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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

2008

Open to Public Inspection

| A Fo | r the | 2008 са | lendar yea | r, or tax year beginning | 10-01-2008 | and ending 09-30-20 | 09 | | | | | |
|--------------------------------|--------------|---------------------------------------|-----------------------------|--|-------------------|------------------------------|------------------------------|---------------------------------------|-------------------------------------|--|--|--|
| B Ch | eck ıf a | pplicable | Please | C Name of organization NATIONAL COUNCIL OF LA | A RAZA INC | | | D Employer i | dentification number | | | |
| ☐ Add | dress ch | nange | use IRS label or | | | | 86-02128 | | | | | |
| ∏ Na | me cha | nge | print or type. See | Doing Business As NCLR | | | | E Telephone number | | | | |
| ┌ Init | al retu | rn | Specific | Number and street (or P (| O box if mail is | not delivered to street add | ress) Room/sur | (202) 785 | | | | |
| Г Те | mınatıc | on | Instruc- tions. | 1126 16TH STREET NW | | | | G Gross rece | ipts \$ 37,389,751 | | | |
| ┌ Am | ended | return | | City or town, state or cou | | 4 | | | | | | |
| Г Арі | olication | n pending | | WASHINGTON, DC 20036 | 63622 | | | | | | | |
| | | | F Nan | ne and address of Princi | ıpal Officer | | H(a) is t | his a group retu | rn for | | | |
| | | | Janet M | lurguia .6TH STREET NW | | | | iates? | ⊤Yes ▽ No | | | |
| | | | | NGTON, DC 2003636 | 522 | | H(b) Are | all affiliates inclu | ded? Yes No | | | |
| I Ta | x-exem | npt status | ▽ 501(c) | (3) ◀ (insert no) | 947(a)(1) or Г | 527 | 1 | | st See instructions) | | | |
| y W | eb sit | e: 🟲 WW | /W NCLR O | RG | | | H(c) Gr | oup Exemption N | lumber 🟲 | | | |
| К Тур | e of org | ganızatıon | ▽ Corporat | ion trust association | other ► | | L Year of | Formation 1968 | M State of legal domicile AZ | | | |
| Pa | rt I | Sumi | mary | | | | | | | | | |
| | 1 | Briefly | describe th | e organization's missior | n or most sıgr | nificant activities | | | | | | |
| <u>မ</u> | | | s the larges panic Ameri | | ıl rıghts and a | dvocacy organization | ın the United | States - works | to improve opportunities | | | |
| Governance | | iornisp | anic Ameri | Cans | | | | | | | | |
| iei Keil | 2 | Checkt | this box | ıf the organization disco | ontinued its o | perations or disposed | of more than | 25% of its ass | ets | | | |
| ŝ | 3 | Number | r of voting r | nembers of the governir | ng body (Part | VI, line 1a) | | . 3 | 25 | | | |
| න් ර | 4 | Number | rofındepen | dent voting members of | f the governin | ig body (Part VI, line : | 1b) | . 4 | 24 | | | |
| ĕ | 5 | Total nu | umber of en | nployees (Part V , line 2 | a) | | | 5 | 169 | | | |
| Activities & | 6 | Total nu | umber of vo | lunteers (estimate if ne | | 6 | 30 | | | | | |
| ₹ | | | | ted business revenue fr | | | | 7 a | | | | |
| | ь | Net unr | elated busi | ness taxable income fro | om Form 990 | -T, line 34 | 1 _ | 76 | | | | |
| | | Combri | hutuana ana | d annuts (Doub VIII line | Р | rior Year | Current Year | | | | | |
| ē | 8 | | | d grants (Part VIII, line | | | • | 4,849,403 | 32,785,018 | | | |
| Reveni | 10 | · · · · · · · · · · · · · · · · · · · | | | | | | 518,600 | -255,112 | | | |
| 걆 | 11 | | | art VIII, column (A), lır | | 131,164 | 108,322 | | | | | |
| | 12 | | revenue—a | dd lines 8 through 11 (n | nust equal Pa | rt VIII, column (A), lı | ne | 25 070 711 | 26,006,267 | | | |
| | 13 | 12) | and simila | er amounts paid (Part IX | / column (A) | lines 1 2) | | 35,978,711 | 36,996,267 | | | |
| | 14 | | | r for members (Part IX, | | | | 8,784,711 | 7,634,482 | | | |
| | 15 | | • | ompensation, employee | , | • | 5 - | | | | | |
| 88 | | 10) | , | | (, a. | | | 9,646,544 | 12,035,588 | | | |
| Expenses | 16a | Profes | sional fund | raising fees (Part IX, co | olumn (A), lın | | 40,651 | 0 | | | | |
| 五 | ь | | | penses, Part IX, column (D), | | | | | | | | |
| | 17 | | | Part IX, column (A), lin | | | | 18,440,546 | 18,368,282 | | | |
| | 18 19 | | | add lines 13–17 (must enses Subtract line 18 | - | · | 36,912,452 -933,741 | 38,038,352 | | | | |
| <u>₹ 60</u> | 19 | Keven | ue less exp | denses Subtract line 18 | s from line 12 | | Pogin | · · · · · · · · · · · · · · · · · · · | -1,042,085 End of Year | | | |
| Net Assets or Fund Balances | 20 | Total | assate /De- | t X, line 16) | | | begin | 53,507,426 | 54,380,430 | | | |
| Ass. Bas | 21 | | | Part X, line 26) | | | | 5,906,128 | 7,818,098 | | | |
| end. | 21 | | | d balances Subtract lin | na 21 fram ! | | 47,601,298 | 46,562,332 | | | | |
| | 22 11 III | | ature Blo | | 16 21 110111 1111 | e 20 | | 47,601,298 | 40,502,532 | | | |
| ra | | | | | examined this ret | turn, including accompanyii | ng schedules and | d statements, and t | o the best of my knowledge | | | |
| | | and beli | ef, it is true, o | correct, and complete Declar | ration of prepare | r (other than officer) is ba | sed on all inform | nation of which prep | arer has any knowledge | | | |
| Please Sign | | Sign | ature of office | ar . | | | 20: Da | 10-08-14 te | | | | |
| Her | | [| | | | | 54 | | | | | |
| | | | e or print nam | Executive VP e and title | | | | | | | | |
| | | Preparer | 's k | | | Date | Check If | Preparer's PTI | N (See Gen Inst) | | | |
| Paid | | signature | | M Underwood CPA | | | self- empolyed ▶ [| _ | | | | |
| | arer's | | ame (or yours | BDO USA LLP | | | | t | | | | |
| Use (| Only | 1 | nployed), and ZIP + 4 | 7101 Wisconsin Ave Suit | te 800 | | | – EIN ► | | | | |
| | | | | Bethesda, MD 2081448 | | | | Phone no 🕨 | (301) 654-4900 | | | |
| May | the IR | S discus | s this retu | rn with the preparer sho | | ee instructions) . | | | ✓ Yes 「No | | | |

Part III Statement of Program Service Accomplishments (See the instructions.)

| 1 | Briefly describe the organization's missio | n | | | | |
|------------|---|---|---|--|--|--|
| See A | dditional Data Table | | | | | |
| 2 | Did the organization undertake any the prior Form 990 or 990-EZ? | | | vices during the yea | r which were not listed on | ┌ Yes ┌ No |
| | If "Yes," describe these new servic | | | | | |
| 3 | Did the organization cease conductions services? | | gnıfıcant o | changes in how it co | nducts any program | ┌ Yes ┌ No |
| _ | If "Yes," describe these changes o | | | | | |
| 4 | Describe the exempt purpose achie Section 501(c)(3) and (4) organization others, the total expenses, and rev | ations and 494 | 7 (a)(1) tru | ists are required to | report the amount of grants | |
| 4a | (Code) (Expense Strategic Communications Group - The St build a community of professionals for ad funds for the organization-Help communi | trategic Communic | cations Group institution's | mission-Honor pioneers | | |
| | | | | | | |
| 4b | (Code) (Expense Community Development and Fellowship healthy communities through the creation institutional assets held by the Hispanic/L controlled by Latino institutions. The Hisp | Program - The m n of social, politica atino community | ission of the I, and econo This will be | mic wealth NCLR seeks measured both by the v | s to measurably increase the level wealth of individual families and the | of liquid, non-liquid, and e amount of capital assets |
| | | | | | | |
| 4 c | (Code) (Expense Office of Research, Advisory, and Legislat and Legislation are part of any communit The organization has amplified its advoca the nonpartisan foundation for increased | tion - The Nationa ty empowerment s acy activities, addii | , I Council of I strategy NC ng a state ai | LR conducts applied rese nd local dimension to NC | earch and advocacy to promote the | well being of Hispanic Americans |
| | | | | | | |
| | (Code) (Expense | es \$ 16, | ,255,674 | including grants of \$ | 3,393,098) (Revenue \$ | 209,485) |
| | | | | | | |
| 4d | Other program services (Describ (Expenses \$ | e in Schedule (including (| • | ; |) (Revenue \$ |) |
| 4e | Total program service expenses s | \$ 35 | ,503,979 | Must equal Part I > | (, Line 25, column (B). | |

| Part IV | Checklist of | Required | Schedules |
|---------|--------------|----------|------------------|
|---------|--------------|----------|------------------|

| | | | Yes | No |
|-----|---|-----|-----|-----|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A | 1 | Yes | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? 🕏 | 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 | | Νο |
| 4 | Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II | 4 | Yes | |
| 5 | Section $501(c)(4)$, $501(c)(5)$, and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III | 5 | | |
| 6 | Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I. | 6 | | 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 | | Νο |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III | 8 | | Νο |
| 9 | Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV | 9 | | Νο |
| 10 | Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | Yes | |
| 11 | Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable | 11 | Yes | |
| 12 | Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII. | 12 | Yes | |
| 13 | Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | Νο |
| 14a | Did the organization maintain an office, employees, or agents outside of the U S ? | 14a | | Νο |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I . | 14b | | Νο |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i> | 15 | | Νο |
| 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, Part III | 16 | | Νο |
| 17 | Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i> | 17 | | No |
| 18 | Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | | Νο |
| 19 | Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III | 19 | | Νo |
| 20 | Did the organization operate one or more hospitals? If "Yes," complete Schedule H | 20 | | Νο |
| 21 | Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | Yes | |
| 22 | Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | | Νο |
| 23 | Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "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 questions 24b-24d and complete Schedule K. If "No," go to question 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 | | N o |
| b | Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? 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, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II | 26 | | Νο |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III | 27 | | No |

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 | | | |
| а | 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 | | | |
| | | 28a | | Νo |
| b | Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV | 28b | | Νo |
| С | 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 | | Νo |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | | No |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," complete Schedule M | 30 | | Νo |
| 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? <i>If</i> "Yes," complete Schedule N, Part II | 32 | | Νo |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I | 33 | | Νo |
| 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 | Yes | |
| 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 | | No |
| 36 | 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 | | Νο |
| 37 | Did the organization conduct more than 5 percent 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 |

| Pai | tt 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 96 | | | |
| b | Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0 | | | |
| | | | | |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 1c | | |
| 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 | | | |
| Ь | If at least one is reported in 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. | 2b | Yes | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this | | | |
| | return? | 3a | | Νo |
| b | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O | 3Ь | | |
| 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 | | No |
| b | If "Yes," enter the name of the foreign country | | | |
| | See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | Νo |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | Νo |
| c | If "Yes," to 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited | | | |
| | Tax Shelter Transaction? | 5с | | |
| 6a | Did the organization solicit any contributions that were not tax deductible? | 6a | | Νo |
| Ь | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | 6b | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | |
| а | Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more? | 7a | | Νo |
| ь | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | |
| c | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to | | | |
| | file Form 8282? | 7c | | No |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | | | |
| _ | Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal | | | |
| - | benefit contract? | 7e | | Νο |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | Νο |
| g | For all contributions of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | Νο |
| h | For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as | | | |
| | required? | 7h | | No |
| 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 | 8 | | |
| | year? | | <u> </u> | <u> </u> |
| 9 | Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. | | | |
| _ | Did the organization make any taxable distributions under section 4966? | 9a | | |
| Ь | Did the organization make a distribution to a donor, donor advisor, or related person? | 9b | | |
| 10 | Section 501(c)(7) organizations. Enter | | | |
| | 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 | | | |
| 11 | Section 501(c)(12) organizations Enter | | | |
| а | Gross income from members or shareholders | | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) | | | |
| 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 | | | |

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

| | Section | Α. | Governing | Body | and | Management |
|--|---------|----|-----------|------|-----|------------|
|--|---------|----|-----------|------|-----|------------|

| | | | | | Yes | No | | | |
|----|---|--|-------------------------|-----|-----|----|--|--|--|
| | For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below processes, or changes in Schedule O. See instructions. | , desc | ribe the circumstances, | | | | | | |
| 1a | Enter the number of voting members of the governing body | 25 | | | | | | | |
| b | Enter the number of voting members that are independent | nter the number of voting members that are independent 1b 2- | | | | | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee? | | 2 | | No | | | | |
| 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? . | | | | | | | | |
| 4 | Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? | | | | | | | | |
| 5 | Did the organization become aware during the year of a material diversion of the organization | 5 | | No | | | | | |
| 6 | Does the organization have members or stockholders? | | | | | | | | |
| 7a | Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? | | | | | | | | |
| b | Are any decisions of the governing body subject to approval by members, stockhold | ers, o | rother persons? | 7b | | Νo | | | |
| 8 | Did the organization contemporaneously document the meetings held or written action year by the following | ons ui | ndertaken during the | | | | | | |
| а | the governing body? | | | 8a | Yes | | | | |
| ь | each committee with authority to act on behalf of the governing body? | | | 8b | Yes | | | | |
| 9a | Does the organization have local chapters, branches, or affiliates? | • | | 9a | | Νo | | | |
| b | If "Yes," does the organization have written policies and procedures governing the adaffiliates, and branches to ensure their operations are consistent with those of the or | . , | 9b | | | | | | |
| 10 | Was a copy of the Form 990 provided to the organization's governing body before it was describe in Schedule O the process, if any, the organization uses to review the | | 10 | Yes | | | | | |
| 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 | | | | | | | | |

Section B. Policies

| | | | Yes | No |
|------------|--|-----|-----|----|
| L2a | Does the organization have a written conflict of interest policy? If "No", go to line 13 | 12a | Yes | |
| b | Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | Yes | |
| С | Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done | 12c | Yes | |
| L3 | Does the organization have a written whistleblower policy? | 13 | Yes | |
| L 4 | Does the organization have a written document retention and destruction policy? | 14 | Yes | |
| L 5 | 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 | | | |
| а | The organization's CEO, Executive Director, or top management official? | 15a | Yes | |
| b | Other officers or key employees of the organization? | 15b | Yes | |
| | Describe the process in Schedule O | | | _ |
| L6a | 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 | | No |
| 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 | | |

Section C. Disclosure

- List the States with which a copy of this Form 990 is required to be filed AL, AZ, CA, CO, CT, DC, FL, GA, IL, IN, KS, KY, MD, ME, MI, MN, MS, NC, ND, NH, NJ, NM, NV, NY, OH, OK, OR, PA, RI, SC, TN, TX, UT, VA, WA, WI, WV
- 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 make these available. Check all that apply own website. I another's website.
- 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. See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

Claudia Rosario 1126 16TH STREET NW WASHINGTON, DC 200363622 (202) 776-1742

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

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

- * List all of the organization's **current** officers, directors, trustees (whether individuals or organizations) and key employees 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) 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

| The check this box in the organization and i | · | (C) Position (check all that apply) | | | | | | | (E) | (F) |
|--|--|-------------------------------------|-----------------------|---------|--------------|------------------------------|--------|---|--|--|
| (A) Name and Title | (B) Average hours per week | Individual Trustee or Chrector | Institutional Trustee | Officei | Key employee | Highest compensated employee | Former | (D) Reportable compensation from the organization (W- 2/1099MISC) | (E) Reportable compensation from related organizations (W- 2/1099- MISC) | Estimated amount of other compensation from the organization and related organizations |
| | | | | | | | | | | |
| | | | | | | | _ | | | |
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| | | | | | | | | | | |

Part VII Continued

| (A) Name and Title | (B) Average hours per week | | apply | Highes emplos Key | Former | (D) Reportable compensation from the organization (W- 2/1099MISC) | (E) Reportable compensation from related organizations (W- 2/1099- MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|------------------------------|--|--|-----------------|-------------------------|----------|---|--|--|
| | | | | | | | | |
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| | | | | | | | | |
| | | | | | | | | |
| 1b Total | | | | | <u> </u> | 2,440,770 | 58,170 | 294,431 |

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ►17

| | | | Yes | No |
|---|--|---|-----|----|
| 3 | Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> | 3 | | Νο |
| 4 | For any individual listed online 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such | | | |
| | ındıvıdual | 4 | Yes | |
| 5 | Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person | 5 | | Νο |

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

| \$100,000 of compensation from the organization | | |
|--|-----------------------------|---------------------|
| (A) Name and business address | (B) Description of services | (C) Compensation |
| American Broadcasting Companies 520 S Buena Vista Street Burbank, CA 91521 | ALMA show airing fees | 2,300,000 |
| Bob Bain ProdInc 1447 Cloverfield Blvd Ste 201 Santa Monica, CA 90404 | Produced ALMA show | 1,685,667 |
| BDO Seidman LLP 7101 Wisconsin Ave Suite 800 Bethesda, MD 208144827 | Auditing and Tax services | 184,752 |
| Patton Boggs LLC 2550 M Street NW Washington, DC 20037 | Legal support | 184,626 |
| Greenberg Quinland Rosner Research 10 G Street NE Ste 500 Washington, DC 20002 | Research-professional svces | 164,907 |
| 2 Total number of independent contractors (including those in 1) who received more than \$ from the organization | | 22 |

Part Stat

| | | | | (A) Total Revenue | (B) Related or Exempt Function Revenue | (C) Unrelated Business Revenue | (D) Revenue Excluded from Tax under IRC 512, 513, or 514 |
|---|-----|---|--------------------|-----------------------------|--|--|--|
| | 1a | Federated campaigns 1 | .a | | ive venide | | |
| まま | ь | Membership dues | | | | | |
| 호 | | - | ь [.] | | | | |
| ΣĔ | С | Fundraising events | c | | | | |
| ž i | d | Related organizations1 | | | | | |
| % <u>=</u> | e | Government grants (contributions) 1 | | | | | |
| 흜 | f | All other contributions, gifts, grants, and | 26,648,483 | } | | | - |
| 돌 | | sımılar amounts not ıncluded above | | | | | |
| ‡ E to | g | 1 Noncash contributions included i | - | | | | |
| Contributions, gifts, grants and other similar amounts | 9 | lines 1a-1f \$ | <u>'</u> | | | | |
| Ų 10 | h | Total (Add lines 1a-1f) | إ | 32,785,018 | | | |
| | | | Business Code | | | | |
| an | 2a | events | 900,099 | 4,148,554 | 4,148,554 | | |
| ven | ь | Membership Dues | 900,099 | 209,485 | 209,485 | | |
| 윤 | c | | | 203,403 | 203,403 | | |
| J.C.e | d | | _ | | | | |
| Ž. | | | _ | | | | 1 |
| ĩ | e | | - | | | | |
| Program Serwce Revenue | f | All other program service revenu | e | | | | |
| Š | g | Total. Add lines 2a-2f | | | | | |
| | | > \$ 4,358,039 | | | | | |
| | 3 | Investment income (including div | ıdends, ınterest | | | | |
| | | other similar amounts) | | 138,372 | | | 138,372 |
| | 4 | Income from investment of tax-exempt | bond proceeds | | | | |
| | _ | Davidhaa | • | | | | |
| | 5 | Royalties (i) Real | | | | | + |
| | 6a | Gross Rents | (II) Personal | | | | |
| | ь | Less rental | | | | | |
| | | expenses Rental income | | | | | |
| | С | or (loss) | | | | | |
| | d | Net rental income or (loss) | <u>.</u> | | | | |
| | | (ı) Securities | (II) O ther | | | | |
| | 7a | Gross amount from sales of | | | | | |
| | | assets other | | | | | |
| | ь | than inventory Less cost or 393,484 | 1 | | | | |
| | | other basis and sales expenses | | | | | |
| | С | Gain or (loss) -393,484 | + | | | | |
| | d | Net gain or (loss) | | -393,484 | | | -393,484 |
| | 0- | <u> </u> | <u> </u> | | | | 1 |
| | 8a | Gross income from fundraising events (not including | | | | | |
| ດ່າ | | \$ | | | | | |
| ž | | of contributions reported on line 1c) See Part IV, line 18 | | | | | |
| Φ 2. | | Attach Schedule G if total exceeds | | | | | |
| ď | | \$15,000 | a | | | | |
| Other Revenue | ь | Less direct expenses | | | | | |
| ₹ | С | Net income or (loss) from fundrai | sing events | | | | |
| | 9a | Gross income from gaming | | | | | |
| | | activities See part IV, line 19 Complete Schedule G if total | | | | | |
| | | exceeds \$15,000 | | | | | |
| | | ; | а | | | | |
| | ь | Less direct expenses | | | | | |
| | С | Net income or (loss) from gaming | j activities ▶- | | | | |
| | 10a | Gross sales of inventory, less | - | | | | |
| | | returns and allowances . | | | | | |
| | | | a | | | | |
| | b | Less cost of goods sold | | | | | |
| | С | Net income or (loss) from sales o | _ | | | | |
| | | Miscellaneous Revenue | Business Code | 100 222 | 100 000 | | |
| | 11a | reimb exp/other rev | 900,099 | 108,322 | 108,322 | | ļ |
| | b | | _ | | | | |
| | С | | _ | | | | |
| | d | All other revenue | . | Ţ | | | |
| | e | Total. Add lines 11a-11d | | | | | |
| | 12 | Total Davience Addition 41 0 | \$ 108,322 | 36,996,267 | 4,466,361 | | 0 -255,112 |
| | ** | Total Revenue. Add lines 1h, 2g, 8c, | ر, 4, 5, ۵۵, /۵, | 50,550,207 | 1,700,301 | | 255,112 |

Part IX Statement of Functional Expenses

| A | Section 501(c)(3) and 501(c)(4) orgall other organizations must complete column (A) but are not re | | | |). |
|------|--|-----------------------|---|-------------------------------------|---------------------------------------|
| Do ı | not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
| 1 | Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 | 7,634,482 | 7,634,482 | | |
| 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 | 1,469,567 | 975,069 | 402,069 | 92,429 |
| 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 | 8,312,082 | 7,090,592 | | 228,711 |
| 8 | Pension plan contributions (include section 401(k) and section 403(b) employer contributions) | 436,986 | 323,406 | 96,958 | 16,622 |
| 9 | Other employee benefits | 1,052,397 | 869,625 | 151,375 | 31,397 |
| 10 | Payroll taxes | 764,556 | 630,749 | 109,029 | 24,778 |
| 11 | Fees for services (non-employees) | | | | |
| а | Management | | | | |
| b | Legal | 257,602 | 161,800 | 94,211 | 1,591 |
| c | Accounting | 123,883 | 19,080 | 104,803 | |
| d | Lobbying | 166,256 | 166,256 | | |
| e | Professional fundraising See Part IV, line 17 | | | | |
| f | Investment management fees | 29,054 | | 29,054 | |
| g | Other | 5,375,036 | 5,016,606 | 289,748 | 68,682 |
| 12 | Advertising and promotion | | | | |
| 13 | Office expenses | 188,432 | 149,106 | 33,230 | 6,096 |
| 14 | Information technology | 157,429 | 28,064 | 129,365 | |
| 15 | Royalties | | | | |
| 16 | Occupancy | 1,950,809 | 1,535,921 | 339,351 | 75,537 |
| 17 | Travel | 3,176,005 | 2,765,056 | 331,665 | 79,284 |
| 18 | Payments of travel or entertainment expenses for any Federal, state or local public officials | | | | |
| 19 | Conferences, conventions and meetings | 4,167,769 | 4,116,236 | 48,888 | 2,645 |
| 20 | Interest | 13 | 13 | | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | 373,231 | 9,174 | 364,057 | |
| 23 | Insurance | 94,567 | 83,997 | 7,721 | 2,849 |
| 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) | | | | |
| а | Other Exp | 905,748 | 2,823,578 | -1,954,893 | 37,063 |
| b | Printing & Publications | 566,978 | 470,486 | 15,617 | 80,875 |
| c | Telephone | 323,163 | 284,473 | 30,513 | 8,177 |
| d | Bad Debt Exp | 282,976 | 162,282 | 100,694 | 20,000 |
| e | Equip Rental & Maint | 229,331 | 187,928 | 38,034 | 3,369 |
| f | All other expenses | | | | |
| 25 | Total functional expenses. Add lines 1 through 24f | 38,038,352 | 35,503,979 | 1,754,268 | 780,105 |
| 26 | Joint Costs. Check 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 | | | Fo | |

| Dart V | Balance | Shoot |
|--------|---------|-------|
| Part X | Balance | Sheet |

| | | | (A) Beginning of year | | (B) End of year |
|-------------|-------|--|--------------------------|-----|--------------------|
| | 1 | Cash—non-interest-bearing | 9,386 | 1 | 23,831 |
| | 2 | Savings and temporary cash investments | 2,717,231 | 2 | 7,671,135 |
| | 3 | Pledges and grants receivable, net | 10,048,353 | 3 | 8,380,333 |
| | 4 | Accounts receivable, net | 3,950,233 | 4 | 3,941,211 |
| | 5 | Receivables from current and former officers, directors, trustees, key employees or other related parties <i>Complete Part II of Schedule L</i> | | 5 | |
| | 6 | Receivables from other disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$ Complete Part II of Schedule L | | 6 | |
| | 7 | Notes and loans receivable, net | | 7 | |
| | 8 | Inventories for sale or use | | 8 | |
| 2 | 9 | Prepaid expenses and deferred charges | 520,058 | 9 | 502,362 |
| Assets | 10a | Land, buildings, and equipment cost basis 4,862,73 | 2 | | |
| | b | Less accumulated depreciation Complete Part VI of Schedule D | 8 2,273,869 | 10c | 2,465,164 |
| | 11 | Investments—publicly traded securities | 4,239,147 | 11 | 1,430,977 |
| | 12 | Investments—other securities See Part IV, line 11 Complete Part VII of Schedule D | 23,119 | 12 | |
| | 13 | Investments—program-related See Part IV, line 11 <i>Complete Part VIII</i> of Schedule D . | | 13 | |
| | 14 | Intangible assets | | 14 | |
| | 15 | Other assets See Part IV, line 11 Complete Part IX of Schedule D | 29,726,030 | 15 | 29,965,417 |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 34) | 53,507,426 | 16 | 54,380,430 |
| | 17 | Accounts payable and accrued expenses . | 5,494,870 | 17 | 7,613,244 |
| | 18 | Grants payable | | 18 | |
| | 19 | Deferred revenue | 199,313 | 19 | |
| | 20 | Tax-exempt bond liabilities | | 20 | |
| <u>, 6</u> | 21 | Escrow account liability Complete Part IV of Schedule D | | 21 | |
| Liabilities | 22 | Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified | | | |
| Ë | | 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 | 211,945 | 25 | 204,854 |
| | 26 | Total liabilities. Add lines 17 through 25 | 5,906,128 | 26 | 7,818,098 |
| s es | | Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 through 29, and lines 33 and 34. | | | |
| Balance | 27 | Unrestricted net assets | 1,390,674 | 27 | 1,183,258 |
| - B | 28 | Temporarily restricted net assets | 44,710,624 | 28 | 43,879,074 |
| 돧 | 29 | Permanently restricted net assets | 1,500,000 | 29 | 1,500,000 |
| or Fund | | Organizations that do not follow SFAS 117, check here ► ☐ and complete lines 30 through 34. | | | |
| | 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 funds | | 32 | |
| Net | 33 | Total net assets or fund balances | 47,601,298 | 33 | 46,562,332 |
| _ | 34 | Total liabilities and net assets/fund balances | 53,507,426 | 34 | 54,380,430 |
| Pa | rt XI | Financial Statements and Reporting | | | |

| Dowl VI | Financial | Ctatamanta | and Reporting |
|---------|-------------|------------|---------------|
| 7.11.5 | l Financiai | Statements | and Reporting |

| | | | 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 |
| b | Were the organization's financial statements audited by an independent accountant? | 2b | Yes | |
| С | If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? | 2c | Yes | |
| 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? | 3a | Yes | |
| b | If "Yes," did the organization undergo the required audit or audits? | 3b | Yes | |

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493226008070

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)nonexempt charitable trusts. Attach to Form 990 or Form 990-EZ. See separate instructions.

Open to Public Inspection

| NATIO | NAL CO | OUNCIL OF LA R | AZA INC | | | | | 0.6 | 021207 | 2 | | |
|-------|----------|--------------------|------------------------------------|---|---------------|--------------------------|------------------|-------------------------|----------------------|-----------------------|-------------|---------|
| Dar | τI | Peacon | for Public C | harity Status (to be co | mnlatad | hy all or | aanizatio | | -021287: Instruct | | | |
| | | | | ation because it is (Please | • | - | | | msuucu | .10113) | | |
| 1 | | | | nurches, or association of ch | | | | | A)(i). | | | |
| 2 | Ė | • | | tion 170(b)(1)(A)(ii). (Attac | | | | -, -(-,(-, | / (- / - | | | |
| 3 | <u></u> | | | e hospital service organizati | | | tion 170(l | b)(1)(A)(i | ii). (Attac | h Schedu | le H) | |
| 4 | į. | • | · | zation operated in conjuncti | | | - | | | | • | |
| - | • | | name, city, and | • | | р | | | _, _(_,(_, | (,(,- | | |
| 5 | Г | • | | or the benefit of a college or | universit | v owned o | roperated | l by a gove | rnmental | unit desc | ribed in | |
| _ | • | _ | • | (Complete Part II) | | , | | , - . | | | | |
| 6 | Г | | | overnment or governmental | unit descr | ribed in Se | ction 170 | (b)(1)(A) | (v). | | | |
| 7 | ৴ | • | , - | ally receives a substantial p | | | | | | n the aene | eral public | : |
| | • | _ | | o)(1)(A)(vi) (Complete Par | | | | | | 5 | | |
| 8 | Г | | - | ped in Section 170(b)(1)(A) | • | nplete Par | tII) | | | | | |
| 9 | Ē | | • | ally receives (1) more than | | • | • | ontribution | ıs, membe | rship fees | s, and gro | SS |
| | • | - | | ated to its exempt functions | | | | | | · | | |
| | | ıts support | from gross inve | estment income and unrelate | ed busines | s taxable | ıncome (l | ess section | on 511 ta: | x) from bu | sinesses | |
| | | acquired by | the organization | on after June 30, 1975 See | Section 5 | 09(a)(2). | (Complet | e Part III |) | | | |
| 10 | Γ | An organiz | ation organized | and operated exclusively to | test for p | ublic safe | ty See Se | ction 509 | (a)(4). (S | ee instruc | tions) | |
| 11 | \sqcap | An organiza | atıon organızed | and operated exclusively fo | r the bene | fit of, to p | erform the | functions | of, or to o | arry out t | he purpo: | ses of |
| | | | | orted organizations describe | | | | | | Section 5 | 09(a)(3) | . Check |
| | | | it describes the ype I b | type of supporting organiza | | omplete li - Function | | | _ | | III - Ot | |
| | _ | • | • • | rtify that the organization is | | | - | | d na ar mai | | | |
| e | ' | • | | agers and other than one or | | | • | | | • | • | |
| | | section 50 | | 3 | • | , , , , | , | | | | | , |
| f | | | | d a written determination fro | m the IRS | 5 that it is | a Type I, | Type II o | r Type III | supportir | ng organiz | ation, |
| | | check this | | as the organization accepted | d any gift. | or contrib | ution from | any of the | | | | ļ |
| g | | following pe | | as the organization accepted | u any gni | or contrib | | ally of the | • | | | |
| | | | | r indirectly controls, either a | alone or to | ogether wi | th persons | describe | d ın (ıı) | | Yes | No |
| | | and (III) be | low, the governi | ng body of the the supported | d organiza | tion? | | | | 11g | (i) | |
| | | (ii) a famıly | / member of a p | erson described in (i) above | 7 | | | | | 11g(| (ii) | |
| | | (iii) a 35% | controlled enti | ty of a person described in (| i) or (ii) al | bove? | | | | 11g(| iii) | |
| h | | Provide the | following inform | nation about the organizatio | ns the org | ganızatıon | supports | | | | | |
| | | | | | | | | | | | | |
| | | ame of | (ii) EIN | (iii) Type of organization | | s the | | ou notify | | s the | (vii) An | |
| , | | oorted nization | | (described on lines 1-9 above or IRC section | _ | ation in Iisted in | | inization i) of your | | ation in organized | supp | ort? |
| , | Jiyai | iizatioii | | (See Instructions)) | | verning | | ort? | | US? | | |
| | | | | (| | ment? | | | | | | |
| | | | | | Yes | No | Yes | No | Yes | No | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |

Total

Support Schedule for Organizations Described in IRC 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.)

| | (Complete only if you chec | keu the box o | 11 lille 3, 7, 01 | o or Part 1.) | | | | |
|------|--|---------------------|-------------------|---------------------|-----------------|--------|------------|------------------|
| | iblic Support | | | | | | | |
| | ndar year (or fiscal year beginning in) | (a) 2004 | (b) 2005 | (c) 2006 | (d) 2007 | (e) | 2008 | (f) Total |
| 1 | Gifts, grants, contributions, and | 19,959,960 | 19,790,867 | 22,517,406 | 30,479,544 | | 32,785,018 | 125,532,795 |
| | membership fees received (Do not | 19,939,900 | 19,790,607 | 22,317,400 | 30,479,344 | | 32,763,016 | 123,332,793 |
| _ | include any "unusual grants ") Tax revenues levied for the organization's | | | | | | | |
| 2 | benefit and either paid to or expended on | | | | | | | |
| | its behalf | | | | | | | |
| 3 | The value of services or facilities | | | | | | | |
| • | furnished by a governmental unit to the | | | | | | | |
| | organization without charge | | | | | | | |
| 4 | Total. Add line 1-3 | 19,959,960 | 19,790,867 | 22,517,406 | 30,479,544 | | 32,785,018 | 125,532,795 |
| 5 | The portion of total contribution by each | | | | | | | |
| _ | person (other than a government unit or | | | | | | | |
| | publicly supported organization) included | | | | | | | 4,866,017 |
| | on line 1 that exceed 2% of the amount | | | | | | | 4,800,017 |
| | shown on line 11, column | | | | | | | |
| | (f) | | | | | | | |
| 6 | Public Support subtract line 5 from line | | | | | | | 120,666,778 |
| | 4 | | | | | | | |
| To | otal Support | | | | | | | |
| Cale | endar year (or fiscal year beginning in) | (a) 2004 | (b) 2005 | (c) 2006 | (d) 2007 | (e) | 2008 | (f) Total |
| 7 | A mounts from line 4 | 19,959,960 | 270,014 | 22,517,406 | 30,479,544 | | 32,785,018 | 125,532,795 |
| 8 | Gross income from interest, dividends, | | | | | | | |
| | payments received on securities loans, | 102,786 | 270,014 | 484,215 | 404,669 | | 138,372 | 1,400,056 |
| | rents, royalties and income from similar | , | , l | , | <i>,</i> | | <i>'</i> | , , |
| | sources | | | | | | | |
| 9 | Net income from unrelated business | 64 100 | | | | | | C4 100 |
| | activities, whether or not the business is | 64,100 | | | | | | 64,100 |
| 40 | regularly carried on | | + | + | | | | |
| 10 | Other income Do not include gain or loss from the sale of capital assets (Explain in | 132,831 | 118,758 | 260,453 | 131,164 | | 108,322 | 751,528 |
| | Part IV) | 102,001 | 110,700 | 200, 100 | 101,10 | | 100,022 | ,01,020 |
| 11 | Total Support (Add lines 7 through 10) | | | | | | | 127,748,479 |
| 12 | Gross receipts from related activities, etc | (See instruction | | | | 4.2 | | |
| | | | | | | 12 | | 24,872,766 |
| 13 | First Five Years. If the Form 990 is for the | organızatıon's fii | st, second, third | d, fourth, or fifth | tax year as a 5 | 01(c)(| | |
| | organization, check this box and stop here | | | | | | | ► □ |
| | annutation of Dublic Compant David | | | | | | | - |
| | omputation of Public Support Perc | | | (0) | | 1 | | |
| 14 | Public Support Percentage for 2008 (line 6 | • • | • | olumn (T)) | | 14 | | 94.460 % |
| 15 | Public Support Percentage for 2007 Sched | ule A , Part IV - A | , lıne 26f | | | 15 | | 88.870 % |
| 16a | 33 1/3% Test - 2008. If the organization did | d not check the b | oox on line 13, a | nd line 14 is 33 | 1/3% or more, | check | this box | |
| | and stop here. The organization qualifies as | | | | , | | | ►V |
| b | 33 1/3% Test - 2007. If the organization di | d not check the I | box on line 13 o | r 16a, and line 1 | L5 is 33 1/3% o | r more | , check th | S |
| | box and stop here. The organization qualifie | es as a publicly : | supported organ | ızatıon | | | | ▶□ |
| 17a | 10% Facts and Circumstances Test - 2008. | - | | | | | | |
| | more, and if the organization meets the "fac | | | | | | | |
| _ | organization meets the "facts and circumst | | | | | | | ►□ |
| Ь | 10% Facts and Circumstances Test - 2007. | | | | | | | |
| | more, and if the organization meets the "fac | | | | | | | |
| 10 | the organization meets the "facts and circu | | | | | | | ▶□ |
| 18 | Private Foundation. If the organization did instructions | not check the bo | ox on time 13, 16 | oa, 100, 1/a or : | 1/D, CHECK THIS | рох а | nu see | ▶ □ |
| | manachona | | | | | | | - 1 |

| Pa | Support Schedule for On (Complete only if you ched | | | | (2) | | |
|------|--|--------------------|-------------------|---------------------|------------------|-----------------|------------|
| | ction A. Public Support | | _ | , | | | |
| Cale | ndar year (or fiscal year beginning in) | (a) 2004 | (b) 2005 | (c) 2006 | (d) 2007 | (e) 2008 | (f) Total |
| 1 | Gifts, grants, contributions, and | | | | | | |
| | membership fees received (Do not | | | | | | |
| 2 | include any "unusual grants ") Gross receipts from admissions, | | | | | | |
| 2 | merchandise sold or services performed, | | | | | | |
| | or facilities furnished in any activity that | | | | | | |
| | is related to the organization's tax- | | | | | | |
| | exempt purpose | | | | | | |
| 3 | Gross receipts from activities that are | | | | | | |
| | not an unrelated trade or business under | | | | | | |
| | section 513 | | | | | | |
| 4 | Tax revenues levied for the | | | | | | |
| | organization's benefit and either paid to | | | | | | |
| | or expended on its behalf | | | | | | |
| 5 | The value of services or facilities | | | | | | |
| | furnished by a governmental unit to the | | | | | | |
| _ | organization without charge | | | | | | |
| 6 | Total Add lines 1-5 | | | | | | |
| 7a | A mounts included on lines 1, 2, and 3 | | | | | | |
| | received from disqualified persons Amounts included on lines 2 and 3 | | | | | | |
| D | received from other than disqualified | | | | | | |
| | persons that exceed the greater of 1% of | | | | | | |
| | the total of lines 9, 10c, 11, and 12 for | | | | | | |
| | the year or \$5,000 | | | | | | |
| c | Total of lines 7a and 7b | | | | | | |
| 8 | Public Support (Substract line 7c from | | | | | | |
| _ | line 6) | | | | | | |
| То | tal Support | | | | | | |
| Cale | ndar year (or fiscal year beginning in) | (a) 2004 | (b) 2005 | (c) 2006 | (d) 2007 | (e) 2008 | (f) Total |
| 9 | A mounts from line 6 | | | | | | |
| 10a | Gross income from interest, dividends, | | | | | | |
| | payments received on securities loans, | | | | | | |
| | rents, royalties and income from similar | | | | | | |
| | sources | | | | | | |
| b | Unrelated business taxable income (less | | | | | | |
| | section 511 taxes) from businesses | | | | | | |
| | acquired after 30 June, 1975 | | + | | | | |
| С | Add lines 10a and 10b | | | | | | |
| 11 | Net income from unrelated business | | | | | | |
| | activities not included in line 10b, whether or not the business is regularly | | | | | | |
| | carried on | | | | | | |
| 12 | Other income Do not include gain or loss | | | | | | |
| | from the sale of capital assets | | | | | | |
| | (Explain in Part IV) | | | | | | |
| 13 | Total Support (Add lines 9, 10c, 11 and | | | | | | |
| | 12) | | | | | | |
| 14 | First Five Years If the Form 990 is for the | organızatıon's fı | rst, second, thir | d, fourth, or fifth | ntax year as a 5 | 01(c)(3) organı | zation, |
| | check this box and stop here | | | | | | ▶ □ |
| | monutation of Dublic Compant Days | | | | | | |
| 15 | mputation of Public Support Perc Public Support Percentage for 2008 (line | | dod by line 12 o | olumn (fl) | | T 4= T | |
| | | | • | .orumin (1)) | | 15 | |
| 16 | Public Support Percentage for 2007 Sche | dule A , Part IV - | A, line 27g | | | 16 | |
| | | D | | | | | |
| Co | mputation of Investment Income Investment Income Percentage for 2008 (| | | ne 13 column /f | <u> </u> | 17 | |
| | | | | - | " | 17 | |
| ΤQ | Investment Income Percentage from 2007 | ocnequie A , Pa | TLIV-A, IINE 2/ | H | | 18 | |

19a 33 1/3% Tests - 2008. 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 **33 1/3% Tests - 2007.** 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

Schedule A (Form 990 or 990-EZ) 2008

▶□

| Part IV | Supplemental Information. Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions) |
|---------|---|
| | |
| | Facts and Circumstances Test |
| | |

Schedule A (Form 990 or 990-EZ) 2008

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Open to Public Inspection

To be completed by organizations described below. Attach to Form 990 or Form 990-EZ

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

- ◆ 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 990EZ, Part VI, line 47 (Lobbying Activities)

- ◆ 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.

| | · / · / | s," to Form 990, Part IV, Line 5 (P | | . , , | |
|-----|--|--|--|--|--|
| N a | ame of the organization TIONAL COUNCIL OF LA RAZA INC | zations complete rait iii | | | ntification number |
| Par | | oy all organizations exempt e the instructions for Schedule | | 86-0212873 n 501(c) and section | |
| 1 | Provide a description of the or | ganızatıon's dırect and ındırect polit | ical campaign act | tivities in Part IV | |
| 2 | Political expenditures | | | | \$ |
| 3 | V olunteer hours | | | | |
| Pai | rt I-B To be completed be for Schedule C for d | oy all organizations exempt etails.) | under sectio | n 501(c)(3). (See the | instructions |
| 1 | Enter the amount of any excise | e tax incurred by the organization ur | nder section 4955 | 5 | \$ |
| 2 | Enter the amount of any excise | e tax incurred by organization mana | gers under sectio | n 4955 | \$ |
| 3 | If the organization incurred in | a section 4955 tax, did it file Form | 4720 for this year | r? | ┌ Yes |
| 4a | Was a correction made? | | | | ┌ Yes ┌ No |
| ь | If "Yes," describe in Part IV | | | | |
| Pai | | oy all organizations exempt for Schedule C for details.) | under sectio | n 501(c), except sec | tion 501(c)(3). |
| 1 | Enter the amount directly expe | ended by the filing organization for s | ection 527 exem | pt function activities | \$ |
| 2 | Enter the amount of the filing of 527 exempt funtion activities | organization's internal funds contribi | uted to other orga | nizations for section | \$ |
| 3 | Total of direct and indirect exe 1120-POL, line 17b | empt function expenditures Add line | s 1 and 2 and en | ter here and on Form | \$ |
| 4 | Did the filing organization file $f I$ | Form 1120-POL for this year? | | | ┌ Yes ┌ No |
| 5 | were made Enter the amount p political contributions received | nd Employer Identification Number (paid and indicate if the amount was in d and promptly and directly delivere action committee (PAC) If additions | oaid from the filing d to a separate po | g organization's own interna olitical organization, such a | ıl funds or were s a separate |
| | (a) Name | (b) Address | (c) EIN | (d) A mount paid from filing organization's internal funds If none, enter - 0 - | (e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter - 0 - |
| | | | | | |
| | | | | | |
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Cat No 50084S

Schedule C (Form 990 or 990-EZ)

section 4911 tax for this year?

┌ Yes ┌ No

| | • | | | |
|----|---|---|--|--|
| P | | organizations exempt under section 501(c | | 68 |
| | (election under sec | tion 501(h)). (See the instructions for Schedule | C for details.) | |
| | <u>-</u> 3 3 | belongs to an affiliated group | | |
| В | Check If the filing organization | checked box A and "limited control" provisions apply | | |
| | | bbying Expenditures— s" means amounts paid or incurred.) | (a) Filing Organization's Totals | (b) Affiliated Group Totals |
| 1a | Total lobbying expenditures to influe | nce public opinion (grass roots lobbying) | | |
| b | Total lobbying expenditures to influe | nce a legislative body (direct lobbying) | 550,787 | |
| c | Total lobbying expenditures (add line | es 1a and 1b) | 550,787 | |
| d | Other exempt purpose expenditures | 37,487,565 | | |
| е | Total exempt purpose expenditures | 38,038,352 | | |
| f | Lobbying nontaxable amount Enter t columns— | 1,000,000 | | |
| | 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 | | |
| _ | Grassroots nontaxable amount (ente | r 25% of line 1f) | 250,000 | |
| _ | • | • | 230,000 | |
| | Subtract line 1g from line 1a Enter - | • | 0 | |
| i | Subtract line 1f from line 1c Enter - (| 0 | | |

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 1a through 1f of the instructions.)

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

| | Lobbying Expenditures During 4-Year Averaging Period | | | | | | | | |
|-------|---|-----------|-----------------|-----------------|------------------|-----------|--|--|--|
| | Calendar year (or fiscal year beginning in) | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) Total | | | |
| 2a | Lobbying non-taxable amount | 1,000,000 | 1,000,000 | 1,000,000 | 1,000,000 | 4,000,000 | | | |
| ь | Lobbying ceiling amount (150% of line 2a, column(e)) | | | | | 6,000,000 | | | |
| _c | Total lobbying expenditures | 560,540 | 589,634 | 610,573 | 550,787 | 2,311,534 | | | |
| _d | Grassroots non-taxable amount | 250,000 | 250,000 | 250,000 | 250,000 | 1,000,000 | | | |
| e | Grassroots ceiling amount (150% of line d, column (e)) | | | | | 1,500,000 | | | |
| f | Grassroots lobbying expenditures | 0 | 0 | | | | | | |

| | 5768 (election under section 501(h)). (See the instructions for Schedule C for d | | | | | |
|----------|---|----------|-----------|-------|-------|----------|
| | | (a | 1) | | (b) | |
| | · | Yes | No | A | moun | nt |
| 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 | | | | | |
| а | referendum, through the use of Volunteers? | | | | | |
| ь | | | | 1 | | |
| c | Media advertisements? | | | | | |
| d | Mailings to members, legislators, or the public? | | | | | |
| e | Publications, or published or broadcast statements? | | | | | |
| f | | | | | | |
| g | Direct contact with legislators, their staffs, government officials, or a legislative body? | | | | | |
| h | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means? | | | | | |
| i | Other activities If "Yes," describe in Part IV | | | | | |
| j | Total lines 1c through | | | | | |
| - | 1) Did the patientias in line 1 agree the arrangements in the net decombed in section FO1/a)/2)2 | | Ī | 1 | | |
| | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes" enter the amount of any tax incurred under section 4912 | | | + | | |
| | If "Yes" enter the amount of any tax incurred by organization managers under section 4912 | | | | | |
| | If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | | | | | |
| | t III-A To be completed by all organizations exempt under section 501(c)(4), sec | tion | 5016 | |) or | |
| G. | section 501(c)(6). (See the instructions for Schedule C for details.) | | 301(| | ,, 0. | |
| | | | _ | | Yes | No |
| 1 | Were substantially all (90% or more) dues received nondeductible by members? | | L | 1 | | |
| 2 | Did the organization make only in-house lobbying expenditures of \$2,000 or less? | | L | 2 | | <u> </u> |
| 3 | Did the organization agree to carryover lobbying and political expenditures from the prior year? | | | 3 | | |
| Par | t III-B To be completed by all organizations exempt under section 501(c)(4), sec | | | | | |
| | section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" (question 3 is answered "Yes." (See the instructions for Schedule C for details.) | OK II | Part | III-A | ٠, | |
| 1 | Dues, assessments and similar amounts from members | T | 1 \$ | | | |
| 2 | Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political | F | ' | | | |
| | expenses for which the section 527(f) tax was paid). | | | | | |
| | Current Year | | 2a \$ | | | |
| b | Carryover from last year | | 2b\$ | | | |
| c | Total | <u> </u> | 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 (line 2c total minus 3 and 4) | | 5 \$ | | | |
| Pā | Supplemental Information | • | | | | |
| | mplete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and F so, complete this part for any additional information | Part II | l-B, line | e 1ı | | |
| | Identifier Return Reference Explanation | on | | | | |
| | | | | | | |
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| Part IV Supplemental I | Part IV Supplemental Information | | | | | | |
|------------------------|----------------------------------|-------------|--|--|--|--|--|
| Ident if ier | Return Reference | Explanation | | | | | |
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Schedule C (Form 990 or 990EZ) 2008

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

DLN: 93493226008070

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Supplemental Financial Statements

Open to Public

| enue Service | <u> </u> | | Inspection |
|--------------------------------|--|--|---|
| | | | Employer identification number |
| THE COUNCIL OF | BY INTER THE | | 86-0212873 |
| | | | unds or Accounts. Complete if the |
| organi | zation answered "Yes" to Form 99 | | (b) Funds and other accounts |
| otal number a | t end of vear | (a) Bollot advised fallas | (b) I and and other accounts |
| | · | | |
| | , •, | | |
| ggregate valu | ue at end of year | | |
| _ | | | or advised Yes No |
| sed only for c npermissible | haritable purposes and not for the ben private benefit? | efit of the donor or donor advisor or other | ☐ Yes ☐ No |
| u Conse | rvation Easements. Complete | <u>if the organization answered "Yes" to</u> | o Form 990, Part IV, line 7. |
| Preservat Protection Preservat | ion of land for public use (e g , recreati n of natural habitat ion of open space | on or pleasure) Preservation of an Preservation of ce | historically importantly land area |
| • | | med conservation contribution in the form | |
| | | | Held at the End of the Yea |
| Total number | of conservation easements | | 2a |
| Total acreage | e restricted by conservation easement | s | 2b |
| Number of co | nservation easements on a certified hi | storic structure included in (a) | 2c |
| Number of co | nservation easements included in (c) a | acquired after 8/17/06 | 2d |
| umber of con | servation easements modified, transfe | rred, released, extinguished, or terminate | d by the organization during |
| ne taxable ye | ar ► | | |
| umber of stat | tes where property subject to conserva | ation easement is located ► | |
| _ | · · · · · · · · · · · · · · · · · · · | · · · · · · · · · · · · · · · · · · · | Yes No |
| taff or volunte | eer hours devoted to monitoring, inspe | cting and enforcing easements during the | year ► |
| mount of exp | enses incurred in monitoring, inspecti | ng, and enforcing easements during the ye | ear ► \$ |
| | • | (d) above satisfy the requirements of sec | tion Yes No |
| alance sheet, | , and include, if applicable, the text of t | he footnote to the organization's financial | · · |
| | | | or Other Similar Assets. |
| rt, historical t | treasures, or other sımılar assets held | for public exhibition, education or research | ch in furtherance of public service, |
| istorical treas | sures, or other similar assets held for i | oublic exhibition, education, or research in | • |
| i) _{Revenues i} | ncluded in Form 990, Part VIII, line 1 | | ► \$ |
| ii) Assets inc | luded in Form 990, Part X | | ► \$ |
| _ | • | • | r financial gain, provide the |
| evenues incli | uded in Form 990, Part VIII, line 1 | | ► \$ |
| ssets include | ed in Form 990. Part X | | ► \$ |
| | of the organical COUNCIL OF Organical number of congermissible of Preservation of the last day of the last day of the organical acreage of the organical number of congermissible of the last day of the last day of the organical acreage of the organical number of congermissible of the last day of the last day of the organical number of congermissible of the organical of the organ | of the organization IAL COUNCIL OF LA RAZA INC I Organizations Maintaining Donor Accordant of the organization answered "Yes" to Form 99 or the state of the organization answered "Yes" to Form 99 or the state of the organization answered "Yes" to Form 99 or the state organization answered "Yes" to Form 99 or the state organization inform all donors and donor advising a re the organization inform all grantees, donors, and sed only for charitable purposes and not for the bening or the state organization inform all grantees, donors, and sed only for charitable purposes and not for the bening or the state organization inform all grantees, donors, and sed only for charitable purposes and not for the bening or the state organization for the pening organization of the preservation of land for public use (e.g., recreating protection of natural habitating protection of conservation easements. Total number of conservation easements included in (c.) at the last day of the tax year. Total number of conservation easements modified, transfer the taxable year with the last day of the tax year. Total number of conservation easements modified, transfer the taxable year with the last day of the tax year. Total number of conservation easements modified, transfer the taxable year with the organization easements it holds to the total transfer organization have a written policy regarding inforcement of the conservation easements included in (c.) at a conservation easement in the last the organization reports organization reports organization reports organization reports organization reports organization reports organization easement reported on line 2 organization organization elected, as permitted under SFAS organiza | The organization of the organization in Maintaining Donor Advised Funds or Other Similar Fiorganization answered "Yes" to Form 990, Part IV, line 6. Ital inumber at end of year gregate Contributions to (during year) gregate Grants from (during year) gregate Grants from (during year) gregate Grants from (during year) gregate value at end of year did the organization inform all donors and donor advisors in writing that the assets held in don indis are the organization's property, subject to the organization's exclusive legal control? If the organization inform all grantees, donors, and donor advisors in writing that grant funds seed only for charitable purposes and not for the benefit of the donor or donor advisor or other permissible private benefit? If Conservation Easements. Complete if the organization answered "Yes" to urpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of open space omplete lines 2a-2d if the organization held a qualified conservation contribution in the form in the last day of the tax year Total acreage restricted by conservation easements Number of conservation easements modified, transferred, released, extinguished, or terminate the taxable year ▶ umber of states where property subject to conservation easement is located ▶ oes the organization have a written policy regarding the periodic monitoring, inspection, viola inforcement of the conservation easements it holds? taffor volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year es each conservation easement reported on line 2(d) above satisfy the requirements of sec 70(h)(4)(8)(i) and 170(h)(4)(8)(ii)? 1 part XIV, describe how the organization reports conservation easements in its revenue and alance sheet, and include, if applicable, the text of the footnote to the organization's financial earousies, or other similar assets held for public exhibition, education or research in vo |

Cat No 52283D

| 3 | | | | | | <u>r Similar As</u> | | |
|---|--|--|-------------------|-----------------|--|---------------------|-------------------|--|
| | Using the organization's accession and othe items (check all that apply) | r records, check any o | f the fo | lowing that ar | e a sıgnıfıcant u | se of its collec | tıon | |
| а | Public exhibition | • | d [| Loan or exc | hange programs | | | |
| ь | Scholarly research | • | e Г | Other | | | | |
| c | Preservation for future generations | | | | | | | |
| 4 | Provide a description of the organization's co | ollections and explain | how the | v further the o | organization's ex | emnt nurnose | ın | |
| _ | Part XIV | meetions and explain | 110 11 6116 | y farther the t | organization's ex | empt purpose | | |
| 5 | During the year, did the organization solicit of assets to be sold to raise funds rather than t | | | | | ıılar | ┌ Yes | □No |
| Pai | t IV Trust, Escrow and Custodial A Part IV, line 9, or reported an an | Arrangements. Co | omplet | e if the orga | | ered "Yes" to | | , |
| 1a | Is the organization an agent, trustee, custod included on Form 990, Part X? | ıan or other ıntermedia | ary for o | ontributions (| or other assets 1 | not | Г Yes | ☐ No |
| b | If "Yes," explain why in Part XIV and comple | te the following table | | | | | | |
| | | | | | | Ar | nount | |
| c | Beginning balance | | | | | | | |
| d | Additions during the year | | | | 1d | | | |
| e | Distributions during the year | | | | 1e | | | |
| f | Ending balance | | | | 1f | | | |
| 2a | Did the organization include an amount on Fo | orm 990, Part X, line 2 | 1? | | | | ┌ Yes | ┌ No |
| b | If "Yes," explain the arrangement in Part XIV | , | | | | | | |
| Pa | rt V Endowment Funds. Complete | | | | | | | |
| | | (a)Current Year | (b)Prioi | Year (c)Tv | vo Years Back (d) | Three Years Back | (e) Four \ | ears Back |
| 1a | Beginning of year balance | 1,765,621 | | | | | | |
| b | Contributions | | | | | | | |
| c | Investment earnings or losses | 115,151 | | | | | | |
| d | Grants or scholarships | | | | | | | |
| _ | | | | | | | | |
| е | Other expenditures for facilities and programs | | | | | | | |
| e f | • | | | | | | | |
| _ | and programs | 1,880,772 | | | | | | |
| f | and programs | , , | | | | | | |
| f g | and programs | , , | | | | | | |
| f g 2 | and programs | , , | | | | | | |
| f g 2 a b | and programs | , , | | | | | | |
| f g 2 a b | and programs | r end balance held as | on that | are held and a | idministered for | the | | |
| f g 2 a b | and programs | r end balance held as | on that | are held and a | idministered for | the | Yes | No |
| f g 2 a b | and programs | r end balance held as | on that | are held and a | idministered for | 3a | (i) | No |
| f g 2 a b c 3a | and programs | r end balance held as | | | idministered for | 3a | (i) | |
| f g 2 a b c 3a | and programs | r end balance held as ssion of the organization | n Sche | | idministered for | 3a | (i) | No |
| f g 2 a b c 3a | and programs | r end balance held as ssion of the organization ns listed as required of eorganization's endow | n Schewment f | dule R? | | 3a | (i) | No |
| f g 2 a b c 3a | and programs | r end balance held as ssion of the organization ns listed as required of eorganization's endow | n Schewment f | | art X, line 10. | 3a | (i) | No |
| f g 2 a b c 3a | and programs | r end balance held as ssion of the organization ns listed as required of eorganization's endow | n Sche wment f | dule R? | | 3a | (i) (ii) b | No |
| f g 2 a b c 3a b | and programs | r end balance held as ssion of the organization ns listed as required of eorganization's endow | n Sche wment f | dule R? | art X, line 10. | 3a 3a 3 | (i) (ii) b | No No |
| f g 2 a b c 3a b 4 Pat | and programs | r end balance held as ssion of the organization ns listed as required of eorganization's endow | n Sche wment f | dule R? | art X, line 10. | 3a 3a 3 | (i) (ii) b | No No |
| f g 2 a b c 3a Par | and programs | r end balance held as ssion of the organization ns listed as required of eorganization's endow | n Sche wment f | dule R? | art X, line 10. | 3a 3a 3 | (i) (ii) b | No No ook value |
| f g 2 a b c 3a b 4 Par | and programs | r end balance held as ssion of the organization ns listed as required of eorganization's endow | n Sche wment f | dule R? | art X, line 10. (b)Cost or other basis (other) | 3a 3a 3 | (i) | No No No ook value 2,076,761 |
| f g 2 a b c 3a Par | and programs Administrative expenses End of year balance Provide the estimated percentage of the year balance Board designated or quasi-endowment Permanent endowment 79 750 % Term endowment 20 250 % Are there endowment funds not in the possess organization by (i) unrelated organizations If "Yes" to 3a(ii), are the related organization Describe in Part XIV the intended uses of the tyl Investments—Land, Buildings Description of investment Land Land Leasehold improvements | r end balance held as ssion of the organization ns listed as required of eorganization's endow | n Sche wment f | dule R? | art X, line 10. (b)Cost or other basis (other) 2,076,761 | 3a 3a(3 | (i) | No No |

| Part VIII Investments—Other Securities. | see Form 990, Part X, line 12. | |
|---|---|--|
| (a) Description of security or cateory (including name of security) | (b)Book value | (c) Method of valuation Cost or end-of-year market value |
| Financial derivatives and other financial products | | Cost of end-of-year market value |
| · | | |
| Closely-held equity interests | | |
| Other | | |
| | | |
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| | | |
| | | |
| | | |
| | | |
| Total. (Column (b) should equal Form 990, Part X, col (B) line 12 |) > | |
| Part VIII Investments—Program Related | See Form 990 Part X line 1 | 3 |
| | | (c) Method of valuation |
| (a) Description of investment type | (b) Book value | Cost or end-of-year market value |
| | | |
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| | | _ |
| | | |
| | | |
| Total. (Column (b) should equal Form 990, Part X, col (B) line 13 | | |
| Part IX Other Assets. See Form 990, Part X | | 1 425 |
| | scription | (b) Book value |
| ASSETS designated FOR DEFERRED COMPENSATIO | N | 204,854 |
| SECURITY DEPOSITS | | 93,363 |
| FUNDS HELD IN TRUST | | 29,667,200 |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Total. (Column (b) should equal Form 990, Part X, col.(B) | line 15.) | |
| Part X Other Liabilities. See Form 990, Part X | | |
| (a) Description of Liability | (b) A mount | |
| Federal Income Taxes | | |
| DEFERRED COMPENSATION | 204,854 | |
| | | |
| | | |
| | | |
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| | | |
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| | | |
| | | |
| | | |
| Total. (Column (b) should equal Form 990, Part X, col (B) line 25 |) ▶ 204,854 | |

| Pai | rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen | nts | |
|----------|--|---------|---------------------|
| 1 | Total revenue (Form 990, Part VIII, column (A), line 12) | 1 | 36,996,267 |
| 2 | Total expenses (Form 990, Part IX, column (A), line 25) | 2 | 38,038,352 |
| 3 | Excess or (deficit) for the year Subtract line 2 from line 1 | 3 | -1,042,085 |
| 4 | Net unrealized gains (losses) on investments | 4 | 129,759 |
| 5 | Donated services and use of facilities | 5 | |
| 6 | Investment expenses | 6 | |
| 7 | Prior period adjustments | 7 | |
| 8 | Other (Describe in Part XIV) | 8 | -126,640 |
| 9 | Total adjustments (net) Add lines 4 - 8 | 9 | 3,119 |
| 10 | Excess or (deficit) for the year per financial statements Combine lines 3 and 9 | 10 | -1,038,966 |
| Par | t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p | er R | eturn |
| 1 | Total revenue, gains, and other support per audited financial statements | 1 | 37,509,262 |
| 2 | A mounts included on line 1 but not on Form 990, Part VIII, line 12 | | |
| а | Net unrealized gains on investments | | |
| Ь | Donated services and use of facilities | | |
| С | Recoveries of prior year grants | | |
| d | Other (Describe in Part XIV) 2d | | |
| е | Add lines 2a through 2d | 2e | 512,995 |
| 3 | Subtract line 2e from line 1 | 3 | 36,996,267 |
| 4 | A mounts included on Form 990, Part VIII, line 12, but not on line 1 | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b . 4a | | |
| Ь | Other (Describe in Part XIV) | _ | |
| - с - | Add lines 4a and 4b | 4c | 0 |
| 5 | Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12) | 5 | 36,996,267 |
| 1 | Total expenses and losses per audited financial statements | 1 | 38,548,228 |
| 2 | A mounts included on line 1 but not on Form 990, Part IX, line 25 | | 30,310,220 |
| a | Donated services and use of facilities | | |
| ь | Prior year adjustments | | |
| c | Losses reported on Form 990, Part IX, line 25 | | |
| d | Other (Describe in Part XIV) 2d | | |
| e | Add lines 2a through 2d | 2e | 509,876 |
| 3 | Subtract line 2e from line 1 | 3 | 38,038,352 |
| 4 | A mounts 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 XIV) 4b | | |
| c | Add lines 4a and 4b | 4c | 0 |
| 5 | Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18) | 5 | 38,038,352 |
| Pai | rt XIV Supplemental Information | | |
| Cor | mplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Pa | art XI\ | /, lines 1b and 2b, |

 $Part\ V, line\ 4, Part\ XI, Part\ XII, line\ 8, Part\ XII, lines\ 2d\ and\ 4b, and\ Part\ XIII, lines\ 2d\ and\ 4b, and\ Part\ XIII, lines\ 2d\ and\ 4d$

| Ident if ier | Return Reference | Explanation |
|-------------------------------------|------------------|---|
| Part V, Line 4 | Endowment Funds | Interest from permanently restricted net assets may be used for general purposes Board designated and temporary endowment funds are spent based on board and donor imposed restrictions |
| Part XI, Line 8 - Other Adjustments | | excess of in-kind service expenses over revenues recognized for financials -126640 |
| | | |
| | | |
| | | |

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

Grants and Other Assistance to Organizations, Governments and Individuals in the U.S.

OMB No 1545-0047

2008

DLN: 93493226008070

Department of the Treasury Internal Revenue Service Name of the organization

Schedule I

(Form 990)

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

Open to Public Inspect ion

Employer identification number

| NATIONAL COUNCIL OF LA F | RAZA INC | | | | | 86-0212873 | |
|---|---------------------------------------|--|------------------------------|---|---|--|---------------------------------------|
| 1 Does the organization ma | aintain records to | | t of the grants or assista | | gibility for the grants or as | | ∀ Yes |
| the selection criteria use Describe in Part IV the o | | | | | | | v ves |
| Part IV and Sch | IV, line 21 for a edule I-1 if add | ny recipient that reco itional space is | eived more than \$5,0 | 00. Check this box | tes. Complete if the oil if no one recipient rece | eived more than \$5, | |
| 1(a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| See Additional Data Table | | | | | | | |
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| | | | | | | | |
| 2 Enter total number of seconganizations | | | | | <u> </u> | | |
| | | | | | | | • |
| For Paperwork Reduction Act Not | ice, see the Instruc | tions for Form 990. | | Cat No 50055 | Р | Sc | hedule I (Form 990) 2008 |

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

| (a)Type of grant or assistance | (b) Number of recipients | (c) A mount of cash grant | (d)A mount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f)Description of non-cash assistance |
|--------------------------------|----------------------------------|-------------------------------------|--------------------------------------|---|---------------------------------------|
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Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

See Additional Data Table

| occinational para rapid | | |
|---|------------------|--|
| Ident if ier | Return Reference | Explanation |
| Procedure for Monitoring Grants in the U S | | Schedule I, Part I, Line 2 Grantees need to submit financial and technical reports on a monthly, quarterly and/or semi-year basis according to the requirements set on the grant |
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Software ID: Software Version:

EIN: 86-0212873

Name: NATIONAL COUNCIL OF LA RAZA INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|------------------------------|---|---|--|---------------------------------------|
| Alta Vista Charter High School1720 Holly Street Kansas City, MO 64108 | 44-0610781 | 501(c)(3) | 35,000 | | | | Grants |
| AltaMed Health Services Corporation249 E Pomona Blvd Monterey Park, CA 91755 | 95-2810095 | 501(c)(3) | 58,397 | | | | Grants |
| Asociacion de Puertorriquenos en Marcha 600 W Diamond Street Philadelphia, PA 19122 | 23-1930630 | 501(c)(3) | 35,000 | | | | Grants |
| Association House of Chicago1116 N Kedzie Avenue Chicago, IL 60651 | 36-2166961 | 501(c)(3) | 138,201 | | | | Grants |
| Avenida Guadalupe Association Inc1327 Guadalupe Street San Antonio, TX 78207 | 36-4229387 | 501(c)(3) | 40,833 | | | | Grants |
| Brighton Park Neighborhood Council4477 S Archer Avenue Chicago, IL 60632 | 36-4229387 | 501(c)(3) | 50,720 | | | | Grants |
| Calexico Community Action Council2320 ML King Ave Calexico, CA 922311753 | 95-2685502 | 501(c)(3) | 15,000 | | | | Grants |
| California State University at Long Beach6300 State University Suite 125-135 125-135 Long Beach, CA 908154110 | 95-1810426 | 501(c)(3) | 125,000 | | | | Grants |
| Camino Nuevo Charter Academy 3435 West Temple St Los Angeles, CA 90026 | 95-4771789 | 501(c)(3) | 10,000 | | | | Grants |
| Casa De Maryland734 University Blvd East Silver Spring, MD 20903 | 59-1460598 | 501(c)(3) | 11,000 | | | | Grants |

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code (d) A mount of cash (e) A mount of non-(f) Method of (a) Description of (h) Purpose of grant organization section arant cash valuation (book. non-cash assistance orassistance or government ıf applıcable assistance FMV, appraisal, other) Centro Campesino 59-1460598 501(c)(3) 28,000 Grants Farmworker Center608 S St V rain El Paso, TX 79901 74-1842169 Centro de La Salud 501(c)(3) 67,206 Grants Familiar La Fe Inc608 South St Vrain El Paso, TX 79901 25-1689720 CentroNia1420 Columbia 501(c)(3) 15.000 Grants Road NW Washington, DC 20009 86-0227210 CDC 50,460 Chicanos por la Causa Grants Phoenix1242 East Washington Suite 10 Phoenix, AZ 85034 Chicanos Por La Causa 86-0227210 Grants 111.370 Tucson200 N Stone Avenue Tucson, AZ 85701 Communidades Latinas 41-1386986 501(c)(3) 26,500 Grants Unidas En Servicio720 East Lake Street Minneapolis, MN 55407 86-0627789 Grants Community Housing 501(c)(3) 108,270 Resources of Arizona 500 E Thomas Road Suite 300 Phoenix, AZ 85012 Community Services of 88-0360474 501(c)(3) 28,083 Grants Nevada3320 Sunrise Avenue Suite 108 Las Vegas, NE 89101 Grants Congreso de Latinos 23-2051143 501(c)(3) 78,183 Unidos Inc216 W Somerset Street Philadelphia, PA 19133 Council for the Spanish 501(c)(3) 111,451 Grants Speaking (El Concilio)308 N California St Stockton, CA 952022625

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization section grant cash valuation (book, non-cash assistance or assistance ıf applıcable FMV, appraisal, or government assistance other) 23-7269955 Cuban American National 501(c)(3) 30,126 Grants Council - Miami1223 SW 4th Street Miami, FL 33135 Cypress Hills Collegiate 45,000 Grants Academy625 Jamaica Ave Brooklyn, NY 11208 6,000 Grants Dallas Concilio of Hispanic Service Organization1601 Bryan Street Dallas, TX 75201 54-2102541 86,900 Grants Dalton-Whitfield 501(c)(3) Community DevPO Box 248 Dalton, GA 307220248 84-8736940 501(c)(3) 114,150 Del Norte Neighborhood Grants Development2926 Zuni Street Suite 202 Denver, CO 80211 Dolores Huerta 20,000 Grants Preparatory School2500 W 18th Street Pueblo, CO 81003 East Los Angeles 95-4531076 501(c)(3) 82,120 Grants Community Corporation 530 S Boyle Avenue Los Angeles, CA 90033 Economic Opportunity 71-0390902 501(c)(3) 50,767 Grants Agency of Washington County614 E Emma Ave Springdale, AK 72726 El BarrioWSEM5209 15,000 Grants Detroit Ave Cleveland, OH 44102 El Centro Inc650 36-2904073 33,400 Grants 501(c)(3) Minnesota Ave Kansas City, KS 66101

| Form 990,Schedule I, | Part II, Gran | ts and Other Ass | istance to Gove | rnments and Or | ganizations in t | he United States | |
|---|----------------|--|------------------------------|---|---|---|---------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| El Paso Affordable Housing6801 Viscount Blvd El Paso,TX 799253616 | 74-2614606 | 501(c)(3) | 34,133 | | | | Grants |
| Friendly House802 S First Ave Phoenix,AZ 85030 | 86-0447737 | 501(c)(3) | 20,000 | | | | Grants |
| Guadalupe Centers1015 Avenıda Cesar E Chavez Kansas Cıty, MO 64108 | 44-0610781 | 501(c)(3) | 115,000 | | | | Grants |
| Hacienda Community Development Corporation 5136 NE 42nd Ave Portland, OR 97218 | 93-0979064 | 501(c)(3) | 15,000 | | | | Grants |
| Harvest America Corporation155 S 18th St Suite 120 Kansas City, KS 66102 | 48-0921462 | 501(c)(3) | 42,827 | | | | Grants |
| HBC Services Inc217 Wisconsin Ave Suite 207 Waukesha, WI 53186 | 39-1992242 | 501(c)(3) | 57,460 | | | | Grants |
| HELP-New Mexico Inc 5101 Copper NE Albuquerque, NM 87108 | 85-0194018 | 501(c)(3) | 75,000 | | | | Grants |
| Hispanic Chamber of Commerce of Minnesota 3000 North 2nd Street Minneapolis, MN 55411 | | | 35,000 | | | | Grants |
| Hispanic Committee of Virgina5827 Columbia Pike Suite 200 Falls Church, VA 22041 | 54-0843915 | 501(c)(3) | 81,117 | | | | Grants |
| Hispanic Office of Planning and Evaluation - HOPE165 Brookside Extension Jamaica Plain, MA 02130 | 23-7296743 | 501(c)(3) | 15,000 | | | | Grants |

| Form 990,Schedule I, | Part II, Gran | nts and Other As | sistance to Gove | rnments and Or | ganizations in t | he United States | |
|--|---------------|--|------------------------------|---|---|---|---------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| Homes on the Hill12 S Terrace Ave Columbus,OH 43204 | 31-1349995 | 501(c)(3) | 111,233 | | | | Grants |
| Housing America CorporationPO Box 600 Somerton, AZ 85350 | 86-0315599 | 501(c)(3) | 61,737 | | | | Grants |
| Housing and Education Alliance550 N Reo Street Suite 300 Tampa,FL 33609 | 43-1963410 | 501(c)(3) | 78,960 | | | | Grants |
| Housing for Nevada285 East Warm Springs Suite 100 Las Vegas, NV 89119 | 88-0514877 | 501(c)(3) | 62,960 | | | | Grants |
| Housing Our Communities PO Box 44457 Mesa, AZ 85211 | 86-0616399 | 501(c)(3) | 58,227 | | | | Grants |
| Idaho Community Action Netwok3450 Hill Road Boise,ID 83703 | | | 10,800 | | | | Grants |
| Information Referral Resource Assistance Inc 4705 S Sugar Road Suite B Edinburg,TX 78539 | | | 56,947 | | | | Grants |
| Instituto Del Progreso Latino2570 S Blue Island A venue Chicago,IL 606084817 | 36-2937375 | 501(c)(3) | 279,125 | | | | Grants |
| International District Housing Alliance606 Maynard Ave S Suite 105 Seattle, WA 98104 | 91-1061105 | 501(c)(3) | 7,333 | | | | Grants |
| ISED Ventures1111 Ninth St Suite 380 Des Moines, ID 50314 | 20-1037604 | 501(c)(3) | 27,500 | | | | Grants |

| Part II, Grar | nts and Other Ass | sistance to Gove | rnments and Or | ganizations in t | the United States | |
|---------------|---|---|---|---|--|---|
| (b) EIN | (c) IRC Code section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| 13-3875888 | 501(c)(3), 509(a) (1) | 115,000 | | | | Grants |
| 23-2955661 | 501(c)(3) | 40,000 | | | | Grants |
| 11-2528786 | 501(c)(3) | 52,753 | | | | Grants |
| 94-3115164 | 501(c)(3) | 30,833 | | | | Grants |
| 58-1945776 | 501(c)(3) | 15,000 | | | _ | Grants |
| 52-1023074 | 501(c)(3) | 279,984 | | | | Grants |
| 20-3097667 | 501(c)(3) | 16,000 | | | | Grants |
| 52-1749216 | 501(c)(3) | 19,400 | | | | Grants |
| 31-1694878 | 501(c)(3) | 10,000 | | | | Grants |
| 04-2982308 | 501(c)(3) | 25,000 | | | | Grants |
| | (b) EIN 13-3875888 23-2955661 11-2528786 94-3115164 58-1945776 52-1023074 20-3097667 52-1749216 31-1694878 04-2982308 | (b) EIN (c) IRC Code section if applicable 13-3875888 501(c)(3), 509(a) (1) 23-2955661 501(c)(3) 11-2528786 501(c)(3) 94-3115164 501(c)(3) 58-1945776 501(c)(3) 52-1023074 501(c)(3) 52-1749216 501(c)(3) 31-1694878 501(c)(3) 04-2982308 501(c)(3) | (b) EIN (c) IRC Code section if applicable (d) Amount of cash grant 13-3875888 501(c)(3), 509(a) [115,000] 23-2955661 501(c)(3) 40,000 11-2528786 501(c)(3) 52,753 94-3115164 501(c)(3) 30,833 58-1945776 501(c)(3) 15,000 52-1023074 501(c)(3) 279,984 20-3097667 501(c)(3) 16,000 52-1749216 501(c)(3) 19,400 31-1694878 501(c)(3) 10,000 04-2982308 501(c)(3) 25,000 | (b) EIN (c) IRC Code section if applicable (d) Amount of cash grant (e) Amount of non-cash assistance 13-3875888 501(c)(3), 509(a) (1) 115,000 23-2955661 501(c)(3) 40,000 11-2528786 501(c)(3) 52,753 94-3115164 501(c)(3) 30,833 58-1945776 501(c)(3) 15,000 52-1023074 501(c)(3) 279,984 20-3097667 501(c)(3) 16,000 52-1749216 501(c)(3) 19,400 31-1694878 501(c)(3) 10,000 04-2982308 501(c)(3) 25,000 | (b) EIN (c) IRC Code section if applicable (d) Amount of cash grant (e) Amount of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) 13-3875888 501(c)(3), 509(a) (1) 115,000 (1) (1) 23-2955661 501(c)(3) 40,000 (1) (1) 11-2528786 501(c)(3) 52,753 (1) (1) 94-3115164 501(c)(3) 15,000 (1) (1) 52-1023074 501(c)(3) 279,984 (1) (1) 20-3097667 501(c)(3) 16,000 (1) (1) 52-1749216 501(c)(3) 19,400 (1) (1) 31-1694878 501(c)(3) 25,000 (1) (1) | section (fapplicable) grant (papplicable) cash assistance (papplicable) valuation (book, pMV, appraisal, other) hon-cash assistance 13-3875888 501(c)(3), 509(a) (1) 115,000 (2) 23-2955661 501(c)(3) 40,000 (2) </td |

| Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States | | | | | | | |
|---|----------------|--|--------------------------------------|---|---|---|---------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| Luz Guerrero Early College High School2797 N Introspect Drive Tucson, AZ 85745 | | | 30,000 | | | | Grants |
| Luz Social Services2797 N Introspect Drive Tucson, AZ 85745 | 52-1621206 | 501(c)(3) | 57,578 | | | | Grants |
| Make the Road New York 301 Grove Street Brooklyn,NY 11237 | 11-3344389 | 501(c)(3) | 13,750 | | | | Grants |
| Mano a Mano Family Center6 E Main Street Round Lake Park, IL 60073 | 36-4418084 | 501(c)(3) | 6,067 | | | | Grants |
| Mexican American Unity Council Inc2300 West Commerce Street Suite 200 200 San Antonio, TX 78207 | 74-6088061 | 501(c)(3) | 54,813 | | | | Grants |
| Midland Community Development Corporation 208 S Marienfeld St123 Midland, TX 79701 | 75-2280264 | 501(c)(3) | 18,000 | | | | Grants |
| Mississippi Immigrants Rights Alliance612 North State St Jackson, MS 39202 | 94-3425290 | 501(c)(3) | 10,260 | | | | Grants |
| Montebello Housing Development1619 Paramount Blvd Montebello, CA 90640 | 95-4413788 | 501(c)(3) | 51,843 | | | | Grants |
| Mujeres Latinas en Accion2124 W 21st Place Chicago, IL 60608 | 36-2877520 | 501(c)(3) | 25,000 | | | | Grants |
| National Immigrant Law Center3435 Wilshire Blvd Suite 2850 Los Angeles, CA 90010 | 95-4539765 | 501(c)(3) | 10,000 | | | | Grants |

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code (d) A mount of cash (e) A mount of non-(f) Method of (a) Description of (h) Purpose of grant valuation (book, non-cash assistance or assistance organization section grant cash FMV, appraisal, or government ıf applıcable assistance other) 35-1916572 70,233 Grants Neighborhood Christian 501(c)(3) Legal Clinic Inc3333 N Meridian St Indiannapolis, IN 46208 140,220 New Economics for 95-3969029 501(c)(3) Grants Women303 S Loma Drive Los Angeles, CA 90035 Organizacion Civica y 20,000 Grants Cultural Hispana Americana3660 Shirley Youngstown, OH 44502 Pathstone Corporation 16-1183242 501(c)(3) 15,000 Grants 400 East Avenue Rochester, NY 146071910 50,000 Promesa East Harlem Grants Council for Community Improvement413 East 120th Street New York, NY 10035 55,000 Grants Raul Yzaguirre School for Success2950 Broadway Houston, TX 77017 501(c)(3) 125,850 Sacramento Home Loan 68-0257422 Grants Counseling Center2003 Howe Avenue Ste100 Sacramento, CA 95825 50,000 Grants Santa Fe South High School301 SE 25th Oklahoma City, OK 73109 Self Help Enterprises PO 94-1592676 35,000 501(c)(3) Grants Box 6520 Visalia, CA 93290 10,000 SouthWest Key Program 74-2481167 501(c)(3) Grants 6002 Jain Lane Austin, TX 78721

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization section grant cash valuation (book, non-cash assistance or assistance ıf applıcable FMV, appraisal, or government assistance other) 38-2324335 Southwest Nonprofit 501(c)(3) 56,666 Grants Housing Corporation8634 W Vernor Hwy Detroit, MI 48209 Spanish American Civic 78,043 Grants Association - SACA545 Pershing Avenue Lancaster, PA 17602 34-1088559 501(c)(3) Spanish American 43,666 Grants Committee4407 Lorain Ave Cleveland, OH 44113 Spanish Coalition for 23-7230578 501(c)(3) 161,067 Grants Housing4037 West North Avenue Chicago, IL 60639 Tejano Center for 76-0377101 501(c)(3) 62,333 Grants Community Concerns 6901 Brownwood St Houston, TX 770205319 22,000 Grants The Committe for Hispanic Children and Families Inc110 William Street Suite 800 New York, NY 10038 The Resurrection Project 36-3576073 501(c)(3) 100,186 Grants 1818 S Paulina Chicago, IL 60608 Tiburcio Vasquez Health 23-7118361 25,000 Grants 501(c)(3) Center Inc22331 Mission Blvd Hayward, CA 94541 Union of Pan Asian 23-7279074 501(c)(3) 7,333 Grants Communities 1031 25th Street San Diego, CA 92101 39-1146191 20,000 United Community Center 501(c)(3) Grants 1028 S 9th Street Milwaukee, WI 53204

| Form 990,Schedule I, | Part II, Grar | nts and Other As | ssistance to Gove | ernments and Or | ganizations in t | the United States | |
|--|---------------|--|-------------------|---|------------------|---|----------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | | (e) A mount of non- cash assistance | | (g) Description of non-cash assistance | (h) Purpose of grant |
| Unity Council1900 Frutvale Ave Suite 2-A Oakland, CA 94601 | 94-1670490 | 501(c)(3) | 74,901 | | | | Grants |
| Visionary Home Builders of California315 N San Joaquin Street Stockton, CA 95202 | 68-0062062 | 501(c)(3) | 81,987 | | | | Grants |
| WattsCentury Latino Organization10360 Wilmington Ave Los Angeles,CA 90002 | 95-4429533 | 501(c)(3) | 97,003 | | | | Grants |
| Women's Initiative for Self Employment1398 Valencia Street San Francisco, CA 94110 | 94-3081525 | 501(c)(3) | 16,500 | | | | Grants |
| Young Women's Christian Association115 Davis El Paso,TX 79907 | 74-1109650 | 501(c)(3) | 63,127 | | | | Grants |
| Youth Development Inc 516 1st Street NW Albuquerque, NM 87102 | 85-0246036 | 501(c)(3) | 107,005 | | | | Grants |
| Youth Policy Institute634 South Spring Street Los Angeles, CA 90014 | 52-1278339 | 501(c)(3) | 125,132 | | | | Grants |
| YWCA CC and Home Ownership Ctr - Las Cruces277 E Amador Ave Suite 308 Las Cruces, NM 88001 | 74-1109650 | 501(c)(3) | 15,000 | | | | Grants |
| YWCA El Paso Del Norte 1918 Texas Av El Paso,TX 79901 | 74-1109650 | 501(c)(3) | 20,377 | | | | Grants |
| | | | | | | | |

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As Filed Data -

DLN: 93493226008070

OMB No 1545-0047

Compensation Information

Department of the Treasury

Internal Revenue Service

Schedule J

(Form 990)

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

2008

Open to Public . Inspection

Name of the organization NATIONAL COUNCIL OF LA RAZA INC **Employer identification number**

86-0212873

| Pa | rt I Questions Regarding Compensatio | n | | | | |
|----|--|--|---|----|-----|-----|
| | | | | | Yes | Νo |
| 1a | Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part II | | | | | |
| | First class or charter travel | Г | Housing allowance or residence for personal use | | | |
| | Travel for companions | Γ | Payments for business use of personal residence | | | |
| | Tax idemnification and gross-up payments | | Health or social club dues or initiation fees | | | |
| | Discretionary spending account | Γ | Personal services (e g , maid, chauffeur, chef) | | | |
| b | If line 1a is checked, did the organization follow a w provision of all the expenses described above? If "I | | | 1b | | |
| 2 | Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executiv | | | 2 | | |
| 3 | Indicate which, if any, of the following the organizat organization's CEO/Executive Director Check all t | | у | | | |
| | Compensation committee | <u> </u> | Written employment contract | | | |
| | Independent compensation consultant | l F | Compensation survey or study | | | |
| | Form 990 of other organizations | <u> </u> | Approval by the board or compensation committee | | | |
| 4 | During the year, did any person listed in Form 990, | Part VI | I, Section A, line 1a | | | |
| а | Receive a severance payment or change of control | payment | t? | 4a | Yes | |
| b | Participate in, or receive payment from, a suppleme | ental non | nqualified retirement plan? | 4b | | Νo |
| c | Participate in, or receive payment from, an equity-b | pased co | mpensation arrangement? | 4c | | Νo |
| | If "Yes" to any of lines 4a-c, list the persons and p | rovide th | ne applicable amounts for each item in Part III | | | |
| | 501(c)(3) and 501(c)(4) organizations only must co | omplete | lines 5-8. | | | |
| 5 | For persons listed in form 990, Part VII, Section A compensation contingent on the revenues of | , line 1a, | , did the organization pay or accrue any | | | |
| а | The organization? | | | 5a | | Νo |
| b | Any related organization? | | | 5b | | Νo |
| | If "Yes," to line 5a or 5b, describe in Part III | | | | | |
| 6 | For persons listed in form 990, Part VII, Section A compensation contingent on the net earnings of | , line 1a, | , did the organization pay or accrue any | | | |
| 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 payments not described in lines 5 and 6? If "Yes," | | , | 7 | | No |
| 8 | Were any amounts reported in Form 990, Part VII, subject to the initial contract exception described in Part III | • | • | | | , n |

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space 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)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

| (A) Name | (B) Breakdown of | W-2 and/or 1099-MI | SC compensation | (C) Deferred | (D) Nontaxable | (E) Total of columns | (F) Compensation |
|-----------------------|--------------------------|---|-----------------------------|-----------------|------------------------|----------------------|--|
| | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other compensation | compensation | benefits | (B)(ı)-(D) | reported in prior Form 990 or Form 990-EZ |
| Janet Murguia (i) | 285,010 40,716 | | | 40,241 5,749 | 5,889 841 | 331,140 47,306 | |
| Gerald Borenstein (i) | 94,644 12,777 | | 36,792 | 8,374 3,177 | 9,309 3,531 | | |
| Charles Kamasakı (1) | 197,369 | | | 13,816 | 10,013 | 221,198 | |
| Sonia Perez (i) | 143,072 | | | 10,015 | 12,829 | 165,916 | |
| Delia Pompa (i) | 152,119 | | | 10,648 | 6,616 | 169,383 | |
| Delia De La Vara (i) | 135,177 | | | 9,462 | 6,588 | 151,227 | |
| Jorge Mursulı (ı) | 195,350 | | | | 6,309 | 201,659 | |
| (ii) | | | | | | | |
| (i) | | | | | | | |
| (ii) | | | | | | | |
| (i) | | | | | | | |
| (ii) | | | | | | | |
| (i) (ii) | | | | | | | |
| (i) | | | | | | | |
| (ii) | | | | | | | |

Part III Supplemental Information

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

| Identifier Return Explanation | |
|--|--|
| Part I, Line 4a Gerald Borenstein for \$36,792 | |
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OMB No 1545-0047

Open to Public Inspection

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Name of the organization NATIONAL COUNCIL OF LA RAZA INC **Employer identification number**

86-0212873

| Identifier | Return Reference | Explanation |
|-----------------------------------|------------------------------|---|
| Form 990, Part III, line 4d | Other Program Services | EDUCATION PROGRAMS - THE NATIONAL COUNCIL OF LA RAZA (NCLR) EDUCATION PROGRAM DIVISION PROVIDES CAPACITY-BUILDING ASSISTANCE TO SUPPORT AND STRENGTHEN EDUCATION PROGRAMMING AT THE COMMUNITY-BASED LEVEL TO THE LATINO COMMUNITY THIS PROGRAM AREA OFFERS RESEARCH AND EVALUATION IN THE AREAS OF EARLY CARE AND EDUCATION, ELEMENTARY AND SECONDARY EDUCATION, ACADEMIC ENRICHMENT, COLLEGE PREPARATION, PARENT/FAMILY INVOLVEMENT, AND ADULT BASED EDUCATION NCLR'S POLICY WORK SEEKS TO IMPACT TRADITIONAL PUBLIC EDUCATION NATIONALLY NCLR'S POLICY WORK STRIVES TO ENSURE THAT LATINO STUDENTS, INCLUDING IMMIGRANT AND ENGLISH LANGUAGE LEARNERS, HAVE EQUITABLE ACCESS TO EDUCATIONAL OPPORTUNITIES IN RECENT YEARS, NCLR HAS ALSO BEGUN ASSISTING COMMUNITY GROUPS TO ENGAGE IN EDUCATION REFORM ISSUES AT THE STATE AND LOCAL LEVELS THROUGH TECHNICAL ASSISTANCE AND THE DISSEMINATION OF POLICY-RELATED INFORMATION AND RESEARCH Expenses \$ 3794820 including grants of \$ 971878 Revenue \$ 0 |

| ldentifier | Return Reference | Explanation |
|--------------------------------|------------------|---|
| Form 990, Part III, line 4d | 1 | Other (DUSA, Mission, Legislative, RSI and IHH) Expenses \$ 12460854 including grants of \$ 2421220 Revenue \$ 209485 |

| ldentifier | Return Reference | Explanation |
|---------------------------------------|------------------|---|
| Form 990, Part VI, Section A, line 10 | | The Executive Committee charged by the Board reviews, and approves Form 990 |

| ldentifier | Return Reference | Explanation |
|---|---------------------|--|
| Form 990, Part VI, Section B, line 12c | | The Conflict of Interest policy is distributed annually by the Board Liaison to Board Members. All are asked to sign and return a statement identifying any conflicting interests. Conflicts are reviewed by the Secretary who recommends action, if any |

| ldentifier | Return Reference | Explanation |
|---|---------------------|--|
| Form 990, Part VI, Section B, line 15 | | The Compensation Committee is charged with oversight for determining the adequacy and reasonableness of the compensation and benefits paid to the chief executive. Within this process, the Committee will conduct an annual performance evaluation that may deem appropriate and includes a chief executive compensation analysis study. In carrying out its responsibilities, the committee may rely upon reasoned written opinions of legal counsel and of qualified legal, accounting, compensation, and valuation experts. Legal counsel may be inhouse or independent. |

| ldentifier | Return Reference | Explanation |
|--|---------------------|--|
| Form 990, Part VI, Section C, line 19 | | The organization makes its governing documents, conflict of interest policy, and financial statements available to the public upon request. The conflict of interest policy is also available under the organization's intranet and there is a summary of the financial statements on the organization's wiebsite, and published in its annual report. |

| ldentifier | Return Reference | Explanation |
|-------------------------------|---------------------|--|
| Form 990, Part XI, Line 2c | Oversight of audit | There have been no changes during the year in the process for oversight of the audit of the financial statements |

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Attach to Form 990. To be completed by organizations that answerd "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37.
 See separate instructions.

| Name of the organization NATIONAL COUNCIL OF LA RAZA INC | | | | Employer identifica | ation number |
|---|--|---|-----------------------------------|--|--|
| Part I Identification of Disregarded Entities | | | | 86-0212873 | |
| (A) Name, address, and EIN of disregarded entity | (B) Primary activity | (C) Legal domicile (state or foreign country) | (D) Total income E | (E) nd-of-year assets | (F) Direct controlling entity |
| | | | | | |
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| Part II Identification of Related Tax-Exempt Organiza | tions | | | | |
| (A) Name, address, and EIN of related organization | (B) Primary activity | (C) Legal domicile (state or foreign country) | (D) Exempt Code section | (E) Public charity status (if section 501(c)(3)) | (F) Direct controlling entity |
| Raza Development Fund (RDF) | | | | | |
| 101 N 1st Ave Phoenix, AZ850031736 52-1954196 | Support organization to NCLR | AZ | 501(c)(3) | 509(a)(3) | N/A |
| Strategic Investment Fund for La Raza Inc (SIFLR) 1126 16th Street NW Washington, DC200363622 52-2268398 | Supports charitable and educational activities for NCLR | DC | 501(c)(3) | 509(a)(3) | N/A |
| Farmworkers Justice Fund 1126 16th Street NW washington, DC20036 52-1196708 | Empower migrant & seasonal farmworkers to improve living & working condition | DC | 501(c)(3) | 170(b)(1)(A) (vi) | N/A |
| Democracia USA 2915 Biscayne Blvd Miami, FL33137 41-2278788 | Voter Education and Registration | FL | 501(c)(3) pending | 170(b)(1)(A) (vı) | N/A |
| | | | | | |
| | | | | | |
| | | | | | |

| (A) Name, address, and EIN of related organization | Prim | (B) nary activity | (C) Legal domicile (state or foreign country) | (D) Direct controlling entity | incom | (E) lominant le(related, lestment, related) | Share | (F) e of total income | (G) Share of end-of- year assets | (H Disprop allocat | l) ortionate tions? | (I) Code V—UBI amount on Box 20 of K-1 | Gene mana part | agıng |
|---|---------|------------------------------|---|---|---------|---|--------|--|---|--------------------------|--|---|----------------------|-------|
| | | | | | | | | | | Yes | No | | Yes | No |
| | | | | | | | | | | | | | | |
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| Part IV Identification of R | Related | l Organizations | Taxable as | a Corporation | ı or Tr | ust | | | | | | | | |
| (A) Name, address, and EIN of related organ | | (B) Primary activity | | (C) Legal domicile (state or foreign country) | | (D) Direct contro | olling | (E) Type of entity (C corp, S corp or trust) | (F) Share of total income | end | (G) hare of l-of-yea assets | (H) Percentage r ownership | | |
| | | | | | | | | | | | | | | |
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(6)

| Part V | Transactions | with | Related | Organizations | |
|--------|--------------|------|---------|---------------|--|
| | | | | | |

| Part V Transactions with Related Organizations | | | | | |
|--|--|---------------------------------|------------|-----|-------|
| Note. Complete line 1 if any entity is listed in Parts II, III or IV | | | | Yes | No |
| During the tax year, did the orgranization engage in any of the following transaction | ns with one or more related organizations listed in Parts II | -IV? | | | |
| a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled ent | tity | | 1a | | No |
| b Gift, grant, or capital contribution to other organization(s) | | | 1b | | No |
| c Gift, grant, or capital contribution from other organization(s) | | | 1c | | No |
| d Loans or loan guarantees to or for other organization(s) | | | 1d | | No |
| e Loans or loan guarantees by other organization(s) | | | 1e | | No |
| f Sale of assets to other organization(s) | | | 1f | | No |
| g Purchase of assets from other organization(s) | | | 1g | | No |
| h Exchange of assets | | | 1h | | No No |
| i Lease of facilities, equipment, or other assets to other organization(s) | | | 1i | | No |
| | | | | | |
| j Lease of facilities, equipment, or other assets from other organization(s) | | | 1j | | No |
| k Performance of services or membership or fundraising solicitations for other org | ganization(s) | | 1k | | No |
| I Performance of services or membership or fundraising solicitations by other org | anization(s) | | 11 | | No |
| m Sharing of facilities, equipment, mailing lists, or other assets | | | 1m | | No |
| n Sharing of paid employees | | | 1 n | | No |
| Reimbursement paid to other organization for expenses | | | 10 | Yes | |
| p Reimbursement paid by other organization for expenses | | | 1р | | No |
| | | | | | |
| q O ther transfer of cash or property to other organization(s) | | | 1q | | No |
| r Other transfer of cash or property from other organization(s) | | | 1r | | No |
| If the answer to any of the above is "Yes," see the instructions for information o | on who must complete this line, including covered relations | hine and transaction thresholds | | | |
| | (B) | | | | |
| (A) Name of other organization(s) | Transaction type(a-r) | (C) Amount Involved | | | |
| 1) | , , , | | | | |
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| 2) | | | | | |
| 3) | | | | | |
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| 4) | | | | | |
| 5) | | | | | |
| - , | I and the second | | | | |

Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

| | | | | | | | | | _ | |
|--|--------------------------------|---|---------------|----|---|--------|---|--|--|-----------|
| (A) Name, address, and EIN of entity | (B) Primary activity | (C) Legal domicile (state or foreign country) | organizations | | (E) Share of end-of-year assets | | | (G) Code V—UBI amount on Box 20 of K-1 | (H) General o managing partner? |) |
| | | | Yes | No | | Yes No | | | Yes | No |
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Software ID: Software Version:

EIN: 86-0212873

Name: NATIONAL COUNCIL OF LA RAZA INC

Form 990, Part VII - Section Aaa

| form 990, Part VII - Section Aaa | | | | | | | | | | | | |
|--|--|-----------------------------------|-----------------------|---------|--------------|------------------------------|--------|---|--|--|--|--|
| | | Posit t | (C tion (hat a | ched | | I | | | (F) | (F) | | |
| (A) Name and Title | (B) Average hours per week | Individual Trustee or Director | Institutional Trustee | Officei | Key employee | Highest compensated employee | Former | (D) Reportable compensation from the organization (W- 2/1099MISC) | (E) Reportable compensation from related organizations (W- 2/1099- MISC) | Estimated amount of other compensation from the organization and related organizations | | |
| Janet Murguia , President & CEO | 35 00 | Х | | Х | | | | 285,010 | 40,716 | 52,720 | | |
| Andrea Bazan , Chair | 1 00 | Х | | | | | | 0 | 0 | 0 | | |
| Daniel Ortega , Vice-Chair | 1 00 | Х | | | | | | 0 | 0 | 0 | | |
| Arturo Valenzuela , Secretary | 1 00 | Х | | | | | | 0 | 0 | 0 | | |
| Anselmo Vıllareal , Treasurer | 1 00 | Х | | | | | | 0 | 0 | 0 | | |
| Jorge Plasencia , Executive Committee | 1 00 | X | | | | | | 0 | 0 | 0 | | |
| Monica Lozano , Executive Committee | 1 00 | Х | | | | | | 0 | 0 | 0 | | |
| Herminio Martinez , Executive Committee | 1 00 | × | | | | | | 0 | 0 | 0 | | |
| Jım Padılla , Executive Committee | 1 00 | X | | | | | | 0 | 0 | 0 | | |
| Maria Pesqueira , Executive Committee | 1 00 | Х | | | | | | 0 | 0 | 0 | | |
| Dorene Dominguez , General Membership | 1 00 | × | | | | | | 0 | 0 | 0 | | |
| Cesar Alvarez , General Membership | 1 00 | Х | | | | | | 0 | 0 | 0 | | |
| Tom Castro , General Membership | 1 00 | Х | | | | | | 0 | 0 | 0 | | |
| Maricela Monterrubio Gal , General Membership | 1 00 | Х | | | | | | 0 | 0 | 0 | | |
| Marıa Gomez , General Membershıp | 1 00 | Х | | | | | | 0 | 0 | 0 | | |
| Lupez Martinez , General Membership | 1 00 | Х | | | | | | 0 | 0 | 0 | | |
| Lında Mazon-Gutierrez , General Membership | 1 00 | Х | | | | | | 0 | 0 | 0 | | |
| Hon Felipe Reinoso , General Membership | 1 00 | Х | | | | | | 0 | 0 | 0 | | |
| Clara Rodriguez , General Membership | 1 00 | Х | | | | | | 0 | 0 | 0 | | |
| Isabel Rubio , General Membership | 1 00 | Х | | | | | | 0 | 0 | 0 | | |
| Angela Sanbrano , General Membership | 1 00 | Χ | | | | | | 0 | 0 | 0 | | |
| Dr Juan Sanchez , General Membership | 1 00 | Х | | | | | | 0 | 0 | 0 | | |
| Lionel Sosa , General Membership | 1 00 | Х | | | | | | 0 | 0 | 0 | | |
| Isabel Valdez , General Membership | 1 00 | Х | | | | | | 0 | 0 | 0 | | |
| Cıd Wılson , General Membershıp | 1 00 | Х | | | | | | 0 | 0 | 0 | | |
| Gerald Borenstein , VP & CFO | 29 00 | | | Х | | | | 131,436 | 12,777 | 24,391 | | |
| Charles Kamasakı , Executive VP | 40 00 | | | Х | | | | 197,369 | 0 | 23,829 | | |
| Sonia Perez , Senior V P | 40 00 | | | Х | | | | 143,072 | 0 | 22,844 | | |
| Cecilia Munoz , senior V P | 34 00 | | | Х | | | | 26,501 | 4,677 | 6,911 | | |
| Delia Pompa , VP | 40 00 | | | X | | | | 152,119 | 0 | 17,264 | | |

Form 990, Part VII - Section Aaa

| | | (C) Position (check all that apply) | | | | | | | (E) | (F) | |
|--|--|--|--|--------------|---|---|---|--|--|--------|--|
| (A) Name and Title | (B) Average hours per week | | | Key employee | | | (D) Reportable compensation from the organization (W- 2/1099MISC) | (E) Reportable compensation from related organizations (W- 2/1099- MISC) | Estimated amount of other compensation from the organization and related organizations | | |
| Lautaro Dıaz , V P | 40 00 | | | Х | | | | 129,726 | 0 | 18,354 | |
| Delia De La Vara , VP | 40 00 | | | Х | | | | 135,177 | 0 | 16,050 | |
| Lısa Navarette , V P | 40 00 | | | Х | | | | 122,234 | 0 | 15,113 | |
| Eric Rodriguez , V P | 40 00 | | | Х | | | | 115,706 | 0 | 17,268 | |
| Marıa Rosa , V P | 40 00 | | | Х | | | | 120,737 | 0 | 4,770 | |
| Jose Velasquez , Deputy VP | 40 00 | | | Х | | | | 113,935 | 0 | 9,015 | |
| Ronald Estrada , Deputy VP | 40 00 | | | Х | | | | 110,515 | 0 | 16,525 | |
| Ruben Gonzales , Deputy VP | 40 00 | | | Х | | | | 123,238 | 0 | 4,770 | |
| Jorge Mursuli , DUSA Executive Dir | 40 00 | | | | Х | | | 195,350 | 0 | 6,309 | |
| Claudia Rosario , Controller | 40 00 | | | | | Х | | 122,432 | 0 | 10,344 | |
| Clarissa Martinez de Cas , Dir-National Campaigns | 40 00 | | | | | Х | | 105,842 | 0 | 13,833 | |
| Raul Gonzalez , Dır-Legıslatıve Affaırs | 40 00 | • | | | | Х | | 110,371 | 0 | 14,121 | |

Form 990, Part III, Line 1 - Briefly describe the organization's mission:

NCLR - the largest national Hispanic civil rights and advocacy organization in the United States - works to improve opportunities for Hispanic Americans. Through its network of nearly 300 affiliated community-based organizations, NCLR reaches millions of Hispanics each year in 41 states, Puerto Rico, and the District of Columbia. To achieve its mission, NCLR conducts applied research, policy analysis, and advocacy, providing a Latino perspective in five key areas - assets/investments, civil rights/immigration, education, employment and economic status, and health. In addition, it provides capacity-building assistance to its Affiliates who work at the state and local level to advance opportunities for individuals and families.