

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

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

OMB No. 1545-0047

2009Open to Public
Inspection

A For the 2009 calendar year, or tax year beginning		and ending	
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization	
		El Centro de la Raza	
		Doing Business As	
		Number and street (or P.O. box if mail is not delivered to street address)	Room/suite
		2524 16th Avenue South	
City or town, state or country, and ZIP + 4		E Telephone number	
Seattle, WA 98144-5104		91-0899927	
F Name and address of principal officer: David Gasca		G Gross receipts \$ 5,195,110.	
same as C above		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	
		If "No," attach a list. (see instructions)	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c) (3) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶	
J Website: ▶ www.ElCentroDeLaRaza.org			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1972 M State of legal domicile: WA	

Part I Summary				
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>Services to enable Latino & other low-income persons to develop self-sustainability.</u>			
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	3	Number of voting members of the governing body (Part VI, line 1a)	14	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	14	
	5	Total number of employees (Part V, line 2a)	138	
	6	Total number of volunteers (estimate if necessary)	1006	
	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	0.	
	7b	Net unrelated business taxable income from Form 990-T, line 34	0.	
Revenue			Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	5,602,895.	4,565,865.
	9	Program service revenue (Part VIII, line 2g)	369,484.	331,132.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	17,897.	27,494.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<130,312.>	156,853.
Expenses	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,859,964.	5,081,344.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,845,453.	1,705,742.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	2,117,814.	2,370,214.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 342,310.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	703,231.	864,394.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,666,498.	4,940,350.
	19	Revenue less expenses. Subtract line 18 from line 12	1,193,466.	140,994.
	Net Assets or Fund Balances			Beginning of Current Year
20		Total assets (Part X, line 16)	4,968,519.	5,413,771.
21		Total liabilities (Part X, line 26)	1,333,884.	1,868,383.
	22	Net assets or fund balances. Subtract line 21 from line 20	3,634,635.	3,545,388.

Part II Signature Block				
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.				
Sign Here	Signature of officer		Date	
	David Gasca, Treasurer			
Type or print name and title				
Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4	08/04/10		
	Watson & McDonnell CPAs, PLLC 600 University Street, Suite 2828 Seattle, WA 98101-3301			EIN ▶ Phone no. ▶ (206) 624-2380

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

Part III Statement of Program Service Accomplishments

- 1 Briefly describe the organization's mission: See Schedule O for Continuation
El Centro de la Raza is a voice and hub of the Latino community for
services and advocacy and provides strong child and youth programs and
comprehensive services that build self-sufficiency. El Centro helps
children, youth, adults and families gain the skills and access the
- 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No
 If "Yes," describe these new services on Schedule O.
- 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
 If "Yes," describe these changes on Schedule O.
- 4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

See Schedule O for Continuation(s)

- 4a (Code:) (Expenses \$ 1,038,040. including grants of \$) (Revenue \$ 325,282.)
Child & Youth Services: Investing in our children and their future, El
Centro provides an array of bilingual, multicultural child and youth
services to the local community. Through these services:

- Infants and young children meet development milestones.
- Young children are prepared to enter kindergarten.
- Latina/o teens become self-reliant as teen parents caring for their children.
- Educationally at-risk students make academic progress.
- Parents and guardians participate in children's learning.
- Students develop and strengthen skills and/or habits that support academic success.

- 4b (Code:) (Expenses \$ 2,624,226. including grants of \$ 1,701,529.) (Revenue \$ 5,850.)
Human Services: Seeking to address immediate aspects of human suffering
such as hunger, healthcare and homelessness, our Frances Martinez
Community Service Center provides diverse, bilingual human services.
Through these services:

- People meet their basic food needs.
- People transitioning out of homelessness secure permanent housing.
- Older adults maintain the highest possible quality of life.
- Families and individuals are able to access basic health insurance plans.

- 4c (Code:) (Expenses \$ 151,194. including grants of \$ 3,747.) (Revenue \$)
Education & Skill Building Programs: El Centro seeks to promote
self-sufficiency and empowerment through bilingual education and skill
building initiatives. Through these services:

- People retain jobs.
- Low and moderate-income families are able to purchase a home.
- Homeowners are able to avoid foreclosure.
- Families and individuals improve financial literacy.
- People acquire and improve English language and literacy skills.
- Individuals become US Citizens.

- 4d Other program services. (Describe in Schedule O.)
 (Expenses \$ 26,334. including grants of \$ 466.) (Revenue \$)

4e Total program service expenses ► \$ 3,839,794.

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)? <i>If "Yes," complete Schedule A</i>	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? <i>If "Yes," complete Schedule C, Part I</i>	3	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>	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? <i>If "Yes," complete Schedule C, Part III</i>	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? <i>If "Yes," complete Schedule D, Part I</i>	6	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8 X	
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	X
11 Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	11 X	
• 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>		
• 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>		
• Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i>		
• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i>		
• Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>		
• 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? <i>If "Yes," complete Schedule D, Part X.</i>		
12 Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i>	12	X
12A Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional</i>	12A X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>	14b	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>	15	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>	16	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	17	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? <i>If "Yes," complete Schedule G, Part II</i>	18 X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20 Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>	20	X

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? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>	X	
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		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? <i>If "Yes," complete Schedule L, Part II</i>		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? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		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? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	X	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	X	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		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? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	5	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	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	138	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country: _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		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?		
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?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	
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	
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	

Form 990 (2009)

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.

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body	14	
b Enter the number of voting members that are independent	14	
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a material diversion of the organization's assets?		X
6 Does the organization have members or stockholders?		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?		X
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?		
11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
11A 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	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	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	X	
13 Does the organization have a written whistleblower policy?	X	
14 Does the organization have a written document retention and destruction policy?	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	X	
b Other officers or key employees of the organization	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?		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 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 **WA**

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 for public inspection. Indicate how you make these available. Check all that apply.
☒ Own website ☒ Another's website ☒ 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.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **El Centro de la Raza - (206)957-4605**
2524 16th Avenue South, Seattle, WA 98144-5104

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 -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's **current** key employees. See instructions for definition of "key 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 the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
David Gasca President	3.00	X		X				0.	0.	0.
Rita Zawaideh Secretary	3.00	X		X				0.	0.	0.
Jefferey M. Middleton Treasurer	3.00	X		X				0.	0.	0.
Roxana Amaral Director	3.00	X						0.	0.	0.
Madrienne Salgado Director	3.00	X						0.	0.	0.
Ricardo Garcia Director	3.00	X						0.	0.	0.
Christina Garcia-Valdez Director	3.00	X						0.	0.	0.
Norma Guerrero Director	3.00	X						0.	0.	0.
Victoria Kill Director	3.00	X						0.	0.	0.
Gloria Marin Director	3.00	X						0.	0.	0.
Urbano Santos Director	3.00	X						0.	0.	0.
William Smith Director	3.00	X						0.	0.	0.
Brenda Williams Director	3.00	X						0.	0.	0.
Estela Ortega Executive Director	50.00			X				64,730.	0.	0.
Roberto Maestas Executive Director	40.00			X				53,491.	0.	0.
Ramon Soliz Vice President	3.00							0.	0.	0.

Part VII

1b Total	▶	118,221.	0.	0.
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the organization? If "Yes," complete Schedule J for such person	5	X
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Section B. Independent Contractors

NONE

2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization	0
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Part VII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns	1a 337,903.				
	b	Membership dues	1b				
	c	Fundraising events	1c 66,782.				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e 2180847.				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 1980333.				
	g	Noncash contributions included in lines 1a-1f: \$	540,627.				
	h	Total. Add lines 1a-1f		4565865.			
Program Service Revenue	2 a	Child Care Tuition	Business Code 611710	325,282.	325,282.		
	b	Management Fees	531310	5,850.	5,850.		
	c					
	d					
	e					
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		331,132.			
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		27,494.		
4		Income from investment of tax-exempt bond proceeds					
5		Royalties					
6 a		Gross Rents	(i) Real 237403. (ii) Personal				
b		Less: rental expenses	82,303.				
c		Rental income or (loss)	155100.				
d		Net rental income or (loss)		155,100.			155,100.
7 a		Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
b		Less: cost or other basis and sales expenses					
c		Gain or (loss)					
d		Net gain or (loss)					
8 a		Gross income from fundraising events (not including \$ 66,782. of contributions reported on line 1c). See Part IV, line 18	a 31,463.				
b		Less: direct expenses	b 31,463.				
c		Net income or (loss) from fundraising events		0.			
9 a		Gross income from gaming activities. See Part IV, line 19	a				
b		Less: direct expenses	b				
c		Net income or (loss) from gaming activities					
10 a		Gross sales of inventory, less returns and allowances	a				
b	Less: cost of goods sold	b					
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue			Business Code				
11 a	Miscellaneous Income	900099	1,753.			1,753.	
b						
c						
d	All other revenue						
e	Total. Add lines 11a-11d		1,753.				
12	Total revenue. See instructions.		5081344.	331,132.	0.	184,347.	

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).

Do not include amounts reported on lines 6b, 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	1,705,742.	1,705,742.		
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	118,221.	92,911.	19,705.	5,605.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,743,368.	1,370,132.	290,575.	82,661.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	62,764.	54,152.	6,942.	1,670.
9 Other employee benefits	268,986.	223,837.	38,246.	6,903.
10 Payroll taxes	176,875.	140,635.	28,460.	7,780.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	31,283.	8,361.	6,476.	16,446.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	169,370.	43,871.	39,208.	86,291.
12 Advertising and promotion	4,727.	4,667.		60.
13 Office expenses	274,332.	117,493.	49,403.	107,436.
14 Information technology	1,266.	710.	191.	365.
15 Royalties				
16 Occupancy	80,131.	19,648.	60,190.	293.
17 Travel	43,132.	24,205.	18,465.	462.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	497.	29.	468.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	169,288.	21,512.	147,776.	
23 Insurance	30,916.		30,916.	
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a Special Event Expenses	24,529.			24,529.
b Fees and Licenses	24,292.	10,099.	12,875.	1,318.
c Miscellaneous	3,869.	792.	2,859.	218.
d Training and Development	3,544.	523.	2,878.	143.
e Employee Recognition	3,218.	475.	2,613.	130.
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	4,940,350.	3,839,794.	758,246.	342,310.
26 Joint costs. Check here <input type="checkbox"/> 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 ...				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	871,312.	2	1,082,451.
	3 Pledges and grants receivable, net	388,890.	3	351,171.
	4 Accounts receivable, net	968.	4	12,505.
	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)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	1,737.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 5,656,781.		
	b Less: accumulated depreciation	10b 1,810,225.		
		3,612,567.	10c	3,846,556.
	11 Investments - publicly traded securities	5,793.	11	9,083.
	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	88,989.	15	110,268.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	4,968,519.	16	5,413,771.	
Liabilities	17 Accounts payable and accrued expenses	279,699.	17	584,781.
	18 Grants payable		18	
	19 Deferred revenue	957.	19	1,897.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	1,053,228.	23	1,281,430.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D	0.	25	275.
	26 Total liabilities. Add lines 17 through 25	1,333,884.	26	1,868,383.
	Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.		
27 Unrestricted net assets		3,534,635.	27	3,435,703.
28 Temporarily restricted net assets		100,000.	28	109,685.
29 Permanently restricted net assets			29	
Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
30 Capital stock or trust principal, or current funds			30	
31 Paid-in or capital surplus, or land, building, or equipment fund			31	
32 Retained earnings, endowment, accumulated income, or other funds			32	
33 Total net assets or fund balances		3,634,635.	33	3,545,388.
34 Total liabilities and net assets/fund balances		4,968,519.	34	5,413,771.

Part XI Financial Statements and Reporting

1 Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____

If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

b Were the organization's financial statements audited by an independent accountant?

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?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:

☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

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.

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

Form 990 (2009)

Department of the Treasury
Internal Revenue Service

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

El Centro de la Raza

Employer identification number
91-0899927

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

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ 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 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts 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 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to 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 ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f ☐ If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box _____

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 (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 organization(s).

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

[illegible]

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	3,471,486.	3,634,435.	5,121,951.	5,602,895.	4,511,627.	22,342,394.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	3,471,486.	3,634,435.	5,121,951.	5,602,895.	4,511,627.	22,342,394.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						22,342,394.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	3,471,486.	3,634,435.	5,121,951.	5,602,895.	4,511,627.	22,342,394.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	239,092.	298,173.	265,209.	257,886.	264,897.	1,325,257.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	10,982.	51,141.	<86,374.>	34,314.	1,603.	11,666.
11 Total support. Add lines 7 through 10						23,679,317.
12 Gross receipts from related activities, etc. (see instructions)					12	1,616,871.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	94.35 %
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	91.26 %
16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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.)**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

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

OMB No. 1545-0047

2009

Name of the organization

El Centro de la Raza

Employer identification number

91-0899927

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)(3) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

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

Special Rules

- ☒ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ _____

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

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

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

Name of organization	Employer identification number
El Centro de la Raza	91-0899927

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	City of Seatte - Human Services 700 5th Avenue, Stuite 5800 Seattle, WA 98124	\$ 1,150,942.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	Department of Community Trade and Economic Development 128 10th Avenue SW, PO Box 425 Olympia, WA 98504	\$ 392,468.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	DHHS - Social Service 700 5th Avenue, Stuite 5800 Seattle, WA 98104	\$ 318,859.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	State of WA Department of Social & Health Services PO Box 45845 Olympia, WA 98504	\$ 266,960.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5	Northwest Harvest 711 Cherry Street Seattle, WA 98104	\$ 168,515.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6	Food Lifeline 1702 NE 150th Street Shoreline, WA 98155	\$ 239,309.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

El Centro de la Raza91-0899927**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	<u>Sea Mar</u> <u>8720 14th Avenue S</u> <u>Seattle, WA 98108</u>	\$ <u>1,171,276.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

El Centro de la Raza91-0899927**Part II Noncash Property** (see instructions)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>5</u>	<u>Food</u> _____ _____ _____	\$ <u>168,515.</u>	<u>05/01/09</u>
<u>6</u>	<u>Food</u> _____ _____ _____	\$ <u>239,309.</u>	<u>01/01/09</u>
	_____ _____ _____ _____	\$ _____	_____
	_____ _____ _____ _____	\$ _____	_____
	_____ _____ _____ _____	\$ _____	_____
	_____ _____ _____ _____	\$ _____	_____

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.

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization

El Centro de la Raza

Employer identification number

91-0899927

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
☐ Preservation of land for public use (e.g., recreation or pleasure) ☐ Preservation of an historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (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 art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:
- a Revenues included in Form 990, Part VIII, line 1
- b Assets included in Form 990, Part X

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a ☒ Public exhibition
 b ☐ Scholarly research
 c ☐ Preservation for future generations

- d ☐ Loan or exchange programs
 e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☒ No

Part IV Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ☐ %
 b Permanent endowment ☐ %
 c Term endowment ☐ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? ☐ Yes ☐ No

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,100,489.		1,100,489.
b Buildings		4,023,329.	1,374,058.	2,649,271.
c Leasehold improvements				
d Equipment		532,963.	436,167.	96,796.
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ☐ 3,846,556.

Schedule D (Form 990) 2009

Part 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	5,081,344.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	4,940,350.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	140,994.
4	Net unrealized gains (losses) on investments	4	3,290.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	<233,531.>
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	<230,241.>
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	<89,247.>

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	5,209,583.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	3,290.
b	Donated services and use of facilities	2b	67,175.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	82,303.
e	Add lines 2a through 2d	2e	152,768.
3	Subtract line 2e from line 1	3	5,056,815.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	24,529.
c	Add lines 4a and 4b	4c	24,529.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	5,081,344.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	5,065,299.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	67,175.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	82,303.
e	Add lines 2a through 2d	2e	149,478.
3	Subtract line 2e from line 1	3	4,915,821.
4	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	4a	
b	Other (Describe in Part XIV.)	4b	24,529.
c	Add lines 4a and 4b	4c	24,529.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	4,940,350.

Part XIV Supplemental Information

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

Part III, line 4: El Centro maintains paintings and murals to educate,

enrich, and invest in the local Latino community.

Part XII, Line 2d - Other Adjustments:

Rental Expenses: 82303.

Part XII, Line 4b - Other Adjustments:

Special Event Indirect Expenses: 24529.

Part XIV Supplemental Information *(continued)*

Part XIII, Line 2d - Other Adjustments:

Rental Expenses: 82303.

Part XIII, Line 4b - Other Adjustments:

Indirect Special Event Expenses: 24529.

Department of the Treasury
Internal Revenue Service

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.**
▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions.**

OMB No. 1545-0047

2009

Open To Public Inspection

Name of the organization

El Centro de la Raza

Employer identification number

91-0899927

Part I

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a ☐ Mail solicitations
- b ☐ Internet and email solicitations
- c ☐ Phone solicitations
- d ☐ In-person solicitations
- e ☐ Solicitation of non-government grants
- f ☐ Solicitation of government grants
- g ☐ Special fundraising events

- 2 a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☐ Yes☐ No

- b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total						

Total

- 3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

	(a) Event #1 Auction Banquet	(b) Event #2	(c) Other events None	(d) Total events (add col. (a) through col. (c))
	(event type)	(event type)	(total number)	
Revenue				
1 Gross receipts	98,245.			98,245.
2 Less: Charitable contributions	66,782.			66,782.
3 Gross income (line 1 minus line 2)	31,463.			31,463.
Direct Expenses				
4 Cash prizes				
5 Noncash prizes				
6 Rent/facility costs				
7 Food and beverages	31,463.			31,463.
8 Entertainment	300.			300.
9 Other direct expenses	10,887.			10,887.
10 Direct expense summary. Add lines 4 through 9 in column (d)				(42,650)
11 Net income summary. Combine line 3, column (d), and line 10				<11,187.>

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue				
1 Gross revenue				
Direct Expenses				
2 Cash prizes				
3 Noncash prizes				
4 Rent/facility costs				
5 Other direct expenses				
6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7 Direct expense summary. Add lines 2 through 5 in column (d)				()
8 Net gaming income summary. Combine line 1, column (d), and line 7				

9 Enter the state(s) in which the organization operates gaming activities: _____

a Is the organization licensed to operate gaming activities in each of these states? _____

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? _____

b If "Yes," explain: _____

11 Does the organization operate gaming activities with nonmembers? _____

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? _____

	Yes	No
9a		
10a		
11		
12		

13 Indicate the percentage of gaming activity operated in:

- a** The organization's facility **13a** %
- b** An outside facility **13b** %

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ►

Address ►

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? **15a**

- b** If "Yes," enter the amount of gaming revenue received by the organization ► \$ and the amount of gaming revenue retained by the third party ► \$

c If "Yes," enter name and address of the third party:

Name ►

Address ►

16 Gaming manager information:

Name ►

Gaming manager compensation ► \$

Description of services provided ►

☐ Director/officer☐ Employee☐ Independent contractor**17** Mandatory distributions:

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? **17a**
- b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization

El Centro de la Raza

Employer identification number
91-0899927

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed. ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance

2 Enter total number of section 501(c)(3) and government organizations

3 Enter total number of other organizations

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

Schedule I (Form 990) 2009

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Human & Emergency Services	22884	1,248,403.	452,688.FMV		Food

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Schedule I, Part I, Line 2: El Centro de la Raza maintained statistical information documenting the income level and household size of all people served during 2009 as required by HUD loans passed through the City of Seattle.

El Centro has a contract with the Health Care Authority of the State of Washington to sponsor enrollees of the Authority's Basic Health Plan whose income level is below 125 percent of the federal income guidelines and who live in certain areas of the State. El Centro has agreed to submit the

Part IV Supplemental Information

entire premium amount for sponsored enrollees and their dependents on a
monthly basis.

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

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

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**Open To Public
Inspection**

Name of the organization

El Centro de la Raza

Employer identification number

91-0899927

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No
	Roberto Maestas	Vehicle lease paid by El Centro de la Raza	X	

- 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____
- 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.

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

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
Total ▶ \$ _____										

Part III Grants or Assistance Benefiting Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No

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

Schedule L (Form 990 or 990-EZ) 2009

See Schedule O for Schedule L Continuations

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

► **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
► **Attach to Form 990.**

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization

El Centro de la Raza

Employer identification number

91-0899927

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory	X	3	452,688.	FMV
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (<u>Auction Items</u>)	X	319	87,939.	FMV
26 Other ► (.....)				
27 Other ► (.....)				
28 Other ► (.....)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgment

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If "Yes," describe in Part II.

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

	Yes	No
30a		X
31		X
32a		X
33		

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

Schedule M (Form 990) 2009

SCHEDULE O

(Form 990)

Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990**Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No. 1545-0047

2009Open to Public
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Name of the organization

El Centro de la Raza

Employer identification number

91-0899927

Form 990, Part III, Line 1, Description of Organization Mission:

resources to lead fulfilled lives and achieve a greater degree of economic self-sufficiency. This is accomplished through the provision of a unique blend of services and advocacy that together result in stronger, more effective programs.

Form 990, Part III, Line 4a, Program Service Accomplishments:

-Identify, alleviate, and meet the needs of at-risk pregnant women.

Form 990, Part III, Line 4d, Other Program Services:

Community Building & Development: El Centro believes that only through civic involvement, grassroots organizing, and political and social activism will our community be able to effectively address the profound contradictions facing our world. We unite communities of all races, genders, ages and classes to fight for civil and human rights both locally and globally.

Expenses \$ 26334. including grants of \$ 466. Revenue \$ 0.

Form 990, Part VI, Section B, line 11: The Board of Directors reviews and approves the 990 before it is filed each year.

Form 990, Part VI, Section B, Line 12c: The Board of Directors and Internal Leadership Team reviews and signs a conflict of interest policy on an annual basis. The policies are also listed on our web site.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

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2009

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Inspection

Name of the organization

El Centro de la Raza

Employer identification number
91-0899927

Form 990, Part VI, Section B, Line 15: Human Resources has developed a
formal wage/salary program and salary is set using salary surveys and
internal equity.

Form 990, Part VI, Section C, Line 19: Our web page, www.Guidestar.org,
and upon request.

Schedule L, Part I, Excess Benefit Transactions:

(a) Name of Person: Roberto Maestas

(b) Description of Transaction: Vehicle lease paid by El Centro for the
benefit of the Executive Director. The lease ended in 2009 and was not
renewed by the organization.

(c) Corrected? = Yes

Name of the organization

El Centro de la Raza

Employer identification number
91-0899927

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

[illegible]

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
ECR - 94-312454	Owns and manages two				
2524 16th Avenue South	single-family residences				
Seattle, WA 98144	for low-income tenants	Washington	501(c)(3)	7	
North Beacon Hill Housing Initiative	Developing, operating and				
Association - 91-1681667, 2524 16th Avenue	maintaining housing units				
South, Seattle, WA 98144	in the Beacon Hill area	Washington	501(c)(3)	11	

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

Schedule R (Form 990) 2009

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.)**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest (iii) royalties or (iv) rent from a controlled entity		<input checked="" type="checkbox"/> 1a
b Gift, grant, or capital contribution to other organization(s)		<input checked="" type="checkbox"/> 1b
c Gift, grant, or capital contribution from other organization(s)		<input checked="" type="checkbox"/> 1c
d Loans or loan guarantees to or for other organization(s)		<input checked="" type="checkbox"/> 1d
e Loans or loan guarantees by other organization(s)		<input checked="" type="checkbox"/> 1e
f Sale of assets to other organization(s)		<input checked="" type="checkbox"/> 1f
g Purchase of assets from other organization(s)		<input checked="" type="checkbox"/> 1g
h Exchange of assets		<input checked="" type="checkbox"/> 1h
i Lease of facilities, equipment, or other assets to other organization(s)		<input checked="" type="checkbox"/> 1i
j Lease of facilities, equipment, or other assets from other organization(s)		<input checked="" type="checkbox"/> 1j
k Performance of services or membership or fundraising solicitations for other organization(s)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> 1k
l Performance of services or membership or fundraising solicitations by other organization(s)		<input checked="" type="checkbox"/> 1l
m Sharing of facilities, equipment, mailing lists, or other assets	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> 1m
n Sharing of paid employees	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> 1n
o Reimbursement paid to other organization for expenses		<input checked="" type="checkbox"/> 1o
p Reimbursement paid by other organization for expenses	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> 1p
q Other transfer of cash or property to other organization(s)		<input checked="" type="checkbox"/> 1q
r Other transfer of cash or property from other organization(s)		<input checked="" type="checkbox"/> 1r

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of other organization(s)	(b) Transaction type (a-r)	(c) Amount involved
(1) <u>Nothing Over \$50,000</u>		<u>0.</u>
(2)		
(3)		
(4)		
(5)		
(6)		

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Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	Buildings														
113	Install Railing	03/16/92	SL	15.00		H16	655.				655.	655.		0.	655.
114	Fire sprinkler in room 209	06/30/92	SL	15.00		H16	373.				373.	373.		0.	373.
115	Lighting in Gallery	07/07/92	SL	15.00		H16	2,781.				2,781.	2,780.		0.	2,780.
116	Maestas' Office Fd Bk Esl	10/01/92	SL	15.00		H16	16,256.				16,256.	16,256.		0.	16,256.
117	Water Heater	11/11/92	SL	15.00		H16	742.				742.	741.		0.	741.
118	Basement Bathroom Remodeling	11/18/92	SL	15.00		H16	2,000.				2,000.	2,000.		0.	2,000.
119	Forklift Fence Cage	12/05/95	SL	15.00		H16	250.				250.	219.		17.	236.
120	Community Design Works	03/25/98	SL	15.00		H16	401.				401.	268.		27.	295.
121	Siders & Byers Associates	04/08/98	SL	15.00		H16	1,500.				1,500.	1,000.		100.	1,100.
122	City of Seattle	05/06/98	SL	15.00		H16	721.				721.	464.		48.	512.
123	Nowicki & Associates	06/19/98	SL	15.00		H16	875.				875.	534.		58.	592.
124	Environmental Works	07/10/98	SL	15.00		H16	673.				673.	404.		45.	449.
125	Environmental Works	07/31/98	SL	15.00		H16	52.				52.	30.		3.	33.
126	Clayton Group Services	07/31/98	SL	15.00		H16	448.				448.	269.		30.	299.
127	A.E.S. Inc.	08/19/98	SL	15.00		H16	1,200.				1,200.	680.		80.	760.
128	Triple D Construction	08/21/98	SL	15.00		H16	59,407.				59,407.	33,004.		3,960.	36,964.
129	Nowicki & Associates	08/28/98	SL	15.00		H16	320.				320.	177.		21.	198.

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130	Siders & Byers Associates	09/11/98	SL	15.00		HY16	6,920.				6,920.	3,844.		461.	4,305.
131	Triple D Construction	09/11/98	SL	15.00		HY16	30,000.				30,000.	16,667.		2,000.	18,667.
132	Triple D Construction	10/02/98	SL	15.00		HY16	21,827.				21,827.	11,641.		1,455.	13,096.
133	Environmental Works	10/09/98	SL	15.00		HY16	31.				31.	16.		2.	18.
134	Environmental Works	11/09/98	SL	15.00		HY16	62.				62.	32.		4.	36.
135	Triple D Construction	11/09/98	SL	15.00		HY16	224.				224.	115.		15.	130.
136	Triple D Construction	12/01/98	SL	15.00		HY16	10,281.				10,281.	5,026.		685.	5,711.
137	Environmental Works	12/01/98	SL	15.00		HY16	1,273.				1,273.	623.		85.	708.
138	Triple D Construction-unfinished work	12/31/98	SL	15.00		HY16	1,000.				1,000.	870.		67.	937.
139	E1 Centro Project Mgt-Steve Erickson Pay	12/31/98	SL	15.00		HY16	3,993.				3,993.	2,465.		266.	2,731.
140	Environmental Works	03/10/98	SL	15.00		HY16	157.				157.	106.		10.	116.
141	Environmental Works	05/04/99	SL	15.00		HY16	140.				140.	90.		9.	99.
142	Environmental Works	05/04/99	SL	15.00		HY16	23.				23.	21.		2.	23.
143	City of Seattle	08/27/99	SL	15.00		HY16	860.				860.	516.		57.	573.
144	Environmental Works	09/01/99	SL	15.00		HY16	265.				265.	179.		18.	197.
145	Environmental Works	09/02/99	SL	15.00		HY16	18.				18.	16.		1.	17.
146	Environmental Works	11/16/99	SL	15.00		HY16	82.				82.	49.		5.	54.
147	Nowicki & Associates	12/29/99	SL	15.00		HY16	639.				639.	388.		43.	431.

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148	Control Systems-Mechanical Improvements	01/31/01	SL	15.00	HY16		30.				30.	16.		2.	18.
149	Control Systems-Mechanical Improvements	02/06/01	SL	15.00	HY16		1,050.				1,050.	553.		70.	623.
150	Control Systems-Mechanical Improvements	03/09/01	SL	15.00	HY16		420.				420.	219.		28.	247.
151	Control Systems-Mechanical Improvements	03/06/01	SL	15.00	HY16		48.				48.	25.		3.	28.
152	Control Systems-Mechanical Improvements	03/31/01	SL	15.00	HY16		209.				209.	108.		14.	122.
153	Control Systems-Mechanical Improvements	05/10/01	SL	15.00	HY16		330.				330.	168.		22.	190.
154	Control Systems-Mechanical Improvements	06/08/01	SL	15.00	HY16		158.				158.	80.		11.	91.
155	Control Systems-Mechanical Improvements	06/19/01	SL	15.00	HY16		330.				330.	166.		22.	188.
156	Control Systems-Mechanical Improvements	07/10/01	SL	15.00	HY16		315.				315.	157.		21.	178.
157	Control Systems-Mechanical Improvements	07/12/01	SL	15.00	HY16		454.				454.	225.		30.	255.
158	Control Systems-Mechanical Improvements	09/05/01	SL	15.00	HY16		420.				420.	205.		28.	233.
159	Control Systems-Mechanical Improvements	10/23/01	SL	15.00	HY16		1,933.				1,933.	926.		129.	1,055.
160	Control Systems-Mechanical Improvements	11/14/01	SL	15.00	HY16		155.				155.	73.		10.	83.
161	Control Systems-Mechanical Improvements	12/05/01	SL	15.00	HY16		663.				663.	312.		44.	356.
162	Control Systems-Mechanical Improvements	12/20/01	SL	15.00	HY16		2,521.				2,521.	1,181.		168.	1,349.
163	Control Systems-Mechanical Improvements	12/31/01	SL	15.00	HY16		149.				149.	70.		10.	80.
164	Control Systems-Mechanical Improvements	12/31/01	SL	15.00	HY16		210.				210.	98.		14.	112.
165	Control Systems-Mechanical Improvements	12/31/01	SL	15.00	HY16		12,601.				12,601.	5,880.		840.	6,720.

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166	Control Systems-Mechanical Improvements	12/31/01	SL	15.00	HY16		32,883.				32,883.	15,345.		2,192.	17,537.
167	Air Return System	06/01/02	SL	15.00	HY16		147,767.				147,767.	64,853.		9,851.	74,704.
168	Driveway Improvements	06/01/02	SL	15.00	HY16		18,570.				18,570.	8,150.		1,238.	9,388.
169	Windows project	10/01/02	SL	15.00	HY16		14,324.				14,324.	5,968.		955.	6,923.
170	Master plan	12/31/02	SL	15.00	HY16		6,658.				6,658.	2,664.		444.	3,108.
171	Room 201 improvements	12/31/02	SL	15.00	HY16		2,780.				2,780.	1,111.		185.	1,296.
172	Environmental Works Master plan	08/31/03	SL	15.00	HY16		2,881.				2,881.	1,024.		192.	1,216.
173	Synergy Windows Project	06/30/03	SL	15.00	HY16		3,838.				3,838.	1,408.		256.	1,664.
174	SME Inc Electrical Upgrade Room 200	01/16/03	SL	15.00	HY16		2,666.				2,666.	1,059.		178.	1,237.
175	SME Inc Renovations Rooms 213 and 209A	02/06/03	SL	15.00	HY16		666.				666.	258.		44.	302.
176	Synergy Windows Project	01/30/03	SL	15.00	HY16		18,410.				18,410.	7,261.		1,227.	8,488.
177	Environmental Works Master plan	04/30/03	SL	15.00	HY16		19.				19.	7.		1.	8.
178	Environmental Works Windows Project	04/30/03	SL	15.00	HY16		11.				11.	5.		1.	6.
179	Synergy Windows Project	01/01/03	SL	15.00	HY16		18,409.				18,409.	7,363.		1,227.	8,590.
180	Environmental Works Master plan	06/30/03	SL	15.00	HY16		941.				941.	345.		63.	408.
181	Environmental Works Windows Project	07/23/03	SL	15.00	HY16		19.				19.	6.		1.	7.
182	Synergy Windows Project	06/30/03	SL	15.00	HY16		24,524.				24,524.	8,992.		1,635.	10,627.
183	Environmental Works Master plan	11/20/03	SL	15.00	HY16		206.				206.	70.		14.	84.

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184	Environmental Works Master plan	11/24/03	SL	15.00	HY16		4,129.				4,129.	1,399.		275.	1,674.
185	ECO Compliance Asbestos Survey for Boiler	07/23/03	SL	15.00	HY16		745.				745.	270.		50.	320.
186	Lux Design-Estela's New Office	12/31/03	SL	15.00	HY16		2,500.				2,500.	834.		167.	1,001.
187	Costigan Construction-Estela's New Of	12/31/03	SL	15.00	HY16		5,785.				5,785.	1,929.		386.	2,315.
188	Environmental Works-Air Return Close out	02/28/04	SL	15.00	HY16		334.				334.	107.		22.	129.
189	Salvador Silva Room 304	05/15/04	SL	15.00	HY16		135.				135.	42.		9.	51.
190	Salvador Silva Room 304	05/15/04	SL	15.00	HY16		1,421.				1,421.	439.		95.	534.
191	SME Room 304	05/15/04	SL	15.00	HY16		2,560.				2,560.	790.		171.	961.
192	Lowe's Business Room 304	05/15/04	SL	15.00	HY16		197.				197.	60.		13.	73.
193	Wells Fargo Room 304	05/15/04	SL	15.00	HY16		47.				47.	14.		3.	17.
194	Home Depot Room 304	05/15/04	SL	15.00	HY16		341.				341.	106.		23.	129.
195	Salvador Silva Room 304	05/15/04	SL	15.00	HY16		561.				561.	172.		37.	209.
196	Home Depot Room 304	05/15/04	SL	15.00	HY16		1,082.				1,082.	333.		72.	405.
197	Wells Fargo Room 304	05/15/04	SL	15.00	HY16		2,718.				2,718.	838.		181.	1,019.
198	Salvador Silva Room 304	05/15/04	SL	15.00	HY16		652.				652.	200.		43.	243.
199	Lowe's Business Room 304	05/15/04	SL	15.00	HY16		43.				43.	14.		3.	17.
200	Home Depot Room 304	05/15/04	SL	15.00	HY16		162.				162.	50.		11.	61.
201	Emerald Aire Room 304	05/15/04	SL	15.00	HY16		1,850.				1,850.	570.		123.	693.

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202	Environmental Works-Conference Center	07/05/05	SL	15.00	HY16		1,556.				1,556.	364.		104.	468.
203	Environmental Works-Conference Center	07/13/05	SL	15.00	HY16		150.				150.	35.		10.	45.
204	Environmental Works-Conference Center	08/23/05	SL	15.00	HY16		428.				428.	95.		29.	124.
205	Choons Painting-Conference Center	08/30/05	SL	15.00	HY16		612.				612.	136.		41.	177.
206	Choons Painting-Conference Center	08/30/05	SL	15.00	HY16		1,838.				1,838.	409.		123.	532.
207	Peter Hardwood Floors-Conference Center	09/28/05	SL	15.00	HY16		1,376.				1,376.	299.		92.	391.
208	Peter Hardwood Floors-Conference Center	10/10/05	SL	15.00	HY16		1,170.				1,170.	250.		78.	328.
209	All City Fence-Perimeter Fence	11/30/04	SL	15.00	HY16		6,350.				6,350.	1,728.		423.	2,151.
210	Environmental Works	12/31/04	SL	15.00	HY16		7,516.				7,516.	2,004.		501.	2,505.
211	Environmental Works	12/31/04	SL	15.00	HY16		5,456.				5,456.	1,456.		364.	1,820.
212	ECO Compliance	12/31/04	SL	15.00	HY16		1,540.				1,540.	411.		103.	514.
213	Environmental Works	12/31/04	SL	15.00	HY16		5,453.				5,453.	1,455.		364.	1,819.
214	Environmental Works	12/31/04	SL	15.00	HY16		500.				500.	133.		33.	166.
215	ECO Compliance	12/31/04	SL	15.00	HY16		972.				972.	260.		65.	325.
216	Environmental Works	12/31/04	SL	15.00	HY16		11,579.				11,579.	3,088.		772.	3,860.
217	Environmental Works	12/31/04	SL	15.00	HY16		1,151.				1,151.	307.		77.	384.
218	Emerald Aire	12/31/04	SL	15.00	HY16		4,298.				4,298.	1,147.		287.	1,434.
219	Environmental Works	12/31/04	SL	15.00	HY16		1,200.				1,200.	320.		80.	400.

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220	Environmental Works	02/28/05	SL	15.00		HY16	1,268.				1,268.	265.		85.	350.
221	Environmental Works	02/28/05	SL	15.00		HY16	1,169.				1,169.	244.		78.	322.
222	Environmental Works	03/31/05	SL	15.00		HY16	619.				619.	128.		41.	169.
223	Environmental Works	04/21/05	SL	15.00		HY16	5,501.				5,501.	1,147.		367.	1,514.
224	Emerald Aire	04/28/05	SL	15.00		HY16	3,699.				3,699.	771.		247.	1,018.
225	Environmental Works	05/20/05	SL	15.00		HY16	1,530.				1,530.	319.		102.	421.
226	Environmental Works	06/30/05	SL	15.00		HY16	1,750.				1,750.	365.		117.	482.
227	Environmental Works	07/20/05	SL	15.00		HY16	2,086.				2,086.	434.		139.	573.
228	Buchanan General Contracting	07/25/05	SL	15.00		HY16	17,128.				17,128.	3,569.		1,142.	4,711.
229	Buchanan General Contracting	09/21/05	SL	15.00		HY16	55,527.				55,527.	11,569.		3,702.	15,271.
230	Buchanan General Contracting	09/30/05	SL	15.00		HY16	116,500.				116,500.	24,271.		7,767.	32,038.
231	Environmental Works	10/11/05	SL	15.00		HY16	5,267.				5,267.	1,097.		351.	1,448.
232	Environmental Works	10/31/05	SL	15.00		HY16	7,003.				7,003.	1,459.		467.	1,926.
233	ECO Compliance	10/31/05	SL	15.00		HY16	1,524.				1,524.	318.		102.	420.
234	Environmental Works	12/31/05	SL	15.00		HY16	2,502.				2,502.	522.		167.	689.
235	Environmental Works	12/31/05	SL	15.00		HY16	1,400.				1,400.	291.		93.	384.
236	Buchanan General Contracting	12/31/05	SL	15.00		HY16	43,401.				43,401.	9,041.		2,893.	11,934.
237	Environmental Works	12/31/05	SL	15.00		HY16	1,964.				1,964.	409.		131.	540.

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238	Buchanan General Contracting	12/31/05	SL	15.00	HY16		13,616.				13,616.	2,837.		908.	3,745.
239	Buchanan General Contracting	12/31/05	SL	15.00	HY16		9,622.				9,622.	2,004.		641.	2,645.
240	Buchanan General Contracting	12/31/05	SL	15.00	HY16		13,024.				13,024.	2,713.		868.	3,581.
241	Buchanan General Contracting	12/31/05	SL	15.00	HY16		4,974.				4,974.	1,037.		332.	1,369.
242	Buchanan General Contracting	12/31/05	SL	15.00	HY16		360.				360.	75.		24.	99.
243	Buchanan General Contracting	12/31/05	SL	15.00	HY16		6,474.				6,474.	1,350.		432.	1,782.
244	Buchanan General Contracting	12/31/05	SL	15.00	HY16		22,530.				22,530.	4,694.		1,502.	6,196.
245	Environmental Works	04/30/06	SL	15.00	HY16		1,487.				1,487.	265.		99.	364.
246	Wayne's Roofing	12/31/07	SL	15.00	HY16		105,692.				105,692.	1,922.		7,046.	8,968.
247	Environmental Works-Windows Project	02/10/05	SL	15.00	HY16		531.				531.	19.		35.	54.
248	Environmental Works-Windows Project	02/28/05	SL	15.00	HY16		2,344.				2,344.	85.		156.	241.
249	Environmental Works-Windows Project	03/28/05	SL	15.00	HY16		3,011.				3,011.	109.		201.	310.
250	Environmental Works-Windows Project	04/19/05	SL	15.00	HY16		383.				383.	14.		26.	40.
251	Environmental Works-Windows Project	12/31/05	SL	15.00	HY16		1,397.				1,397.	51.		93.	144.
252	Environmental Works-Windows Project	05/31/06	SL	15.00	HY16		3,103.				3,103.	113.		207.	320.
253	Environmental Works-Windows Project	06/14/06	SL	15.00	HY16		4,442.				4,442.	162.		296.	458.
254	Environmental Works-Windows Project	07/20/06	SL	15.00	HY16		8,923.				8,923.	324.		595.	919.
255	Environmental Works-Windows Project	10/31/06	SL	15.00	HY16		8,605.				8,605.	313.		574.	887.

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256	Windows Doors and More-Windows Project	12/31/06	SL	15.00	HY16	205,680.				205,680.	7,479.		13,712.	21,191.
257	Windows Doors and More-Windows Project etc	12/31/07	SL	15.00	HY16	447,922.				447,922.	16,232.		29,861.	46,093.
258	La Concina Remodeling	04/01/93	SL	15.00	HY16	424.				424.	424.		0.	424.
259	La Concina Remodeling	05/19/93	SL	15.00	HY16	91.				91.	90.		0.	90.
260	La Concina Remodeling	05/19/93	SL	15.00	HY16	65.				65.	63.		0.	63.
261	La Concina Remodeling	12/31/02	SL	15.00	HY16	11,001.				11,001.	3,850.		733.	4,583.
262	La Concina Remodeling	01/01/03	SL	15.00	HY16	1,872.				1,872.	656.		125.	781.
263	La Concina Remodeling	01/19/93	SL	15.00	HY16	140.				140.	140.		0.	140.
264	Food Bank Improvements	10/31/95	SL	15.00	HY16	934.				934.	934.		0.	934.
265	Food Bank Improvements: Slab for Forklift	02/01/00	SL	15.00	HY16	5,017.				5,017.	2,759.		334.	3,093.
266	La Concina Remodeling	02/04/93	SL	15.00	HY16	350.				350.	350.		0.	350.
267	La Concina Remodeling	02/08/93	SL	15.00	HY16	407.				407.	407.		0.	407.
268	La Concina Remodeling	02/16/93	SL	15.00	HY16	947.				947.	947.		0.	947.
269	La Concina Remodeling	04/01/93	SL	15.00	HY16	75.				75.	75.		0.	75.
270	La Concina Remodeling	01/19/93	SL	15.00	HY16	92.				92.	92.		0.	92.
271	La Concina Remodeling	06/14/93	SL	15.00	HY16	850.				850.	850.		0.	850.
272	La Concina Remodeling	06/14/93	SL	15.00	HY16	521.				521.	521.		0.	521.
273	La Concina Remodeling	06/14/93	SL	15.00	HY16	473.				473.	473.		0.	473.

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274	La Concina Remodeling	06/14/93	SL	15.00	HY16		538.				538.	538.		0.	538.
275	La Concina Remodeling	06/14/93	SL	15.00	HY16		423.				423.	423.		0.	423.
276	La Concina Remodeling	06/14/93	SL	15.00	HY16		364.				364.	364.		0.	364.
277	La Concina Remodeling	07/30/93	SL	15.00	HY16		240.				240.	240.		0.	240.
278	La Concina Remodeling	07/30/93	SL	15.00	HY16		471.				471.	471.		0.	471.
279	Carpet Installation	06/24/92	SL	15.00	HY16		2,183.				2,183.	2,183.		0.	2,183.
280	Account 1710.430	12/31/91	SL	15.00	HY16		181,697.				181,697.	181,697.		0.	181,697.
281	Account 1720.430	12/31/91	SL	15.00	HY16		317,263.				317,263.	317,263.		0.	317,263.
282	Account 1710.431	12/31/91	SL	15.00	HY16		14,945.				14,945.	14,945.		0.	14,945.
283	Account 1720.431	12/31/91	SL	15.00	HY16		13,949.				13,949.	13,949.		0.	13,949.
284	Kiosk, Kitchen, etc.	07/01/92	SL	15.00	HY16		116,894.				116,894.	116,894.		0.	116,894.
285	Account 1710.437	12/31/91	SL	15.00	HY16		14,700.				14,700.	14,700.		0.	14,700.
286	Account 1710.438	12/31/91	SL	15.00	HY16		8,190.				8,190.	8,190.		0.	8,190.
287	Account 1710.439	12/31/91	SL	15.00	HY16		44,013.				44,013.	44,013.		0.	44,013.
288	Account 1710.441	12/31/91	SL	15.00	HY16		15,000.				15,000.	15,000.		0.	15,000.
289	Account 1710.442	12/31/91	SL	15.00	HY16		5,077.				5,077.	5,077.		0.	5,077.
290	Account 1710.443	12/31/91	SL	15.00	HY16		7,500.				7,500.	7,500.		0.	7,500.
291	Account 1710.444	12/31/91	SL	15.00	HY16		5,000.				5,000.	5,000.		0.	5,000.

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292	Kiosk, Kitchen, etc.	07/01/92	SL	15.00	HY16	16,646.				16,646.	16,646.		0.	16,646.
293	Carpet for Museum	12/27/92	SL	15.00	HY16	628.				628.	628.		0.	628.
294	Misc. Improvements	11/24/01	SL	15.00	HY16	732.				732.	391.		49.	440.
295	Misc. Improvements	12/31/02	SL	15.00	HY16	843.				843.	664.		56.	720.
296	Misc. Improvements	03/31/03	SL	15.00	HY16	41.				41.	16.		3.	19.
297	Misc. Improvements	04/30/03	SL	15.00	HY16	1,114.				1,114.	425.		74.	499.
298	Misc. Improvements	07/31/03	SL	15.00	HY16	87.				87.	32.		6.	38.
299	Misc. Improvements	09/30/03	SL	15.00	HY16	426.				426.	148.		28.	176.
300	Misc. Improvements	09/30/03	SL	15.00	HY16	416.				416.	146.		28.	174.
301	Misc. Improvements	06/10/03	SL	15.00	HY16	113.				113.	42.		8.	50.
302	Misc. Improvements	06/20/03	SL	15.00	HY16	1,686.				1,686.	617.		112.	729.
303	Misc. Improvements	10/15/03	SL	15.00	HY16	395.				395.	136.		26.	162.
304	Misc. Improvements	11/26/03	SL	15.00	HY16	3,327.				3,327.	1,128.		222.	1,350.
305	Misc. Improvements	12/11/03	SL	15.00	HY16	25,812.				25,812.	8,634.		1,721.	10,355.
306	Misc. Improvements	12/31/03	SL	15.00	HY16	28,014.				28,014.	9,494.		1,868.	11,362.
307	Eco Compliance	02/28/04	SL	15.00	HY16	2,781.				2,781.	895.		185.	1,080.
308	Fredhoes Building Construction	02/28/04	SL	15.00	HY16	26,661.				26,661.	8,590.		1,777.	10,367.
309	Environmental Works	03/31/04	SL	15.00	HY16	1,500.				1,500.	475.		100.	575.

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310	Fredhoses Building Construction	04/30/04	SL	15.00	HY16		8,146.				8,146.	2,534.		543.	3,077.
311	Account 1720.602	12/31/91	SL	15.00	HY16		9,438.				9,438.	9,438.		0.	9,438.
312	Kiosk Canopies	04/08/92	SL	15.00	HY16		6,464.				6,464.	6,464.		0.	6,464.
313	Kiosk Canopies	04/08/92	SL	15.00	HY16		5,648.				5,648.	5,648.		0.	5,648.
314	Install Door / Panic Exit	12/10/92	SL	15.00	HY16		1,198.				1,198.	1,198.		0.	1,198.
315	Gravel for Playground	06/07/93	SL	15.00	HY16		194.				194.	194.		0.	194.
316	Misc Adjustment	Various	SL	15.00	HY16							192.		0.	192.
317	Eco Compliance	06/30/08	SL	27.50	MM16		2,360.				2,360.	43.		86.	129.
318	Environmental Works	06/30/08	SL	27.50	MM16		584.				584.	11.		21.	32.
319	Environmental Works	06/30/08	SL	27.50	MM16		2,726.				2,726.	50.		99.	149.
320	Environmental Works	06/30/08	SL	27.50	MM16		312.				312.	6.		11.	17.
321	Environmental Works	06/30/08	SL	27.50	MM16		1,296.				1,296.	24.		47.	71.
322	Environmental Works	06/30/08	SL	27.50	MM16		1,361.				1,361.	25.		49.	74.
323	Environmental Works	06/30/08	SL	27.50	MM16		4,412.				4,412.	80.		160.	240.
324	Environmental Works	06/30/08	SL	27.50	MM16		5,368.				5,368.	98.		195.	293.
325	Otto Roseneau & Assoc.	06/30/08	SL	27.50	MM16		472.				472.	9.		17.	26.
326	Otto Roseneau & Assoc.	06/30/08	SL	27.50	MM16		1,100.				1,100.	20.		40.	60.
327	Otto Roseneau & Assoc.	06/30/08	SL	27.50	MM16		820.				820.	15.		30.	45.

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328	Wayne's Roofing, Inc.	06/30/08	SL	27.50	MM	16	40,556.				40,556.	737.		1,475.	2,212.
329	Wayne's Roofing, Inc.	06/30/08	SL	27.50	MM	16	107,227.				107,227.	1,950.		3,899.	5,849.
330	Wayne's Roofing, Inc.	06/30/08	SL	27.50	MM	16	83,809.				83,809.	1,524.		3,048.	4,572.
331	Wayne's Roofing, Inc.	06/30/08	SL	27.50	MM	16	415,075.				415,075.	7,547.		15,094.	22,641.
332	Wayne's Roofing, Inc.	06/30/08	SL	27.50	MM	16	111,330.				111,330.	2,024.		4,048.	6,072.
333	Wayne's Roofing, Inc.	06/30/08	SL	27.50	MM	16	51,087.				51,087.	929.		1,858.	2,787.
334	Environmental Works	12/31/08	SL	27.50	MM	16	7,788.				7,788.			283.	283.
335	Environmental Works	12/31/08	SL	27.50	MM	16	7,566.				7,566.			275.	275.
336	Environmental Works	12/31/08	SL	27.50	MM	16	12,500.				12,500.			455.	455.
337	Environmental Works	12/31/08	SL	27.50	MM	16	540.				540.			20.	20.
338	Environmental Works	12/31/08	SL	27.50	MM	16	880.				880.			32.	32.
339	Environmental Works	12/31/08	SL	27.50	MM	16	2,532.				2,532.			92.	92.
340	Seattle Daily News	12/31/08	SL	27.50	MM	16	86.				86.			3.	3.
341	Environmental Works	01/01/08	SL	27.50	MM	16	2,244.				2,244.	82.		82.	164.
342	Environmental Works	01/01/08	SL	27.50	MM	16	210.				210.	8.		8.	16.
343	Environmental Works	01/01/08	SL	27.50	MM	16	420.				420.	15.		15.	30.
344	Environmental Works	01/01/08	SL	27.50	MM	16	385.				385.	14.		14.	28.
345	Environmental Works	01/01/08	SL	27.50	MM	16	158.				158.	6.		6.	12.

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346	Environmental Works	01/01/08	SL	27.50	MM16		280.				280.	10.		10.	20.
347	Environmental Works	01/01/08	SL	27.50	MM16		420.				420.	15.		15.	30.
348	Francisco Chavez	01/01/08	SL	27.50	MM16		2,595.				2,595.	94.		94.	188.
349	Israel Chavez	01/01/08	SL	27.50	MM16		3,757.				3,757.	137.		137.	274.
350	Maria G. Meliton	01/01/08	SL	27.50	MM16		4,247.				4,247.	154.		154.	308.
351	Old Fashioned Paint	01/01/08	SL	27.50	MM16		979.				979.	36.		36.	72.
352	Old Fashioned Paint	01/01/08	SL	27.50	MM16		2,193.				2,193.	80.		80.	160.
353	Old Fashioned Paint	01/01/08	SL	27.50	MM16		6,350.				6,350.	231.		231.	462.
354	Old Fashioned Paint	01/01/08	SL	27.50	MM16		8,773.				8,773.	319.		319.	638.
355	Old Fashioned Paint	01/01/08	SL	27.50	MM16		1,033.				1,033.	38.		38.	76.
356	Old Fashioned Paint Donation	01/01/08	SL	27.50	MM16		3,899.				3,899.	142.		142.	284.
357	Otto Roseneau & Assoc.	01/01/08	SL	27.50	MM16		472.				472.	17.		17.	34.
358	Windows Doors & More	01/01/08	SL	27.50	MM16		92,728.				92,728.	3,372.		3,372.	6,744.
359	All Purpose Door Repair	07/01/08	SL	27.50	MM16		19,774.				19,774.	719.		719.	1,438.
360	All Purpose Door Repair	07/01/08	SL	27.50	MM16		1,619.				1,619.	59.		59.	118.
361	All Purpose Door Repair	07/01/08	SL	27.50	MM16		2,226.				2,226.	81.		81.	162.
362	Sigmatix	07/01/08	SL	27.50	MM16		1,600.				1,600.	58.		58.	116.
383	Environmental Works	04/01/09	SL	27.50	HY16		868.				868.	24.		24.	24.

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384	Environmental Works	04/01/09	SL	27.50	HY16		80.				80.			2.	2.
385	Home Depot	04/01/09	SL	27.50	HY16		513.				513.			14.	14.
386	Otto Roseneau & Assoc.	06/01/09	SL	27.50	HY16		75.				75.			2.	2.
387	Wayne's Roofing	02/01/09	SL	27.50	HY16		40,556.				40,556.			1,352.	1,352.
388	Environmental Works	04/01/09	SL	27.50	HY16		210.				210.			6.	6.
389	Windows Doors and More	09/01/09	SL	27.50	HY16		10,251.				10,251.			124.	124.
390	Lowe's	05/01/09	SL	5.00	HY16		4,563.				4,563.			591.	591.
391	D&S Electrical	01/01/10	SL	27.50	HY16		36,495.				36,495.			0.	0.
392	D&S Electrical	01/01/10	SL	27.50	HY16		76,877.				76,877.			0.	0.
393	D&S Electrical	01/01/10	SL	27.50	HY16		70,923.				70,923.			0.	0.
394	D&S Electrical	01/01/10	SL	27.50	HY16		43,908.				43,908.			0.	0.
395	D&S Electrical	01/01/10	SL	27.50	HY16		57,104.				57,104.			0.	0.
396	Environmental Works	01/01/10	SL	27.50	HY16		140.				140.			0.	0.
397	Environmental Works	01/01/10	SL	27.50	HY16		374.				374.			0.	0.
398	Environmental Works	01/01/10	SL	27.50	HY16		2,271.				2,271.			0.	0.
399	Environmental Works	01/01/10	SL	27.50	HY16		3,587.				3,587.			0.	0.
400	Environmental Works	01/01/10	SL	27.50	HY16		7,536.				7,536.			0.	0.
401	Environmental Works	01/01/10	SL	27.50	HY16		3,093.				3,093.			0.	0.

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402	Environmental Works	01/01/10	SL	27.50	HY16	354.				354.			0.	
403	Pacific Northwest Title	01/01/10	SL	27.50	HY16	596.				596.			0.	
404	Sigmasix	01/01/10	SL	27.50	HY16	1,800.				1,800.			0.	
405	Net Versant	01/01/10	SL	5.00	HY16	27,145.				27,145.			0.	
406	Net Versant	01/01/10	SL	5.00	HY16	5,461.				5,461.			0.	
	* 990 Page 10 Total Buildings					4,023,327.				4,023,327.	1,215,582.		158,710.	1,374,292.
	Furniture & Fixtures													
1	Furniture, Fixtures & Equipment	12/31/91	SL	5.00	HY16	1,930.				1,930.	1,930.		0.	1,930.
14	Furniture, Fixtures & Equipment	12/31/91	SL	5.00	HY16	3,717.				3,717.	3,717.		0.	3,717.
19	Time Clock	03/31/97	SL	5.00	HY16	974.				974.	974.		0.	974.
42	Furniture, Fixtures & Equipment	12/31/91	SL	5.00	HY16	4,254.				4,254.	4,254.		0.	4,254.
48	Furniture, Fixtures & Equipment	12/31/91	SL	5.00	HY16	327.				327.	327.		0.	327.
49	Refrigerator	01/30/96	SL	5.00	HY16	2,807.				2,807.	2,807.		0.	2,807.
55	Donated Refrigerator Cases	08/31/99	SL	5.00	HY16	2,590.				2,590.	2,590.		0.	2,590.
60	Encore 3 hole sink	12/21/06	SL	5.00	HY16	615.				615.	246.		123.	369.
63	Furniture, Fixtures & Equipment	12/31/91	SL	5.00	HY16	2,335.				2,335.	2,335.		0.	2,335.
64	Furniture, Fixtures & Equipment	12/31/91	SL	5.00	HY16	5,691.				5,691.	5,691.		0.	5,691.
65	Furniture, Fixtures & Equipment	12/31/91	SL	5.00	HY16	2,636.				2,636.	2,636.		0.	2,636.

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68	New Freezer	12/31/02	SL	5.00		HY16	14,300.				14,300.	14,300.		0.	14,300.
69	Furniture, Fixtures & Equipment	12/31/91	SL	5.00		HY16	1,504.				1,504.	1,504.		0.	1,504.
73	Smith and Greene-Coffee Maker	06/20/03	SL	5.00		HY16	2,557.				2,557.	2,557.		0.	2,557.
74	Erickson Commercial Refrigeration	11/26/03	SL	5.00		HY16	17,522.				17,522.	17,522.		0.	17,522.
75	Encore 3 hole sink	12/21/06	SL	5.00		HY16	615.				615.	246.		123.	369.
76	Furniture, Fixtures & Equipment	12/31/91	SL	5.00		HY16	400.				400.	400.		0.	400.
77	Furniture, Fixtures & Equipment	12/31/91	SL	5.00		HY16	400.				400.	400.		0.	400.
78	Freezer	05/01/96	SL	5.00		HY16	3,730.				3,730.	3,730.		0.	3,730.
81	Furniture, Fixtures & Equipment	12/31/91	SL	5.00		HY16	10,857.				10,857.	10,857.		0.	10,857.
82	Furniture, Fixtures & Equipment	12/31/91	SL	5.00		HY16	1,145.				1,145.	1,145.		0.	1,145.
92	Furniture, Fixtures & Equipment	12/31/91	SL	5.00		HY16	812.				812.	812.		0.	812.
96	Furniture, Fixtures & Equipment	12/31/91	SL	5.00		HY16	1,210.				1,210.	1,210.		0.	1,210.
97	Furniture, Fixtures & Equipment	12/31/91	SL	5.00		HY16	1,720.				1,720.	1,720.		0.	1,720.
98	Playground Equipment	11/18/92	SL	5.00		HY16	6,108.				6,108.	6,108.		0.	6,108.
99	Furniture, Fixtures & Equipment	12/31/91	SL	5.00		HY16	327.				327.	327.		0.	327.
102	Playground Equipment	08/23/95	SL	5.00		HY16	1,315.				1,315.	1,315.		0.	1,315.
103	Playground Equipment	10/31/95	SL	5.00		HY16	9,294.				9,294.	9,294.		0.	9,294.
104	Classroom Equipment	01/31/96	SL	5.00		HY16	1,630.				1,630.	1,630.		0.	1,630.

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(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
105	Classroom Equipment	01/21/96	SL	5.00	HY16		343.				343.	343.		0.	343.
107	Encore 3 hole sink	12/21/06	SL	5.00	HY16		615.				615.	246.		123.	369.
363	Encore Restaurant Equipment	07/01/08	SL	5.00	HY16		302.				302.	30.		60.	90.
364	Express Delivery	07/01/08	SL	5.00	HY16		75.				75.	8.		15.	23.
365	JR Furniture	07/01/08	SL	5.00	HY16		652.				652.	65.		130.	195.
366	Lakeshore Learning Materials	07/01/08	SL	5.00	HY16		2,206.				2,206.	221.		441.	662.
367	HSBC	07/01/08	SL	5.00	HY16		490.				490.	49.		98.	147.
368	HSBC	07/01/08	SL	5.00	HY16		490.				490.	49.		98.	147.
407	Coastwide Labs	10/01/09	SL	5.00	HY16		1,117.				1,117.			56.	56.
421	Costco	02/01/09	SL	5.00	HY16		3,023.				3,023.			554.	554.
* 990 Page 10 Total Furniture & Fixtures Machinery & Equipment							112,635.				112,635.	103,595.		1,821.	105,416.
3	New Water Heater	11/20/01	SL	5.00	HY16		664.				664.	664.		0.	664.
4	Eschelon Phone System	12/31/02	SL	5.00	HY16		25,915.				25,915.	25,915.		0.	25,915.
5	Eschelon Phone System	08/31/03	SL	5.00	HY16		2,773.				2,773.	2,773.		0.	2,773.
6	Itzak Mgomez-CCTV cameras	12/31/04	SL	5.00	HY16		8,422.				8,422.	6,737.		1,684.	8,421.
7	Alert Security-Security System	12/31/04	SL	5.00	HY16		11,922.				11,922.	9,537.		2,384.	11,921.
8	Itzak Mgomez-CCTV cameras	01/31/05	SL	5.00	HY16		2,807.				2,807.	2,198.		561.	2,759.

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Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
9	Vortex Industries- Electric Door Strikes	01/31/05	SL	5.00	HY16		755.				755.	591.		151.	742.
10	Vortex Industries- Electric Door Strikes	02/15/05	SL	5.00	HY16		2,264.				2,264.	1,755.		453.	2,208.
11	SME Security Lights	12/31/04	SL	5.00	HY16									0.	
12	SME Security Lights	12/31/04	SL	5.00	HY16		8,307.				8,307.	6,645.		1,661.	8,306.
13	Global Intermodal Systems	07/15/04	SL	5.00	HY16		1,958.				1,958.	1,714.		392.	2,106.
15	Lawchief Lawnmower	07/30/92	SL	5.00	HY16		1,514.				1,514.	1,514.		0.	1,514.
16	Panasonic KXP3624	08/03/94	SL	5.00	HY16		417.				417.	417.		0.	417.
17	American Fundware	06/23/95	SL	5.00	HY16		5,758.				5,758.	5,758.		0.	5,758.
18	American Fundware: A/R	03/31/97	SL	5.00	HY16		1,500.				1,500.	1,500.		0.	1,500.
20	Video Camera	07/09/97	SL	5.00	HY16		716.				716.	716.		0.	716.
21	Fiscal Office 486DX66 & P-90	07/03/95	SL	5.00	HY16		4,492.				4,492.	4,492.		0.	4,492.
22	William Sound Rev. 3	09/23/97	SL	5.00	HY16		1,863.				1,863.	1,863.		0.	1,863.
23	Microsoft Software	06/30/95	SL	5.00	HY16		27,300.				27,300.	27,300.		0.	27,300.
24	ETC Corporation	12/31/98	SL	5.00	HY16		1,714.				1,714.	1,714.		0.	1,714.
25	Minolta Printer	01/29/98	SL	5.00	HY16		2,813.				2,813.	2,813.		0.	2,813.
26	PC Help Software	05/07/98	SL	5.00	HY16		310.				310.	310.		0.	310.
27	Paragon Computer Equipment	06/19/98	SL	5.00	HY16		2,969.				2,969.	2,969.		0.	2,969.
28	Paragon Computer Equipment	06/19/98	SL	5.00	HY16		5,064.				5,064.	5,064.		0.	5,064.

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* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
29	Edio Micro Tech Software	06/19/98	SL	5.00	HY16		916.				916.	916.		0.	916.
30	Hanh Lam Consulting	06/26/98	SL	5.00	HY16		217.				217.	217.		0.	217.
31	Supreme Bus. Prod Compute	06/26/98	SL	5.00	HY16		587.				587.	587.		0.	587.
32	Hanh Lam Consulting	06/26/98	SL	5.00	HY16		323.				323.	323.		0.	323.
33	ESC Tech Computers	06/30/98	SL	5.00	HY16		2,222.				2,222.	2,222.		0.	2,222.
34	Hanh Lam Consulting	07/15/98	SL	5.00	HY16		130.				130.	130.		0.	130.
35	Maga Haus Computers	08/07/98	SL	5.00	HY16		996.				996.	996.		0.	996.
36	Paragon Computer Equipment	08/07/98	SL	5.00	HY16		148.				148.	148.		0.	148.
37	Fire Proof Safe for Finance Office	05/31/99	SL	5.00	HY16		3,605.				3,605.	3,605.		0.	3,605.
38	American Fundware Software	06/30/00	SL	5.00	HY16		6,658.				6,658.	6,658.		0.	6,658.
39	New Electrical Circuits	05/28/01	SL	5.00	HY16		2,883.				2,883.	2,883.		0.	2,883.
40	Computer Lab	11/15/01	SL	5.00	HY16		1,945.				1,945.	1,945.		0.	1,945.
41	Track Lighting in 2nd floor corridor	06/14/06	SL	5.00	HY16		13,387.				13,387.	7,017.	6,695.		13,712.
43	Sage MIP Software	04/24/95	SL	5.00	HY16		1,298.				1,298.	1,298.		0.	1,298.
44	Development Office Printer & Software	02/14/97	SL	5.00	HY16		406.				406.	406.		0.	406.
45	Computer 386SX-25	05/22/96	SL	5.00	HY16		3,989.				3,989.	3,989.		0.	3,989.
46	ESL Computers	08/09/92	SL	5.00	HY16		1,150.				1,150.	1,150.		0.	1,150.
47		01/08/93	SL	5.00	HY16		11,580.				11,580.	11,580.		0.	11,580.

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
50	Kitchen Equipment	12/31/96	SL	5.00	HY16		1,373.				1,373.	1,373.		0.	1,373.
51	Printer HP 5L	06/05/97	SL	5.00	HY16		418.				418.	418.		0.	418.
52	Computer Equipment	06/05/97	SL	5.00	HY16		530.				530.	530.		0.	530.
53	Computer	02/13/97	SL	5.00	HY16		162.				162.	162.		0.	162.
54	Computer Equipment	06/05/97	SL	5.00	HY16		1,005.				1,005.	1,005.		0.	1,005.
56	Gateway Select 1100 Computer	06/11/01	SL	5.00	HY16		1,334.				1,334.	1,334.		0.	1,334.
57	Gateway DS Solo Computer	12/31/01	SL	5.00	HY16		1,299.				1,299.	1,299.		0.	1,299.
58	Monarch Trading Steam Table	11/19/01	SL	5.00	HY16		1,561.				1,561.	1,561.		0.	1,561.
59	Encore Stove Purchase	09/05/06	SL	5.00	HY16		3,041.				3,041.	1,419.		608.	2,027.
61	Computer 486DX-33	04/08/94	SL	5.00	HY16		1,434.				1,434.	1,434.		0.	1,434.
62	Computer	02/13/97	SL	5.00	HY16		162.				162.	162.		0.	162.
66	Computer	02/13/97	SL	5.00	HY16		81.				81.	81.		0.	81.
67	Raymond Forklift	06/29/95	SL	5.00	HY16		1,500.				1,500.	1,500.		0.	1,500.
70	Computer Parts	07/09/97	SL	5.00	HY16		1,253.				1,253.	1,253.		0.	1,253.
71	Printer HP 6P	06/30/97	SL	5.00	HY16		869.				869.	869.		0.	869.
72	PowerPro 486DX-33	05/04/93	SL	5.00	HY16		2,016.				2,016.	2,016.		0.	2,016.
79	Dell Power Point Projector	12/31/02	SL	5.00	HY16		2,393.				2,393.	2,393.		0.	2,393.
80	Computer 386SX-25	06/19/92	SL	5.00	HY16		1,049.				1,049.	1,049.		0.	1,049.

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* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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83	Apple Mac Classic 40 Computer	04/16/92	SL	5.00	HY16		1,535.				1,535.	1,535.		0.	1,535.
84	Apple Mac Classic II 40 Computer	04/16/92	SL	5.00	HY16		1,346.				1,346.	1,346.		0.	1,346.
85	HP LaserJet IIP	04/16/92	SL	5.00	HY16		1,488.				1,488.	1,488.		0.	1,488.
86	Computer Equipment Upgrade	05/22/96	SL	5.00	HY16		1,029.				1,029.	1,029.		0.	1,029.
87	Computer Parts	02/12/97	SL	5.00	HY16		1,120.				1,120.	1,120.		0.	1,120.
88	Computer Parts	08/07/97	SL	5.00	HY16		632.				632.	632.		0.	632.
89	Mailing List	09/25/96	SL	5.00	HY16		1,056.				1,056.	1,056.		0.	1,056.
90	Computer Parts	06/04/97	SL	5.00	HY16		325.				325.	325.		0.	325.
91	Computer Parts	02/12/97	SL	5.00	HY16		1,744.				1,744.	1,744.		0.	1,744.
93	Video Camera	01/31/96	SL	5.00	HY16		1,093.				1,093.	1,093.		0.	1,093.
94	Misc. Equipment	12/31/98	SL	6.00	HY16		1,772.				1,772.	1,772.		0.	1,772.
95	Misc. Equipment	12/31/98	SL	5.00	HY16		652.				652.	652.		0.	652.
100	Hewlett Packard Computers-Donated	08/31/99	SL	5.00	HY16		999.				999.	999.		0.	999.
101	Hewlett Packard Computers-Donated	09/30/99	SL	5.00	HY16		1,615.				1,615.	1,615.		0.	1,615.
106	Computer Upgrade	04/30/95	SL	5.00	HY16		701.				701.	701.		0.	701.
369	CN Software	07/01/08	SL	5.00	HY16		1,006.				1,006.	101.		201.	302.
370	CN Software	07/01/08	SL	5.00	HY16		352.				352.	35.		70.	105.
371	Dell	07/01/08	SL	5.00	HY16		1,008.				1,008.	101.		202.	303.

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372 Dell		07/01/08	SL	5.00		HY16	1,083.				1,083.	108.		217.	325.
373 Dell		07/01/08	SL	5.00		HY16	5,000.				5,000.	500.		1,000.	1,500.
374 Dell		07/01/08	SL	5.00		HY16	1,000.				1,000.	100.		200.	300.
375 Dell		07/01/08	SL	5.00		HY16	1,932.				1,932.	193.		386.	579.
376 Guardian		01/01/08	SL	5.00		HY16	12,937.				12,937.	2,587.		2,587.	5,174.
377 Guardian		07/01/08	SL	5.00		HY16	1,619.				1,619.	162.		324.	486.
378 Sage Software		07/01/08	SL	5.00		HY16	3,333.				3,333.	333.		667.	1,000.
379 Wells Fargo/ Dell Comp 301		07/01/08	SL	5.00		HY16	855.				855.	86.		171.	257.
408 Dell		05/01/09	SL	5.00		HY16	3,834.				3,834.			511.	511.
409 Dell		06/01/09	SL	5.00		HY16	548.				548.			64.	64.
410 Dell		07/01/09	SL	5.00		HY16	1,212.				1,212.			121.	121.
411 Dell		09/01/09	SL	5.00		HY16	2,756.				2,756.			184.	184.
412 Dell		10/01/09	SL	5.00		HY16	856.				856.			43.	43.
413 NPower		01/01/10	SL	5.00		HY16	6,125.				6,125.			0.	0.
414 NPower		01/01/10	SL	5.00		HY16	3,954.				3,954.			0.	0.
415 NPower		01/01/10	SL	5.00		HY16	7,468.				7,468.			0.	0.
416 NPower		01/01/10	SL	5.00		HY16	3,644.				3,644.			0.	0.
417 NPower		01/01/10	SL	5.00		HY16	840.				840.			0.	0.

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Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction in Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
418	NPower	01/01/10	SL	5.00		HY16	641.				641.			0.	
419	NPower	01/01/10	SL	5.00		HY16	775.				775.			0.	
420	NPower	01/01/10	SL	5.00		HY16	1,910.				1,910.			0.	
	* 990 Page 10 Total Machinery & Equipment						277,932.				277,932.	202,300.		21,537.	223,837.
	Transportation Equipment														
108	Chevrolet S-Van	06/16/00	SL	5.00		HY16	23,054.				23,054.	23,054.		0.	23,054.
109	Van Donated by Muckleshoot Tribe	12/31/04	SL	5.00		HY16	30,495.				30,495.	24,396.		6,099.	30,495.
110	95 Ford 15 Passenger Van	06/16/95	SL	5.00		HY16	4,983.				4,983.	4,983.		0.	4,983.
111	94 Ford 15 Passenger Van	06/15/94	SL	5.00		HY16	25,803.				25,803.	25,803.		0.	25,803.
112	94 Nissan King Cab Pickup	01/01/99	SL	5.00		HY16	5,000.				5,000.	5,000.		0.	5,000.
380	Northwest Bus Sales	07/01/08	SL	5.00		HY16	10,600.				10,600.	1,060.		2,120.	3,180.
381	Northwest Bus Sales	07/01/08	SL	5.00		HY16	42,463.				42,463.	4,246.		8,493.	12,739.
	* 990 Page 10 Total Transportation Equipment						142,398.				142,398.	88,542.		16,712.	105,254.
	Land														
2	Land	Various	L			HY	1,100,489.				1,100,489.			0.	
	* 990 Page 10 Total Land						1,100,489.				1,100,489.	0.		0.	0.
	Other														
422	Loan Fees	01/01/08	SL	22.00		HY16						712.		714.	1,426.

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Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	* 990 Page 10 Total Other						0.				0.	712.		714.	1,426.
	* Grand Total 990 Page 10 Depr						5,656,781.				5,656,781.	1,610,731.		199,494.	1,810,225.

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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

OMB No. 1545-1709

► File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ **X**
 - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868.

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

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

Part I only ☐

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

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

Type or print File by the due date for filing your return. See instructions.	Name of Exempt Organization	Employer identification number
	El Centro de la Raza	91-0899927
	Number, street, and room or suite no. If a P.O. box, see instructions. 2524 16th Avenue South	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Seattle, WA 98144-5104	

Check type of return to be filed (file a separate application for each return):

- | | | |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

El Centro de la Raza

- The books are in the care of ► **2524 16th Avenue South - Seattle, WA 98144-5104**
- Telephone No. ► **(206) 957-4605** FAX No. ► _____

- 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 will cover.

- 1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **August 15, 2010**, to file the exempt organization return for the organization named above. The extension

is for the organization's return for:

► ☒ calendar year **2009** or► ☐ tax year beginning _____, and ending _____.

- 2 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

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

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.

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form **8868** (Rev. 4-2009)