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Form 990

Return of Organization Exempt From Income Tax

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

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(HTA)

benefit trust or private foundation)

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

and ending For the 2009 calendar year, or tax year beginning C Name of organization В Check if applicable AMERICAN IMMIGRATION LAWYERS ASSOC D Employer identification number use IRS X Address change Doing Business As 91-1911195 label or print or Name change Number and street (or P O box if mail is not delivered to street address) E Telephone number Room/suite type Initial return 3701 OLD COURT ROAD SUITE (410) 484-4757 Specific Terminated City or town, state or country, and ZIP + 4 Instruc-Amended return BALTIMORE MD 21208 G Gross receipts \$ 120,129 Application pending Name and address of principal officer Х H(a) Is this a group return for affiliates? CYNTHIA ROSENBERG 3701 OLD COURT ROAD, SUITE #6, BALTIMO H(b) Are all affiliates included? Tax-exempt status X 501(c) (If "No," attach a list (see instructions) 4947(a)(1) or 6) **◄** (insert no) J Website: ▶ WWW AILADC ORG H(c) Group exemption number Trust | X | Association K Form of organization Corporation Other > L Year of formation M State of legal domicile DC Part I Briefly describe the organization's mission or most significant activities THE DC CHAPTER OF THE AMERICAN IMMIGRATIONS LAWYERS ASSOCIATION PROMOTES AND FACILITATES THE PRACTICE OF IMMIGRATION LAW IN 7∏¶Activities & Governance Check this box | If the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) 3 Number of independent voting members of the governing body (Part VI, line 1b) 4 0 5 Total number of employees (Part V, line 2a) 5 0 Total number of volunteers (estimate if necessary) 6 10 Total gross unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T, line 34 ല **Prior Year Current Year 8** Contributions and grants (Part VIII, line 1h) 78,339 74,494 Program service revenue (Part VIII, line 2g) 80,014 45,612 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . 857 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0 Total revenue—add lines 8 through 11 (must equal Part Vttt column (A), line 12)
Grants and similar amounts paid (Part IX, column (A), lines 1–3) 12 159.210 120,129 13 32,100 25,442 14 Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee/perfits/(Partix, compensation, employee) 15 0 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 Total fundraising expenses (Part IX, coturn (D), line 25 Other expenses (Part IX, column (A), lines 114 114 24n 17 131,685 77,900 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25). 163,785 103,342 19 Revenue less expenses Subtract line 18 from line 12 -4.57516.787 **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) 29.948 46.735 21 Total liabilities (Part X, line 26). 0 22 Net assets or fund balances Subtract line 21 from line 20 29.948 46,735 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Signature of officer Here CYNTHIA ROSENBERG **TREASURER** Type or print name and title Preparer's Check if Preparer's identifying number signature self-**Paid** ▶ X 5/10/2010 employed Preparer's Firm's name (or yours **SEIDEN & ASSOCIATES Use Only** if self-employed), 3701 OLD COURT ROAD, SUITE #7, BALTIMORE, MD 21208 address, and ZIP + 4 Phone no **►** (410) 484-0540 May the IRS discuss this return with the preparer shown above? (see instructions) . X Yes No For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2009)

Pa	art III Statement of Program Service Accomplishments	
1	Briefly describe the organization's mission: THE DC CHAPTER OF THE AMERICAN IMMIGRATION LAWYERS ASSOCIATION PROMOTES AND FACILITATES PRACTICE OF IMMIGRATION LAW IN THE WASHINGTON DC AREA	
2	Did the organization undertake any significant program services during the year which were not listed on	
2	the prior Form 990 or 990-EZ?	x X No
_	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Ye	s X No
	If "Yes," describe these changes on Schedule O	
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants allocations to others, the total expenses, and revenue, if any, for each program service reported.	
4a		0)
	MEMBERSHIP MEETING AND CONFERENCES PROVIDE A FORUM FOR DISCUSSION OF ISSUES AFFECTING WASHINGTON DC AREA IMMIGRATION LAWYERS AND THEIR CONSTITUENTS	
	••••••	
	•••••••••••••••••••••••••••••••••••••••	
4b	(Code) (Expenses 0 including grants of \$ 0) (Revenue \$ NEWSLETTER AND WEB SITE PROVIDE UP TO DATE INFORMATION FOR DC AREA IMMIGRATION LAWYERS ON DEVELOPMENTS AND THE DEPARTMENT OF STATE	

	•••••••••••••••••••••••••••••••••••••••	
	•••••••••••••••••••••••••••••••••••••••	
	1	
4c	(Code) (Expenses 0 including grants of \$ 0) (Revenue \$ THE CHAPTER ACTS AS A LOCAL LIAISON AMONG MEMBERS, IMMIGRATION OFFICIALS, THE COURTS AND THE DEPARTMENT OF STATE	<u>0</u>)
	••••••	
4d	Other program services. (Describe in Schedule O.)	
	(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)	

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_		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	<u> </u>	X
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		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
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		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			ĺ
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	_		
	complete Schedule D, Part III	8		_X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		×
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or	-		 ^
	quasi-endowments? If "Yes," complete Schedule D, Part V.	10		x
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,	-"		<u> </u>
	VII, VIII, IX, or X as applicable	11		x
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI.			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			٤
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	*		
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	1	· »	
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	*	· *	
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. Did the organization's separate or consolidated financial statements for the tax year include a footnote that	v 🕸	*	l
_	addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X	48	2	,
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
-	Schedule D, Parts XI, XII, and XIII.	12	**	Х
12A	Was the organization included in consolidated, independent audited financial statements for the tax Yes No	1 -		<u> </u>
	year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A X	"		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
16	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	ļ	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
17	to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	16		X
.,	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		v
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17		X
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		×
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	· · ·		<u> </u>
	If "Yes," complete Schedule G, Part III	19		х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H.	20		X

		1	103	140
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	24	х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the	21	_^_	<u> </u>
22	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K If "No," go to line 25.	24a		Х
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
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		
	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		<u> </u>
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	255		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	25b	-	
20	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			<u> </u>
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			l '
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.	28a		Χ
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV.	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
00	Part IV	28c		X
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<u> </u>
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		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N,</i>	30		 ^-
•	Part I	31		×
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?			
	If "Yes," complete Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
37	organization? If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		
J1	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	 		 ^ -
	19? Note. All Form 990 filers are required to complete Schedule O	38		x
			000	(2000)

			Yes	No
i 1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of		res	NO
	U.S. Information Returns Enter -0- if not applicable		ŀ	
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		ŀ	
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 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see			
	instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by	amon assess		
	this return?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		Х
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		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? .	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			
	Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
_	organization solicit any contributions that were not tax deductible?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
-	gifts were not tax deductible?	<u>6b</u>		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 -		
d		7c		
e	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			
E	benefit contract?	70		<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	79		
	required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		-
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 .			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter.			
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)			
I2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?.	12a		L
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . 12b			·

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Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body 1a 5			,
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3_		_ X_
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		<u> </u>
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	_		
	of the governing body?	7a		X
р	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	,		
	The governing body?			
a b	Each committee with authority to act on behalf of the governing body?	8a 8b	-	X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached	OD		<u> </u>
9	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.	9a		х
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal	Ja		
	enue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	X	
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	100		
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	×	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11	х	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a		12a	Х	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	Х	
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	_X_	
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by	,		
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		<u> </u>
b	Other officers or key employees of the organization	15b		_X_
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			: -
	with a taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			-
Soot	the organization's exempt status with respect to such arrangements?	16b	l	l
<u>3ect</u> 17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s or	nlv)		
. •	available for public inspection. Indicate how you make these available. Check all that apply	· • • • • • • • • • • • • • • • • • • •		
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest.	est		
-	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ne		
	organization ► CYNTHIA ROSENBERG			
	3701 OLD COURT ROAD, SUITE #6, BALTIMORE, MD 21208		 -	

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

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

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

X Check this box if the organization did not compe	ensate any curre	ent off	îce	r, d	rec	tor, o	r tru	ustee.		
(A)	(B)			(0				(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee or director	Institutional trustee	hecl Officer		Highest compensated at employee	S Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
MICHELLE FUNK CHAIRPERSON	15							0	0	0
BRENDA OLIVER VICE-CHAIR	5							0	0	0
PETER ASAAD SECRETARY	5							0	0	0
CYNTHIA ROSENBERG TREASURER	5							0	0	0
SONAL VERMA CHAIR-ELECT	8							0	0	0
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		-								
	,									
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	990 (2009)	AMERICAN IMMIGRATION LAV									91-191		Page	8
Pai	rt VII	Section A. Officers, Directors, 1		ploy	ees,			hest	t Co		ployees (cont	nued)		
		(A)	(B)	_			C) 			(D)	(E)		(F)	
		Name and title	Average hours per week	Individual trustee or director		Officer	Key employee	Highest compensated at employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC	comp) fro orga and	timated nount of other pensation om the anization irelated nizations	
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41									<u> </u>					_
1b	Total n	umbor of individuals (including but				·	a) 14 d	<u> </u>	2011	0	<u> </u>	0		_0
2		umber of individuals (including but ble compensation from the organiz		se iis	ieu a	DOVE 0	e) W	no re	ceiv	ed more than \$ i	חו טטט,טט			
												Y	es No	 >
3		organization list any former office ee on line 1a? If "Yes," complete S					yee	, or h	ighe	st compensated		3	X	
4		nunividual listed on line 1a, is the anization and related organizations in the contractions in the contraction in the cont										4	X	
5		r person listed on line 1a receive o s rendered to the organization? If '								rganization for		5	×	•
Sec		ndependent Contractors	· · · · · · · · · · · · · · · · · · ·											
1		ete this table for your five highest consation from the organization.	ompensated inde	pend	lent (contr	acto	ors th	at re	ceived more tha	in \$100,000 of			
		(A) Name and busines	s address							(B) Description of ser	vices ((C) Compensa		_
									-					0
	-										···			0
			· · · · · · · · · · · · · · · · · · ·											C
_	Tata	anti-confidence of the second	· 1 - 1						<u> </u>	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				С
2		umber of independent contractors an \$100,000 in compensation fror	•		ed to	thos	se lis	sted a	yode	e) who received				

Part	VIII	Statement of Revenue			_		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
रुष	1a	Federated campaigns	a 0		•		
할	_	Membership dues	7				
한 전	b	· · · · · · · · · · · · · · · · · · ·					
an E	C	Fundraising events 1					
jg ja	d	Related organizations <u>1</u>	1				
ξ.Έ	е	Government grants (contributions)	e 0				
ë r	f	All other contributions, gifts, grants, and					
Contributions, gifts, grants and other similar amounts		similar amounts not included above . 1	f ol			*	
1 1 1 1	g	Noncash contributions included in lines 1a-1f: \$	0	*aŭ			,
SE	h	Total. Add lines 1a–1f	•	74,494			
		10th, 70th inco 1a 11	Business Code	77,707			
a	ο-	MEETINGO		45.040	45.040		
Š.	2a	MEETINGS	541900	45,612	45,612		
ž	b			0			
Š	C			0			
Şel	d			0			<u> </u>
Ē	е			0			
Program Service Revenue	f	All other program service revenue		0			
Pro	q	Total. Add lines 2a–2f		45,612			
	3	Investment income (including dividends, interest, a	-	.0,012			
	3	·	ariu _				
		other similar amounts)	- ▶	23	23		
	4	Income from investment of tax-exempt bond proce	eds . 🕨	0			
	5	Royalties	▶	0			
		(ı) Real	(II) Personal				,
	6a	Gross Rents .			* *		
	b	Less rental expenses .		ļ	×		,
	С		0 0				
	d	Net rental income or (loss)	<u> </u>	0			^
		Gross amount from sales of (i) Securities	(II) Other	- 3	\$ y **	, x	
	1 a				`		
73			0 0	*	, * *	٠. ،	
	b	Less: cost or other basis		8	2 -2 -4	\$, ,
			0 0				;
	C	Gain or (loss)	0 0				
	d	Net gain or (loss)	▶	0			
	8a	Gross income from fundraising					
ue		events (not including \$ 0		*	३ ⊀	// i) *	
en		of contributions reported on line 1c)	1		* 4	* *	
e.			ا ا	İ			
2				Ť	^		
Other Revenu		Less direct expenses					
ŏ		Net income or (loss) from fundraising events	. <u> </u>	0			
	9a	Gross income from gaming activities.					
		See Part IV, line 19	a0				
	b	Less direct expenses b	0				
		Net income or (loss) from gaming activities	. •	0			
		Gross sales of inventory, less			••		
		returns and allowances	ا ا				
	L						
			,				- not
	<u> </u>	· · · · · · · · · · · · · · · · · · ·	· · · · •	0			
	L	Miscellaneous Revenue	Business Code	· 			
	11a						
	b			0	· · · · · · · · · · · · · · · · · · ·		
	С			0			
	d	All other revenue		0			
	e	Total. Add lines 11a–11d		0			
	12	Total revenue. See instructions		120,129	45,635	0	0
				,	.0,000	<u></u> _	

Part IX Statement of Functional Expenses

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

	All other organizations must complete column	(A) but are not req	juired to complete	columns (B), (C), a	ind (D).
	not include amounts reported on lines 6b, 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.	21,042			
2	Grants and other assistance to individuals in	21,042			
_	the U.S. See Part IV, line 22 .	4,400		*	
2	Grants and other assistance to governments,	4,400			
3				* *	
	organizations, and individuals outside the				
	U.S See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0		* '` }	<u>*</u>
5	Compensation of current officers, directors,				
	trustees, and key employees	0			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	ol			
7	Other salaries and wages	0			
8	Pension plan contributions (include section 401(k)		 -		
•	and section 403(b) employer contributions)	o			
9	Other employee benefits	0			
10	Payroll taxes .	0			
11	Fees for services (non-employees)	اً			
а	Management .	0			
b	Legal				
С	Accounting	3,127			
d	Lobbying	0			
е	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees .	0			
g	Other	1,661			
12	Advertising and promotion	0			
13	Office expenses	1,376			
14	Information technology .	0			
15	Royalties	0	-		
16		0			
17	- `· `	4,851			
18		4,001			
10	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	0		,	
19	Conferences, conventions, and meetings	56,639		-	
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0	0	0	0
23	Insurance	0			
24	Other expenses Itemize expenses not		. *	, %	_
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed	-9	\\\	****	
	5% of total expenses shown on line 25 below.)			ţ.	
а	WEBSITE NEWSLETTER & DESIGN EXPENSES	6,184			
b	BANK SERVICE CHARGES & CREDIT CARD FEES	2,033			
_	POSTAGE & DELIVERY	40			
ď	TELEPHONE	1,239			
_	CONTINUING LEGAL EDUCATION EXPENSES	751			
e					
o f	All other expenses ROUNDING DIFFERENCE	-1			
25	Total functional expenses. Add lines 1 through 24f	103,342	0	0	0
26	Joint costs. Check here ▶ 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				

Balance Sheet Part X (A) (B) Beginning of year End of year Cash—non-interest-bearing. 29,948 46.735 2 Savings and temporary cash investments 2 Pledges and grants receivable, net . . . 0 3 0 ol Accounts receivable, net . 0 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete 6 7 Notes and loans receivable, net . . Ωl 7 0 Inventories for sale or use . Prepaid expenses and deferred charges 10a 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D Less accumulated depreciation 10b 10c 0 11 Investments—publicly traded securities 11 0 0 12 Investments—other securities. See Part IV, line 11. ol 12 13 Investments—program-related See Part IV, line 11 ol 13 0 14 ol 14 0 Intangible assets 15 Other assets See Part IV, line 11. 0 15 0 Total assets. Add lines 1 through 15 (must equal line 34) 29.948 16 46,735 17 Accounts payable and accrued expenses . 17 18 Grants payable. 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities . 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties 0 23 Unsecured notes and loans payable to unrelated third parties . . . 24 0 24 0 25 Other liabilities. Complete Part X of Schedule D 0 25 0 Total liabilities. Add lines 17 through 25 ol 26 0 Organizations that follow SFAS 117, check here ▶ X and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 29,948 27 46,735 Temporarily restricted net assets 28 Permanently restricted net assets . . . Organizations that do not follow SFAS 117, check here▶ and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds. 32 33 Total net assets or fund balances 29,948 46,735 33 Total liabilities and net assets/fund balances. 29.948 46.735 If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Form **990** (2009)

SCHEDULEI (Form 990)

Department of the Treasury

Name of the organization

AMERICAN IMMIGRATION LAWYERS ASSOCIATION, WASHINGTON DC CHAPTER

General Information on Grants and Assistance

Partl

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

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

▶ Attach to Form 990.

OMB No		2009	Onen to Public
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Employer identification number

91-1911195

ž (h) Purpose of grant or assistance Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 0 0 0 0 (e) Amount of non-cash assistance 20,000 (d) Amount of cash grant Part IV and Schedule I-1 (Form 990) if additional space is needed Enter total number of section 501(c)(3) and government organizations the selection criteria used to award the grants or assistance? (c) IRC section if applicable 52-1549711 (p) EIN 918 F STREET N W WASHINGT 1 (a) Name and address of organization or government AILA FOUNDATION Part II

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations

Schedule I (Form 990) 2009

91-1911195

Schedule I (Form 990) 2009

Page 2 Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III

(f) Description of non-cash assistance								tional information					
(e) Method of valuation (book, FMV, appraisal, other)								e 2, and any other additional information					
(d) Amount of non-cash assistance	0	0	0	0	0	0	0	equired in Part I, line	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
(c) Amount of cash grant	4,400	0	0	0	0	0	0	t to provide the information required in Part I, line 2,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
(b) Number of recipients	8	0	0	0	0	0	0			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
(a) Type of grant or assistance (b) Number of (c) Amount of recipients cash grant	SCHOLARSHIPS							Part IV Supplemental Information. Complete this par					144444414111111111111111111111111111111

Schedule I (Form 990) 2009

SCHEDULE O (Form 990)

Supplemental Information to Form 990

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

OMB No 1545-0047 Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990.

AMERICAN IMMIGRATION LAWYERS ASSOCIATION, WASHINGTON DC CHAPTER 91-1911195 Form 990 Part III Line LINE 4D OTHER PROGRAM SERVICES DESCRIPTION- THE CHAPTER CREATED A PROGRAM ENTITLED "CITIZENSHIP DAY" WHEREBY PRO-BONO WORKSHOPS ARE PROVIDED IN MARYLAND, VIRGINIA AND WASHINGTON DC ASSISTING MEMBERS OF THE IMMIGRANT CIMMUNITY IN FILLING OUT FORMS AND CITIZENSHIP APPLICATIONS Form 990 Part PART VI Section SECTION B Line 11A FORM 990 REVIEW PROCESS- TAX RETURN IS REVIEWED AT REGULAR MEETING PRIOR TO DUE DATE. Form 990 Part PART VI Section B Line 12C EXPLANATION OFMONITORING AND ENFORCEMENT OF COMPLIANCE-DURING REGULAR BOARD MEETINGS ALL MEMBERS HAVE AN OPPORTUNITY TO MAKE ANY AND ALL CONFLICTS KNOV