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Return of Organization Exempt From Income Tax

2008

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

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For the 2008 calendar year, or tax year beginning , 2008, and ending

B Check if applicable:	C Name of organization Legislative Black Caucus of Maryland, Inc.			D Employer Identification Number 01-0646813		
	<input type="checkbox"/> Address change	<input type="checkbox"/> Name change	<input type="checkbox"/> Initial return	Number and street (or P.O. box if mail is not delivered to street addr)	Room/suite 300	E Telephone number (410) 841-3185
<input type="checkbox"/> Termination	<input checked="" type="checkbox"/> Amended return	<input type="checkbox"/> Application pending	6 Bladen Street	City, town or country Annapolis	State ZIP code + 4 MD 21401	G Gross receipts \$ 37,347.
F Name and address of principal officer: Catherine Pugh 6 Bladen St Annapolis MD 21401			H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
			H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'No,' attach a list. (see instructions)			
I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (4) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			J Website: ► N/A			
K Type of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ►			L Year of Formation: 2001 M State of legal domicile: MD			

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: To establish and initiate actions to promote social welfare and provide leadership in developing, advocating and implementing programs and policies that serve the best interest of the African-American and other minority communities.	
	2 Check this box ► <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.	
Revenue	3 Number of voting members of the governing body (Part VI, line 1a)	3 4
5 Number of independent voting members of the governing body (Part VI, line 1b)	4 4	
6 Total number of employees (Part V, line 2a)	5 1	
7a Total gross unrelated business revenue from Part VIII, line 12, column (C)	6 4	
b Net unrelated business taxable income from Form 990-T, line 34	7a 0.	
7b		
Expenses	8 Contributions and grants (Part VIII, line 1h)	Prior Year 183,565. Current Year 37,347.
	9 Program service revenue (Part VIII, line 2g)	
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0.	
12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	183,565. 37,347.	
Net Assets or Fund Balances	13 Grants and similar amounts paid (Part IX, column (A), lines 1-7)	RECEIVED
	14 Benefits paid to or for members (Part IX, column (A), line 4)	
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	31,110. 37,692.	
16a Professional fundraising fees (Part IX, column (A), line 11e)	30,533.	
b Total fundraising expenses (Part IX, column (D), line 25)	0.	
17 Other expenses (Part IX, column (A), lines 11a-1d, 11f-24)	70,805. 51,986.	
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	132,448. 89,678.	
19 Revenue less expenses. Subtract line 18 from line 12	51,117. -52,331.	
	Beginning of Year 163,554. End of Year 92,746.	
	21 Total liabilities (Part X, line 26)	19,312. 835.
	22 Net assets or fund balances. Subtract line 21 from line 20	144,242. 91,911.

Part II Signature Block

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.		
		08/07/10	Date
	Signature of officer		
	Catherine Pugh		Chairperson
Type or print name and title.			

Paid Preparer's Use Only	Preparer's signature ► ANTHONY G KING, CPA	Date 08/06/10	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (see instructions) P00364597
	Firm's name (or yours if self-employed, address, and ZIP + 4) ► KING, KING & ASSOCIATES, P.A. 124 SLADE AVENUE SUITE 100 BALTIMORE MD 21208-4900	EIN ►	Phone no. ► (410) 486-4500	

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

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

TEEA0101 04/23/09 Form 990 (2008)

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Part III. Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission:

To establish and initiate actions to promote social welfare and provide leadership in developing, See Form 990, Page 2, Part III, Line 1 (continued)

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

If 'Yes,' describe these new services on Schedule O.

Yes No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

If 'Yes,' describe these changes on Schedule O

Yes No

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code _____) (Expenses \$ 59,845. including grants of \$ 0.) (Revenue \$ 37,347.)

Legislative programs bringing together business, legislators, the community and disadvantaged groups to introduce and educate them in the government and its processes

4b (Code _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4c (Code. _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4d Other program services (Describe in Schedule O)

(Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e Total program service expenses ► \$ 59,845. (Must equal Part IX, Line 25, column (B))

Part IV Checklist of Required Schedules

	Yes	No
1		X
2	X	
3		X
4		
5	X	
6		X
7		X
8		X
9	X	
10		X
11	X	
12		X
13		X
14a	X	
14b		X
15	X	
16		X
17		X
18		X
19		X
20		X
21		X
22		X
23		X
24a		X
24b		
24c		
24d		
25a		X
25b		X
26		X
27		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If 'Yes,' complete Schedule L, Part IV	28a	X
b Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L, Part IV	28b	X
c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If 'Yes,' complete Schedule L, Part IV	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33	X
34 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34	X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35	X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If '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	X

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Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	1a	0	
1b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	1	
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)</i>	2b	X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	X	
b If 'Yes' has it filed a Form 990-T for this year? <i>If 'No,' provide an explanation in Schedule O</i>	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X	
b If 'Yes,' enter the name of the foreign country: ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1 , Report of Foreign Bank and Financial Accounts.	5a	X	
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5b	X	
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5c		
c If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	6a	X	
6a Did the organization solicit any contributions that were not tax deductible?	6b		
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	7a	X	
7 Organizations that may receive deductible contributions under section 170(c).	7b		
a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7c	X	
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7d		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7e	X	
d If 'Yes,' indicate the number of Forms 8282 filed during the year	7f	X	
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7g		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7h		
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	8		
h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	9a		
8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	9b		
9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?			
b Did the organization make any distribution to a donor, donor advisor, or related person?			
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from other members or shareholders	11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b		

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Part VI Governance, Management and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

For each 'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions

1a Enter the number of voting members of the governing body **1a|4**
 b Enter the number of voting members that are independent **1b|4**

2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee? **2 X**

3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? **3 X**

4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? **4 X**

5 Did the organization become aware during the year of a material diversion of the organization's assets? **5 X**

6 Does the organization have members or stockholders? **6 X**

7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? **7a X**
 b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? **7b X**

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:
 a The governing body? **8a X**
 b Each committee with authority to act on behalf of the governing body? **8b X**

9a Does the organization have local chapters, branches, or affiliates? **9a X**
 b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? **9b X**

10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990 **10 X**

11 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O **11 X**

Section B. Policies

12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13 **12a X**
 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? **12b X**
 c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done **12c X**

13 Does the organization have a written whistleblower policy? **13 X**

14 Does the organization have a written document retention and destruction policy? **14 X**

15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:
 a The organization's CEO, Executive Director, or top management official? **15a X**
 b Other officers of key employees of the organization? **15b X**
 Describe the process in Schedule O. (see instructions)

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? **16a X**
 b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? **16b X**

Section C. Disclosures

17 List the states with which a copy of this Form 990 is required to be filed ► Maryland

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request

19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:
 ► Maryland _____ 6 Bladen St., #300 Annapolis _____ MD 21401 _____ (301) 858-3185

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- 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) or more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did not compensate any officer, director, trustee, or key employee

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

1 b Total

33,808.

0.

0 -

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ►

	Yes	No
3		X
4		X
5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

Part VIII Statement of Revenue

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c	26,307.			
	d Related organizations	1d	0.			
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	11,040.			
	g Noncash contribns included in lns 1a-1f.		\$ 11,040.			
	h Total, Add lines 1a-1f			37,347.		
PROGRAM SERVICE REVENUE		Business Code				
	2a					
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g Total, Add lines 2a-2f					
OTHER REVENUE	3 Investment income (including dividends, interest and other similar amounts)					
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6a Gross Rents	(i) Real	(ii) Personal			
	b Less: rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)					
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
b Less: cost or other basis and sales expenses						
c Gain or (loss)						
d Net gain or (loss)						
8a Gross income from fundraising events (not including \$ 26,307. of contributions reported on line 1c). See Part IV, line 18	a					
b Less: direct expenses	b					
c Net income or (loss) from fundraising events		0.	0.	0.	0.	
9a Gross income from gaming activities. See Part IV, line 19	a	0.				
b Less: direct expenses	b					
c Net income or (loss) from gaming activities		0.	0.	0.	0.	
10a Gross sales of inventory, less returns and allowances	a					
b Less: cost of goods sold	b					
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue	Business Code					
11a						
b						
c						
d All other revenue						
e Total, Add lines 11a-11d						
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e		37,347.	0.	0.	0.	

Part IX. Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	35,322.	14,202.	21,120.	0.
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				
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	2,370.	0.	2,370.	0.
11 Fees for services (non-employees)				
a Management	0.	0.	0.	0.
b Legal	2,500.	1,250.	1,250.	0.
c Accounting	4,050.	2,025.	2,025.	0.
d Lobbying				
e Prof fundraising svcs See Part IV, ln 17				
f Investment management fees	0.	0.	0.	0.
g Other	0.	0.	0.	0.
12 Advertising and promotion	744.	298.	446.	0.
13 Office expenses	667.	0.	667.	0.
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	401.	0.	401.	0.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.	0.	0.	0.
19 Conferences, conventions, and meetings	24,782.	24,782.	0.	0.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a Outside services	15,889.	15,889.	0.	0.
b Payroll processing fees	1,544.	0.	1,544.	0.
c Misc	1,399.	1,399.	0.	0.
d Bank fees	10.	0.	10.	0.
e				
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	89,678.	59,845.	29,833.	0.
26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X | Balance Sheet

		(A) Beginning of year	(B) End of year
ASSETS	1 Cash – non-interest-bearing	163,554.	1 62,889.
	2 Savings and temporary cash investments	2	
	3 Pledges and grants receivable, net	3	
	4 Accounts receivable, net	4	
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L	5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L	6	
	7 Notes and loans receivable, net	7	29,857.
	8 Inventories for sale or use	8	
	9 Prepaid expenses and deferred charges	9	
	10a Land, buildings, and equipment: cost basis	10a	
	b Less: accumulated depreciation. Complete Part VI of Schedule D	10b	10c
	11 Investments – publicly-traded securities	11	
	12 Investments – other securities See Part IV, line 11	12	
	13 Investments – program-related. See Part IV, line 11	13	
	14 Intangible assets	14	
	15 Other assets. See Part IV, line 11	15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	163,554.	16 92,746.	
LIABILITIES	17 Accounts payable and accrued expenses	19,312.	17 835.
	18 Grants payable	18	
	19 Deferred revenue	19	
	20 Tax-exempt bond liabilities	20	
	21 Escrow account liability. Complete Part IV of Schedule D	21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	22	
	23 Secured mortgages and notes payable to unrelated third parties	23	
	24 Unsecured notes and loans payable	24	
	25 Other liabilities. Complete Part X of Schedule D	25	
	26 Total liabilities. Add lines 17 through 25	19,312.	26 835.
NET ASSETS OR FUND BALANCE	Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29 and lines 33 and 34.		
	27 Unrestricted net assets	144,242.	27 91,911.
	28 Temporarily restricted net assets	28	
	29 Permanently restricted net assets	29	
	Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 30 through 34.		
	30 Capital stock or trust principal, or current funds	30	
	31 Paid-in or capital surplus, or land, building, and equipment fund	31	
	32 Retained earnings, endowment, accumulated income, or other funds	32	
	33 Total net assets or fund balances.	144,242.	33 91,911.
	34 Total liabilities and net assets/fund balances.	163,554.	34 92,746.

Part XI | Financial Statements and Reporting

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

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

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

 c If 'Yes' to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

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

 b If 'Yes,' did the organization undergo the required audit or audits?

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

Miscellaneous Statement

AMENDED RETURN - YEAR ENDED DECEMBER 31, 2008	ORIGINAL	AMENDED
<u>The original return included balance sheet transactions that were erroneously reported as Functional Expenses in Part IX</u>		
Part 1 Line 17 Other Expenses	81,843.	51,986.
Part X Line 7 Receivables	0.	29,987.
Part X Line 17 Payables/Accrued Expenses	0.	835.
Total	<u>81,843.</u>	<u>82,808.</u>

Schedule O (Form 990), Supplemental Information to Form 990

Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission:

advocating and implementing programs and policies that serve the
best interest of the African-American and other minority communities.

Miscellaneous Statement

AMENDED RETURN - YEAR ENDED DECEMBER 31, 2008	ORIGINAL	AMENDED
<u>The original return included balance sheet transactions that were erroneously reported as Functional Expenses in Part IX</u>		
Part 1 Line 17 Other Expenses	81,843.	51,986.
Part X Line 7 Receivables	0.	29,987.
Part X Line 17 Payables/Accrued Expenses	0.	835.
Total	<u>81,843.</u>	<u>82,808.</u>