

### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



**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)

OMB No 1545-0047 2011

**Open to Public** 

	nal Revenue		► The organization	n may have to use a copy of this return	n to satisfy stat	ate reportir	ng requirem	ents.		Inspection		
$\overline{\mathbf{A}}$	For the 2	011 calend	lar year, or tax year begin	ning	, 2011, and	d ending	<del></del>			,		
В	Check if app	plicable	C Name of organization LEA	DERSHIP CONFERENCE	EDUCAT	TION :	FUND	D Employ	er Identi	fication Number		
	Addres	s change	Doing Business As					23-7	7026	895		
	Name	change	Number and street (or P O bo	ox if mail is not delivered to street addr)		Room/su	ute	E Telepho	ne numb	per		
	Initial	-	1629 K STREET, N	W., 10TH FLOOR			i	(202	2) 4	66-3434		
	Termin		City, town or country		State ZIP	code + 4		· · · · ·				
		led return	WASHINGTON		DC 20	0006		G Gross re	eceints S	\$5,183,302.		
	=	ation pending	F Name and address of principa	l officer			H(a) Is this a	group return				
			WADE HENDERSON 1629 K ST	REET, NW., 10TH WASHINGTO	N DC 20	0006		affiliates incli		Yes No		
$\overline{\Gamma}$	Tax-exen	npt status	X 501(c)(3) 501(c) (		(a)(1) or	527	If 'No,' a	attach a list	(see inst	tructions)		
J	Websit	•	W.CIVILRIGHTS.OR	<del></del>	(-)(-)		H(c) Group e	exemption nu	mber ►			
K		organization	X Corporation Trust	Association Other ►	L Year o		on 1969			egal domicile DC		
_		Summar		Vicebolation     Gallet	1 = 100.0	o o	<u></u> 1303	7 1111 0	<del>1010 01 10</del>	igai conneile De		
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•	I	-		ES THAT SUPPORT CI								
Š		CONOMIC										
Activities & Governance												
δ				n discontinued its operations o	r disposed (	of more	than 25%	6 of its ne	t asse	ts		
প				ning body (Part VI, line 1a)					3			
es				of the governing body (Part V					4	6		
Ϋ́			of volunteers (estimate if r	calendar year 2011 (Part V, II	ne za)			}	5 6	45		
Act				Part VIII, column (C), line 12				Ì	7a	0.		
			business taxable income f						7b			
							Pı	rior Year		Current Year		
_	8 Contributions and grants (Part VIII, line 1h)								80.	5,145,686.		
Revenue	<b>9</b> Pro	gram serv	ice revenue (Part VIII, line	2g)								
e e	10 Inv	estment in	come (Part VIII, column (A	), lines 3, 4, and 7d)				78,3	47.	36,432.		
ď				es 5, 6d, 8c, 9c, 10c, and 11e					62.	1,184.		
	1			(must equal Part VIII, column	(A), line 12)	)	4	<u>,559,1</u>	89.	5,183,302.		
			milar amounts paid (Part I)							<del></del>		
			to or for members (Part IX			<del></del>						
စ္	<b>15</b> Sal		r compensation, employee	<u>,209,1</u>	85.	3,006,537.						
Expenses	<b>16a</b> Pro	6a Professional fundraising fees (Part IX, column (A), line 11e)										
Kpe	<b>b</b> Tot	al fundrais	ing expenses (Part IX, colu	ımn (D), line 25) ►	402,	735 <u>.</u>						
ű	17 Oth	ner expens	es (Part IX, column (A), lin	es 11a-11d, 11f-24e)			2	,434,2	97.	1,712,168.		
	<b>18</b> Tot	al expense	s Add lines 13-17 (must e	qual Part IX, column (A), hine	25)/:		5	,643,4	82.	4,718,705.		
	<b>19</b> Re	venue less	expenses Subtract line 18	3 from line 12		1	-1	,084,2	93.	464,597.		
5 8				8 550		18	Beginnin	g of Current	Year	End of Year		
Net Assets or Fund Balances	<b>20</b> Tot	tal assets (	Part X, line 16)	DEC I	3 2012	IÇ!	6	,259,8		6,676,326.		
85	<b>21</b> Tot	al liabilitie:	s (Part X, line 26)	7		33		705,2	67.	657 <b>,</b> 177.		
		t assets or	fund balances Subtract lin	ne 21 from line 20	th tics		5,	,554,5	52.	6,019,149.		
Pa	rt II	Signatur	e Block		ناڭ ويا.	l. u						
Unde	er penalties o	of perjury, I de	clare that I have examined this return of the than officer) is based on	urn, including accompanying schedules a all information of which preparer has an	and statements	s, and to th	e best of my	knowledge	and belie	ef, it is true, correct, and		
		IN STATE	Content diam officer) is based on	all linding by which preparer has an								
٠.		Sugnatur	re of officer	11 Tawton			1 (   Dat	0/24/1	2			
Sig He	gn 	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	(					-				
пе	re		EN McGILL LAWSON print name and title				EXECU	TIVE V	/P/C	00		
_		· ·	reparer's name	Preparer's signature	Date	<u>,                                    </u>		<u> </u>	1. 17	PTIN		
_		1	•	Check	J "							
Pa			Eric Bradshaw self-empl							000265373		
	eparer e Only	Firm's name								0005650		
<del>.</del>	Ciny	Firm's addre								Firm's EIN > 26-0025658		
<u></u>	. the IDC	dian. (== 41;	ALEXANDRIA	VA	22314			Phone no	(202			
				shown above? (see instruction	s)					X Yes No		
БA	m ror Pa	perwork R	eduction Act Notice, see tl	ie separate instructions.		TEEA	A0101 07/0	05/11		Form <b>990</b> (2011)		

	n 990 (2011) LEADERSHIP CONFERENCE EDUCATION FUND 23-7026895		Page 2
Par	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		X
1	Briefly describe the organization's mission:		
	FOUNDED IN 1969 AS THE EDUCATION AND RESEARCH ARM OF THE CIVIL RIGHTS		
	COALITION, THE LEADERSHIP CONFERENCE ON CIVIL RIGHTS EDUCATION FUND		
	See Form 990, Page 2, Part III, Line 1 (continued)		
2	Did the organization undertake any significant program services during the year which were not listed on the prior		
	Form 990 or 990-EZ?	X	No
	If 'Yes,' describe these new services on Schedule O.		
3	orani. Tanan ili alla alla alla alla alla alla a	$\mathbf{x}$	No
	If 'Yes,' describe these changes on Schedule O	<u></u>	
4	· · · · · · · · · · · · · · · · · · ·	nense	
-	Describe the organization's program service accomplishments for each of its three largest program services, as measured by ex Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allow	cations	s to
	others, the total expenses, and revenue, if any, for each program service reported.		
<b>4</b> a	a (Code:) (Expenses \$ 475,280. including grants of \$ 0.) (Revenue \$ 1,06		<u>10.</u> )
	AMERICAN FOR FINANCIAL REFORM (AFR): AFR'S MISSION IS TO WORK FOR A FINANCIAL	! <b>_</b>	
	SYSTEM THAT SERVES EVERYONE FAIRLY, THAT REBUILDS A MORE JUST ECONOMY, AND	. <b>–</b> – -	
	THAT PROVIDES CAPITAL FOR, RATHER THAN POSING A FUNDAMENTAL RISK TO,	<b>-</b>	
	EQUITABLE ECONOMIC GROWTH.	. <b>_</b>	
	LCCREF'S WORK INCLUDES 1) CONTNUING THE FIGHT FOR EFFECTIVE IMPLEMENTATION		
	THAT WILL REALIZE THE BEST POTENTIAL OF THE FINANCIAL REFORM LEGISLATION		
	2) PROVIDING FOR INFORMATION SHARING, COORDINATION, JOINT STRATEGIZING, AND		
	MESSAGE AMPLIFICATION ON FINANCIAL REFORM ISSUES THAT ALLOWS AFR AND OUR		
	PARTNERS TO IDENTIFY AND SEIZE OPPORTUNITIES TO MAKE ADDITIONAL PROGRESS		
	ON CHANGING THE FINANCIAL SYSTEM AND 3) INCREASING THE RANGE AND NUMBER OF		
	Soo Form 000 Pore 2 Port III Line 4e (continued)		
	See Form 990, Page 2, Part III, Line 4a (continued)		- <b>-</b> -
41	<b>b</b> (Code:) (Expenses \$293,671. including grants of \$0.) (Revenue \$1,00	0,00	<u> </u>
	AFFIRMATIVE ACTION: LCCREF'S AMERICANS FOR A FAIR CHANCE PROJECT		
	WAS FOCUSED PRIMARILY ON THE FOLLOWING AREAS OF WORK: CONDUCTING PUBLIC	. <b>–</b> – -	
	EDUCATION CAMPAIGNS AT THE NATIONAL AND STATE LEVELS; SCANNING EXISTING		
	PUBLIC ATTITUDES RESEARCH SO THAT WE MAY DETERMINE A COURSE OF ACTION THAT	- <del>-</del> -	. – – -
	WILL MOVE TARGET AUDIENCES TO BE MORE SUPPORTIVE OF THE POLICY; DETERMINING		
	A WORK PLAN FOR IDENTIFYING NEW PARTNERS IN THE BUSINESS AND OPINION		
	LEADER COMMUNITIES IN KEY STATES; BUILDING AND SUPPORTING STATE COALITIONS		
	IN CO, NE AND AZ; AND BEING IMPLEMENTATION OF COMMUNICATIONS AND MESSAGING		
	STRATEGIES FOR SCCESS. MOST OF THE WORK IS BEING CONDUCTED THROUGH THE		
	LCCR/RF DEPARTMENT OF FIELD OPERATIONS, WITH THE SUPPORT OF THE		
	COMMUNICATIONS DEPARTMENT.		
4	c (Code:) (Expenses \$332,936. including grants of \$0.) (Revenue \$53	5 5	99 )
	EDUCATION: THE EDUCATION PROJECT IS INTENDED TO ENSURE THAT THE VOICES	, <u>, , , , , , , , , , , , , , , , , , </u>	<u> </u>
	OF COMMUNITIES OF COLOR ARE HEARD IN THE DEBATE OVER HIGH SCHOOL REFORM.		
	TOO OFTEN, POOR AND MINORITY COMMUNITIES ARE LEFT OUT OF THE REFORM DEBATE		
	BECAUSE THEY ARE NOT INFORMED OR EMPOWERED ABOUT EITHER THEIR EDUCATIONAL		
	SOLUTIONS OR THEIR ADVOCACY OPTIONS. THE PROJECT IS INTENDED TO PROVIDE		
	BOTH EDUCATION POLICY INFORMATION AND ADVOCACY TOOLS AND TRAINING.	<b>-</b>	
			- <b></b> -
		. <del>-</del>	- <b></b> -
40	d Other program services (Describe in Schedule O )		
	(Expenses \$ 2,387,179. including grants of \$ 0.) (Revenue \$ 1,662,329.	)	
40	e Total program service expenses ► 3,489,066.		

			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	,	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
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		х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	_5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		х
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		х
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		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10	Х	333000
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
•	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI</i>	11 a	х	
1	b Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		х
1	c Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		х
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X.	11 e	<u> </u>	
	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11f	Х	
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII .	12a	Х	
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19	_	х
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		Х
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 Ь		

Part IV Checklist of Required Schedules (continued)

_		T		
			Yes	No
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.	21_		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2° If 'Yes,' complete Schedule I, Parts I and III	22		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? <i>If 'Yes,' complete Schedule J</i>	23	Х	
24 a	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, and 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		x
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		
c	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	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>x</u>
t	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b	L	<u> x</u>
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		<u>x</u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		<u> </u>
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):			
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		<u> </u>
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
ď	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M .	29		<u>X</u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		<u>X</u>
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		<u>X</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u> </u>
Ł	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		<u>x</u> _
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Х	
BAA	· · · · · · · · · · · · · · · · · · ·	Form	990 (	2011)

Notes: It Schedule U Contains a response to any quiesten in this Part V  1 a Enter the number reported in Box 3 of Form 1096. Enter -0 - if not applicable  1 a	ai	Charles Regarding Other World Introduction of the Dark V			
1a Enter the number reported in Box 3 of From 1096. Enter- of- in ota applicable   1a   0   0   0   0   0   0   0   0   0		Check if Schedule O contains a response to any question in this Part V	···		
be Enter the number of Forms W-26 included in line 1a. Enter O-I find applicable   1		•		Yes	No
C Dut the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize withers?  2a Enter the number of employees reported on Form W.3, Transmittal of Wage and Tax State ments, field for the calefidate year inding with or within the year evented by the return  bit at least one is reported on line 2a, and 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 (see instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the vealendary year, did the organization in Schedule O  3 a Nat the file of form 990-T for this year? If No, provide an explanation in Schedule O  3 bit 1'Yes, either the name of the freeign country.  See instructions for filing requirements for form 10 F 90-22 1, Report of Foreign Bank and Financial accounts?  Sea Was the organization in foreign country.  See instructions for filing requirements for form 10 F 90-22 1, Report of Foreign Bank and Financial Accounts?  Sea Was the organization in foreign country.  See instructions for filing requirements for form 10 F 90-22 1, Report of Foreign Bank and Financial Accounts?  5 a Was the organization in the organization that it was or is a party to a prohibited tax shelfer transaction?  6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization collect any contributions that may receive deductible?  7 bit Yes, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 bit Yes, indicate the number of Forms 8829 the during the year.  9 bit Yes, and the organization include with every solicitation an express statement that such contributions or gifts were form 8829?  1 bit Yes, indicate the number of Forms 8822 filed during the year.  9 bit He organization received a contribution of qualified intellectual	1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
(gambling) winnings to prize winners?  2 Enfert 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  bit at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note, if the sum of lines Ia and 2a is greater than 250, you may be required to e-rife (see instructions)  3 bit if Yes has it filed a Form 990-T for this year? If No., 'provide an explanation in Wagnariation have unreliated business gross income of \$1,000 or more during the year?  4 a At any time during the calendar year, od the organization have an interest in, or a signature or other authority over, a bit if Yes,' enter the name of the foreign country:  5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5 a Did any textibe party norify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year?  5 a Did any textibe party norify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year?  5 a Did any textibe party norify the organization that it was or is a party to a prohibited tax shelter transaction at a party to a prohibited tax shelter transaction at a party to a prohibited tax shelter transaction at a contribution and party time during the tax year?  5 a Did any textibe party norify the organization that it was or is a party to a prohibited tax shelter transaction at a deductible?  5 a Did the organization norify the donor of the value of the goods or services provided?  5 b If Yes, if dub organization norify the donor of the value of the goods or services provided?  6 b If Yes, if any the organization norify the donor of the value of the goods or services provided?  7 b If the organization received a contribu	Ŀ	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
(gambling) winnings to prize winners?  2 Enfert 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  bit at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note, if the sum of lines Ia and 2a is greater than 250, you may be required to e-rife (see instructions)  3 bit if Yes has it filed a Form 990-T for this year? If No., 'provide an explanation in Wagnariation have unreliated business gross income of \$1,000 or more during the year?  4 a At any time during the calendar year, od the organization have an interest in, or a signature or other authority over, a bit if Yes,' enter the name of the foreign country:  5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5 a Did any textibe party norify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year?  5 a Did any textibe party norify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year?  5 a Did any textibe party norify the organization that it was or is a party to a prohibited tax shelter transaction at a party to a prohibited tax shelter transaction at a party to a prohibited tax shelter transaction at a contribution and party time during the tax year?  5 a Did any textibe party norify the organization that it was or is a party to a prohibited tax shelter transaction at a deductible?  5 a Did the organization norify the donor of the value of the goods or services provided?  5 b If Yes, if dub organization norify the donor of the value of the goods or services provided?  6 b If Yes, if any the organization norify the donor of the value of the goods or services provided?  7 b If the organization received a contribu	c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
ments, filed for the calendar year ending with or within the year covered by this return    24   45		(gambling) winnings to prize winners?	1 c	X	
ments, filed for the calendar year ending with or within the year covered by this return    24   45	2:	Finter the number of employees reported on Form W-3. Transmittal of Wage and Tax State-			
Note, if the sum of lines Ia and 2a is greater than 250, you may be required to e-file (see instructions)  a Did the organization have unrelated business gross income of \$1,000 or more during the year?  a Aa At any time during the calendary 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, e-order financial accountly over, a financial account) is offered group country. See instructions for filing requirements for Form TD F 90-22 I, 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 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b Did any taxable party notely the organization that it was or is a party to a prohibited tax shelfer transaction?  5c Was 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?  5c Was the firm of the state of		ments, filed for the calendar year ending with or within the year covered by this return 2a 45			
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b If Yes' has it filed a Form 990-T for this year? If No,' provide an explanation in Schedule O 4 a At any time during the calendar year, idd the organization have an inferest in, or a signature or other authority over, a financial account in a foreign country.  b If Yes,' enter the name of the foreign country:  See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 5 a Was the organization a party to a prohibited tax shelfer transaction at any time during the tax year?  b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelfer transaction?  6 a 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?  6 a 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?  7 b If Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 b If Yes,' did the organization include with every solicitation and expertise that a such contributions or gifts were not tax deductible?  8 b If Yes,' indicate the number of Forms 8282 filed during the year.  9 b If Yes,' indicate the number of Forms 8282 filed during the year.  9 b If the organization received a contribution of qualified intellectual property, did the organization file Form 8299 as required?  9 b If the organization in received a contribution of qualified intellectual property, did the organization file a Form 1980?  9 c Sponsoring organization is maintaining donor advised funds and section 509(x)3) supporting organizations. Did the supporting organization is a distribution to a donor, donor advised funds and section 509(x)3) supporting organizations. Did the supporting organizations maintaining donor advised funds and section 509(x)3) supporting organizations. Polici	3:		32		Y
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c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d If Yes, indicate the number of Forms 8282 filed during the year.  e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations male any taxable distributions under section 4966?  Sponsoring organization make any taxable distributions under section 4966?  b Did the organization make a distribution to a donor, donor advisor, or related person?  Section 501(c(X)) organizations. Enter a 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  Section 501(c(X)) organizations. Enter a Gross income from members or shareholders b Gross income from other sources (Oo 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 bif Yes, enter the amount of tax-exempt interest received or accrued during the year  13 Section 501(c(X29) qualified nonprofit health insurance issuers. a is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter th		· · · · · · · · · · · · · · · · · · ·	$\overline{}$		_X
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b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14	Did the organization receive any payments for indoor tanning services during the tax year?	$\overline{}$		_ <u>X</u> _
		olf 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b		

Form 990 (2011)

Form 990 (2011) LEADERSHIP CONFERENCE EDUCATION FUND 23-7026895 Page 6 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. x Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 6 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 officer, director, trustee or key employee? Х 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 Х Did the organization make any significant changes to its governing documents X since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Х Did the organization have members or stockholders? 6 Х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? **7** a X **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b stockholders, or other persons other than the governing body? X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a Х a The governing body? 8b Х b Each committee with authority to act on behalf of the governing body? 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 9 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. No Yes 10 a Х 10a Did the organization have local chapters, branches, or affiliates? b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10 b operations are consistent with the organization's exempt purposes? 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Х 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Х 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Х c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done Х 13 X Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 14 X 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? 15a a The organization's CEO, Executive Director, or top management official 15b X b Other officers of key employees of the organization 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 16 a Х taxable entity during the year? b If 'Yes,' did the organization follow 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 16 b organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ <u>District of Columbia</u> Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Another's website X Upon request 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 during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization 1629 K STREET, NW , 10TH FLOOR WASHINGTON DC 20006 (202) 466-3434

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

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of 'key employee'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee												
		(C)										
(A) Name and title	(B) Average hours per week	unles	Position (do not check more than one bounless person is both an officer and a director/trustee)			(D)  Reportable compensation from the organization	(E)  Reportable compensation from related organizations	(F) Estimated amount of other compensation				
	(describe hours for related organiza- tions in Schedule O)	adividi al trus <del>cee</del> or director	nshintonal laustae	Officer	key amphyee	Highest coinहार-पड्यांस्ट employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations		
_(1) WILLIAM ROBINSON	ŀ							_	_			
CHAIRPERSON	0.70	X	Щ		Щ			0.	0.	0.		
(2) MURIEL MORISBY VICE-CHAIRPERSON	0.70	х						0.	0.	0.		
(3) CAROLYN OSOLINIK												
SECRETARY/TREASURER	0.70	Х						0.	0.	0.		
(4) MARY FRANCIS BERRY BOARD MEMBER	0.70	x						0.	0.	0.		
(5) JOHN PODESTA	1						•	<del></del>				
BOARD MEMBER	0.70	х				ł		0.	0.	_ 0.		
(6) MARILYN SNEIDERMAN												
BOARD MEMBER	0.70	Х						0.	0.	0.		
MADE HENDERSON PRESIDENT/CEO	39.70			х	х			43,000.	157,000.	18,611.		
(8) KAREN McGILL LAWSON EXECUTIVE VP/COO	39.70			х	х			138,600.	15,400.	19,125.		
(9) NANCY ZIRKIN	33.70		-	Ĥ	^			130,000.	13/400.	15/125.		
EXECUTIVE VP/OF POLICY	39.00			x	х			107,100.	32,900.	15,909.		
(10) EDWIN FICHTER												
VP_DEVELOPMENT	39.00			<u> </u>	Х			100,394.	33,465.	17,709.		
(11) ELLEN BUCHMAN  VP FIELD OPERATIONS	39.00					х		98,395.	17,364.	11,696.		
(12) LISA BORNSTEIN												
SENIOR COUNSEL	39.00		L			Х		89,368.	22,342.	11,867.		
(13) JEFF MILLER VP COMMUNICATIONS	39.00					x		79,044.	26,348.	_7,347.		
(14) CORRINE YU	1 22.50											
SENIOR COUNSEL & MANAGING POLICY DIR	39.00		L			х		49,148.	60,070.	11,705.		

Part VII   Section A. Officers, Directors, Trust	ees, l	<b>Кеу</b>	Em	plo	ye	es,	and	d Highest Compensated Employees (cont)				
			(C)									
(A) Name and title	(B) Average hours per	Position (do not check more than one box, unless person is both an officer and a director/trustee)					h an tee)	Reportable compensation from	(E)  Reportable compensation from	(F) Estimated amount of other compensation		
	week (describ e hours for related organi- zations	Indiv	Insti	Officer	Key	Highest compensate employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization		
	e hours for	recto	Institutional trustee	Ğ	empl	est co	er			and related organizations		
	related organi-	trust	al tru	1	oyee	mpe	<b>i</b>					
	zations in Sch O)		stee			nsated						
(15) JUNE ZEITLIN	<del> </del>		-		├		-			<del>                                     </del>		
DIRECTOR-CEDAW	39.00					x		112,579.	12,509	16,207.		
(16) ANGELA LOVELACE DIRECTOR OF FINANCE	39.00					х		87,227.	21,807			
(17) DIANNE PICHE SENIOR COUNSEL	39.00					х		86,805.	21,701.			
(18) LISA DONNER DIRECTOR-AFR	39.00					x		81,106.	20,276.			
(19)	]			_		-	_		20/2.0.	3,2131		
	ļ				ļ							
(20)					L							
(21)												
(22)												
(23)												
<u>(24)</u>												
(25)								<del></del>				
1 b Sub-total					L	<u>.                                    </u>	•	1,072,766.	441,182.	147,125.		
c Total from continuation sheets to Part VII, Section A	4						•					
d Total (add lines 1b and 1c)							<u> </u>	1,072,766.		<del></del>		
2 Total number of individuals (including but not limited from the organization 4	to thos	se lis	ted	abo	ve) v	who	rece	eived more than \$1	100,000 of reportat	ole compensation		
nom the organization										Yes No		
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in	or trust dividua	ee, k <i>l</i>	кеу е	empl	loye	e, or	hig	hest compensated	employee	3 X		
4 For any individual listed on line 1a, is the sum of repathe organization and related organizations greater the									om			
<ul><li>such individual</li><li>Did any person listed on line 1a receive or accrue co</li></ul>	mpens	ation	n fro	m a	ny u	nrela	ated	organization or in	idividual	4 X 5 X		
for services rendered to the organization? If 'Yes,' co	ompiete	e Scr	reau	ie J	ior :	Sucr	per	son .	·	5 X		
Complete this table for your five highest compensate compensation from the organization. Report compensation.	d indep	end	ent o	cont	ract	ors t	hat	received more tha	n \$100,000 of	tay year		
(A)  Name and business addres		101 (	10 0	4.011		<i>you</i> .	0.10	(B)	)	(C) Compensation		
Traine and business address — Description of services — Compe									Compensation			
								<u></u>				
2 Total number of independent contractors (including t	out not	lımıt	ed to	o the	ose l	isted	d abo	ove) who received	more than			
\$100,000 in compensation from the organization >												

Par	rt viii   Statement of Revenue				
	•	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions)  f All other contributions, gifts, grants, and similar amounts not included above  1a  1b  1c  181,350.  1d  1e	-			
NDON	g Noncash contributions included in lns 1a-1f: \$	] .		İ	
	h Total. Add lines 1a-1f  Business Code	5,145,686.			
PROGRAM SERVICE REVENUE				-	
REV	2a				
VICE	c				
SER	d				
¥.	e				
000	f All other program service revenue .	ļ			
-	g Total. Add lines 2a-2f	<u> </u>			
	<ul> <li>Investment income (including dividends, interest and other similar amounts)</li> <li>Income from investment of tax-exempt bond proceeds</li> </ul>	307.32.	0.	0.	36,432.
	5 Royalties	•		· · ·	
	(i) Real (ii) Personal				
	6a Gross rents .	_			
ĺ	b Less rental expenses	4			
	c Rental income or (loss) d Net rental income or (loss)				
	7a Gross amount from sales of assets other than inventory (i) Securities (ii) Other				
	b Less: cost or other basis and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss)				
NUE	8a Gross income from fundraising events (not including \$ 181,350.				
OTHER REVEN	of contributions reported on line 1c).  See Part IV, line 18 . a				
HER	b Less: direct expenses b	1			
٥	c Net income or (loss) from fundraising events				
	9a Gross income from gaming activities See Part IV, line 19				
	<b>b</b> Less direct expenses <b>b</b>				
	c Net income or (loss) from gaming activities	<u> </u>			
	10a Gross sales of inventory, less returns and allowances	_			
	b Less: cost of goods sold b				
	c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code	<del> </del>			
	11a OTHER REVENUE 900099	1,184.	1,184.	0.	0.
	b				
	c				
	d All other revenue	1			
	e Total. Add lines 11a-11d	1/1011	1 104		36 430
	12 Total revenue. See instructions	5,183,302.	1,184.	0.	36,432.

#### Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	Check if Schedule O contains a response to any question in this Part IX											
Do 1 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses							
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21											
2	Grants and other assistance to individuals in the United States. See Part IV, line 22											
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16											
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees											
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		!									
7	Other salaries and wages	2,447,137.	1,734,350.	452,207.	_260,580.							
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)											
9	Other employee benefits	559,400.	401,356.	101,159.	56,885.							
10	Payroll taxes											
11	Fees for services (non-employees):											
a	Management											
t	Legal .											
	: Accounting	25,144.	0.	25,144.	0.							
	Lobbying											
e	Professional fundraising services See Part IV, line 17 .											
	Investment management fees .											
	Other											
12	Advertising and promotion .											
13	•											
14	Information technology											
15	Royalties .											
16	Occupancy	451,186.	327,110.	67,678.	56,398.							
17	Travel	119,454.	116,995.	2,459.	0.							
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .											
19	Conferences, conventions, and meetings	149,225.	91,678.	57,547.	0.							
20	Interest				·····							
21	Payments to affiliates		·									
22	Depreciation, depletion, and amortization	31,305.	22,696.	4,696.	3,913.							
23	Insurance											
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)											
2	CONSULTING	400,928.	335,935.	64,993.	0.							
	SUBCONTRACTORS	211,450.	211,450.	0.	0.							
	PRINTING AND COPYING	45,954.	35,393.	10,561.	0.							
	TELEPHONE	122,708.	24,665.	96,148.	1,895.							
	All other expenses	154,814.	187,438.	-55,688.	23,064.							
	Total functional expenses. Add lines 1 through 24e	4,718,705.	3,489,066.	826,904.	402,735.							
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	.,,	, ,									
	Check here ► if following SOP 98-2 (ASC 958-720)											

Part X **Balance Sheet** (A) (B) Beginning of year End of year 1 Cash - non-interest-bearing 833,671 1 767,359. 2 2 Savings and temporary cash investments 2,511,597 3 Pledges and grants receivable, net 3 2,819,357. 4 Accounts receivable, net 5,539 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L  $\,$  . . . 5 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) . . 6 Notes and loans receivable, net 7 Inventories for sale or use 8 20,979 9 Prepaid expenses and deferred charges 30,631 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10a 190,036 **b** Less<sup>1</sup> accumulated depreciation 135,756 10b 79,252 10 c 54,280. 11 Investments - publicly traded securities 2,463,642 1,803,606. 12 12 Investments - other securities See Part IV, line 11 Investments - program-related See Part IV, line 11 13 14 14 Intangible assets 345,139 15 1,201,093. 15 Other assets. See Part IV, line 11 6,259,819 16 6,676,326. 16 Total assets. Add lines 1 through 15 (must equal line 34) 496,612. 17 480,199. 17 Accounts payable and accrued expenses 18 18 Grants payable Deferred revenue 19 19 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 208,655 25 176,978. 705,267 26 657,177. Total liabilities. Add lines 17 through 25 Ĕ Organizations that follow SFAS 117, check here X and complete lines 27 through 29 and lines 33 and 34. Unrestricted net assets 1,603,095 27 1,410,169. 3,751,457 28 4,408,980. 28 Temporarily restricted net assets 200,000 29 200,000. Permanently restricted net assets R Organizations that do not follow SFAS 117, check here and complete FUZD lines 30 through 34. 30 30 Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances 5,554,552 33 6,019,149. Total liabilities and net assets/fund balances 6,259,819 34 6,676,326.

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Form 990 (2011)

Forn	1990 (2011) LEADERSHIP CONFERENCE EDUCATION FUND	23-7026895	_	Pa	ge <b>12</b>					
Pai	t XI Reconciliation of Net Assets									
	Check if Schedule O contains a response to any question in this Part XI				$\Box$					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,18	<del></del>						
2										
3	Revenue less expenses Subtract line 2 from line 1	3		54,5						
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	<u>5,55</u>	54 <u>,5</u>	<u>52.</u>					
5	Other changes in net assets or fund balances (explain in Schedule O)	5								
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	<u>6</u> ,01	19,1	49.					
Pai	rt XII Financial Statements and Reporting				_					
	Check if Schedule O contains a response to any question in this Part XII				$\Box$					
			$\longrightarrow$	Yes	No					
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				1					
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.									
2	Were the organization's financial statements compiled or reviewed by an independent accountant? .		2a		Χ					
Į	Were the organization's financial statements audited by an independent accountant?	•	2b	Х						
•	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight review, or compilation of its financial statements and selection of an independent accountant?	of the audit,	_2c	х						
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.									
(	If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is separate basis, consolidated basis, or both:	ssued on a			ĺ					
	X Separate basis Consolidated basis Both consolidated and separate basis									
3	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Audit Act and OMB Circular A-133?	the Single	3a		x					
	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the ror audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired audit	3ь							
BAA			Form	990 (2	2011)					

# SCHEDULE A (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

lame (	ne of the organization Employer identification number												
LEA	DEI	RSHIP CONFEREN	NCE EDUCATION	FUND					23-70	02689	5		
Pan	tT_	Reason for Publ	ic Charity Status	(All organizations	must c	comple	te this	part.)	See ii	nstruct	tions.		
he c	rgai	nization is not a privat	e foundation because	it is: (For lines 1 through	gh 11, cl	heck onl	y one bo	ox )	_		-		
1		A church, convention	of churches or assoc	iation of churches descr	ribed in s	section	1 <b>70</b> (b)(1	)(A)(i).					
2	П	A school described in	section 170(b)(1)(A)	(ii). (Attach Schedule E	.)								
3	П	A hospital or a coope	rative hospital service	e organization described	in <b>sect</b>	ion 170(	b)(1)(A)	(iii).					
4		A medical research o	rganization operated	in conjunction with a ho	spital de	escribed	ın secti	on 170(	ьх1хах	(iii) Ente	er the hospital's		
		name, city, and state	:	•	•			•		•	,		
5			ated for the benefit of	a college or university	owned o	r operat	ed by a	governn	nental u	nit desci	ribed in section		
6 7	X	An organization that i	A federal, state, or local government or governmental unit described in <b>section 170(b)(1)(A)(v).</b> An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in <b>section 170(b)(1)(A)(vi).</b> (Complete Part II)										
8	. $lacksquare$												
9		from activities related	l to its exempt functio	more than 33-1/3% of ns — subject to certain taxable income (less s	exceptio	ns. and	(2) no r	nore tha	ın 33-1/3	3% of its	s support from aross		
	_	June 30, 1975. See s	ection 509(a)(2). (Cor	nplete Part III )	00110110	i i tuny i	70111 500	,,,,,,,,,,,	aoquiic	o by the	organization artor		
10	Ц	An organization organ	nized and operated ex	clusively to test for pub	lic safet	y Sees	ection 5	509(a)(4)	).				
11		more publicly support	ed organizations desi	cclusively for the benefit cribed in section 509(a) on and complete lines 1	<ol><li>or se</li></ol>	ection 50	he funct 19(a)(2)	ions of, See <b>se</b>	or carry ction 50	out the 19(a)(3).	purposes of one or Check the box that		
		a Type I	<b>b</b> Type II	c ☐ Type III			ıntegrate	ed		d $\square$	Type III - Other		
е		By checking this box	I certify that the orga managers and other	nization is not controlle than one or more public	d directl	y or indi orted or	rectly by ganization	one or	more di cribed in	squalifie section	ed persons 509(a)(1) or		
f		If the organization red check this box	ceived a written deteri	mination from the IRS th	hat is a <sup>-</sup>	Type I, T	Гуре II о	r Type I	ll suppo	rting org	ganization,		
g		Since August 17, 200	6, has the organization	on accepted any gift or	contribu	tion fror	n any of	the foll	owing pe	ersons?			
		<b>(3)</b> A management of					do	and a	n (u) nn	od (m)	Yes No		
		<ul><li>(i) A person who d below, the gove</li></ul>	rning body of the sup	introls, either alone or to ported organization?	ogetner v	with per	sons des	scribea	n (II) an	ia (iii)	11 g (i)		
			er of a person describ								11 g (ii)		
		• •		lescribed in (i) or (ii) ab	ove?						11 g (iii)		
h		• •	•	supported organization							<u> </u>		
		(i) Name of supported organization	(ii) EIN	(ili) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) organiz column ( your go	ls the zation in i) listed in overning	the organ	ou notify nization in n (i) of upport?	organiz colur organize	s the ation in in (i) ed in the	(vii) Amount of support		
					Yes	No No	Yes	No	Yes	No			
		<del></del>											
<u>A)</u>					ļ	<u> </u>	<u></u>						
B)													
						}							
<u>C)</u>						<del> </del>	-	<del> </del>					
(D)													
E)						ļ				,			
[otal													

Schedule A (Form 990 or 990-EZ) 2011

### Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Sec	tion A. Public Support						
Cale: begir	ndar year (or fiscal year nning in) ►	(a) 2007	<b>(b)</b> 2008	(c) 2009	<b>(d)</b> 2010	<b>(e)</b> 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	4,960,865.	6,415,957.	9,013,910.	4,480,080.	5,145,686.	30,016,498.
	Tax revenues levied for the organization's 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 lines 1 through 3.	4,960,865.	6,415,957.	9,013,910.	4,480,080.	5,145,686.	30,016,498.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						5,041,803.
6	Public support. Subtract line 5 from line 4				_		24,974,695.
Sec	tion B. Total Support						
Caleı begir	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2007	<b>(b)</b> 2008	(c) 2009	<b>(d)</b> 2010	<b>(e)</b> 2011	(f) Total
7	Amounts from line 4	4,960,865.	6,415,957.	9,013,910.	4,480,080.	5,145,686.	30,016,498.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	112,244.	110,501.	126,201.	78,347.	36,432.	463,725.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)	0.	0.	1,713.	762.	1,184.	3,659.
11	<b>Total support.</b> Add lines 7 through 10					<u> </u>	30,483,882.
12	Gross receipts from related activ	ities, etc (see inst	ructions)			12	<u> </u>
	First five years. If the Form 990 organization, check this box and	stop here	·	d, third, fourth, or	fifth tax year as a	section 501(c)(3)	▶ □
Sec	tion C. Computation of Pu			<del></del>		<del> </del>	
14		-	• •	e 11, column (f))		. 15	81.93%
15						<u> </u>	82.05%
	33-1/3% support test - 2011. If t and stop here. The organization	qualifies as a pub	licly supported or	ganization		•	► <u>X</u>
Ь	33-1/3% support test — 2010. If t and stop here. The organization				i, and line 15 is 33	3-1/3% or more, c	heck this box ►
17 a	10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts'	meets the 'facts-a	nd-circumstances'	' test, check this b	oox and <b>stop here.</b>	. Explain in Part I\	√how
	10%-facts-and-circumstances to or more, and if the organization morganization meets the 'facts-and	meets the 'facts-a d-circumstances' t	nd-circumstances est. The organizat	' test, check this b tion qualifies as a	oox and <b>stop here.</b> publicly supported	. Explain in Part IV d organization	V how the ►
18 BAA	Private foundation. If the organiz	zation did not che	ck a box on line 1	3, 16a, 16b, 17a,			uctions

## Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Sec	tion A. Public Support			<u> </u>			
Calen	dar year (or fiscal yr beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	<b>(e)</b> 2011	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include any unusual grants.)						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
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						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6)						
<u>Sec</u>	tion B. Total Support			<del></del>			
Calen	dar year (or fiscal yr beginning in) 🟲	(a) 2007	<b>(b)</b> 2008	(c) 2009	( <b>d)</b> 2010	<b>(e)</b> 2011	(f) Total
10 a	Amounts from line 6 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 June 30, 1975			-			
	Add lines 10a and 10b  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 Ins 9, 10c, 11, and 12)						
14	First five years. If the Form 990 organization, check this box and	s for the organiza	tion's first, second	d, third, fourth, or	fifth tax year as a	section 501(c)(3)	▶∏
	tion C. Computation of Pu						
	Public support percentage for 20			: 13, column (f))		15	8
	Public support percentage from 2	•	• • •		·	16	8
	tion D. Computation of Inv			·			
17	Investment income percentage for	or <b>2011</b> (line 10c,	column (f) dıvıded	by line 13, colum	nn (f)) .	17	- %
18	Investment income percentage fr	om 2010 Schedule	e A, Part III, line 1	7		18	- 8
	<b>33-1/3% support tests — 2011.</b> If is not more than 33-1/3%, check	this box and stop	here. The organiz	zation qualifies as	a publicly support	ted organization	▶ [_]
b	33-1/3% support tests - 2010. If line 18 is not more than 33-1/3%	the organization of the check this box a	did not check a bo nd <b>stop here.</b> The	x on line 14 or lin organization qua	ie 19a, and line 16 lifies as a publicly	is more than 33-1/ supported organiza	/3%, and ►
20	Private foundation. If the organiz						<b>▶</b> □

Schedule A (Form 990 or 990-EZ) 2011 LEADERSHIP CONFERENCE EDUCATION FUND	23-7026895	Page <b>4</b>
Part V Supplemental Information. Complete this part to provide the explanations re Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any a (See instructions).	quired by Part II, line additional information	10;
EXPLANATION FOR OTHER INCOME: OTHER INCOME NOT NORMALLY	·	
OCCURING.		
Other Income Part II, Line 10		
Description: OTHER INCOME		
2007: 0.		
2008: 0.		
2009: 1713.		
2010: 762.	<b></b>	
2011: 1184.	- <b></b>	
		<del>-</del> -
	<b>-</b>	
		<b>-</b>
	<b></b>	
	·	
	·	
	·	
	·	

#### SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury

Name of organization

### **Political Campaign and Lobbying Activities**

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

► Complete if the organization is described below.

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

OMB No 1545-0047

2011

Open to Public Inspection

Employer identification number

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

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

Section 501(c)(4), (5), or (6) organizations: Complete Part III

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

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

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

23-7026895 LEADERSHIP CONFERENCE EDUCATION FUND Part I-A | Complete if the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No 4a Was a correction made? b If 'Yes,' describe in Part IV Part I-C | Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures, Add lines 1 and 2. Enter here and on Form 1120-POL, Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (c) EIN (a) Name (b) Address (d) Amount paid from filing (e) Amount of political organization's funds if none, enter-0contributions received and

(a) Name (b) Address (c) EIN (d) Amount paul from filing organization's funds if none, enter-0- (e) Amount of political corporativation's exceeded and promptly and directly delivered to a separate political organization if none, enter -0- (1) (2) (3) (4) (5) (6) (6)

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2011

Schedule C (Form 990 or 990-EZ) 201				23-7026	
Part II-A Complete if t		is exempt under sec	ction 501(c)(3) and	filed Form 5768 (ele	ection under
<del></del>		ngs to an affiliated group (a	and list in Part IV each a	affiliated group member's	name
	-	share of excess lobbying e		-imated group member s	riao,
	•	ked box A and 'limited conf			
	Limits on Lobbyi			(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	res to influence pub	lic opinion (grass roots lob)	hyina)	0.	
<b>b</b> Total lobbying expenditu	· · · · · · · · · · · · · · · · · · ·	: :=	* -	0.	
c Total lobbying expenditu		• • • •	g/	0.	
d Other exempt purpose e	•			4,814,099.	
e Total exempt purpose ex	·	es 1c and 1d)	· · ·	4,814,099.	
	•	•		1/011/0331	
both columns.	· · · · · · · · · · · · · · · · · · ·	unt from the following table	e in	390,705.	<del></del>
If the amount on line 1e, colu	mn (a) or (b) is T	he lobbying nontaxable ar	mount 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 o	ver \$1,500,000		
Over \$17,000,000		\$1,000,000			
<b>g</b> Grassroots nontaxable a	mount (enter 25% o	f line 1f)		97,676.	
<b>h</b> Subtract line 1g from line	e 1a If zero or less,	enter -0-		0.	<del></del>
i Subtract line 1f from line	e 1c If zero or less,	enter -0	Į	0.	···
j If there is an amount oth section 4911 tax for this	ner than zero on eith	er line 1h or line 1i, did the	organization file Form	4720 reporting	☐Yes ☐No
Section 4911 tax for this		4 V 4	Index Cooking 501/b)		1 1103 1 110
(Som	ne organizations tha	4-Year Averaging Period U t made a section 501(h) eld is below. See the instruction	ection do not have to co	omplete all of the five	
	Lobb	ying Expenditures During	4-Year Averaging Perio	od	
Calendar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	<b>(d)</b> 2011	(e) Total
2a Lobbying non-taxable amount	428,33	9. 592,661.	431,689.	390,705.	1,843,394.
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					2,765,091.
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount	108,08	5. 148,165.	107,922.	97,676.	461,848.
e Grassroots ceiling amount (150% of line 2d, column (e))	· · · · · · · · · · · · · · · · · · ·				692,772.
f Grassroots lobbying expenditures				Schodulo C (F	990 or 990-EZ) 201
BAA				Schedule C (Form	

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

Schedule C (Form 990 or 990-EZ) 2011 LEADERSHIP CONFERENCE EDUCATION FUND	23-7026895	Page 4
Partiva Supplemental Information (continued)	····	
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		- <b></b> -
	<b>-</b>	<del>-</del> -
		<del>-</del> -

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

### **Supplemental Financial Statements**

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

LEA	ADERSHIP CONFERENCE EDUCATION	FUND		23-7026895	
Par			r Funds or Acce		e if
	the organization answered 'Yes' t	o Form 990, Part IV, line 6.			
		(a) Donor advised funds	(b) F	unds and other acc	ounts
1	Total number at end of year .				
2	Aggregate contributions to (during year)				
3	Aggregate grants from (during year)				
4	Aggregate value at end of year .				
5	Did the ergonization inform all denote and don	or advisors in writing that the assets held	in donor advised		
J	Did the organization inform all donors and don funds are the organization's property, subject t	o the organization's exclusive legal contro	013	Yes	☐ No
6	Did the organization inform all grantees, donor used only for charitable purposes and not for to purpose conferring impermissible private bene	he benefit of the donor or donor advisor, o		Yes	☐ No
Par	t II   Conservation Easements. Compl	ete if the organization answered	'Yes' to Form 99	90, Part IV, line	7.
1	Purpose(s) of conservation easements held by				
	Preservation of land for public use (e.g., re		ation of an historica	Illy important land a	irea
	Protection of natural habitat	· · · · · · · · · · · · · · · · · · ·	ation of a certified h	•	
	Preservation of open space	_			
2	Complete lines 2a through 2d if the organization last day of the tax year	n held a qualified conservation contribution	on in the form of a c	onservation easem	ent on the
			<u> </u>	leld at the End of th	ne Tax Year
a	Total number of conservation easements		2a		
Ł	Total acreage restricted by conservation easer	nents	2b	<del></del>	
C	: Number of conservation easements on a certif	ed historic structure included in (a)	2c	·	
c	Number of conservation easements included in structure listed in the National Register	(c) acquired after 8/17/06, and not on a	historic 2d		
3	Number of conservation easements modified, t tax year ▶	ransferred, released, extinguished, or teri	minated by the orga	nization during the	
4	Number of states where property subject to con	nservation easement is located 🕨			
5	Does the organization have a written policy requand enforcement of the conservation easemen	garding the periodic monitoring, inspection ts it holds?	n, handling of violati	ons,	☐ No
6	Staff and volunteer hours devoted to monitorin	g, inspecting, and enforcing conservation	easements during t	he year	
7	Amount of expenses incurred in monitoring, in \$	specting, and enforcing conservation ease	ements during the ye	ear	
8	Does each conservation easement reported on 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requirements	of section	Yes	☐ No
9	In Part XIV, describe how the organization repinclude, if applicable, the text of the footnote to	orts conservation easements in its revenu o the organization's financial statements t	ie and expense state hat describes the or	ement, and balance ganization's accoun	sheet, and iting for
Par	conservation easements.  t III   Organizations Maintaining Colle	ections of Art. Historical Treasure	es, or Other Sim	ilar Assets	
	Complete if the organization ans	wered 'Yes' to Form 990, Part IV	, line 8.		
1 a	If the organization elected, as permitted under art, historical treasures, or other similar assets in Part XIV, the text of the footnote to its finan-	s held for public exhibition, education, or r	esearch in furtherar	and balance sheet wanted of public service	works of e, provide,
t	o If the organization elected, as permitted under historical treasures, or other similar assets hel following amounts relating to these items:	SFAS 116 (ASC 958), to report in its reve d for public exhibition, education, or resea	enue statement and arch in furtherance c	balance sheet work of public service, pro	s of art, ovide the
	(i) Revenues included in Form 990, Part VIII,	line 1		<b>▶</b> \$	
	(ii) Assets included in Form 990, Part X			<b>►</b> \$	
2	If the organization received or held works of ar amounts required to be reported under SFAS 1	t, historical treasures, or other similar ass 16 (ASC 958) relating to these items:	sets for financial gai	n, provide the follow	ving
a	Revenues included in Form 990, Part VIII, line	1		<b>►</b> \$	
ı	Accets included in Form 990 Part Y			<b>▶</b> \$	

Schedule D (Form 990) 2011 LEADE				23-702	
Part III Organizations Mainta	ining Collections	of Art, Historica	Treasures, or	Other Similar Ass	ets (continued)
3 Using the organization's acquisition items (check all that apply).	on, accession, and other			at are a significant use	of its collection
a Public exhibition		<b>—</b>	hange programs		
<b>b</b> Scholarly research		e Other			
c Preservation for future genera					
4 Provide a description of the organ Part XIV.					n
5 During the year, did the organizat assets to be sold to raise funds ra	ion solicit or receive di ather than to be mainta	onations of art, histor ained as part of the o	rical treasures, or o rganization's collect	ther similar tion? . [	<b>∀es No</b>
Part IV Escrow and Custodia line 9, or reported an	Arrangements. (	Complete if the o	rganization ans		m 990, Part IV,
1 a Is the organization an agent, trus included on Form 990, Part X?				assets not	Yes No
<b>b</b> If 'Yes,' explain the arrangement	in Part XIV and comple	ete the following table	е		
• December hal					Amount
c Beginning balance.				1c	
<ul><li>d Additions during the year</li><li>e Distributions during the year</li></ul>	,		•	1 e	
f Ending balance	•	•	• •	1f	<del></del>
2a Did the organization include an ai	mount on Form 990 P	art X. line 217			Yes No
<b>b</b> If 'Yes,' explain the arrangement		art X, iiric 21.		l	
Part V Endowment Funds. Co		nızation answere	ed 'Yes' to Form	990, Part IV, line	10.
	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1 a Beginning of year balance	642,962.	556,248.	414,050		
<b>b</b> Contributions .				67,595.	
c Net investment earnings, gains, and losses	12,496.	89,538.	144,750	300,755.	
d Grants or scholarships					
<ul> <li>Other expenditures for facilities and programs</li> </ul>		· · · · · · · · · · · · · · · · · · ·	i		
f Administrative expenses	3,271.	2,824.	2,552		
<b>g</b> End of year balance .	652,187.	642,962.	556,248	_ <del></del>	<u> </u>
2 Provide the estimated percentage	-	nd balance (line 1g, c	olumn (a)) held as:		
a Board designated or quasi-endow		——*			
<b>b</b> Permanent endowment ▶	34.00 %				
c Temporarily restricted endowmen		<b>-</b>			
The percentages in lines 2a, 2b, a  3a Are there endowment funds not in	•		e held and administ	ered for the	[ <u>,                                    </u>
organization by					Yes No
(i) unrelated organizations	•		•		3a(i) X 3a(ii) X
(ii) related organizations  b If 'Yes' to 3a(ii), are the related o	raanizationa listad os i	raguirad on Sahadula	. D2		3a(ii) X
4 Describe in Part XIV the intended	~	•			[ <u>3b</u> ]
Part VI Land, Buildings, and				<del> </del>	
Description of property			Cost or other	(c) Accumulated	(d) Book value
	(in)	vestment)	basis (other)	depreciation	(a) Book value
1 a Land					
<b>b</b> Buildings .					
c Leasehold improvements			131,601.	77,321.	54,280.
<b>d</b> Equipment			58,435.	58,435.	0.
e Other					F 4 - 4 - 4 - 4
Total. Add lines 1a through 1e. (Colum	n (d) must equal Form	990, Part X, column	(B), line 10(c))	P Cohod	54,280. ule <b>D</b> (Form 990) 2011
RAA				Schen	we D (FORM 990) 701 i

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Par	t XI   Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		5,183,302.
2	Total expenses (Form 990, Part IX, column (A), line 25)		4,718,705.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		464,597.
4	Net unrealized gains (losses) on investments		
5	Donated services and use of facilities		
6	Investment expenses .		
7	Prior period adjustments		
8	Other (Describe in Part XIV)		
9	Total adjustments (net). Add lines 4 through 8		
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		464,597.
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	turn	
1	Total revenue, gains, and other support per audited financial statements	1	5,278,696.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	State of the state	
	Net unrealized gains on investments . 2a	(")	
	Donated services and use of facilities  2b 95,394.		
	Recoveries of prior year grants . 2c		
	Other (Describe in Part XIV.)		
	Add lines 2a through 2d	20	05 204
2	Subtract line 2e from line 1	2 e	95,394.
3	I I	<del>3</del>   -	5,183,302.
	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
	Investment expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIV )		
_	Add lines 4a and 4b	4c	
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	5,183,302.
	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per		4 014 000
1	Total expenses and losses per audited financial statements	7	4,814,099.
	Amounts included on line 1 but not on Form 990, Part IX, line 25		
	Donated services and use of facilities 2a 95, 394.		
	Prior year adjustments		
	Other losses 2c		
	Other (Describe in Part XIV.)		
€	Add lines 2a through 2d	2e	95,394.
3	Subtract line 2e from line 1	3	4,718,705.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1	
	Investment expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIV )	<u>-</u> -	
	Add lines 4a and 4b	4c	4 710 705
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  1 XIV Supplemental Information	<u> </u>	4,718,705.
		16	01-
Part	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete the additional information.	is part to p	≥b; provide
Pt.	V Line 4 THE EDUCATION'S ENDOWMENT CONSISTS OF THE CAROL PITCH	<u>IERSKY</u>	· <b></b>
~	DEVELOPMENT FUND, A DONOR-RESTRICTED ENDOWMENT FUND,	THE	- <b></b>
	PRINCIPAL OF WHICH IS CLASSIFIED WITHIN PERMANENTLY	·	
~	RESTRICTED NET ASSETS.		
<u>Pt</u> .	X THE EDUCATION FUND IS EXEMPT FROM PAYMENT OF INCOME T	'AXES	
~	UNDER THE PROVISION OF SECTION 501(C)(3) OF THE INTER	NAL	
	REVENUE CODE AND HAS BEEN CLASSIFIED AS OTHER THAN A	PRIVAT	E
	FOUNDATION WITHIN THE MEANING OF SECTION 509(A)(2) OF	THE	<b>D</b> (F 000) 0011

Schedule <b>D</b> (Form 990) 2011			EDUCATION FUND	)	23-7026895	Page 5
Rant XIX Supplementa	al Information (co	ntinuea)				
	INTERNAL REVE	NUE CODE.	THE EDUCATION	FUND HAD NO	UNRELATED	
	BUSINESS INCO	ME DURING '	THE YEAR ENDED	DECEMBER 31	. 2011.	
	THE EDUCATION	_FUND_BELI	EVES THAT IT H	AS_APPROPRIA	TE SUPPORT	
	FOR ANY INCOM	E TAX POSI	TIONS TAKEN. T	HEREFORE, MA	NAGEMENT	
	HAS NOT IDENT	IFIED ANY	UNCERTAIN INCO	ME_TAX_POSIT	IONS. AT	
	A MINIMUM, TH	E 2007 THR	OUGH 2011 TAX	YEARS ARE OP	EN FOR	
	EXAMINATION E	Y_TAXING_A	UTHORITIES.			
				<del>-</del>		
	- <b>-</b>					
		- <b>-</b>		·		
	<b></b>					<b>-</b>
		- <b></b>				
					<b>-</b>	

# SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Depart Interna	ment of the Treasury	or 19, o	or if the organiza Attach to Form	tion ente 990 or F	rea more t orm 990-E2	nan \$15,000 on Form 9 Z.   ► See separate inst	90-EZ, line 6a. tructions.	Inspection
	of the organization						Employer identifica	tion number
LEA	DERSHIP CONFERE						23-702689	5
Par	Fundraising Activit	ties. Compare not rec	lete if the organi juired to comple	zation an te this pa	swered 'Ye art	s' to Form 990, Part IV	, line 17	
1	Indicate whether the org					wing activities Check a	II that apply.	
а	Mail solicitations				e	Solicitation of non-	-	
b	<b>–</b>	olicitations	<b>;</b>		f	Solicitation of gove	_	
C					g	Special fundraising	events	
d 2a	In-person solicitation  Did the organization have employees listed in Forr	e a writter	n or oral agreem t VII) or entity in	ent with a	any individu ion with pro	ial (including officers, d ofessional fundraising se	rectors, trustees or key ervices?	X Yes No
b	If 'Yes,' list the ten higher compensated at least \$5	est paid ind 5,000 by th	dividuals or entit e organization	ies (fund	raisers) pui	rsuant to agreements ur	nder which the fundraise	r is to be
(i)	Name and address of in or entity (fundraiser		(ii) Activity	have custo	fundraiser ody or control ributions <sup>9</sup>	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization
		· <del>-</del>	<del> </del>	Yes	No			
1	THE BONNER GROV	מוס	     FUNDRAISING		/ x	0.	30,000.	-30,000.
2	THE BOWNER GROV		FUNDRAISING		_ ^	0.	307000.	30,000.
3		······				· · · · · · · · · · · · · · · · · · ·		
4						<del></del>		
5								
6								
7	·					100		
8								
9								<u></u>
10							<u> </u>	····
Total				J	, 	0.	30,000.	-30,000.
	List all states in which the	he organiza	ation is registere	d or licer	nsed to solu			
	or licensing.							
				. <b></b> -				
			<b>-</b>					
			<del>_</del>					
				- <del>-</del>				
					<del>-</del>			

Pai	t II	Fundraising Events. Complete if more than \$15,000 of fundraising List events with gross receipts gro	event contributions	nswered 'Yes' to Fo s and gross income	orm 990, Part IV, III e on Form 990-EZ,	ne 18, or reported lines 1 and 6b.	
R		<u> </u>	(a) Event #1  FUNDRAISING DINNER  (event type)	(b) Event #2	(c) Other events	(d) Total events (add column (a) through column (c))	
REVEZUE	1	Gross receipts .	181,350.			181,350.	
Ĕ	2	Less: Charitable contributions .	181,350.			181,350.	
	3	Gross income (line 1 minus line 2)	0.			0.	
	4	Cash prizes					
_	5	Noncash prizes					
DIRECT	6	Rent/facility costs					
	7	Food and beverages					
E P	8	Entertainment					
EXPENSES	9	Other direct expenses .					
Š	10	Direct expense summary Add lines 4 thro	ough 9 in column (d) .		. ▶		
Das	11	Net income summary Combine line 3, co		ol to Form 000. Box	<b>▶</b>	0.	
Гаг		Gaming. Complete if the organiza \$15,000 on Form 990-EZ, line 6a.	illon answered Tes		tiv, line 19, or rep	onted more than	
REVERUE			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))	
Ē	1	Gross revenue					
E	2	Cash prizes .					
DIRECT	3	Non-cash prizes .					
Č Š T E S	4	Rent/facility costs					
	5	Other direct expenses					
	6	Volunteer labor .	Yes %	Yes%	Yes %		
	7	Direct expense summary. Add lines 2 thro	ough 5 in column (d) .		•		
	8	Net gaming income summary Combine li	nes 1, column (d) and l	ine 7			
	9 Enter the state(s) in which the organization operates gaming activities:  a is the organization licensed to operate gaming activities in each of these states?  b if 'No,' explain:						
		e any of the organization's gaming licenses	•			Yes No	
BAA			TEEA3702 0	1/24/12	Schedule <b>G</b> (Fo	rm 990 or 990-EZ) 2011	

23-7026895

Page 2

Schedule G (Form 990 or 990-EZ) 2011 LEADERSHIP CONFERENCE EDUCATION FUND

Sched	dule G (Form 990 or 990-EZ) 2011 LEADERSHIP CONFERENCE EDUCATION FUND	23-70268	395	Page 3
	Does the organization operate gaming activities with nonmembers?	. [	Yes	No
12	ls the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity administer charitable gaming?	formed to	Yes	No
12	Indicate the percentage of gaming activity operated in:	1 1		
	The organization's facility	13a		8
	An outside facility	13b		
	Enter the name and address of the person who prepares the organization's gaming/special events books a			
	Name ►			
	Address •		<del>-</del>	
15 a	Does the organization have a contact with a third party from whom the organization receives gaming revel	nue?	Yes	∏No
	If 'Yes,' enter the amount of gaming revenue received by the organization > \$ a		□ .••	٠.٠٠ لب
	of gaming revenue retained by the third party > \$			
	If 'Yes,' enter name and address of the third party:			
	Name ►			1
	Address ►			1
16	Gaming manager information:			
	Name •			
	Gaming manager compensation ► \$			
	Description of services provided			<del>-</del> -
	☐ Director/officer ☐ Employee ☐ Independent contractor			
17	Mandatory distributions			
	Is the organization required under state law to make charitable distributions from the gaming proceeds to state gaming license? $$		Yes	No
	Enter the amount of distributions required under state law to be distributed to other exempt organizations	or spent in the		
Des	organization's own exempt activities during the tax year ▶ \$  Supplemental Information. Complete this part to provide the explanations requ	ired by Part	l line '	2h
gan	columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as at this part to provide any additional information (see instructions).	plicable. Als	so comp	olete

#### SCHEDULE J (Form 990)

**Compensation Information** 

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

Complete if the organization answered 'Yes' to Form 990, Part IV, line 23.

Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

LEADERSHIP CONFERENCE EDUCATION FUND

Employer identification number

23-7026895

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

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

section 53.4958-6(c)?

Schedule J (Form 990) 2011

Page 2

23-7026895

LEADERSHIP CONFERENCE EDUCATION FUND

Pইম্যায় Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Schedule J (Form 990) 2011

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

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

		(B) Breakdown	(R) Breakdown of W.2 and/or 1099-MISC	MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
<b>(A)</b> Name	<u> </u>	(i) Base compensation		(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)·(D)	reported as deferred in prior Form 990
	Θ	1		0	3,787.	214.	47,001.	0.
1 WADE HENDERSON	€	157,000.	0	0		782.	171,610.	0.
	Θ	138,600.		0	12,634.	4,578.	155,812.	0.
2 KAREN McGILL LAWSON		15,400.	00	0	1,	509.	17,313.	0.
		107,100.		01	8,280.	3,891.	-	0.
3 NANCY ZIRKIN	€	32,	0	0	. 2,	1,195.	छ	0.
	Θ	100,394.	0	01	6,526.	6,756.	9	
4 EDWIN FICHTER	(1)	33	0	0	2,17	2,252.	37,892.	0
	]ω		 	 	           	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 1 1	1 1 1 1 1 1 1
2	(ii)							
	]ω		             	           	             	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 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
9	(ii)							
	Θ			\$           	             	             	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
7	<b>€</b>		i I					
	ε			 			!	! ! ! ! ! ! ! ! ! !
80	€		 					
	€			! 	             	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 1 1	
9								
	Ξ	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	
10	Θ							
	Ξ	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 1 1 1 1 1 1 1	1 1 1 1 1 1 1
11	€							
	ε		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 1 1			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
12								
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13	<b>a</b>							
	ε	1 1 1 1 1 1 1	1 1 1 1		1 1 1 1 1			
14								
ļ	ε :		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 1 1 1 1 1 1 1 1
15	<b>(</b>							
31	ຣ [			 	1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
BAA				TEEA4102 (	01/24/12		Sche	Schedule J (Form 990) 2011

∽Γ	HIP CONFERENCE EDUCATION FUND	23-7026895	Page 3
Complete this part to provide the information, Part II. Also complete this part for any addition	explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, and information.	5a, 5b, 6a, 6b, 7, and 8, for	.
Pt_I_Line_4b	LCCREF HAS ESTABLISHED A DEFERRED COMPENSATION PLAN FOR ALL EMPLOYEES UNDER	ER	1
Pt_I Line 4b	_SECTION_457(B)_OF_THE_INTERNAL_REVENUE_CODETHE_DEFERRED_COMPENSATION_AMOUNTED	OUNTED	     
Pt_I_Line_4b	_TO \$71,267 AND HAS BEEN FUNDED BY EMPLOYEES! WITHHOLDINGS IN A FIXED ANNUITY	IIY CONTRACT.	 
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	 
Pt_I Line 4b	ALTHOUGH NOT RELATED BY DEFINITION (THE SAME PERSONS DO NOT CONSTITUTE A		 
Pt_I_Line_4b	MAJORITY OF THE MEMBERS OF THE GOVERNING BODY OF BOTH ORGANIZATIONS), LCCREE		1
Pt_I Line 4b	IS REPORTING THE FOLLOWING INFORMATION ABOUT LEADERSHIP CONFERENCE ON CIVIL	II	1
Pt_I_Line_4b	RIGHTS (LCCR).		
N/A	NAME, ADDRESS AND EIN OF ORGANIZATION: LEADERSHIP CONFERENCE ON CIVIL RIGH	RIGHTS, INC.	 
N/A	1629 K STREET NW. 10TH FLOOR, WASHINGTON, DC 20006		1 1
N/A	_EIN#52-0789800		1
N/A	- PRIMARY ACTIVITY: TO PROMOTE THE ENACTMENT AND ENFORCEMENT OF EFFECTIVE CI	<u></u>	 
N/A	RIGHTS LEGISLATION AND POLICY.		 
N/A	LEGAL DOMICILE: WASHINGTON, DC.		     
N/A	_EXEMPT_CODE_SECTION:_501_(C)_(4)		 
<u>N/A</u>	DIRECT CONTROLLING ENTITY: N/A		 
<u>N/A</u>	TRANSACTIONS:		1 ! !
N/A	LOAN TO LCCR OF \$489,021.		     
See Schedule J - Part III -	See Schedule J - Part III - Supplemental Information (Continuation Sheet)		
BAA		Schedule <b>J</b> (Form 990) 2011	30) 2011

#### SCHEDULE O (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2011

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization  LEADERSHIP CONFEI	RENCE EDUCATION FUND	Employer identification number 23-7026895
Pt_VI, Line_8b	THE COMMITTEES OF THE BOARD OF DIRECTORS DO NOT	HAVE
	AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BOD	DY. THERFORE,
	_ DOCUMENTATION_OF_COMMITTEE_ACTIVITY_IS_HANDLED	THROUGH
	THE MINUTES OF BOARD MEETINGS.	
Pt VI, Line 11a	THE PROCESS FOR FORM 990 REVIEW PRIOR TO FILING	J. IT IS
	REVIEWED BY THE DIRECTOR OF FINANCE AS WELL AS	THE EXECUTIVE
	VICE PRESIDENT/COO OF THE ORGANIZATION AND THE	FINANCE
	COMMITTEE OF THE BOARD THAT REPORTS TO THE FULL	BOARD.
Pt_VI,_Line_15	THE PROCESS FOR COMPENSATION APPROVAL IS BIFURG	CATED
	BETWEEN ANNUAL COST OF LIVING ADJUSTMENTS FOR A	ALL_EMPLOYEES
	AND PERIODIC INCREASES TO ENSURE EQUITY AMONG S	STAFF
	AND THE MARKET FOR THE NOT FOR PROFIT SECTOR.	
	ONE-TIME ADJUSTMENTS ARE BASED ON THIRD PARTY O	CONSULTATION
	RESULTING IN MARKET ANALYSIS OF SALARIES IN THE	NOT FOR
	PROFIT SECTOR IN WASHINGTON, DC. SALARY RANGES	AND SPECIFIC
Pt_VI,_Line_5	_N/A	
	SALARIES FOR THE PRESIDENT ARE SET BY THE EXECU	TIVE
	COMMITTEE OF THE BOARD OF DIRECTORS. THE BOARD	HAS A STANDING
	COMMITTEE FOR PERSONEL ISSUES. ALL OTHER STAFF	SALARIES
	ARE SET BY THE PRESIDENT AND COO UNDER ADVICE O	F_A_SALARY_STUDY
	AND THIRD PARTY CONSULTATION.	
Pt.VI, Line 17	DC, AK, AL, AR, CA, CO, CT, FL, GA, IL, KS, MA, MD, ME, MI, MN	I, MS, NC, NH
	ND, NJ, NM, NY, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV	AND KY.
Pt.VI, Line 19	LCCREF MAKES ITS GOVERNING DOCUMENTS, CONFLICT	OF INTEREST
	POLICY AND FINANCIAL STATEMENTS AVAILABLE UPON	REQUEST.
Pt.XI,Line 5	CHANGES IN NET ASSETS: NET UNREALIZED GAINS ON	INVESTMENTS: \$36,432.

Schedule O (Form 990 or	990·EZ) 2011		Page 2			
Name of the organization  LEADERSHIP CONFE	ERENCE EDUCATION FUND	Employer Identification number 23-7026895				
	THE PROCESS IS CONSISTENT WITH THE PRIOR	YEAR.				
Pt.IV,Line_34	PER THE INSTRUCTIONS, LEADERSHIP CONFEREN	NCE ON CIVIL RIGHTS				
	EDUCATION FUND (LCCREF) IS NOT RELATED TO LEADERSHIP CONFERENCE					
	ON CIVIL RIGHTS (LCCR) BECAUSE THE SAME	PERSONS DO NOT				
	CONSTITUTE A MAJORITY OF THE MEMBERS OF	THE GOVERNING BODY				
	OF BOTH ORGANIZATIONS. THEREFORE, THE ORG	GANIZATIONS DO NOT				
	QUALIFY AS RELATED BROTHER/SISTER NONPRO	FIT ORGANIZATIONS.				
	LCCR, WITH A BOARD OF 31 VOTING MEMBERS	AND LCCREF, WITH				
	A BOARD OF 6 VOTING MEMBERS.					
Pt.VI,LINE 5	A MATERIAL AMOUNT OF FUNDS WERE MISAPPRO	PRIATED BY A FORMER				
	EMPLOYEE OVER SEVERAL YEARS INCLUDING TH	E YEAR ENDED				
	DECEMBER 31, 2011. HOWEVER, THE AMOUNT M	ISAPPROPRIATED IN				
	2011 WAS IMMATERIAL. THE MISAPPROPRIATION	N WAS DISCOVERED				
	HALFWAY THROUGH THE PERIOD UNDER AUDIT.	MANAGEMENT AND THE				
	BOARD ARRANGED FOR A FORENSIC AUDIT THAT	RESULTED IN				
	RECOMMENDATIONS FOR IMPROVED INTERNAL CO	NTROLS, AND THE				
	RECOMMENDATIONS WERE IMPLEMENTED.					
			<b>_</b>			

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission:

(LCCREF), USES ITS RESEARCH AND EDUCATION CAMPAIGNS TO PROMOTE AN UNDERSTANDING OF THE NEED FOR NATIONAL POLICIES THAT SUPPORT CIVIL RIGHTS AND SOCIAL AND ECONOMIC JUSTICE. LCCREF INITIATIVES ARE GROUNDED IN THE BELIEF THAT AN INFORMED PUBLIC IS MORE LIKELY TO SUPPORT EFFECTIVE FEDERAL CIVIL RIGHTS AND SOCIAL JUSTICE POLICIES.

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 4a (continued)

ORGANIZATIONS AND ENGAGED AROUND FINANCIAL ISSUES. OUR BROAD GOAL IS TO MAKE SURE THAT THE PUBLIC'S VOICE IS HEARD IN THE DEBATE AROUND OUR FINANCIAL SYSTEM. AND TO INCREASE THE EXTENT TO WHICH DEMANDS FOR AN ADEQUATE RESPONSE TO THE CONTINUING DEVASTATION CAUSED BY THE DISASTROUS CYCLE OF DEREGULATION CORPORATE CONTROL OF LAW AND POLICY MAKING, AND UNFETTERED RECKLESSNESS AND GREED, SHAPES THE CONVERSATION ABOUT NEXT STEPS.

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 4d (continued)

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

Code:	Description:	OTHER	PROGRAMS	 	 	
Expenses	2,387,179.			 	 	
Grants Of				 		
Revenue	1,662,329.					

dule J - Part III Supplemental Information (continued)	dule J - Part III - Supplemental Information (Continuation Sheet)
. Part III	- Part III
Schedule J ·	Schedule J

Explanation	EQUIPMENT, AND OTHER ASSETS.		REIMBURSEMENT PAID BY LCCR FOR EXPENSES.
	SHARING OF FACILITIES,	SHARING OF EMPLOYEES.	REIMBURSEMENT PAID BY 1
Line Number	N/A	N/A	N/A