Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

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

Open to Public Inspection

A Fo	x the	2009 calendar year, or tax year beginning and endin	9		
B ch	eck if	Please C Name of organization	D	Employer identific	cation number
-ap	plicable:	USSO IRS CAMPUS TOLERANCE FOUNDATION			
	Address change	label or FORMERLY KNOWN-CAMPUS TRUTH FOUNDATION			
	Name change	type. Doing Business As		05-0	<u>526296</u>
	Initial return	See Number and street (or P.O. box if mail is not delivered to street address) Room	/surte E	Telephone numbe	Г
	Termin- ated	Instruc-C/O MARCELLA ROSEN, 900 5TH AVE 2A		212-	<u> 585-1581</u>
	Amende return	City or town, state or country, and ZIP + 4	G	Gross receipts \$	1,899
	Applica tion	MEW TORK, NI 10021	н(a) Is this a group re	eturn
	pending	F Name and address of principal officer: MARCELLA ROSEN	_	for affiliates?	Yes X No
		900 FIFTH AVENUE, APT 2A, NEW YORK, NY 1	<u>002</u> /н(b) Are all affiliates inc	luded? Yes No
<u>I Ta</u>	x-exe	mpt status: X 501(c) (3		If "No," attach a	list. (see instructions)
J W	ebsite	E: ► CAMPUSTOLERANCE.COM	H(c) Group exemptio	n number 🕨
K Fo	rm of	organization: X Corporation	Year of fo	rmation: 2002 N	A State of legal domicile: N
		Summary			
	1 E	Briefly describe the organization's mission or most significant activities: MISSION	IS T	O FIGHT A	LL
Governance		INTOLERANCE ON COLLEGE CAMPUSES WHETHER ANT			•
Ē	_	Check this box If the organization discontinued its operations or disposed of			
8		Number of voting members of the governing body (Part VI, line 1a)	_	з	
			7	4	
න්		Number of independent voting members of the governing body (Part VI, line 1b) VEE Total number of employees (Part V, line 2a) RECEIVEE	ار، ۔۔۔ را	5	-
Activities		otal number of volunteers (estimate if necessary)	100	6	1
; 등			10. 10	[····	0
₹	ь М	otal gross unrelated business revenue from Part VIII, column (G) line 12AY. 1.8.20 Net unrelated business taxable income from Form 990-T, line 348	100		0
\dashv				Prior Year	Current Year
	8 (Contributions and grants (Part VIII, line 1h)OGDEN_	<u>u</u>	115,741.	1,800
Revenue				113,711.	1,000
<u>§</u>		Program service revenue (Part VIII, line 2g)	 	<969.	> 99
~~		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		<u> </u>	
		Fotal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		114,772.	1,899
\dashv		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	_	114,114.	1,000
}					
_]				·	
Expenses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)			
Ë		Professional fundraising fees (Part IX, column (A), line 11e)	2,320		
꿃		Total fundraising expenses (Part IX, column (D), line 25)	·		
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		<u>55,870.</u>	82,038
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	-	55,870.	82,038
_ 0	19 I	Revenue less expenses. Subtract line 18 from line 12	-	58,902.	<80,139
Net-Assets or Fund Balances			Beginn	ing of Current Year	End of Year
SSE		Total assets (Part X, line 16)	·	127,918.	47,779
≨		Total liabilities (Part X, line 26)	·		4= ===
		Net assets or fund balances. Subtract line 21 from line 20		127,918.	47,779
Pa	rt II:				
©	1	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and stater and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any known	ments, and t wiedge.	o the best of my knowled	ge and belief, it is true, correct,
1	l	M . Ω		1	
.Sign		Macleton		5/14/	10
Here	•	Signature of officer		Date	
	ŀ	MARCELLA ROSEN, PRESIDENT			
2		Type or print name and title			
Paid		Preparer's Date Date	Check of self-	Prepar (see in	er's identifying number structions)
	امدمي	signature JOANNE M. JOHNSON, CPA SOLO	employ	1 '	P00058540
D) [arer's	Firm's name (or PERELSON WEINER LLP	-	EIN ► 13-	3791592
Use (nur a	self-employed), NONE DAG HAMMARSKJOLD PLAZA			
	į	address, and ZIP+4 NEW YORK, NY 10017-2286		Phone no. ▶ 2	12-605-3100
Mary	the IP	S discuss this return with the preparer shown above? (see instructions)		· · · · · · · · · · · · · · · · · · ·	X Yes N

CAMPUS TOLERANCE FOUNDATION

Part IV Checklist of Required Schedules

			Yes	No					
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?								
•	If "Yes," complete Schedule A	1	x						
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X					
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for								
_	public office? If "Yes," complete Schedule C, Part I								
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X					
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and								
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5							
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to								
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х					
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,								
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X					
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete								
	Schedule D, Part III	8		X					
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide								
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X					
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?								
	If "Yes," complete Schedule D, Part V								
11									
	as applicable	11		<u>X</u>					
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	-1 2		700					
	Part VI.	1.3		387					
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	3.	5	₹36 ± <u>1.</u> -\$1 1.					
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	7-7	150	,					
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	15.5	2 7 7 5 T						
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	7 5	197	-12 -1 <i>f</i>					
•	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	1433	14.						
	Part X, line 16? If "Yes," complete Schedule D, Part IX.								
•	● Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.								
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	1,1	, ,	30.24					
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.	1.2.	155.2						
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			15					
	Schedule D, Parts XI, XII, and XIII.	12		X					
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No	1. 12 ² 2		5 ° 4 ° - 3 ° -					
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	1 1	7744	<u> </u>					
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	ļ - · · ·	X					
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X					
Ь	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, Part I	14b	}	X					
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	l	l	٠,,					
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	 	X					
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	16		х					
	located outside the United States? If "Yes," complete Schedule F, Part III								
Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,									
column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I									
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			- v					
40	1c and 8a? If "Yes," complete Schedule G, Part II	18	 	X					
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40		_V					
00	complete Schedule G, Part III	19	 	X					
<u>20</u>	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	ــــــــــــــــــــــــــــــــــــــ	<u>_^</u>					

Form 990 (2009). FORMERLY KNOWN-CAM
Part IV | Checklist of Required Schedules (continued)

01	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the		Yes	No
21	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
~~	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,	 	-	
22		~		v
~	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	_22_		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			l
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			v
	Schedule J	23_		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			ĺ
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	l		37
	Schedule K. If "No", go to line 25	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			1
	any tax-exempt bonds?	24c	ļ	
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	 -	
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
Ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	ļ	!	l
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete		i	ł
	Schedule L, Part I	25b	L	X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV	- '\\- - \\-	3,1-	2 A
	instructions for applicable filing thresholds, conditions, and exceptions):		- 8	1
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
Ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	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		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
•	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		x
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	<u> </u>		
5 5	If "Yes," complete Schedule R, Part V, line 2	35		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	~	1	
30	If "Yes," complete Schedule R, Part V, line 2	36		x
27	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30	 	
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
00		31	t	
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	X.	
	Note. All Form 990 filers are required to complete Schedule O.	1 30	<u> </u>	

Form **990** (2009)

9009). FORMERLY KNOWN-CAMPUS TRUTH FOUNDATION
Statements Regarding Other IRS Filings and Tax Compliance Form 990 (2009).

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	150	~ ((r	
	U.S. Information Returns. Enter -0- if not applicable	0		
b	Enter the number of Forms W-2G included in line 1a. Enter -0 if not applicable	0		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable garning	7		5
	(gambling) winnings to prize winners?	1c		
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	15.	T474	/, E.
	filed for the calendar year ending with or within the year covered by this return	o 💥	-, ,	e ^d , '-,
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	1.15	1,1	: ;;
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time dunng the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
ь	If "Yes," enter the name of the foreign country: ▶	- :		1
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and	2.1.	- P	- "
	Financial Accounts.			7.
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	- 3,77	2 kg * t _s *	, <u> </u>
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services		}	•
	provided to the payor?	7a		X
Ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7ъ		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	17	,	特色
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	30. * 3	.4,	·-,
	benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 g		<u> </u>
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		ļ
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the	100		
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings	15.	5	-75-
	at any time during the year?	. 8	E .	St. 17
9	Sponsoring organizations maintaining donor advised funds.		- Ju	7 1
а	Did the organization make any taxable distributions under section 4966?	9a	ļ	<u> </u>
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	The Second	3-2-	5 ° € £
а	Initiation fees and capital contributions included on Part VIII, line 12	12.5	2.	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	4.2	-	1.2
11	Section 501(c)(12) organizations. Enter:	1	1	1 1/2
а	Gross income from members or shareholders	⊣ ,₹<.,	(3-)	5.3
Ь	, i	7,71	(c vi ''	17.5
	amounts due or received from them.)	, 71 , t	- `	150
	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	1	7.7	\$ 3.7°

05-0526296

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

sec	uon A. Governing Body and Management									
	1 1		Yes	No						
1a	Enter the number of voting members of the governing body 1a		• 5.	F2314						
b	Enter the number of voting members that are independent		7 -	ı - ´						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1 - 3	1,52	3.5						
	officer, director, trustee, or key employee?	2	X							
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			l						
	of officers, directors or trustees, or key employees to a management company or other person?	3		<u>X</u>						
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X						
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X						
6										
7a	7a Does the organization have members, stockholders, or other persons who may elect one or more members of the									
	governing body?									
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	100	7.7	, v _z						
	by the following:	E 2	1.	115						
а	The governing body?	8a	X							
h	Each committee with authority to act on behalf of the governing body?	8b	X							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the									
J	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		x						
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	, -	1							
-	tion D. 1 Onotoo (Mis Section & requests information about policies not required by the internal nevenue Gode.)		Yes	No						
100	Does the organization have local chapters, branches, or affiliates?	10a	103	X						
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	104								
D		10b								
	and branches to ensure their operations are consistent with those of the organization?	11	x	_						
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11		17.10						
11A			\$ X.7	!						
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	 	<u>X</u>						
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b								
_	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	۳.	<u> </u>							
C		12c								
40	in Schedule O how this is done	13	\vdash	x						
13	Does the organization have a written whistleblower policy?	14		X						
14	Does the organization have a written document retention and destruction policy?	14	7							
15	Did the process for determining compensation of the following persons include a review and approval by independent		1 2 2 3	3,						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	1 '-	1, 4	C 141						
а	The organization's CEO, Executive Director, or top management official	15a	-	X						
b	Other officers or key employees of the organization	15b	- (-)-7	X						
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)	24.		ļ. ~						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	7-1-1-	137.0							
	taxable entity dunng the year?	16a	1	X						
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation		-	7/ =						
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's	- '- '- '- '- '- '- '- '- '- '- '- '- '-	1 18 5	1.7						
	exempt status with respect to such arrangements?	16b	<u> </u>	L						
Sec	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed ►NY									
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	e 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, a	and fin	ancial							
	statements available to the public.									
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	ation:]	_							
	MARCELLA ROSEN - 212-585-1581									
_	900 FIFTH AVENUE, NEW YORK, NY 10021									
		Forn	990	(2009)						

Form 990 (2009) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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. Use Schedule J-2 if additional space is needed.

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

X Check this box if the organization did (A)	(B)				(C)			(D)	(E)	(F)	
Name and Title	Average			Position				Reportable	Reportable	Estimated	
	hours	(cl	(check all tha			hat apply)		compensation	compensation	amount of	
	per week	sctor						from the	from related organizations	other compensation	
	Week	or dir				ated		organization	(W-2/1099-MISC)	from the	
		ustee	truste		93	upens		(W-2/1099-MISC)	,	organization	
		Individual trustee or director	Institutional trustee	_	mploy	st con	=			and related	
		를	Instit	Officer	Key employee	Highest compensated employee	Former			organizations	
MARCELLA ROSEN											
PRESIDENT	25.00	Х		X	L.			0.	0.	_0.	
AMY RUBENSTEIN											
DIRECTOR		X		L				0.	0.	0.	
AARON DANIELS		ļ									
DIRECTOR		X	<u> </u>					0.	0.	0.	
JUDY DANIELS								0.	0.	0.	
DIRECTOR		X	-	-				0.	0.	<u> </u>	
RICHARD GOLDBERG DIRECTOR		x						0.	0.	0.	
ELLEN LEVY		1			\vdash				- 0.	0.	
DIRECTOR	Ì	x						0.	0.	0.	
MARV WALDMAN		 ^^			\vdash						
DIRECTOR		x			ļ			0.	0.	0	
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932007 02-04-10

FORMERLY KNOWN-CAMPUS TRUTH FOUNDATION

Part VII Section A. Officers, Directors, Tru	ıstees, Key Eı	mplo	yee	s, a	nd F	ligh	est	Compensated Employ	ees (continued)	
(A) Name and title	(B) Average			(C Posi	itıon		1	(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	Individual trustee or director	Institutional trustee	all		Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
		<u>.</u>								
		! 	-							
						_	-			
					-					
		<u> </u>								
							-			
					-					
		<u> </u>				L				
2 Total number of individuals (including but in compensation from the organization)	not limited to ti	hose	liste	ed a	bov	e) w	ho r	eceived more than \$100	L	0.
3 Did the organization list any former officer line 1a? If "Yes," complete Schedule J for:								nighest compensated e		Yes No
4 For any individual listed on line 1a, is the s and related organizations greater than \$15	um of reportab	ole c	omp	ensa	atıor	n an	d ot	her compensation from		4 X
5 Did any person listed on line 1a receive or the organization? If "Yes," complete Scheen	•					•		-		5 X
1 Complete this table for your five highest co	ompensated in	dep	ende	ent c	cont	ract	ors 1	that received more than	\$100,000 of comp	ensation from
the organization. NONE (A) Name and business	s address				-			(B) Description of	services	(C) Compensation
				·						
				·						
2 Total number of independent contractors		not l	 imite	ed to		_	iste	d above) who received r	nore than	
\$100,000 in compensation from the organ	zation					0			[T.	

	1990 () irt VII	FORMERLY KNOWN-CAMPUS Statement of Revenue	TRUTH FOU	NDATION	U5-U5262	296 Page 9
Pa		Statement of Revenue	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above 1a 1b 1c 1d 1d 1,800.				
Sep		Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f	1,800.		A	
Program Service Revenue		Business Code				
α.		All other program service revenue		,	4.	- , , - 4 , 5 .
	3 4 5	Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal	99.			99.
	b c d	Gross Rents Less: rental expenses Rental income or (loss) Net rental income or (loss)				
	b	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss) Net garn or (loss)				
Other Revenue	8 a	Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a a b				
	9 a	Net income or (loss) from fundraising events Gross income from gaming activities. See Part IV, line 19			12	
	10 a	Net income or (loss) from garning activities Gross sales of inventory, less returns and allowances				
	-	Net income or (loss) from sales of inventory			16 1	1-1114
	11 a		<u> </u>			г , Б,
		All other revenue			. ex. (1 = 1)	9 74
		Total. Add lines 11a-11d Total revenue. See instructions.	1,899	 	+	99
9320 02-0	12 009 04-10	Total revenue. Occ man denotis.	1 1000	<u> </u>	<u>-1</u>	Form 990 (2009

Form 990 (2009) ·

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). (D) Fundraising (A) Total expenses (B) Program service Do not include amounts reported on lines 6b, Management and 7b, 8b, 9b, and 10b of Part VIII. expenses expenses general expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 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 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 7 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) Other employee benefits Payroll taxes 10 Fees for services (non-employees): Management 200 200 ь 14,000 14,000 Accounting Lobbying ؙؙڂڂڮڒۼۺڰ۩ ؙؙؙؙؙؙؙؙؙؙڰڂڰڒڿۼۺڰۺ Professional fundraising services. See Part IV, line 17 Investment management fees Other ______. g Advertising and promotion 12 Office expenses..... 13 Information technology 14 15 16 Occupancy 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Payments to affiliates 21 Depreciation, depletion, and amortization 22 23 Other expenses. Itemize expenses not covered 24 above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) ... 67,334 67,334 RESEARCH EXPENSES 375 OFFICE & CLERICAL EXPEN 375 69. 69 BANK CHARGES 60. MISCELLANEOUS EXPENSES 60 d e All other expenses 0. 67,334 14,704 82,038 Total functional expenses. Add lines 1 through 24f 25 Joint costs. Check here
if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

932010 02-04-10

Part	X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing	36,734.	1	
		Savings and temporary cash investments	91,184.	2	47,779.
		Pledges and grants receivable, net		3	
ì		Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key		.50	
		employees, and highest compensated employees. Complete Part II		5.	等是自己的特别
		of Schedule L		5	
i	6	Receivables from other disqualified persons (as defined under section	1 3 . 2 + 1 3 . 3 . 4 . 5 . 5 . 5 . 5 . 5 . 5 . 5 . 5 . 5	72	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			
		Part II of Schedule L		6	
\$	7	Notes and loans receivable, net		7	
Assets		Inventories for sale or use		8_	
₹		Prepaid expenses and deferred charges		9	
1	I0a	Land, buildings, and equipment: cost or other		74.5	
		basis. Complete Part VI of Schedule D 10a		** *	
	Ь	Less: accumulated depreciation		10c	
1	11	Investments - publicly traded securities		11	
1	12	Investments - other securities. See Part IV, line 11		12	
1	13	Investments - program-related. See Part IV, line 11		13	
1	14	Intangible assets		14	
1	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	127,918.	16	47,779.
1	17	Accounts payable and accrued expenses		_17	
1	18	Grants payable		18	
1	19	Deferred revenue		19	
2	20	Tax-exempt bond liabilities		20	
S 2	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	3\
Liabilities	22	Payables to current and former officers, directors, trustees, key employees,	700	, <u></u> '	
룝		highest compensated employees, and disqualified persons. Complete Part II	The formation of the first	1-1-	
- 1		of Schedule L		22	
2	23	Secured mortgages and notes payable to unrelated third parties		23	
l -	24	Unsecured notes and loans payable to unrelated third parties		24	
I -	25	Other liabilities. Complete Part X of Schedule D		25	
- 2	26	Total liabilities. Add lines 17 through 25	0.	26	0.
		Organizations that follow SFAS 117, check here and complete		17.75	
Se		lines 27 through 29, and lines 33 and 34.			1 " " 1 3 4 5 5 7 5 6 6 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
a la	27	Unrestricted net assets	1	27	
8 2	28	Temporarily restricted net assets		28	-
[[2	29	Permanently restricted net assets	200 N. W. Salar	29	16 1 FA 4 12 156 A 15 25 F E
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here	是我们就想到"是"的。 第15章		高大学院设置
ō ø	00	complete lines 30 through 34.	جي. ۽ "اِي "-" _{دي} "جي "عرب" آيي." دي. آ		
set	30	Capital stock or trust principal, or current funds		+	0.
As	31	Paid-in or capital surplus, or land, building, or equipment fund	127,918.		47,779.
Ş S	32	Retained earnings, endowment, accumulated income, or other funds			47,779.
_ { `	33	Total net assets or fund balances	127,918.		47,779.
	<u>34</u>	Total liabilities and net assets/fund balances	14/,310.	J_34	Form 990 (2009)

Form 990 (2009)

CAMPUS TOLERANCE FOUNDATION

Form 990 (2009) FORMERLY KNOWN-CAMPUS TRUTH FOUNDATION 05-0526296 Page 12

	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			
	•		Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other	7.75	2	ر ک
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		47. ±	
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b		X
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			
	review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	71.7	15	7
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a	. 47-	1 5 7 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	η
	consolidated basis, separate basis, or both:	133	3 3	13.
	Separate basis Consolidated basis Both consolidated and separate basis		100	12.0
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			
	Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
_	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3ь		
		Form	990 (2009)

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2009
Open to Public Inspection

Name of the organization

CAMPUS TOLERANCE FOUNDATION

Employer identification number

RMERLY KNOWN-CAMPUS TRUTH FOUNDATION 05-0526296

Lairi	neason	or Fubile Charl	ity Status (Ali organiz	ations mu	si complet	e uns pan	.) See inst	ructions.			
The organ		•	pecause it is: (For lines 1	_	•	•	*				
-1	•		s, or association of churc		ribed in se	ction 170	(b)(1)(A)(i)	•			
2			0(b)(1)(A)(ii). (Attach Sci								
3 ├┤	•	•	tal service organization of								
4 📖			pperated in conjunction	with a hos	pital descr	ibed in se	ction 170	(b)(1)(A)(iii). Enter ti	ne hospital's name,	
	city, and stat							nontal cali	dogodbo	dia	
5	_	-	benefit of a college or un	liversity ov	wiled or op	erated by	a govern	nentai onii	describe	G III	
6 🗀		(b)(1)(A)(iv). (Comple to, or local government	ent or governmental unit	describer	l in coetie	n 170/bV:	VAVA				
7 🕱			ent of governmental drift erves a substantial part (•• •• •	r from the	general r	ublic described in	
, (44)	_	b)(1)(A)(vi). (Complet	-	or its supp	or nom a	governme	me dine o	, nom the	general p	abile described in	
в 🗀			ection 170(b)(1)(A)(vi). (Complete	Part II.)						
9 🔲	=		eives: (1) more than 33 1			om contn	butions, m	embershij	o fees, an	d gross receipts from	n
	•	•	nctions - subject to certa					-		-	
	income and u	ınrelated business ta	axable income (less sect	ion 511 ta	x) from bu	sinesses a	cquired b	y the orga	nızation a	fter June 30, 1975.	
	See section	509(a)(2). (Complete	Part III.)								
10 🖳	-	•	perated exclusively to te	-	-			-			
11 📖			perated exclusively for th								
			tions described in section). See sec	tion 509(a	a)(3). Che	ck the box that	
			organization and comple		_						
	a L Type i				e III - Func	-	_		لــا ۵	Type III - Other	
e 📖	-		t the organization is not								
		-	han one or more publicly ten determination from t		_				(a)(I) or s	section 509(a)(z).	
f		rganization, check th			-					٢	\neg
g		•	nis box					 owing pers			
9			rectly controls, either al							Yes N	0
			upported organization?								_
			n described in (i) above?							1 1 1	_
			person described in (i) o								_
h			about the supported on								
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	e of supported ganization	(ii) EIN	in col. (i) la	organization sted in your document?	organizacon in cor		(i) organization in col.		(vii) Amount of support		
			(see instructions))	Yes	No	Yes	No	Yes	No	<u></u>	
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LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

CAMPUS TOLERANCE FOUNDATION

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Schedule A (Form 990 or 990-EZ) 2009 FORMERLY KNOWN-CAMPUS TRUTH FOUNDATION 05-0526296 Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

Sec	Section A. Public Support											
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(ь) 2006	(c) 2007	(ർ) 2008	(e) 2009	(f) Total					
	Gifts, grants, contributions, and											
	membership fees received. (Do not											
	include any "unusual grants.")	68,216.	100,580.	33,500.	115,741.	1,800.	319,837.					
2	Tax revenues levied for the organ-				•							
_	ization's benefit and either paid to											
	or expended on its behalf											
_												
3	The value of services or facilities											
	furnished by a governmental unit to											
	the organization without charge	60 216	100,580.	33,500.	115,741.	1,800.	319,837.					
_	Total. Add lines 1 through 3	68,216.	100,200.	33,300.	113,741.	1,000.	319,037.					
5	The portion of total contributions	the Assessment				, , ,						
	by each person (other than a			ير عن من الله الماري								
	governmental unit or publicly											
	supported organization) included				(支持)(為7							
	on line 1 that exceeds 2% of the	3 (3) (3)										
	amount shown on line 11,		- 2 ,		선교(함께)							
	column (f)		4 () 10 () 1 () 1 () 1 () 1 () 1 () 1	1 H 4 15 15 1	- 15	F ' - ' _ ' _ '	220,776.					
6	Public support. Subtract line 5 from line 4	أعدالكم المدارة والمدارة		1 3 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Gentler British	-, -, -, -, -, -, -, -, -, -, -, -, -, -	99,061.					
Sec	ction B. Total Support				r							
Cale	endar year (or fiscal year beginning in)	(a) 2005	(ь) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total					
7	Amounts from line 4	68,216.	100,580.	33,500.	115,741.	1,800.	319,837.					
8	Gross income from interest,					!						
	dividends, payments received on											
	securities loans, rents, royalties											
	and income from similar sources		286.	1,696.	1,136.	99.	3,217.					
9	Net income from unrelated business											
_	activities, whether or not the											
	business is regularly carried on											
10	Other income. Do not include gain											
10	or loss from the sale of capital											
	assets (Explain in Part IV.)				1							
		1. (注意 清 点。	7至此19 11 年		10 PT 10 PM	3-2-2	323,054.					
11			- '	<u> </u>		12	32370311					
12	Gross receipts from related activities First five years. If the Form 990 is fo	•		d fourth or fifth to								
13	-					11 30 1(0)(3)	ightharpoonup					
Sa	organization, check this box and stoction C. Computation of Pub			······································	· · · · · · · · · · · · · · · · · · ·	··· ··· <u>,-</u> ··· · · .	<u></u>					
_				noluma (fi)		14	30.66 %					
	Public support percentage for 2009 (35.39 %					
	Public support percentage from 2008											
16a	a 33 1/3% support test - 2009.If the c						.					
	stop here. The organization qualifies											
	33 1/3% support test - 2008. If the c						► 37					
	and stop here. The organization qua											
17:	a 10% -facts-and-circumstances tes											
	and if the organization meets the "fac											
	meets the "facts-and-circumstances"											
1	o 10% -facts-and-circumstances tes											
	more, and if the organization meets t											
	organization meets the "facts-and-cir											
18	Private foundation. If the organization	on did not check a	box on line 13, 16	Sa, 16b, 17a, or 17	b, check this box	and see instruction	<u>ns ▶</u>					
					Cab	adula A /Earm 00	n or 990-F71 2009					

932022 02-08-10

Pa	edule A (Form 990 or 990-EZ) 2009 rt III Support Schedule for C	Organizations	Described in S	Section 509(a	a)(2) (Complete only	of you checked the b	Page 3 ox on line 9 of Part I.)
	tion A. Public Support						_
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(ъ) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and				1		
	membership fees received. (Do not					ł	
	ınclude any "unusual grants.")				_		
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
_	ization's benefit and either paid to		}			-	
	or expended on its behalf					Ì	į
5	The value of services or facilities				1		
Ŭ	furnished by a governmental unit to		1				
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						-
10	3 received from disqualified persons					1	
h	Amounts included on lines 2 and 3 received						
u	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the					1	
_	amount on line 13 for the year	· · · · · · · · · · · · · · · · · · ·			<u> </u>		
	Add lines 7a and 7b	,	30 155-1	C 12 7 25 75 7	=1;	· ·	
	Public support (Subtract line 7c from line 6) rtion B. Total Support			*,	1.74		<u> </u>
		4 > 0005		4 1 0007	1 , 2 2000	1 4 1 0000	(D.T.A.)
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
_	Amounts from line 6				 		
_	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income						
10a	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						
10a	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						
10a	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						
10 a	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.)						
10 a b c c 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.)	the organization	s first second this	1 fourth or fifth	tay year as a secti	on 501(c)(3) organi	zation
10 a b c c 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 lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo	_			-	–	
10aa b c c 111 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.)				-	–	
10a b c c 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 lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here	ic Support Pe	rcentage	· · · · · · · · · · · · · · · · · ·	<u> </u>	· · · · · · · · · · · · · · · · · · ·	▶□
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10a b c 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. 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 lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public support percentage from 2008 ction D. Computation of Inversal 1/3% support tests - 2009. If the	lic Support Pe line 8, column (f) d 3 Schedule A, Part stment Incom 2008 (line 10c, colur 2008 Schedule A, e organization did r	ircentage livided by line 13, c III, line 15 III Percentage III divided by line Part III, line 17 Inot check the box of	e 13, column (f))	ne 15 is more than	15 16 17 18 33 1/3%, and line	% % % 17 is not
10a b c c 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 lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for check this box and stop here. Stion C. Computation of Public support percentage from 2008 ction D. Computation of Inventivestment income percentage from 33 1/3% support tests - 2009. If the more than 33 1/3%, check this box as	lic Support Pe line 8, column (f) d 3 Schedule A, Part stment Incom 2009 (line 10c, colur 2008 Schedule A, e organization did r and stop here. The	ircentage livided by line 13, c III, line 15 III Percentage IIII, line 17 IIII, line 17 IIII line 17 IIII control check the box of organization qualification in the control check the check the check the control check the che	e 13, column (f)) on line 14, and liries as a publicly	ne 15 is more than supported organiz	15 16 17 18 33 1/3%, and line	% % % 17 is not
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Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions.

2009
Open to Public
Inspection

Name of the organization

CAMPUS TOLERANCE FOUNDATION

FORMERLY KNOWN-CAMPUS TRUTH FOUNDATION

Employer identification number 05-0526296

Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
	Aggregate contributions to (during year)		
	Aggregate grants from (during year)		
	Aggregate value at end of year		
	Did the organization inform all donors and donor advisors in		sed funds
	are the organization's property, subject to the organization's	-	
	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of		
	• •		
Par			
	Purpose(s) of conservation easements held by the organization		
•	Preservation of land for public use (e.g., recreation or p		storically important land area
	Protection of natural habitat		tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contribution in the form	of a conservation easement on the last
_	day of the tax year.		Total Control Validity Cabonicing Control and Last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		
h	Total acreage restricted by conservation easements		
c	Number of conservation easements on a certified historic str		
d	Number of conservation easements included in (c) acquired		
3	Number of conservation easements modified, transferred, re		
Ü	year >	included, extriguished, or terminated by tr	o organization during the tax
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the per		
J	violations, and enforcement of the conservation easements		
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above		
Ü	and section 170(h)(4)(B)(ii)?	- · · · · · · · · · · · · · · · · · · ·	
9	In Part XIV, describe how the organization reports conservat		
3	include, if applicable, the text of the footnote to the organiza	•	
	conservation easements.	alon 5 manola statements that Geograps	o and organization o addodnang to
Par	t III Organizations Maintaining Collections o	of Art, Historical Treasures, or (Other Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116, no	ot to report in its revenue statement and l	balance sheet works of art, historical
_	treasures, or other similar assets held for public exhibition, e		
	the footnote to its financial statements that describes these	·	, , , ,
b	If the organization elected, as permitted under SFAS 116, to		nce sheet works of art, historical treasures,
_	or other similar assets held for public exhibition, education, of		
	these items:		3
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
			> \$
2	If the organization received or held works of art, historical tre		
~	the following amounts required to be reported under SFAS 1	•	and proting
а	Revenues included in Form 990, Part VIII, line 1		> \$
_	Assets included in Form 990, Part X		
b	Assets moluded in Form 330, Part A		

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 932051 02-01-10

Schedule D (Form 990) 2009

	t III Organizations Maintaining Coll							ar Asset	S (conti	nued)
	Using the organization's acquisition, accession,									
	(check all that apply):				3		_			
а	Public exhibition	d	. Пь	an or exc	hange program	ıs				
b	Scholarly research	e								
c	Preservation for future generations	·								
	Provide a description of the organization's collections	ctions and explai	n how they	, further t	he organization	's exe	mot ouro	ose in Part	XIV.	
	During the year, did the organization solicit or re									
	to be sold to raise funds rather than to be maint								Yes	☐ No
	t IV. Escrow and Custodial Arrange									
-	reported an amount on Form 990, Part X		cto ii oiga	iizduoii w	nomence res		555, 1	2, 1, 1, m. io 1	, o.	
12	Is the organization an agent, trustee, custodian		diary for co	ntribution	ns or other asse	ets not	included			
	on Form 990, Part X?								Yes	□ No
	If "Yes," explain the arrangement in Part XIV and									•
D	ir res, explain the analigement in rat XIV all	a complete the re	morning tan	J.C.					Amount	
_	Paginning halance						1c	_	7 4110 4110	<u> </u>
	Beginning balance Additions during the year									
										-
	Distributions during the year								<u> </u>	
f O-	Ending balance								Yes	□ No
		1 990, Fart A, lifte	211						1 162	140
	If "Yes," explain the arrangement in Part XIV. t V Endowment Funds. Complete if the	o organization as	newored "V	oe" to Ec	m 900 Part IV	/ line 1	<u> </u>			
- ai			T		(c) Two years			veare hack	(a) Four	years back
	 	a) Current year	(b) Pric	уеаг	(C) TWO years		(d) Tillee	years back	(E) 1 Out	- 7
	Beginning of year balance				944 334	3 73	3. (1.175)	77. Shi (a. 1)	*17-2-2-17	\= , \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	Contributions		 		2 8 7 28 7 28 27 28 27 28 28 28 28 28 28 28 28 28 28 28 28 28	, '' 		****	2,	
C	Net investment earnings, gains, and losses		ļ				<u>-,, -</u>	<u> </u>	1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -	**************************************
d	Grants or scholarships	•	 		- 3			<u> </u>) - '+- '	<u> </u>
е	Other expenditures for facilities				10.25	·	調り組み	13 111 a 243 3 44		3. 1 ± 3 , 4
	and programs	 -	 		\$ 17.75 \ \times 2.33	5 *	•		11.0	#25 (6 1 76 1 7 2 1)
f	Administrative expenses		 			7 % 7 % 0		- / 5/, 5	7 c 7	
g	End of year balance		L		1/2 2/1 1/12		.,,	1	5 °, 7'	
2	Provide the estimated percentage of the year en	nd balance held a								
а	Board designated or quasi-endowment		%							
b	Permanent endowment >	%								
	Term endowment >%						_	_		
3а	Are there endowment funds not in the possessi	ion of the organiz	zation that	are held a	and administere	ed for t	the organ	zation	ſ	
	by:								[- m	Yes No
	(i) unrelated organizations									
	(ii) related organizations								3a(ii)	
þ	If "Yes" to 3a(ii), are the related organizations lis								3b	
4	Describe in Part XIV the intended uses of the or									
Pa	rt VI· Investments - Land, Buildings,									
	Description of investment	(a) Cost or o			t or other		ccumulat		(d) Boo	k value
		basis (invest	ment)	Dasis	(other)		preciation			
	Land					F = 1.2.2.				
	Buildings									
	Leasehold improvements									
d	Equipment	ļ								
_	Other									
<u> Tota</u>	I. Add lines 1a through 1e. (Column (d) must equ	ıal Form 990, Par	t X, columi	n (B), line	10(c).)	*******		<u>. </u>		0,
										0001 0000

Schedule D (Form 990) 2009

932053 02-01-10

CAMPUS TOLERANCE FOUNDATION FORMERLY KNOWN-CAMPUS TRUTH FOUNDATION Schedule D (Form 990) 2009 05-0526296 Page 4 Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements 1,899. Total revenue (Form 990, Part VIII, column (A), line 12) 1 2 Total expenses (Form 990, Part IX, column (A), line 25) 82,038. Excess or (deficit) for the year. Subtract line 2 from line 1 <80,139.> 3 3 Net unrealized gains (losses) on investments 4 Donated services and use of facilities 5 5 Investment expenses 6 7 Prior period adjustments 7 Other (Describe in Part XIV.) 8 Total adjustments (net). Add lines 4 through 8 9 <80,139·: Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 10 Part XII | Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12: Net unrealized gains on investments **2**a Donated services and use of facilities **2**b Recoveries of pnor year grants 2c C Other (Describe in Part XIV.) Add lines 2a through 2d **2e** Subtract line 2e from line 1 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1: `--Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIV.) 4b Add lines 4a and 4b c 40 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: - 3, a Donated services and use of facilities b Prior year adjustments 2h Other (Describe in Part XIV.) 2d Add lines 2a through 2d 2e Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIV.) Add lines 4a and 4b 4c Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 Part XIV Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part Y line 2: Part YI line 8: Part YII lines 2d and 4h; and Part YIII lines 2d and 4h. Also complete this part to provide any additional information

7, mile 2, 1 at 71, mile 5, 1 at 711, miles 2a and 15, and 1 at 711, miles 2a and 15. 7156 5511 piets and part to provide any additional						
					<u>-</u>	
<u> </u>						

Schedule D (Form 990) 2009

SCHEDULE O

Supplemental Information to Form 990

Department of the Treasury
Internal Revenue Service

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

Attach to Form 990.



CAMPUS TOLERANCE FOUNDATION Employer identification number Name of the organization 05-0526296 FORMERLY KNOWN-CAMPUS TRUTH FOUNDATION FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: AMERICAN, ANTI-GAY, ANTI-WOMEN OR ANTI ANY OTHER GROUP. FORM 990, PART VI, SECTION A, LINE 2: AARON DANIELS AND JUDY DANIELS HUSBAND AND WIFE. FORM 990, PART VI, SECTION B, LINE 11: A COPY OF A DRAFT FORM 990 WAS PROVIDED TO THE BOARD OF DIRECTORS FOR REVIEW AND COMMENT. THE PRESIDENT PERFORMED THE FINAL REVIEW, APPROVED AND SIGNED THE TAX RETURN. FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON WRITTEN REQUEST.