Form **990**

Return of Organization Exempt From Income Tax

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

2012

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

DLN: 93493228005253 OMB No 1545-0047

B Check if Address Name cl Initial re	change Doing Business As	D Employer 23-7026	identification number									
Name ch	Doing Business As	23-7026										
	Doing Business As											
Initial re												
— -	Number and street (of FO DOX if that is not delivered to street address) Room/suite	E Telephone	number									
Termina		(202)46	66-3434									
Amende	WASHINGTON, DC 20006											
Applicati	on pending	G Gross rece	ıpts \$ 6,179,010									
	F Name and address of principal officer KAREN MCGILL LAWSON	H(a) Is this a group re										
	1629 K STREETNW10TH FLOOR	affiliates?	┌ Yes ┌ No									
	WASHINGTON, DC 20006	H(b) Are all affiliates in	ncluded? 「Yes 「No									
Tax-exe	empt status 501(c)(3) 501(c)() (insert no) 4947(a)(1) or 527	If "No," attach a	list (see instructions)									
J Websi	te:▶ WWW CIVILRIGHTS ORG	H(c) Group exemption	number ►									
K Form of	organization 🔽 Corporation 🗆 Trust 🗀 Association 🗀 Other 🕨	L Year of formation 1969	M State of legal domicile DC									
Part I	Summary											
Governance	Briefly describe the organization's mission or most significant activities TO PROMOTE AN UNDERSTANDING OF THE NEED FOR NATIONAL POLICIE AND ECONOMIC JUSTICE	S THAT SUPPORT CIV	IL RIGHTS AND SOCIAL									
E												
₹ ₂	Check this box 🔭 if the organization discontinued its operations or disposed of	more than 25% of its ne	et assets									
Activities & 2 4 2 6	Number of voting members of the governing body (Part VI, line 1a) $$. $$. $$.		3 6									
≗ 4	Number of independent voting members of the governing body (Part VI, line 1b)		4 6									
∯ 5	Total number of individuals employed in calendar year 2012 (Part V, line 2a) $$.		5 45									
- I	Total number of volunteers (estimate if necessary)	_	6 0									
	a Total unrelated business revenue from Part VIII, column (C), line 12		7a 0									
	Net unrelated business taxable income from Form 990-T, line 34	Prior Year	7b Current Year									
	Contributions and grants (Part VIII line 1h)	5,145,686										
∯ 9	Contributions and grants (Part VIII, line 1h)	5,145,666	3,992,904									
enule 10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	36,43										
Æ 11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,184										
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line	·										
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	5,183,30	6,179,010									
14	Benefits paid to or for members (Part IX, column (A), line 4)		0									
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	3,006,53										
25 and 26		2,523,53	0									
<u>\$</u> 1												
ш ₁₇	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,712,168	1,861,397									
18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	4,718,70	5 5,268,813									
19	Revenue less expenses Subtract line 18 from line 12	464,59	910,197									
Secondary Second		Beginning of Current Year	End of Year									
9 E 20	Total assets (Part X, line 16)	6,676,320	7,512,910									
중 21	Total liabilities (Part X, line 26)	657,13	7 583,524									
1	Net assets or fund balances Subtract line 21 from line 20	6,019,189	6,929,386									
温温 22		- 11	, , , , , , , , , , , , , , , , , , ,									

my knowledge and belief, it is true, correct, and complete Declaration of prepar preparer has any knowledge

	**	***							
Sign	Sıç	gnature of officer							
Here	KA	KAREN MCGILL LAWSON EXECUTIVE VP/COO							
	Ту	pe or print name and title							
Paid		Print/Type preparer's name ERIC BRADSHAW	Preparer's signature						
Prepare	r	Firm's name ▶ ERIC BRADSHAW TAX SERVICE							
Use Only		Firm's address ► 817 A KING STREET SUITE 302							
		ALEXANDRIA, VA 22314							

May the IRS discuss this return with the preparer shown above? (see instruction

Part IV	Checl	klist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? *	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νo
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
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? If "Yes," complete Schedule F, Parts II and IV	15		No
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? If "Yes," complete Schedule F, Parts III and IV	16		No
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? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
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</i> "Yes," complete Schedule J	23	Yes	
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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part		1	1
_		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section $512(b)(13)$?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

art	V	Statements Regarding Other IRS Filings and Tax Compliand					_
		Check if Schedule O contains a response to any question in this Part V .			• •	Yes	No
1 a F	nter	the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a		o [165	140
		the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b		5		
		e organization comply with backup withholding rules for reportable payments t		lors and reportable	7		
		g (gambling) winnings to prize winners?	• •	· · · · · ·	1c	Yes	
Т	ax St	the number of employees reported on Form W-3, Transmittal of Wage and tatements, filed for the calendar year ending with or within the year covered	2a	4	5		
b I	, fat le	east one is reported on line 2a, did the organization file all required federal emp	ployme	ent tax returns?	2b	Yes	
		If the sum of lines 1a and 2a is greater than 250, you may be required to e-file			2-		N.a
		e organization have unrelated business gross income of \$1,000 or more durin			3a 3b		No
		s," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Sch</i>			30		
0	ver, a	y time during the calendar year, did the organization have an interest in, or a si a financial account in a foreign country (such as a bank account, securities ac nt)?	count,	or other financial	4a		No
b 1	f "Ye:	s," enter the name of the foreign country					
S	ee in	structions for filing requirements for Form TD F 90-22 1, Report of Foreign Ba	nk and	d Financial Accounts			
5a W	√as tŀ	he organization a party to a prohibited tax shelter transaction at any time durii	ng the	tax year?	5a		No
		ny taxable party notify the organization that it was or is a party to a prohibited	-	•	5b		No
		s," to line 5a or 5b, did the organization file Form 8886-T?			100		
- 1	63	5, to the 54 of 55, and the organization life form 6000-17.			5c		
0	rganı	the organization have annual gross receipts that are normally greater than \$1 Ization solicit any contributions that were not tax deductible as charitable con	tributio	ons?	6а		No
W	ere n	s," did the organization include with every solicitation an express statement th not tax deductible?	nat suc	th contributions or gifts	6 b		
	_	izations that may receive deductible contributions under section 170(c).		d		V	
s	ervic	e organization receive a payment in excess of \$75 made partly as a contributives provided to the payor?			7a	Yes	
		s," did the organization notify the donor of the value of the goods or services p			7b	Yes	
		e organization sell, exchange, or otherwise dispose of tangible personal properm 8282?		which it was required t	°		No
		s," indicate the number of Forms 8282 filed during the year	7d				
		•					
		e organization receive any funds, directly or indirectly, to pay premiums on a pact?	person	al benefit	7e		No
		e organization, during the year, pay premiums, directly or indirectly, on a pers	· · onal be	enefit contract?	7f		No
g I	fthe	organization received a contribution of qualified intellectual property, did the c			s 7g		
		organization received a contribution of cars, boats, airplanes, or other vehicles	s, dıd t	the organization file a	7h		
tl	he su	oring organizations maintaining donor advised funds and section 509(a)(3) supporting organization, or a donor advised fund maintained by a sponsoring orgess holdings at any time during the year?	anızatı				
		oring organizations maintaining donor advised funds.	-		8		<u> </u>
	-	e organizations maintaining donor advised runds.			9a		
		e organization make a distribution to a donor, donor advisor, or related person			9b		
		on 501(c)(7) organizations. Enter	•				
		tion fees and capital contributions included on Part VIII, line 12	10a				
b G		receipts, included on Form 990, Part VIII, line 12, for public use of club	10b				
		on 501(c)(12) organizations. Enter					
		Income from members or shareholders	11a				
		income from other sources (Do not net amounts due or paid to other sources st amounts due or received from them)	11b				
2a S	ectio	on 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 99	0 ın lıe	eu of Form 1041?	12a		
		s," enter the amount of tax-exempt interest received or accrued during the	12b				
•		on 501(c)(29) qualified nonprofit health insurance issuers.					
a I	s the	organization licensed to issue qualified health plans in more than one state? See the instructions for additional information the organization must report on	Sched	dule O	13a		
b E	nter	the amount of reserves the organization is required to maintain by the states ch the organization is licensed to issue qualified health plans	13b				
		the amount of reserves on hand	13c				
a D	ıd th	e organization receive any payments for indoor tanning services during the tax	x year	?	14a	İ	No
		s " has it filed a Form 720 to report these payments? If "No " provide an explan	•		14h	1	

Form 990 (2012) Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management

		Yes	No
Enter the number of voting members of the governing body at the end of the tax year			
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
Enter the number of voting members included in line 1a, above, who are independent			
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?	2		No
Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
Did the organization have members or stockholders?	6		No
Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
The governing body?	8a	Yes	
Each committee with authority to act on behalf of the governing body?	8b		Νo
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	9		No
ction B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod	e.)
	\longrightarrow	Yes	No
Did the organization have local chapters, branches, or affiliates?	10a		No
If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
Describe in Schedule O the process, if any, used by the organization to review this Form 990			
Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	1 1		
rise to conflicts?	12b	Yes	
Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12b 12c	Yes	No
Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		Yes	No
Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		No
Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c 13	Yes	No
Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c 13	Yes	No
Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c 13 14	Yes Yes	No
Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c 13 14	Yes Yes	No
Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c 13 14	Yes Yes	No
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O Enter the number of voting members included in line 1a, above, who are independent 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? 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? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? Each committee with authority to act on behalf of the governing body? 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 Stion B. Policies (This Section B requests information about policies not required by the Internal R Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organi	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O Enter the number of voting members included in line 1a, above, who are independent	Enter the number of voting members of the governing body at the end of the tax year . Ia 6 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule 0 Enter the number of voting members included in line 1a, above, who are independent . 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?

- 17 List the States with which a copy of this Form 990 is required to be filed ►DC
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - Own website Another's website Upon request Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►THE ORGANIZATION 1629 K STREETNW 10TH FLOOR WASHINGTON, DC (202) 466-3434

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

Check if Schedule O contains a response to any question in this Part VII $\,$. $\,$.

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more pers	person is both an officer and a director/trustee)		(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			
			မြိ			## ##d				
(1) WILLIAM ROBINSON	70	, , ,								
INTERIM CHAIR		X						0	0	0
(2) MURIEL MORISBY	70	×						0	0	0
VICE-CHAIRPERSON		_ ^						U	0	0
(3) CAROLYN OSOLINIK	70	×						0	0	0
SECRETARY/TREASURER								Ů		
(4) MARY FRANCES BERRY	70	×						0	0	0
BOARD MEMBER								Ů		
(5) JOHN PODESTA	70	l x						0	0	0
BOARD MEMBER								Ĭ		
(6) MARILYN SNEIDERMAN	70	×						0	0	0
BOARD MEMBER										
(7) WADE HENDERSON	40 00			x	x	×		201,880	0	15,030
PRESIDENT/CEO								·		
(8) KAREN MCGILL LAWSON	40 00			х	х			153,756	0	17,972
EXECUTIVE VP/COO (9) NANCY ZIRKIN	40 00						-			
	40 00			х	х			136,314	0	16,954
EXECUTIVE VP/OF POLICY (10) EDWIN FICHTER	40 00									
	40 00				х			130,747	0	22,652
VP DEVELOPMENT (11) ELLEN BUCHMAN	40 00	-								
VP FIELD OPERATIONS	10 00					х		118,313	0	13,222
(12) LISA BORNSTEIN	40 00									
SENIOR COUNSEL						Х		113,321	0	14,609
(13) JEFF MILLER	40 00									
VP COMMUNICATIONS						Х		111,212	0	8,612
(14) CORRINE YU	40 00					t				
SENIOR COUNSEL & MANAGING POLICY DIR						X		111,724	0	14,339
(15) JUNE ZEITLIN	40					,,		101 5-5		20.7:-
DIRECTOR-CEDAW						X		121,669		20,746
(16) ANGELA LOVELACE	40					V		102.012		16.006
DIRECTOR OF FINANCE				L		Х	L	102,913		16,006
(17) DIANNE PICHE	40					_		100 220		0.467
SENIOR COUNSEL						Х		109,338		9,467
										Form 990 (2012)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) A verage hours per week (list any hours	more t	tion (han d n is	ne l both	box, an d	heck unless officer stee)	;	(E Repor comper from organiza	table sation the tion (W-	(E) Reportable compensation from related organizations (W		(F) Estima mount of compens from t	ted fother ation he
		for related organizations below dotted line)	Individual trustiee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)		rganizati relate organiza	ed
1b	Sub-Total			•				 						
c d	Total from continuation sheet Total (add lines 1b and 1c).	s to Part VII, S			•	•	•	•		1,411,187				169,609
2	Total number of individuals (in \$100,000 of reportable compe	cluding but not	limited	to the	ose	liste		e) w	ho receive					
													Yes	No
3	On line 1a? If "Yes," complete S					key •		yee, •	, or highes	t compen	sated employee	3		No
4	For any individual listed on line organization and related organ individual											4	Yes	
5	Did any person listed on line 1 services rendered to the organ									anızatıon	or individual for	5	103	No
S	ction B. Independent Co	ntractors									L			
1	Complete this table for your five compensation from the organization compensation from the organization from t	ve highest comp											tax vear	
	-	(A) lame and business	-					, -			(B) cription of services		(C) Compen)
												+		
												\pm		
	Total number of independent coi \$100,000 of compensation fron			not	lımıt	ed to	o thos	e list	ted above)	who rece	ived more than	+		

Part V	7111	Statement of Revenue Check if Schedule O contains a response to	any question i	in this Part VIII			
		eneck if Senedule & Contains a response to	uny question	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
w 22	1a	Federated campaigns 1a					
ant	ь	Membership dues 1b					
s, Grants Amounts	c	Fundraising events 1c	154,100				
iffs, a⊤A	d	Related organizations 1d					
ons, Giffe Similar	e	Government grants (contributions) 1e					
ons Sir	f	All other contributions, gifts, grants, and 1f	5,838,804				
tributio Other	'	similar amounts not included above					
Ę ŏ	g	Noncash contributions included in lines 1a-1f \$					
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines 1a-1f		5,992,904			
		Bus	iness Code				
Program Serwce Revenue	2a						
E E	b						
931	С						
ž.	d						
Ē	e						
200	f	All other program service revenue					
<u>*</u>	g	Total. Add lines 2a-2f	►				
	3	Investment income (including dividends, intand other similar amounts)		108,320			108,320
	4	Income from investment of tax-exempt bond proceed	-				
	5	Royalties	▶				
) Personal				
	6a	Gross rents Less rental					
	6	expenses					
	C	Rental income or (loss)					
	d	Net rental income or (loss)					
	7a	(i) Securities (Gross amount from sales of assets other	u) Other				
	ь	than inventory Less cost or other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss)	· · · •				
Other Revenue	8a	Gross income from fundraising events (not including \$154,100 of contributions reported on line 1c) See Part IV, line 18					
<u>.</u>		a					
¥	b с	Less direct expenses b Net income or (loss) from fundraising events	,				
J		Gross income from gaming activities See Part IV, line 19	· · · F				
	.	a					
	b c	Less direct expenses b Net income or (loss) from gaming activities					
		Gross sales of inventory, less returns and allowances .					
	_	a					
	I	Less cost of goods sold b					
	├	Net income or (loss) from sales of inventory Miscellaneous Revenue Bus	· • ► Iness Code				
	11a	OTHER REVENUE	900099	77,786	77,786		
	ь						
	c						
	d	All other revenue					
	e	Total. Add lines 11a-11d	. ►	77,786			
	12	Total revenue. See Instructions			77 704		100 220
	1			6,179,010	77,786		108,320

Part IX Statement of Functional Expenses

	on 501(c)(3) and 501(c)(4) organizations must complete all columns. All	other organizat	ions must comm	olete column (A)	
	Check if Schedule O contains a response to any question in this Pa				<u>.</u>
	ot include amounts reported on lines 6b, o, 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 United States See Part IV, line 21				·
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
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	2,771,613	1,961,218	555,319	255,076
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)				
9	Other employee benefits	635,803	451,197	128,431	56,175
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting	32,300	0	32,300	0
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	461,843	332,956	75,184	53,703
17	Travel	107,614	104,231	3,383	0
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	238,102	226,634	11,468	0
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	31,938	23,026	5,199	3,713
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	CONSULTING	464,714	412,432	52,282	0
b	SUBCONTRACTORS	291,465	291,465	0	0
c	PRINTING AND COPYING	34,929	34,544	385	0
d	TELEPHONE	89,963	24,460	64,539	964
e	All other expenses	108,529	84,058	4,950	19,521
25	Total functional expenses. Add lines 1 through 24e	5,268,813	3,946,221	933,440	389,152
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		•	767,359	1	845,553
	2	Savings and temporary cash investments				2	<u> </u>
	3	Pledges and grants receivable, net			2,819,357	3	1,420,852
	4	Accounts receivable, net			, ,	4	, ,
	5	Loans and other receivables from current and former officers, dir employees, and highest compensated employees Complete Part Schedule L	ectors	, trustees, key		-	
Assets	6	Loans and other receivables from other disqualified persons (as $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and coand sponsoring organizations of section $501(c)(9)$ voluntary emorganizations (see instructions) Complete Part II of Schedule L	ntrıbu	ting employers		6	
တ္	ا	Notes and leave reconstite wat				7	
জ ব্	7	Notes and loans receivable, net	•	• •		8	
	8	Inventories for sale or use			20.024		C4 00F
	9 10a	Prepaid expenses and deferred charges	10a	 190,036	30,631	9	64,995
	ь	Less accumulated depreciation	10a 10b	167,695	4	100	22,341
	11	Investments—publicly traded securities		·	1.803.606		1,825,633
	12	Investments—other securities See Part IV, line 11			1,000,000	12	1,020,000
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			1,201,093		3,333,536
	16	Total assets. Add lines 1 through 15 (must equal line 34)			6,676,326		7,512,910
	17	Accounts payable and accrued expenses			480,159	17	450,818
	18	Grants payable		•	400,100	18	400,010
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV of Sched				21	
lities	22	Loans and other payables to current and former officers, director key employees, highest compensated employees, and disqualifie	s, trus				
Liabilit		persons Complete Part II of Schedule L				22	
Ξ	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties .				24	
	25	Other liabilities (including federal income tax, payables to relate and other liabilities not included on lines 17-24) Complete Part					
		D			176,978		132,706
	26	Total liabilities. Add lines 17 through 25			657,137	26	583,524
yn do		Organizations that follow SFAS 117 (ASC 958), check here ► ✓	and c	omplete			
ğ	27	lines 27 through 29, and lines 33 and 34.			1,410,209	27	578,922
<u>ನ</u> ನ	27	Unrestricted net assets		•	4,408,980		6,150,464
<u> </u>	28	Temporarily restricted net assets			200,000	28 29	200,000
or Fund Balances	29	Permanently restricted net assets			200,000	29	
∽	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other fui	nds			32	
Ę	33	Total net assets or fund balances			6,019,189	33	6,929,386
2	34	Total liabilities and net assets/fund balances			6,676,326	34	7,512,910

Par	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				
	Check if Schedule O Contains a response to any question in this rate XI		• •	• •	<u> </u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1		6.1	179,010
2	Total expenses (must equal Part IX, column (A), line 25)	2			268,813
3	Revenue less expenses Subtract line 2 from line 1	3			910,197
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			19,189
5	Net unrealized gains (losses) on investments	5		<u> </u>	<u> </u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		6,9	929,386
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. \sqsubset
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed or	ו		
	Separate basis Consolidated basis Both consolidated and separate basis				
Ь	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	▼ Separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	it of th	2 c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			1:	
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	е	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equire	d 3b		

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As Filed Data -

DLN: 93493228005253

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

LEADERSHIP CONFERENCE EDUCATION FUND

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

Inspection

									23-7026		
Par				blic Charity Sta						instructions	5.
	rganı:		•	te foundation becaus	•		- '	•	•		
1	<u>_</u>			on of churches, or a				ection 170(b)(1)(A)(i).		
2	<u>_</u>			in section 170(b)(1							
3				perative hospital se							
4				h organization operat	ted ın conjun	ction with a	hospital des	cribed in se	ction 170(b)	(1)(A)(iii).	Enter the
5	\vdash			ty, and state erated for the benefi	t of a colloge	or universi	ty owned or o	norated by	2 governmen	atal unit doc	cribad in
3	1	_	•	(A)(iv). (Complete P	_	: or universi	ty owned or o	perated by	a governmen	itai uiiit ues	cribed iii
_	_				•	al unit doco	whad in each	170(b)(1)(A)()		
6	 -			local government or							ماطيب است
7 8	 	describ	ed in sectio	at normally receives on 170(b)(1)(A)(vi). described in sectior	(Complete F	art II)		_	ental unit or	rrom the ger	ierai public
9				at normally receives					butions, mer	nbership fee	s, and gross
	•	_		rities related to its ex					•	-	-
				oss investment inco	· ·	_					
		acquire	ed by the org	ganızatıon after June	30,1975 S	ee section !	509(a)(2). (C	omplete Pa	rt III)		
10	\sqcap	An org	anızatıon or	ganized and operated	d exclusively	to test for p	public safety	See sectio	n 509(a)(4).		
11	Γ	An org	anızatıon or	ganized and operated	d exclusively	for the ben	efit of, to perf	orm the fur	nctions of, or	to carry out	the purposes of
				ly supported organiz						See section !	509(a)(3). Check
			_	bes the type of supp						lan function	ally intograted
_	_	·	Type I	b Type II c ox, I certify that the			-				-
e	'	other t		on managers and ot							
f				received a written de	etermination	from the IR	S that it is a	Type I, Typ	oe II, or Type	III support	ting organization,
			this box								Г
g				2006, has the organi	ızatıon accep	oted any gift	or contributi	on from any	of the		
			ng persons? erson who d	rectly or indirectly o	ontrols, eith	er alone or t	together with	persons de	scribed in (ii)	Yes No
				governing body of th			_				g(i)
				er of a person descri		_					y(ii)
		• •	•	lled entity of a perso			above?				ı(iii)
h				ng information about							
				-		_					
(i)) Nam	ne of	(ii) EIN	(iii) Type of	(iv) Is	the	(v) Did you	ı notıfy	(vi) Is	the	(vii) A mount of
	uppor			organization	organizati		the organi		organiza		monetary
or	ganiza	ation		(described on lines 1- 9 above	col (i) lis your gove		in col (i) o		col (i) or in the l	-	support
				or IRC section	docume	_	Suppor		I III the t	, , ,	
				(see							
				instructions))	Yes	No	Yes	No	Yes	No	7
							1		 	+	+
									1		
Total									1		

Schedule A (Form 990 or 990-EZ) 2012 Page 2 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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 **(e)** 2012 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do not 6,415,957 9,013,910 4,480,080 5,145,686 5,992,904 31,048,537 include any "unusual grants ") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 6,415,957 9,013,910 4,480,080 5,145,686 5,992,904 31,048,537 Total. Add lines 1 through 3 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 Public support. Subtract line 5 31,048,537 from line 4 Section B. Total Support Calendar year (or fiscal year (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total beginning in) 🟲 4,480,080 5,992,904 6,415,957 9,013,910 5,145,686 31,048,537 Amounts from line 4 Gross income from interest, dividends, payments received on 110,501 126,201 78,347 36,432 108,320 459,801 securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include 10 gain or loss from the sale of 1,713 762 1,184 77,786 81,445 capital assets (Explain in Part IV) 11 Total support (Add lines 7 31,589,783 through 10) Gross receipts from related activities, etc (see instructions) 12 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check Section C. Computation of Public Support Percentage 14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) 98 290 % 14 15 Public support percentage for 2011 Schedule A, Part II, line 14 15 81 930 % 16a 33 1/3% support test—2012. 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 b 33 1/3% support test—2011. 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 17a 10%-facts-and-circumstances test - 2012. 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 b 10%-facts-and-circumstances test - 2011. 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

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

supported organization

instructions

Schedule A (Form 990 or 990-EZ) 2012 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 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 Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11. and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage **15** Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f)) 0 % 15 16 Public support percentage from 2011 Schedule A, Part III, line 15 16 Section D. Computation of Investment Income Percentage

33 1/3% support tests—2011. 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

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

19a 33 1/3% support tests—2012. 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

Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))

Investment income percentage from 2011 Schedule A, Part III, line 17

17

18

0 %

M

17

18

Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

EXPLANATION FOR OTHER INCOME OTHER INCOME NOT NORMALLY, OCCURRING, OTHER INCOME PART II, LINE 10, DESCRIPTION OTHER INCOME, 2008 0, 2009 1713, 2010 762, 2011 1184, 2012 77786,

Explanation

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493228005253

OMB No 1545-0047

Inspection

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

► See separate instructions.

Political Campaign and Lobbying Activities

If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- ◆ Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** LEADERSHIP CONFERENCE EDUCATION FUND 23-7026895 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 2 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made? If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year? ☐ Yes Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (e) A mount of political (a) Name (b) Address (c) EIN (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

section 4911 tax for this year?

┌ Yes ┌ No

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

Check	▶ □	if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN,
		expenses, and share of excess lobbying expenditures)

B Check ► If the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying E (The term "expenditures" means a		(a) Filing organization's totals	(b) Affiliated group totals
a	Total lobbying expenditures to influence public of	opinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)		
c	Total lobbying expenditures (add lines 1a and 1	b)		
d	Other exempt purpose expenditures		5,313,046	
e	Total exempt purpose expenditures (add lines 1	c and 1d)	5,313,046	
f	Lobbying nontaxable amount Enter the amount columns	from the following table in both	415,652	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of lir	ne 1f)	103,913	
h	Subtract line 1g from line 1a If zero or less, ent	er -0 -		
i	Subtract line 1f from line 1c If zero or less, ente	er-0-		
j	If there is an amount other than zero on either li	ne 1h or line 1ı, did the organization file Form 4720	reporting	

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) Total beginning in) 592,661 431,689 390,705 415,652 1,830,707 Lobbying nontaxable amount Lobbying ceiling amount 2,746,061 (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount 148,165 107,922 97,676 103,913 457,676 Grassroots ceiling amount 686,514 (150% of line 2d, column (e)) Grassroots lobbying expenditures

Identifier

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has filed Form 5768 (election under section 501(h)).	тог				.gc <u>-</u>
For e	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a	1)		(b)	
activ		Yes	No	A	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
e	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	O ther activities?					
j	Total Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c))(5), oı	r se	ctio	n
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		<u> </u>	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		
Pai	rt III-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year	2a				
b	Carryover from last year	2b				
С	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and					
	political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list),

Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Return Reference

Schedule C (Form 990 or 990EZ) 2012

Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493228005253

OMB No 1545-0047

Open to Public

Inspection

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b

► Attach to Form 990. ► See separate instructions.

Supplemental Financial Statements

Name of the organization

Employer identification number

LEAI	DERSHIP CONFERENCE EDUCATION FUND			, , .	7026905		
Pa	rt I Organizations Maintaining Donor Adv	vised Funds or (Other Similar F		7026895 or Accou	nts. Comple	te if the
	organization answered "Yes" to Form 990	, Part IV, line 6.				·	
		(a) Donor a	dvised funds		(b) Funds a	ind other acco	unts
L	Total number at end of year						
2	Aggregate contributions to (during year)						
3	Aggregate grants from (during year)						
ŀ	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or			nor advı	ısed	┌ Yes	┌ No
5	Did the organization inform all grantees, donors, and do used only for charitable purposes and not for the beneft conferring impermissible private benefit?					┌ Yes	┌ No
Pai	t II Conservation Easements. Complete if	the organization	answered "Yes" t	to Forn	n 990, Par	t IV, line 7.	
<u>.</u>	Purpose(s) of conservation easements held by the org Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a	or education)	Preservation of ar Preservation of a	certifie	d historic st	tructure	
	easement on the last day of the tax year				Held at	the End of the	Year
а	Total number of conservation easements			2a	Troid de	the Line of the	
b	Total acreage restricted by conservation easements			2b			
c	Number of conservation easements on a certified histo	oric structure include	ed ın (a)	2c			
d	Number of conservation easements included in (c) acq historic structure listed in the National Register	quired after 8/17/06	, and not on a	2d			
	Number of conservation easements modified, transferr	ed, released, exting	uished, or terminate	ed by th	ne organizat	ion during	
	the tax year ►						
	Number of states where property subject to conservat	ion easement is loca	ited ▶				
	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?			 idling of	violations,	and Yes	┌ No
	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing	conservation ease	ments o	during the ye	ear	
	A mount of expenses incurred in monitoring, inspecting	g, and enforcing cons	ervation easement	s durin	g the year		
	Does each conservation easement reported on line 2 (and section 170(h)(4)(B)(II)?	d) above satisfy the	requirements of se	ction 17	70(h)(4)(B)	(ı) T Yes	┌ No
	In Part XIII, describe how the organization reports conbalance sheet, and include, if applicable, the text of the organization's accounting for conservation easeme	e footnote to the org					
ar	Organizations Maintaining Collection Complete if the organization answered "Y			or Ot	her Simil	ar Assets.	
а	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide, in Part XIII, the text of the footnote to	.16 (ASC 958), not ts held for public ex	to report in its reve hibition, education,	or rese	arch in furtl		
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide the following amounts relating to thes	ts held for public ex	•				lic
	(i) Revenues included in Form 990, Part VIII, line 1				► \$		
	(ii) Assets included in Form 990, Part X				► \$		
	If the organization received or held works of art, histor following amounts required to be reported under SFAS				· ·		
a	Revenues included in Form 990, Part VIII, line 1				► \$		
	, , –						

b Assets included in Form 990, Part X

Pai	t IIII Organizations Maintaining Co	llections of Art	t, His	tori	<u>cal Tr</u>	easur	es, or C	the	<u>r Similar A</u>	ssets	(coi	ntınued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other reco	ds, cl	neck	any of t	he follo	wing that	are a	significant us	e of its	3	
а	Public exhibition		d	Γ	Loan	orexch	ange prog	ams				
b	Scholarly research		е	Γ	Other							
С	Preservation for future generations											
4	Provide a description of the organization's co Part XIII	ollections and expla	ain ho	w the	y furthe	r the or	ganızatıor	ı's ex	empt purpose	ın		
5	During the year, did the organization solicit o								ılar	_		_
Б.	assets to be sold to raise funds rather than t								!! to E	┌ Ye	S	□ No
Pa	rt IV Escrow and Custodial Arrang Part IV, line 9, or reported an an						answere	u Y	es to Form	990,		
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?						r other ass	ets r	not	Г Ye	s	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follo	ving	table		_					
							-		A	mount		
С	Beginning balance							1c				
d	Additions during the year							1d				
е	Distributions during the year							1e				
f	Ending balance							1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, lin	e 21?							┌ Ye	s	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	anatı	on has b	een pro	ovided in F	art >	KIII			Γ
Pa	rt V Endowment Funds. Complete											
_	_	(a)Current year	(b)	Pnor		b (c) Tw	•	+	Three years back		ur ye	ars back
1a	Beginning of year balance	652,187			642,962		556,248	3	414,050	<u>'</u>		650,076
Ь	Contributions									-		67,595
С	Net investment earnings, gains, and losses	87,448			12,496		89,538	3	144,750			-300,755
d	Grants or scholarships											
е	Other expenditures for facilities and programs											
f	Administrative expenses	3,484			3,271		2,824	1	2,552	2		2,866
g	End of year balance	736,151			652,187		642,962	2	556,248	3		414,050
2	Provide the estimated percentage of the cur	rent year end balan	ce (lır	ie 1g	, colum	n (a)) h	eld as					
а	Board designated or quasi-endowment ►											
b	Permanent endowment ► 27 000 %											
c	Temporarily restricted endowment > 73 (The percentages in lines 2a, 2b, and 2c sho	000 % uld equal 100%										
За	Are there endowment funds not in the posse:	ssion of the organiz	ation	that	are held	l and ac	lmınıstere	d for	the	_		
	organization by								-	-	'es	No
	(i) unrelated organizations		•	•				•		1(i)	_	No
ь	(ii) related organizations							•		(ii)		No_
4	Describe in Part XIII the intended uses of the	•						•	· · · Γ	, o		
_	rt VI Land, Buildings, and Equipme					.0.						
	Description of property		,	(a) Cost o	r other	(b)Cost or basis (otl		(c) Accumula depreciation		d) Bo	ok value
1a	Land											
ь	Buildings											
c	Leasehold improvements						13	1,601	109	,260		22,341
d	Equipment						5	8,435	58	,435		
	Other											
Tot	al. Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part	X, colu	ımn (B), line	10(c).)						22,341
									Schedule	D (For	m 99	00) 2012

Part VII Investments—Other Securities. See	Form 990, Part X, line 1:	2.	
(a) Description of security or category	(b) Book value		d of valuation
(including name of security)		Cost or end-of	-year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	 -		
Part VIII Investments—Program Related. Se	ee Form 990, Part X, line	13.	
(a) Description of investment type	(b) Book value	1	d of valuation
		Cost or end-of	-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	>		
Part IX Other Assets. See Form 990, Part X, I			
(a) Descr			(b) Book value
	peron		
(1) INVESTMENTS-RESTRICTED			816,231
(2) DUE FROM THE LEADERSHIP CONFERENCE			267,166
(3) CASH AND CASH EQUIVALENTS - RESTRICTED			2,250,139
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1			3,333,536
Part X Other Liabilities. See Form 990, Part	1,		
1 (a) Description of liability	(b) Book value		
Federal income taxes			
DEFERRED RENT	42,336		
DEFERRED COMPENSATION	90,370		
DEFERRED COTTLENSATION	30,370		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	132,706		

	(rage
Par	t XI Reconciliation of Revenue per Audited Financial State	emei	nts With Revenue	per Retur	'n
1	Total revenue, gains, and other support per audited financial statements			1	6,223,243
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b	44,233	1	
C	Recoveries of prior year grants	2c		1	
d	Other (Describe in Part XIII)...............	2d		1	
e	Add lines 2a through 2d			2e	44,233
3	Subtract line 2e from line 1			3	6,179,010
4	Amounts included on Form 990, Part VIII, line 12, but not on line $oldsymbol{1}$				
а	Investment expenses not included on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII).............	4b			
C	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 3	12)		5	6,179,010
Par	Reconciliation of Expenses per Audited Financial State	teme	nts With Expense	s per Ret	urn
1	Total expenses and losses per audited financial statements			1	5,313,046
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	_			
а	Donated services and use of facilities	2a	44,233	3	
b	Prior year adjustments	2b			
C	Other losses	2c			
d	Other (Describe in Part XIII)...............	2d			
e	Add lines 2a through 2d			2e	44,233
3	Subtract line 2e from line 1			3	5,268,813
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)...............	4b			
С	Add lines 4a and 4b			4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line	e 18)		5	5,268,813

Part XIII 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, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

I dentifier	Return Reference	Explanation
Pt V Line 4		THE EDUCATION'S ENDOWMENT CONSISTS OF THE CAROL PITCHERSKY
		DEVELOPMENT FUND, A DONOR-RESTRICTED ENDOWMENT FUND, THE PRINCIPAL OF WHICH IS CLASSIFIED WITHIN PERMANENTLY RESTRICTED NET ASSETS
Pt X		THE EDUCATION FUND IS EXEMPT FROM PAYMENT OF INCOME TAXES
		UNDER THE PROVISION OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND HAS BEEN CLASSIFIED AS OTHER THAN A PRIVATE FOUNDATION WITHIN THE MEANING OF SECTION 509(A)(2) OF THE
		INTERNAL REVENUE CODE THE EDUCATION FUND HAD NO UNRELATED BUSINESS INCOME DURING THE YEAR ENDED DECEMBER 31,2012 THE EDUCATION FUND BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR ANY INCOME TAX POSITIONS TAKEN THEREFORE, MANAGEMENT HAS NOT IDENTIFIED ANY UNCERTAIN INCOME TAX POSITIONS AT A MINIMUM, THE 2008 THROUGH 2012 TAX YEARS ARE OPEN FOR EXAMINATION BY TAXING AUTHORITIES

DLN: 93493228005253

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ) **Supplemental Information Regarding**

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Fundraising or Gaming Activities

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. Form 990-EZ filers are not required to complete this part.

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

Name of the organization LEADERSHIP CONFERENCE EDUCATION FUND **Employer identification number**

							23-7026895	
Pa	rt I Fundraising Ac	tivities. Complete	e if the oi	ganızatı	ion a	inswered "Yes" t	to Form 990, Part IV,	line 17.
1	Indicate whether the orga	nızatıon raısed funds	through ar	ny of the 1	follov	ving activities Che	eck all that apply	
а	Mail solicitations			е	▽	Solicitation of non	-government grants	
b	✓ Internet and email so	licitations		f	Γ	Solicitation of gov	ernment grants	
c	Phone solicitations			g	~	Special fundraisin	g events	
d	✓ In-person solicitation	ıs						
2a	Did the organization have or key employees listed in							Γ _{Yes} Γ _N
b	If "Yes," list the ten highe to be compensated at leas			undraiser	rs) pı	irsuant to agreeme	ents under which the fun	draiser is
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrais custo cont contrib	Did ser have ody or rol of utions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
		FUNDRAISING	Yes	No				
	THE BONNER GROUP	FUNDRAISING		No			30,000	-30,000
Γα t ∙				<u> </u>			20.000	20.000
Tota 3	List all states in which the	e organization is regis	tered or li	ensed to	solı	cıt funds or has be	30,000 en notified it is exempt	-30,0 from registration or

			(a) Event #1 ANNUAL DINNER	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))
			(event type)	(event type)	(total number)	(c)
₽	1	Gross receipts	154,100			154,100
Revenue	2	Less Contributions	154,100			154,100
ě	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
	5	Noncash prizes				
ses						
Expenses	6	Rent/facility costs				
፴	7	Food and beverages .				
Direct	8	Entertainment				
۵	9	Other direct expenses .				
	10	Direct expense summary Add lir	nes 4 through 9 ın column	(d)		()
	11	Net income summary Combine I	ine 3, column (d), and line		•	
Par	t III	Gaming. Complete if the o		"Yes" to Form 990, Pa	rt IV, line 19, or rep	orted more than
ds		\$15,000 on Form 990-EZ, li		(h) Dull take (Instant	(a) Other server	(d) Total samura (add
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
₽_	1	Gross revenue				
ses	2	Cash prizes				
⊆	3					
ĝ		Non-cash prizes				
d Expenses		Rent/facility costs				
Direct Expe	4					
চ এ	4 5	Rent/facility costs	Г Yes Г No	Г Yes	Г Yes	
চ এ	4 5 6	Rent/facility costs Other direct expenses	□ No	□ No	□ No	
চ এ	4 5 6 7	Rent/facility costs Other direct expenses Volunteer labor	No	□ No	厂 No	
চ এ	4 5 6 7 8	Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Add line	S 2 through 5 in column (d)	厂 No	
Direct	4 5 6 7 8	Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Add line Net gaming income summary Com	No s 2 through 5 in column (nbine lines 1 and 7 in column ation operates gaming ac	No d) umn (d) tivities	厂 No	Tyes T No
o	4 5 6 7 8 Enta	Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Add line Net gaming income summary Com- er the state(s) in which the organiz	s 2 through 5 in column (abine lines 1 and 7 in column ation operates gaming ace gaming activities in each	d)	厂 No	Tyes T No
pled of a	4 5 6 7 8 Enta	Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Add line Net gaming income summary Com ter the state(s) in which the organization licensed to operate	S 2 through 5 in column (abine lines 1 and 7 in column ation operates gaming act agaming activities in eact	d)	厂 No	

JUE5	the organization operate gaining	activities with nonlinembers		· · I Yes I No
12	Is the organization a grantor, ber	neficiary or trustee of a trust or a men	nber of a partnership or other entity	
	formed to administer charitable o	gamıng [,]		· · · · Fyes F No
13	Indicate the percentage of gamir	ng activity operated in		
а	The organization's facility			13a
b	An outside facility			13b
L4	Enter the name and address of th	ne person who prepares the organizati	on's gaming/special events books	and records
	Name ►			
	Address ►			
	revenue?	ntract with a third party from whom the		
Ь		ning revenue received by the organizated by the third party 🟲 \$		d the
С	If "Yes," enter name and address	s of the third party		
	Name 🟲			
	Address 🟲			
L 6	Gaming manager information			
	Name 🟲			
	Gaming manager compensation	> \$		
	Description of services provided	>		
	Director/officer	□ Employee	Independent contractor	
L 7	Mandatory distributions			
а	Is the organization required unde	er state law to make charitable distrib	utions from the gaming proceeds to	
	retain the state gaming license?			$\Gamma_{\text{Yes}} \Gamma_{\text{No}}$
b	Enter the amount of distributions	required under state law distributed	to other exempt organizations or sp	ent
		activities during the tax year 🕨 \$		
Par	columns (III) and (v), a	mation. Complete this part to pr and Part III, lines 9, 9b, 10b, 15b ditional information (see instruct	, 15c, 16, and 17b, as applical	
	Identifier	Return Reference	Explana	tion

DLN: 93493228005253

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990,

Compensation Information

Part IV, question 23. ► Attach to Form 990. ► See separate instructions. Open to Public Inspection

Name of the organization LEADERSHIP CONFERENCE EDUCATION FUND **Employer identification number**

23-7026895

Pa	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form			
	990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items Housing allowance or residence for personal use			
	First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
	, Possibilities (e.g., maia, chamber, cher,			
ь	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers,			
	directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the			
	organization's CEO/Executive Director Check all that apply Do not check any boxes for methods			
	used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee			
	✓ Independent compensation consultant			
	Approval by the board of compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization			
	or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		Νo
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4 c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of			
а	The organization?	5a		Νo
b	,	5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		Νo
b	Any related organization?	6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			
	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		Νo
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was			
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III			
_		8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of (i) Base compensation	FW-2 and/or 1099-MIS (ii) Bonus & Incentive	(iii) Other reportable	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported as deferred in prior Form 990
		•	compensation	compensation				
(1)WADE HENDERSON	(i) (ii)	200,000		1,880	13,520	1,510	216,910	
(2)KAREN MCGILL LAWSON	(i) (ii)	153,756			10,410	7,562	171,728	
(3)NANCY ZIRKIN	(i) (ii)	136,314			9,464	7,490	153,268	
(4)EDWIN FICHTER	(i) (ii)	130,747			9,049	13,603	153,399	

Schedule J (Form 990) 2012

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this	part for any	[,] addıtıonal	ınformatıon
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Identifier	Return Reference	Explanation
Pt I Line 4b		LCCREF HAS ESTABLISHED A DEFERRED COMPENSATION PLAN FOR ALL EMPLOYEES UNDER SECTION 457(B) OF THE INTERNAL REVENUE CODE THE DEFERRED COMPENSATION AMOUNTED TO \$90,370 AND HAS BEEN FUNDED BY EMPLOYEES' WITHHOLDINGS IN A FIXED ANNUITY CONTRACT ALTHOUGH NOT RELATED BY DEFINITION (THE SAME PERSONS DO NOT CONSTITUTE A MAJORITY OF THE MEMBERS OF THE GOVERNING BODY OF BOTH ORGANIZATIONS), LCCREF IS REPORTING THE FOLLOWING INFORMATION ABOUT LEADERSHIP CONFERENCE ON CIVIL RIGHTS (LCCR)
N/A		NAME, ADDRESS AND EIN OF ORGANIZATION LEADERSHIP CONFERENCE ON CIVIL RIGHTS, INC 1629 K STREET,NW, 10TH FLOOR, WASHINGTON, DC 20006 EIN#52-0789800 PRIMARY ACTIVITY TO PROMOTE THE ENACTMENT AND ENFORCEMENT OF EFFECTIVE CIVIL RIGHTS LEGISLATION AND POLICY LEGAL DOMICILE WASHINGTON, DC EXEMPT CODE SECTION 501 (C) (4) DIRECT CONTROLLING ENTITY N/A TRANSACTIONS LOAN TO LCCR OF \$267,166 SHARING OF FACILITIES, EQUIPMENT, AND OTHER ASSETS SHARING OF EMPLOYEES REIMBURSEMENT PAID BY LCCR FOR EXPENSES

Schedule J (Form 990) 2012

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DLN: 93493228005253

OMB No 1545-0047

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, lines 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. 2012

Open to Public Inspection

Name of the orga LEADERSHIP CONFER	nization RENCE EDUCATION FU	ND						1ploye -7026		fication	number	•
Part I Exces	s Benefit Tran	sactions (section 5	01(c)(3) aı	nd section 5	01(c)(4) or						
Comple	te if the organizati	ion answered	"Yes" on F	orm 990, P	art IV, line 25	sa or 25b, or I	orm 9	90-E	Z, Part \	√, line 4		
1 (a) Name o	of disqualified pers			between dis 1 organizatio		(c) Descrip	otion o	ftrans	action		(d) Corre	
			person and	ı organizatio	''''						res	No
		-										
	ount of tax incurre	ed by organiza	ation mana	gers or disq	ualıfıed perso	ns during the	yearı	ınders	ection			
4958	· · · · · ·							•	F \$.			
5 Enter the am	ount of tax, if any,	on line 2, ab	ove, reimb	ursea by the	e organización			•	- >			
	ns to and/or F											
•	olete if the organiz					ne 38a, or Fo	rm 99	0,Par	t IV , lın	e 26, o	r ıf the	
(a) Name of	(b) Relationship				(e)Original	(f) Balance	(a)	In	(h)	(i)Wrı	tten
interested	with organization		or from t		principal	due		ult?	Appro	ved	agreen	
person			organizat	ion?	amount				by boa			
			То	From	1		Yes	No	Yes	No	Yes	No
			1 10	110111			103	110	103	110	103	1 110
											_	
											_	
											_	
											_	
									Ļ		_	
Total			▶ \$									
	its or Assistan					TV lung 27						
(a) Name of inte	plete if the orga	lationship bet			assistance	(d) Type of		tanco	(0)	Durnos	e of assi	stanco
person	' '	ted person ar		.) Alliount of	assistance	(d) Type of	1 05515	tance	(6)	ruipos	e 01 a551	Stance
		organızatıon										

Part IV Business Transactions Complete if the organizat			ne 28a, 28b, or 28c.		
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization revenues?	
				Yes	No
(1) HAROLD ZIRKIN ZIRKEN CUTLER	SPOUSE OF KEY EMPLOYEE	200,000	INVESTMENT OF RESTRICTED FUNDS		No
(2) HAROLD ZIRKIN MT BANK	SPOUSE OF KEY EMPLOYEE	2,250,000	INVESTMENT OF RESTRICTED FUNDS		No

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Ident if ier	Return Reference	Explanation
		Schedule I (Form 990 or 990-F7) 2012

Schedule L (Form 990 or 990-EZ) 2012

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OMB No 1545-0047

Inspection

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

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

Noncash Contributions

Name of the organization LEADERSHIP CONFERENCE EDUCATION FUND **Employer identification number**

					23-7026895			
Pa	It I Types of Property							
		(a) Check ıf applıcable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of a noncash contri		_	ts
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							
1.1	structures							
	contribution—Other							
	Real estate—Residential .							
	Real estate—Commercial							
	Real estate—Other							
	Collectibles							
	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
24	Archeological artifacts							
	PROFESSIONAL Other►(<u>SERVICES</u>)	l x	2	1	FAIR VALUE OF S PROVIDED	ERVIC	ES	
				44,233	PROVIDED			
	O ther ► ()							
	Other ► () Other ► ()							
	Number of Forms 8283 received	by the eras	nization during the tay yea	r for contributions				
29	for which the organization comple				29			
			,,,,,,,,,,,,,,,,				Yes	No
30a	During the year, did the organiza	ation receiv	e by contribution any prope	erty reported in Part I, lines	1-28 that it			
	must hold for at least three year							
	for exempt purposes for the enti					30a		No
b	If "Yes," describe the arrangement							
31	Does the organization have a gif	ft acceptand	ce policy that requires the	review of any non-standard	contributions?	31		No
372	Does the organization hire or us							
JECI			· · · · · · ·			32a		No
b	If "Yes," describe in Part II							
33	If the organization did not report	t an amount	ın column (c) for a type of	property for which column (a) is checked,			
	describe in Part II							

Page 2

Schedule M	(Form 990) (201:
Part II	Supplem

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) (2012)

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OMB No 1545-0047

2012

Open to Public

Inspection

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service

SCHEDULE 0

(Form 990 or 990-EZ)

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

► Attach to Form 990 or 990-EZ.

Employer identification number Name of the organization LEADERSHIP CONFERENCE EDUCATION FUND 23-7026895

Identifier	Return Reference	Explanation
Pt VI, Line 8b		THE COMMITTEES OF THE BOARD OF DIRECTORS DO NOT HAVE
		AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY THEREFORE,
		DOCUMENTATION OF COMMITTEE ACTIVITY IS HANDLED THROUGH
		THE MINUTES OF BOARD MEETINGS
Pt VI, Line 11b		THE PROCESS FOR FORM 990 REVIEW PRIOR TO FILING IT IS
		REVIEWED BY THE DIRECTOR OF FINANCE AS WELL AS THE EXECUTIVE
		VICE PRESIDENT/COO OF THE ORGANIZATION AND THE FINANCE
		COMMITTEE OF THE BOARD THAT REPORTS TO THE FULL BOARD
Pt VI, Line 15b		THE PROCESS FOR COMPENSATION APPROVAL IS BIFURCATED
		BETWEEN ANNUAL COST OF LIVING ADJUSTMENTS FOR ALL EMPLOYEES
		AND PERIODIC INCREASES TO ENSURE EQUITY AMONG STAFF
		AND THE MARKET FOR THE NOT-FOR-PROFIT SECTOR
		ONE-TIME ADJUSTMENTS ARE BASED ON THIRD PARTY CONSULTATION
		RESULTING IN MARKET ANALYSIS OF SALARIES IN THE NOT-FOR-
		PROFIT SECTOR IN WASHINGTON, DC SALARY RANGES AND SPECIFIC
Pt VI, Line 5		N/A
Pt III, Line 2		EVERY VOTER COUNTS PROJECT PROVIDES STRATEGIC SUPPORT
		AND GUIDANCE, MATERIALS AND TOOLS, AND TECHNICAL
		ASSISTANCE DESIGNED TO EDUCATE ABOUT THE RIGHT TO VOTE,
		VOTER PROTECTION AND OVERCOMING BARRIERS TO THE RIGHT TO

ldentifier	Return Reference	Explanation
		VOTE IN ORDER TO INCREASE THE UNDERSTANDING OF THE
		IMPORTANCE OF VOTING THE GOAL OF OUR STATE STRATEGIC
		FIELD AND COMMUNICATIONS ACTIVITIES IS TO OFFER BROAD
		SUPPORT TO DIVERSE LOCAL STAKEHOLDERS WORKING TO ENHANCE
		VOTER EDUCATION AND IMPROVE CIVIC PARTICIPATION RATES
		IMMIGRATION PROJECT WORKS TO RAISE AWARENESS ABOUT THE
Form 990, Part III, Line 4d		OTHER PROGRAMS 2553348 0 4226431
Form 990, Part IX, Line 24f		OTHER EXPENSES 148798 23207 110653 14938 POSTAGE AND MESSENGER 8277 3453 241 4583 OTHER TRAVEL, INCLUDING STIPENDS 32035 30888 1147 0 DUES AND SUBSCRIPTIONS 10786 2318 8468 0 REPAIRS & MAINTENANCE 29544 24192 5352 0 BANK CHARGES 4775 0 4775 0 ALLOCATION TO EDUCATION FUND -125686 0 -125686 0
		NEED FOR IMMIGRATION REFORM AND POLICIES TO ADDRESS THE
		NEEDS OF ALL LOW-WAGE WORKERS THROUGH THE PROJECT, WE
		DEVELOP PUBLIC EDUCATION TOOLS, AND BUILD MULTI-ETHNIC
		CIVIL AND HUMAN RIGHTS COALITIONS THROUGHOUT THE COUNTRY
		AT THE NATIONAL LEVEL, WE CONTINUE TO MONITOR DEBATE
		ABOUT COMPREHENSIVE IMMIGRATION REFORM WITH A SPECIAL
		FOCUS ON THE DREAM ACT
Pt VI, Line 15a		SAME AS RESPONSE ON LINE 15b
Pt VI, Line 15b		SALARIES FOR THE PRESIDENT ARE SET BY THE EXECUTIVE
		COMMITTEE OF THE BOARD OF DIRECTORS THE BOARD HAS A STANDING
		COMMITTEE FOR PERSONEL ISSUES ALL OTHER STAFF SALARIES
		ARE SET BY THE PRESIDENT AND COO UNDER ADVICE OF A SALARY STUDY

ldentifier	Return Reference	Explanation
		AND THIRD PARTY CONSULTATION
Pt VI, Line 17		DC, AK, AL, AR, CA, CO, CT, FL, GA, IL, KS, MA, MD, ME, MI, MN, MS, NC, NH
		ND,NJ,NM,NY,OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WI,WV AND KY
Pt VI, Line 19		THE EDUCATION FUND MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST
		POLICY AND FINANCIAL STATEMENTS AVAILABLE UPON REQUEST
Pt XI,Line 5		CHANGES IN NET ASSETS NET UNREALIZED GAINS ON INVESTMENTS \$36,432
		THE PROCESS IS CONSISTENT WITH THE PRIOR YEAR
Pt IV,Line 34		PER THE INSTRUCTIONS, THE LEADERSHIP CONFERENCE
		EDUCATION FUND IS NOT RELATED TO THE LEADERSHIP CONFERENCE
		ON CIVIL & HUMAN RIGHTS BECAUSE THE SAME PERSONS DO NOT
		CONSTITUTE A MAJORITY OF THE MEMBERS OF THE GOVERNING BODY
		OF BOTH ORGANIZATIONS THEREFORE, THE ORGANIZATIONS DO NOT
		QUALIFY AS RELATED BROTHER/SISTER NONPROFIT ORGANIZATIONS
		THE LEADERSHIP CONFERENCE, WITH A BOARD OF 29 VOTING MEMBERS AND THE EDUCATION FUND, WITH
		A BOARD OF 6 VOTING MEMBERS