly traded securities	<u> </u>	11	
	12	Investments – other securities See Part IV, line 11		12	
	13	Investments – program-related See Part IV, line 11		13	
	14	Intangible assets	·	14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets Add lines 1 through 15 (must equal line 34)	357,914.	16	153,150.
	17	Accounts payable and accrued expenses	192,807.	17	173,508
	18	Grants payable		18	2.5/000.
	19	Deferred revenue	98,220.	19	50,835.
Ļ	20	Tax-exempt bond liabilities		20	00/000
Å B	21	Escrow or custodial account liability Complete Part IV of Schedule D	*	21	
L I T	22	highest compensated employees, and disqualified persons. Complete Part II	- 1	#** ? 	THE STATE OF
- 1		of Schedule L	· ,	22	
E S	23			23	
	24			24	
	25	Other liabilities Complete Part X of Schedule D		25	·
	26	Total liabilities. Add lines 17 through 25.	291,027.	26	224,343.
Ë		Organizations that follow SFAS 117, check here > X and complete lines			
_	27	27 through 29 and lines 33 and 34.		- 1882 -	an ilebahkhank
人ろうましょう	27	Unrestricted net assets	-137,020.	27	<u>-76,747.</u>
Ė	28	Temporarily restricted net assets	203, 907.	28	5,554.
O R	29	Permanently restricted net assets	e grade en	29	
		Organizations that do not follow SFAS 117, check here and complete	4.	<i>"</i>	
F 320		lines 30 through 34.	<i>-</i> ′	-4	
	30	Capital stock or trust principal, or current funds	_	30	
BALANC	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ä	32	Retained earnings, endowment, accumulated income, or other funds		32	
ğΪ	33	Total net assets or fund balances.	66,887.	33	- 71,193.

BAA

Total liabilities and net assets/fund balances

Form **990** (2010)

357,914.

Form 950 (2010) Center for Resource Solutions	<u>94-3265560</u>	Page 12
Part XI Reconciliation of Net Assets		
Check if Schedule O contains a response to any question in this Part XI		
4 Table	1 - 1	
1 Total revenue (must equal Part VIII, column (A), line 12)	1	1,966,738.
2 Total expenses (must equal Part IX, column (A), line 25)	2	2,104,818.
3 Revenue less expenses Subtract line 2 from line 1	3	-138,080.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	4	66,887.
5 Other changes in net assets or fund balances (explain in Schedule O)	5	0.
6 Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	-71,193.
Part XII. Financial Statements and Reporting		
Check if Schedule O contains a response to any question in this Part XII		
1 Accounting method used to prepare the Form 990	n	2a X 2b X 2c X
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year we separate basis, consolidated basis, or both. X Separate basis Consolidated basis Both consolidated and separate basis	re issued on a	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth Audit Act and OMB Circular A-133?	in the Single	3a 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.	ne required audit	3b
BAA		Form 990 (2010)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

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

OMB No 1545-0047

Open to Public Inspection

June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit (of to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a		of the organization							Employ	er identific	ation number	
The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A school described in section 178(bX1XAXii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 179(bX1XAXiii). Enter the hospital's name, city, and state A medical research organization organization organization operated by a governmental unit described in section 179(bX1XAXiii). Complete Part III.) A norganization operated for the benefit of a college or university owned or operated by a governmental unit described in section 179(bX1XAXiv). (Complete Part III.) A norganization that normality receives a substantial part of its support from a governmental unit or from the general public described in section 170(bX1XAXV). (Complete Part III.) A community frust described in section 170(bX1XAXV). (Complete Part III.) A community frust described in section 170(bX1XAXV). (Complete Part III.) A community frust described in section 170(bX1XAXV). (Complete Part III.) A norganization that normality receives (1) more than 33-1/3% of its support from activities related to its exempt functions – subject to certain exceptions, and (2) no more than 33-1/3% of its support from activities related to its exempt functions – subject to certain exceptions, and (2) no more than 33-1/3% of its support from gors investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization organization organization organization and complete lines 11e through 11th A norganization organization adoperated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or organization organization organization and complete lines 11e through 11th A norganization organization and the properation organization organization organization organization organization												
A church, convention of churches or association of churches described in section 170(bX1XAXi). A school described in section 170(bX1XAXii). (Altach Schedule E) A hospital or a cooperative hospital service organization described in section 170(bX1XAXiii). A medical research organization operated in conjunction with a hospital described in section 170(bX1XAXiii). Enter the hospital's name, city, and state Todo(bX1XAXiv). (Complete Part II) A reganization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(bX1XAXv). A federal, state, or local government or governmental unit described in section 170(bX1XAXv). A reganization an organization and in ormally receives a substantial part of its support from a governmental unit or from the general public described in section 170(bX1XAXvi). (Complete Part II) An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts investment income and unicaled business I saxable income (less section 51) I say from June 18-3-1/3% of its support from contributions, membership fees, and gross receipts investment income and unicaled business I saxable income (less section 51) I say from June 18-3-1/3% of its support from gross investment income and unicaled business I saxable income (less section 51) I say from June 18-3-1/3% of its support from gross investment income and unicaled business I saxable income (less section 50(a)(a). An organization organized and operated exclusively to test for public safety. See section 50(a)(a). An organization organized and operated exclusively for the benefit of t, to perform the functions of or carry cut the purposes of one or more publicly supported organizations described in section 509(a)(2). See section 509(a)(3). Check the box that a Type II by performance of the public of supporting organization and complete fines I be through III by a complete organization organization described in (a) or (ii) above?									.) See	ınstruc	tions.	
A school described in section 170(b)(1)(A)(ii). Altach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state A medical research organization operated in the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(v). (Complete Part II.) A community for local government or governmental unit described in section 170(b)(1)(A)(v). (Complete Part III.) A community frust described in section 170(b)(1)(A)(v). (Complete Part III.) A community frust described in section 170(b)(1)(A)(v). (Complete Part III.) A community frust described in section 170(b)(1)(A)(v). (Complete Part III.) A community frust described in section 170(b)(1)(A)(v). (Complete Part III.) A community frust described in section 170(b)(1)(A)(v). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 50(a)(2). (Complete Part III.) An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or described in section 50(a)(2). (Complete Part III.) An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or described the section 50(a)(2). (Complete Part III.) An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or described the section of the section 50(a)(2). (Complete Part III.) An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or described in the type of supporting organization and complication and complic	The o	organization is not a private foundatio	n becau	se it is: (For lines 1 thre	ough 11	, check	only one	e box)				
A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state 5	1											
A medical research organization operated in conjunction with a hospital described in section 170(b)(1)A(x)(ii) Enter the hospital's name, city, and state 5	2	A school described in section 17	0(b)(1)(A	A)(ii). (Attach Schedule	E)							
A medical research organization operated in conjunction with a hospital described in section 170(b)(1)A(x)(ii) Enter the hospital's name, city, and state 5	3	A hospital or a cooperative hospi	tal servi	ce organization describ	ed in se	ction 17	70(b)(1)(AXiii).				
name, city, and state A rederal, state, or local government or governmental unit described in section 170(b)(1)A(v). (Complete Part II)	4	A medical research organization	operate	d in conjunction with a	hospital	describe	ed in se	ction 1	70(b)(1)(AXiii) E	nter the ho	spital's
T70(bXT)Ax(iv). (Complete Part II)					•				() / /	. ,, , –		- F
7	5	170(b)(1)(A)(iv). (Complete Part	11)					-		al unit de	escribed in	section
m section 170(b)(T)(A)(w). (Complete Part II.)			nent or g	jovernmental unit descr	ibed in s	section	1 70(b)(1	I)(A)(v).				
9	,	in section 170(b)(1)(A)(vi). (Com	plete Pa	art II.)			overnme	ental un	nt or fro	n the ge	eneral publi	c described
from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 509(a)(2). The provided in the purpose of one or more publicly supported organization organized and operated exclusively to test for public safety. See section 509(a)(2). An organization organized and operated exclusively to test for public safety. See section 509(a)(2). Check the box that describes the type of supported organization and complete lines (1) to the purposes of one or more publicly supported organization and complete lines (1) to the purpose of the purposes of one or more publicly supported organization and complete lines (1) to the purpose of the purpose of the purposes of the purpose of	8											
An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a	9	investment income and unrelated June 30, 1975 See section 509(a)	ipt funct I busine: 2)(2). (Co	ions – subject to certai ss taxable income (less omplete Part III)	n excep section	tions, ai 511 tax	nd (2) n) from t	o more ousiness	than 33 ses acqu	.1/3% of	tite cumpor	t from arose
more publicly supported organizations described in Section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a	10											
a Type I b Type II c Type III – Functionally integrated d Type III – Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons of their than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? (ii) A supported organization (described on lines 1 9 above or IRC section (reganization in column (i) organization in column (i	11	An organization organized and of more publicly supported organiza describes the type of supporting	erated tions de organiza	exclusively for the bene scribed in section 509(a ition and complete lines	efit of, to a)(1) or a 11e thi	perforn section : ough 11	n the fui 509(a)(2 h	nctions 2) See	of, or ca section	rry out 1 509(a)(3	the purpose). Check th	s of one or ne box that
section 509(a)(2) If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (i) and (ii) below, the governing body of the supported organization? (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization (described on lines 1 9 above or iRC section (
g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (i) and (iii) below, the governing body of the supported organization? (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? (i) Name of supported organization (described on lines 1 g above or iRC section (see instructions)) (ii) Selin (iii) EIN (iii) Type of organization in (described on lines 1 g above or iRC section (see instructions)) (iv) Is the organization in column (i) organization in o	е	By checking this box, I certify that other than foundation managers a section 509(a)(2)	t the org	ganization is not control or than one or more pub	lled dire	ctly or in	ndırectly organıza	by one ations d	or more	disqual I in secti		
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? h Provide the following information about the supported organizations) (ii) Name of supported organization in (described on lines i) above or interesting organization in (column (i) isted in your governing) of your support? Yes No Yes No Yes No (A) (B) (C) (D)	f	If the organization received a write check this box	ten dete	ermination from the IRS	that is	а Туре І	, Type I	l or Typ	e III sur	porting	organizatio	n,
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s) (i) Name of supported organization (ii) EIN (iii) Type of organization organization (specified organization in column (i) isled in your governing document? Yes No Yes No Yes No (Vi) S the organization in column (i) organization in column (i) organization in column (i) organization in column (i) organization in column (i) isled in your support? Yes No Yes No Yes No (A) (B) (C)	g	Since August 17, 2006, has the o	rganızat	ion accepted any gift o	r contrib	oution fr	om any	of the f	ollowing	persons	s?	
below, the governing body of the supported organization? (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? h Provide the following information about the supported organization(s) (ii) EIN (iii) Type of organization (described on lines 1 9 above or IRC section (see instructions)) (iv) Is the organization in column (i) is organization in column (i) organization in column (i) organization in column (i) organization in organization in column (i) organization in column (i) organization in column (i) organization in organization in column (i) organization in column (ii) organization in column (iii) organization in column									_			Yes No
(iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s) (ii) Name of supported organization (described on lines 1 9 above or IRC section (see instructions)) (iv) Is the organization in column (i) of your support? Yes No Yes No Yes No (iii) EIN (ivi) Figure of organization in column (i) of your support? (vii) Amount of support organization in organization in your governing document? Yes No Yes No (A) (B)		below, the governing body of	of the su	pported organization?	togethe	r with pe	ersons o	describe	ed in (ii)	and (III)		
h Provide the following information about the supported organization(s) (i) Name of supported organization (ii) EIN (iii) Type of organization (described on lines 1 9 above or IRC section (see instructions)) (Yes No Yes No Yes No (A) (B) (Iii) Type of organization (described on lines 1 9 above or IRC section (see instructions)) (Yes No Yes No Yes No (A)		(ii) A family member of a perso	n descri	bed in (i) above?							11 g (ii)	
(i) Pame of supported organization (described on lines 1 9 above or iffic section (see instructions)) (ii) Type of organization (described on lines 1 9 above or iffic section (see instructions)) (iv) Is the organization in column (i) Islated in your governing document? Yes No Yes No (A) (B) (Iv) Is the organization in column (i) of your support? Ves No Yes No (A)		• •	•	*, *,							11 g (iii)	
(described on lines 1 9 above or IRC section (see instructions)) (described on lines 1 9 above or IRC section (see instructions)) (see instructions)) (described on lines 1 9 above or IRC section (column (i) or column (i) or column (i) or ganization in column (i) or ganization (in column (h	Provide the following information	about th	e supported organization	on(s)							
(A) (B) (C) (D)		(i) Name of supported (ii) Ell organization	N	(described on lines 1.9 above or IRC section	column (zation in i) listed in overning	the organ	nization in in (i) of	organiz colur organiz	ation in nn (i) ed in the	(vii) Amour	nt of support
(B) (C)					Yes	No	Yes	No	Yes	No		
(B) (C)												
(C)	(A)								ļ			
(C)												····
(C)	(B)				<u>L</u>			f	l			
(D)											-	
(D)	(C)								i.			
											 -	
	(D)				ļ					ļ		
(E)												
	(E)											
			· / //	المراجع المواجع المراجع	7 12 3			. 5	2			
	Total		-						.,			.

Schedule A (Form 990 or 990-EZ) 2010 Center for Resource Solutions 94-3265560 Part II Support Schedule for Organizations Described in Sections 170(bX1XAXiv) and 170(bX1XAXvi)

(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.)

Se	ction A. Public Support						
beg	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')	731,590.	767,328.	703,830.	574,840.	106,698.	2,884,286.
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	731,590.	767,328.	703,830.	574,840.	106,698.	2,884,286.
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)						1,726,064.
6	Public support. Subtract line 5 from line 4		,				1,158,222.
Sec	ction B. Total Support				 		1,130,222.
Cale begi	ndar year (or fiscal year nning in) >	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4	731,590.	767,328.	703,830.	574,840.	106,698.	2,884,286.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources		;	1,778.	2,548.	965.	5,291.
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) See Part IV				3,383.		3,383.
11	Total support. Add lines 7 through 10		,				2,892,960.
12	Gross receipts from related activ	ities, etc (see inst	ructions)			12	7,186,336.
	First five years. If the Form 990 organization, check this box and	stop here		d, third, fourth, or	fifth tax year as	a section 501(c)(3	3) ▶ □
	tion C. Computation of Pub						
	Public support percentage for 20 Public support percentage from 2		· ·	e II, column (t)).		14	40.0% 55.0%
	33-1/3% support test - 2010. If the	he organization di	d not check the b	ox on line 13, and	the line 14 is 33		neck this box
	33-1/3% support test — 2009. If the	he organization di	d not check a box	on line 13 or 16a			4
	and stop here. The organization of	qualifies as a publ	icly supported or	ganization			▶ []
17 a	10%-facts-and-circumstances termore, and if the organization rethe 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 organization meets the 'facts-and	neets the 'facts-ar -circumstances' t	nd-circumstances est The organiza	' test, check this b ition qualifies as a	ox and stop here publicly supporte	. Explain in Part ed organization	IV how the ▶ □
BAA	Private foundation. If the organiz	auon dio not cned	ik a box on line I	ა, IDa, IDD, I/a, (***		0 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						
Caler	ndar year (or fiscal yr beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include any 'unusual grants')						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose			Î			
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						-
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
ł	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						
(: Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)	,					
	tion B. Total Support						•
	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 Unrelated business taxable income (less section 511 taxes) from businesses			-			
Ŀ	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511			-			
t:	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	·		-			
t 11	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from 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 in line 10b, whether or not the business is	·		-			
11 12	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from 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 in line 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	·		-			
11 12 13	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from 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 in line 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 lins 9, 10c, 11, and 12) First five years. If the Form 990	is for the organization	ation's first, seco	nd, third, fourth, o	fifth tax year as	a section 501(c)(3)	
11 12 13 14	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from 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 in line 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 lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and	stop here		nd, third, fourth, or	fifth tax year as	a section 501(c)(3)	
11 12 13 14 Sec	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from 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 in line 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 lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul	stop here blic Support P	ercentage		fifth tax year as		<u> </u>
11 12 13 14 Sec 15	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from 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 in line 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 lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul	stop here blic Support P 10 (line 8, column	ercentage n (f) divided by lii		fifth tax year as a	15	▶]
11 12 13 14 Sec 15 16	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from 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 in line 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 lins 9, 10c, 11, and 12.) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage from 20.	stop here blic Support P 10 (line 8, column 2009 Schedule A,	ercentage n (f) divided by lii Part III, line 15	ne 13, column (f)).	fifth tax year as		<u> </u>
11 12 13 14 Sec 15 16 Sec	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources of 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 in line 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 lins 9, 10c, 11, and 12). First five years. If the Form 990 organization, check this box and tion C. Computation of Pulpublic support percentage from 20 public support percentage from 20 tion D. Computation of Invitations.	stop here blic Support P 10 (line 8, column 2009 Schedule A, estment Incon	ercentage n (f) divided by lii Part III, line 15 ne Percentage	ne 13, column (f))		15 16	90 96
11 12 13 14 Sec 15 16 Sec	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources of 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 in line 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 lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pull Public support percentage from 2 tion D. Computation of Investment income percentage for 20.	stop here blic Support P 10 (line 8, column 2009 Schedule A, estment Incon or 2010 (line 10c,	ercentage n (f) divided by lift Part III, line 15 ne Percentage column (f) divide	ne 13, column (f)).		15 16	00 00
11 12 13 14 Sec 15 16 Sec 17 18	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources of 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 in line 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 lins 9, 10c, 11, and 12). First five years. If the Form 990 organization, check this box and tion C. Computation of Pull Public support percentage from 20 public support percentage from 20 public support percentage from 20 public support percentage from 21 public support supp	stop here blic Support P 10 (line 8, column 2009 Schedule A, estment Incon or 2010 (line 10c, rom 2009 Schedul the organization	ercentage n (f) divided by lin Part III, line 15 ne Percentage column (f) divide le A, Part III, line did not check the	ne 13, column (f)) d by line 13, column 17 box on line 14, ar	nn (f)) nd line 15 is more	15 16 17 18 than 33-1/3%, and	90 00
11 12 13 14 Sec 15 16 Sec 17 18 19a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from 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 in line 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 lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pullic support percentage for 20 Public support percentage from 2 tion D. Computation of Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment income percentage for Investment Income percentage for Investment Income percentage for Investment Income percentage for Investment Income percentage for Investment Income percentage for Investment Income percentage for Investment Income percentage for Investment Income percentage for Investment Income percentage for Investment Income percentage for Investment Income	stop here blic Support P 10 (line 8, column 2009 Schedule A, estment Incon or 2010 (line 10c, rom 2009 Schedul the organization this box and stop the organization	Part III, line 15 ne Percentage column (f) divide le A, Part III, line did not check the here. The organ	d by line 13, column (f)) box on line 14, and a lization qualifies as	nn (f)) nd line 15 is more s a publicly suppo	15 16 17 18 than 33-1/3%, and rted organization 6 is more than 33-	% % % d line 17 ► □

Schedule A	(Form 990 or 990-EZ) 2010	Center for Reso	urce Solutions	94-3265560	, Page 4
Part IV	Supplemental Informat Part II, line 17a or 17b; (See instructions).	ion. Complete this pa and Part III, line 12.	art to provide the explan Also complete this part	ations required by Part II, line for any additional information.	10;
			· -		
			·		
					
		, 			
					- -
- -				· 	

2010	Sched	ule A, Part	IV - Supplen	nental Inforn	nation	Page 5
Client CRS07		Cente	r for Resource So	lutions		94-3265560
9/29/11	_				···	02 14PM
Part II, Line 10 - Oth	er Income)				
Nature and Source	:e	2010	2009	2008	2007	2006
Miscellaneous			3,383. \$ 3,383.	-		
	Total	\$ 0.	\$ 3,383.	<u> 0.</u> <u>\$</u>	0. \$	0.
						i
						i
		•				

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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.

2010

Open to Public Inspection

OMB No 1545 0047

Employer identification number

Cei	nter for Resource Solutions				94-3265560	
Pa	rt I Organizations Maintaining Dono	or Advised Funds or Oth	er Similar Fun	ds or Acc		te ıf
	the organization answered 'Yes'	to Form 990, Part IV, Iin	e 6.			
		(a) Donor advised	funds	(b) F	unds and other ac	counts
1	Total number at end of year					
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and do funds are the organization's property, subject	nor advisors in writing that the to the organization's exclusiv	e assets held in do e legal control?	onor advised	Yes	No
6	Did the organization inform all grantees, donused only for charitable purposes and not for purpose conferring impermissible private ben	the benefit of the donor or do	ing that grant fund onor advisor, or foi	ds can be any other	Yes	No
Pa	rt II Conservation Easements. Comp	lete if the organization a	nswered 'Yes'	to Form 9	90, Part IV, line	e 7.
1	Purpose(s) of conservation easements held to					
-	Preservation of land for public use (e.g.,			of an historic	ally important land	area
	Protection of natural habitat	•	\vdash		historic structure	
	Preservation of open space					
2	Complete lines 2a through 2d if the organizat last day of the tax year	tion held a qualified conservati	on contribution in	the form of	a conservation eas	sement on the
				- +	leid at the End of t	the Tax Year
á	Total number of conservation easements			2a		
ı	Total acreage restricted by conservation ease	ements		2b		
(Number of conservation easements on a cert	ified historic structure included	(a) nı b	2c		
•	Number of conservation easements included structure listed in the National Register	in (c) acquired after 8/17/06, a	and not on a histor	1C 2d		
3	Number of conservation easements modified, tax year ▶	, transferred, released, extingu	iished, or terminat	ed by the or	ganization during t	he
4	Number of states where property subject to c	onservation easement is locat	ed >	_		
5	Does the organization have a written policy reand enforcement of the conservation easeme	egarding the periodic monitorinate it holds?	ng, inspection, har	ndling of viol	ations, Yes	No
6	Staff and volunteer hours devoted to monitor	ing, inspecting, and enforcing	conservation ease	ments during	g the year	
7	Amount of expenses incurred in monitoring, i	nspecting, and enforcing cons	ervation easemen	ts during the	year	
8	Does each conservation easement reported o 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	in line 2(d) above satisfy the re	equirements of sec	ction	Yes	☐ No
9	In Part XIV, describe how the organization report include, if applicable, the text of the footnote conservation easements	s conservation easements in its to the organization's financial	revenue and expensions that d	se statement, escribes the	and balance sheet, organization's acc	and ounting for
Par	till Organizations Maintaining Colle Complete if the organization ans	ections of Art, Historical wered 'Yes' to Form 990	Treasures, or), Part IV, line (Other Sim 3.	nilar Assets.	
1 a	If the organization elected, as permitted unde art, historical treasures, or other similar asset in Part XIV, the text of the footnote to its fina	is held for public exhibition, ec	ducation, or resear	nue statemer ch in further	nt and balance she ance of public serv	et works of vice, provide,
t	If the organization elected, as permitted unde historical treasures, or other similar assets he following amounts relating to these items	er SFAS 116 (ASC 958), to repeld for public exhibition, educa	ort in its revenue : tion, or research ii	statement ar n furtherance	nd balance sheet we of public service,	orks of art, provide the
	(i) Revenues included in Form 990, Part VIII	, line 1			► \$	
	(ii) Assets included in Form 990, Part X				► \$	
2	If the organization received or held works of a amounts required to be reported under SFAS	art, historical treasures, or othe 116 (ASC 958) relating to the	er similar assets fo se items	or financial g	ain, provide the fol	llowing
а	Revenues included in Form 990, Part VIII, line	e 1			► \$	
ь	Assets included in Form 990, Part X				► \$	

Schedule D (Form 990) 2010 Center 1	or Resour	ce Solutio	ons	94-32	65560 Page 2
Part III Organizations Maintaining					
Using the organization's acquisition, a items (check all that apply)	<u> </u>				
a Public exhibition		d Loan	or exchange programs	;	
b Scholarly research		e Othe	- · · ·		
c Preservation for future generation	s	_			•
4 Provide a description of the organizati Part XIV	on's collections	and explain ho	ow they further the orga	nization's exempt purpo	ose in
5 During the year, did the organization s assets to be sold to raise funds rather	solicit or receive than to be mail	donations of a ntained as part	irt, historical treasures, of the organization's c	or other similar ollection?	Yes No
Part IV Escrow and Custodial Arr 9, or reported an amount of	rangements. on Form 990,	Complete if Part X, line	organization answers	ered 'Yes' to Form	990, Part IV, line
1a is the organization an agent, trustee, included on Form 990, Part X?	custodian, or ot	her intermediar	y for contributions or o	ther assets not	Yes No
b If 'Yes,' explain the arrangement in Pa					
			-		Amount
c Beginning balance				1c	
d Additions during the year				1d	
e Distributions during the year				1e	
f Ending balance				11	
2a Did the organization include an amour	nt on Form 990,	Part X, line 21	?		Yes No
b If 'Yes,' explain the arrangement in Pa					
Part V Endowment Funds. Compl		anization an	swered 'Yes' to Fo	rm 990, Part IV, lin	e 10.
	a) Current year	(b) Prior yea			
1 a Beginning of year balance.					
b Contributions					
c Net investment earnings, gains, and losses			1		
d Grants or scholarships					,
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					Ţ.,
2 Provide the estimated percentage of the	ne year end bala	ance held as			
a Board designated or quasi-endowment	.	8			
b Permanent endowment ►	8				
c Term endowment ►	%				
3a Are there endowment funds not in the organization by:	possession of t	he organization	that are held and adm	inistered for the	Yes No
(i) unrelated organizations					3a(i)
(ii) related organizations					3a(ii)
b If 'Yes' to 3a(ıı), are the related organi	zations listed as	required on S	chedule R?		3b
4 Describe in Part XIV the intended uses					
Part VI Land, Buildings, and Equi					
Description of investment	(a) Cost	or other basis vestment)		(c) Accumulated depreciation	(d) Book value
1a Land		10 - 17			
b Buildings					

1 a Land

b Buildings

c Leasehold improvements

d Equipment
35,877.

e Other

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

1,316.

BAA

Schedule **D** (Form 990) 2010

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)

See Part XIV

	edule D (Form 990) 2010 Center for Resource Solutions	94-3265560	Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1,966,738.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2,104,818.
3	Excess or (deficit) for the year Subtract line 2 from line 1		-138,080.
4	Net unrealized gains (losses) on investments		-
5	Donated services and use of facilities		
6	Investment expenses		
7	Prior period adjustments		
8	Other (Describe in Part XIV)		
9	Total adjustments (net) Add lines 4 through 8		
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		-138,080.
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return	,
	Total revenue, gains, and other support per audited financial statements		,966,738.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
	Net unrealized gains on investments 2a		
	Donated services and use of facilities 2b		
(Recoveries of prior year grants	7	
	Other (Describe in Part XIV)	\dashv \mid	
	Add lines 2a through 2d		
	Subtract line 2e from line 1		, 966, 738.
	Amounts included on Form 990, Part VIII, line 12, but not on line 1		, , , , , , , , , , , , , , , , , , , ,
	Investments expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIV)	 -	
	Add lines 4a and 4b	4c	
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		,966,738.
	t XIII. Reconciliation of Expenses per Audited Financial Statements With Expenses p		, 300, 738.
	Total expenses and losses per audited financial statements		,104,818.
	Amounts included on line 1 but not on Form 990, Part IX, line 25	TEN	,104,010.
	Donated services and use of facilities 2a		
	Prior year adjustments 2b		
	Other losses 2c		
	Other (Describe in Part XIV.)		
	Add lines 2a through 2d		
	Subtract line 2e from line 1	2e	104 010
_	Amounts included on Form 990, Part IX, line 25, but not on line 1:	3 2	,104,818.
4			
	Investments expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIV.) 4a 4b	.	
	Add lines 4a and 4b	4c	
-	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		,104,818.
	XIV Supplemental Information		7201,020.
Comp Part any a	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; 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 compidditional information		2b, rovide
	Part X - FIN 48 Footnote		
	The <u>Internal Revenue Service and the California Franchise Tax Board</u>	<u>have deter</u>	mined
	that the Organization is exempt from federal and state income taxes	<u>under Inte</u>	rnal
	Revenue Code Section 501 (c) (3) and the California Revenue and Tax	ation Code	
	Section 23701(d). The Organization has evaluated its current tax po	sitions_and	has
	concluded that as of December 31, 2010, the Organization does not h	ave_any	
	<u>significant uncertain tax positions for which a reserve would be ne</u>	cessary	

Schedule D (Form 990) 2010 Center for Resource Solutions	94-3265560 Page 5
Part XIV Supplemental Information (continued)	
	•
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545 0047

Department of the Treasury Internal Revenue Service Name of the organization

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.

Employer identification number 104 226550

Center for Resource Solutions 94-3263360
Form 990, Part III, Line 4a - Program Service Accomplishments
CRS_administered the Green-e Energy, Green-e Climate and Green-e Marketplace
certification_programs, and accomplished policy goals that support the development of
sustainable_energy_ Green-e_Energy_provides_consumer_protection_and_standard_setting_
for the voluntary renewable energy market in North America. Green-e Energy worked
with 281 renewable energy sellers selling 111 certified products, and verified 27
million_MWh of certified renewable energy transactions, up 43% from the prior year
The program certified 62% of voluntary market sales volume nationally. CRS, in
cooperation with the Green-e Governance Board, completed stakeholder processes and
updated the Green-e Energy National Standard to Version 2.0, which was released
7/15/10. CRS also began review of the Green-e Energy Code of Conduct and Customer
Disclosure Requirements
Green-e_Climate_is_a_certification_program_that_provides_consumer_protection_and_best
practice_standards_for_the_voluntary_carbon_offset_market Green-e_Climate_certified_
sales increased nearly 30% in the Program's second year- a year when the overall
over-the-counter_offset_market_declined. In 2010 after_stakeholder_consultation,
Green-e_Climate_endorsed_the_Climate_Action_Reserve_(CAR)_under_the_Green-e_Climate
Standard. Green-e Climate also extended eligibility to certain types of solid and
liguid biomass facilities, previously not allowed, after stakeholder consultation
The_diversity of the program increased in 2010, with half of the offset products
certified under Green-e Climate utilizing either VCS or CAR project certification
The program certified products that included reductions from methane capture and
destruction, including at landfills, livestock farms, and coal mines, and renewable
energy, including wind, solar, small-hydro, biomass, and now geothermal, projects
located_in_the_United_States, China, Brazil, and Turkey

Green-e Marketplace works to promote business purchasing of renewable energy.

Eight

Center for Resource Solutions	94-3265560
Form 990, Part III, Line 4a - Program Service Accomplishments	
new participants join the program. The number of products carr	ying the Green-e logo
surpassed 500 in 2010, with many companies expanding use of the	logo to nearly all
product_lines Green-e Marketplace_also introduced_a_new_indus	try-specific program
called "Green-e Marketplace re:print", targeted at the printing	and paper industry.
The program allows companies who use Green-e certified papers a	t Green-e certified
printers the to use the Green-e logo and the claim "Paper Manuf	actured and Printed
Using 100% Renewable Electricity" on their printed collateral	At year end, there
were 60 available paper lines and five printers participating.	Green-e Marketplace
staff worked closely with other certifiers and organizations in	volved in corporate
social responsibility to highlight the importance of renewable	energy use and
integration into certification and supply chain guidelines.	
CRS' policy work to promote sustainable energy achieved several	_notable
accomplishments in 2010, including inclusion of Voluntary Renew	able Energy (VRE) Set
Aside in California draft regulation for cap and trade, the pub	lication of the
Shockproofing Society report, which played a major role in the	public and policy
dialogues about the wisdom of going forward with AB 32 implement	tation, and the use by
the California Air Resources Board (CARB) of the conclusions of	our report Climate
Policy and Economic Growth in California to frame continuing con	nversation_about
future_economic_impacts	
Form 990, Part III, Line 4b - Program Service Accomplishments	
CRS continued to provide overall administration to the China Sus	stainable Energy
Program contract. CRS coordinated an international team of const	ıltants providing
expert assistance to policy makers and organizations working to	develop China's
renewable energy sector. As part of this work, the CRS team cre	eated a report and
accompanying presentation surveying international solar policy	and incentives,
conducted three training workshops in China around integrating a	cenewable energy

At the first board meeting of the year, the members are asked to disclose any

possible conflict of interest by signing an affidavit.

Schedule O (Form 990 or 990-EZ) 2010 Name of the organization	P. Employer identification number
Center for Resource Solutions	94-3265560
Form 990, Part VI, Line 15a - Compensation Review & Approve	al Process for CEO, Exec. Dir., or Top Mgtment
The Organization uses an executive search firm	and surveys in the bay area.
Form 990, Part VI, Line 15b - Compensation Review & Approve	al Process for Officers & Key Employees
The Organization uses an executive search firm	and surveys in the bay area
Form 990, Part VI, Line 19 - Other Organization Documents	Publicly Available
The annual report is published on the website.	

Form **8868**(Rev. January 2011)

December and the Tenner

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545 1709

Department of the Treasury Internal Revenue Service

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

	_
•	X

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 990-1), 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 Center for Resource Solutions 94-3265560 File by the due date for Number, street, and room or suite number. If a P.O. box, see instructions filing your return See 1012 Torney Ave. 2nd Floor instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions San Francisco, CA 94129 03 Enter the Return code for the return that this application is for (file a separate application for each return) **Application** Return Application Return Code Is For Is For Code 01 Form 990 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) Form 8870 12 The books are in the care of Dee Young Telephone No ► 415-561-2100 FAX No ► 415-561-2105 If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, 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 members the extension is for 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 tax year beginning _____, 20 ____, and ending _____, 20 ____ 2 If the tax year entered in line 1 is for less than 12 months, check reason | Initial return Final return

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

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any

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

payments made Include any prior year overpayment allowed as a credit

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax

Change in accounting period

nonrefundable credits. See instructions

0.

0.

0.

3a|\$

3b|\$

Form 886	8 (Rev 1-2011)					Page 2
• If you	are filing for an	Additional (Not Automatic) 3-Mor	nth Extensio	n, complete only Part II and check	this box	P
Note. Only	y complete.Part	II if you have already been grante	d an automa	atic 3-month extension on a previou	usly filed Form 8868	<u></u>
If you	are filing for an	Automatic 3-Month Extension, co	mplete only	Part I (on page 1)		
Part II	Additional (I	Not Automatic) 3-Month Ext	ension of	Time. Only file the original ((no copies needed).	
					Employer identification number	
Type or	1					
print	ype or wint Center for Resource Solutions				94-3265560	
_	Number, street, and room or suite number. If a P.O. box, see instructions					
File by the extended	Crosby & Kaneda, CPAs					
due date for filing the return See instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions.						
	Oakland,	CA 94612-2151				
Enter the l	Return code for	the return that this application is f	or (file a se	parate application for each return)		01
Applicatio	on		Return	Application		Return
ls For		Code	ls For		Code	
Form 990			01			
Form 990-BL		02	Form 1041-A			
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	
			ed an auton	natic 3-month extension on a previ	ously filed Form 8868.	
		Dee Young				
	one No ► <u>41</u> 5			415-561-2105		
	_	s not have an office or place of bu				▶ 📗
		eturn, enter the organization's four				is for the
•	up, check this be		roup, cneck t	his box 🕨 🗌 and attach a list wi	th the names and EINs of	i ali
	the extension is	al 3-month extension of time until	11/15	20 11		
4 I requ	alendar vear	2010 or other tay year beginning		, 20	20	
6 If the	tav vear entere	ed in line 5 is for less than 12 month	ths check re	, 20 , and ending eason Initial return	Final return	-
	Change in accou		mo, criccii ii			•
	_		aver re	spectfully requests add	ditional time to	
				mplete and accurate ta		
ت تدور						
Sa If this	annlication is f	or Form 990-BL, 990-PF, 990-T, 47	720 or 6069	enter the tentative tax less any		
nonre	fundable credit	s. See instructions			8a \$	
b If this	application is f	or Form 990-PF, 990-T, 4720, or 6	069, enter a	ny refundable credits and estimated	d tax	
	ients made Incl Form 8868	ude any prior year overpayment al	lowed as a	credit and any amount paid previou	sly 8b\$	
		at line Oh from line On Include you	r novement v	with this form of recovered by vision		
EFTP:	'S (Electronic Fe	ct line 8b from line 8a Include you ederal Tax Payment System) See	instructions	with this form, it required, by using	8c \$	
				Verification		
Jnder penalties	s of perjury, I declare	that I have examined this form, including according to prepare this form	ompanying sche	dules and statements, and to the best of my known	owledge and belief, it is true.	
orrect, and co	A . A	Soundinged to prepare this form	001		olal	
Signature 🕨	NO821	+ Loulda Title >	CPA	<u> </u>	Date ► 8 8	
BAA			FIFZ0502L	11/15/10	Form 8868 (R	ev 1-2011)