Form Department of the Treasury

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 Open to Public Inspection

Internal Revenue Service and ending For the 2011 calendar year, or tax year beginning D Employer identification number C Name of organization Check if applicable: B Campus Pride Inc Address change 14-1969456 Doing Business As Name change Room/suite Telephone number Number and street (or P.O. box if mail is not delivered to street address) Initial return 704-277-6710 PO Box 240473 City or town, state or country, and ZIP + 4 Terminated 288,234 NC 28224 G Gross receipts \$ Charlotte Amended return Name and address of principal officer: Yes Application pending H(a) Is this a group return for affiliates? Shane Windmeyer H(b) Are all affiliates included? PO Box 240473 If "No." attach a list. (see instructions) NC 28224 Charlotte 4947(a)(1) or **X** 501(c)(3) 501(c) (insert no.) Tax-exempt status: www.campuspride.org H(c) Group exemption number L Year of formation: 2006 M State of legal domicile: X Corporation Association Other Form of organization: Trust Part I Summary 1 Briefly describe the organization's mission or most significant activities: Campus Pride builds future lesbian, gay, bisexual, transgender (LGBT) and ally Governance student leaders and safer, more LGBT-Friendly colleges and universities. 2 Check this box 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) 4 4 4 Number of independent voting members of the governing body (Part VI, line 1b) 0 5 5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 4350 6 Total number of volunteers (estimate if necessary) 0 7a 7a Total unrelated business revenue from Part VIII, column (C), line 12 0 b Net unrelated business taxable income from Form 990-T, line 34 Current Year Prior Year 66,012 92,307 8 Contributions and grants (Part VIII, line 1h) 240,057 222,222 9 Program service revenue (Part VIII, line 2g) 0 0 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 0 0 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 288,234 332,364 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 0 0 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) Ō 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 329,094 300,592 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 300,592 329,094 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 3,270 -12,35819 Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year End of Year 18,409 28,154 20 Total assets (Part X, line 16) 19,040 16,427 21 Total liabilities (Part X, line 26) -631 22 Net assets or fund balances. Subtract line 21 from line 20 Signature Block Part II 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. Signature of officer Sign President Shane Windmeyer Here Type or print name and title Date Check Preparer's signature Print/Type preparer's name P00681529 05/15/12 self-employed Paid Mary J Green Mary J Green 64-0964805 Mary J. Green, CPA, PLLC Firm's EIN Preparer Firm's name 7301 Carmel Executive Park Ste **Use Only** 704-752-7771 28226 Phone no Charlotte, NC X Yes No May the IRS discuss this return with the preparer shown above? (see instructions)