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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 Inspection

Department of the Treasury ▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service For the 2011 calendar year, or tax year beginning January 1, 2011, and ending December 31, 20 D Employer identification number C Name of organization Skinner Leadership Institute, Inc. Check if applicable Doing Business As Skinner Leadership Institute, Inc. 52-1830868 Address change Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number Name change 301-261-9800 5875 Solomons Island Road Initial return City or town, state or country, and ZIP + 4 Terminated Tracy's Landing, MD 20779-9701 G Gross receipts \$ Amended return Rev. Barbara Skinner F Name and address of principal officer H(a) Is this a group return for affiliates? Yes Vo No Application pending 5875 Solomons Island Rd Tracy's Landing, MD 20779-9701 H(b) Are all affiliates included? Yes No If "No," attach a list (see instructions)) ◀ (insert no) ☐ 4947(a)(1) or 501(c) (Tax-exempt status Website: ▶ www.skinnerleadership H(c) Group exemption number ▶ ☐ Association ☐ Other ► Form of organization Corporation Trust L Year of formation M State of legal domicile Part I Summary Briefly describe the organization's mission or most significant activities: The Institute coaches, trains and equips leaders in our nation, leaders in the church, leaders among youth, committed to Activities & Governance moral and technical excellence, reconciliation and empowerment of the economically underserved and spiritually neglected to impact and influence the world through moral and technical leadership excellence. Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) . . . 9 Number of independent voting members of the governing body (Part VI, line 1b) 9 2 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 0 Total number of volunteers (estimate if necessary) 6 Total unrelated business revenue from Part VIII, column (C), line 12 0 7a 0 Net unrelated business taxable income from Form 990-T, line 34 Current Year Contributions and grants (Part VIII, line 1h) . 213.647 175,292 8 106,531 Program service revenue (Part VIII, line 2g) 80,607 9 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . 2 11 Other revenue (Part VIII; column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 87 352 12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) 294,344 282,177 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) Benefits paid to or for members (Part IX, column (A), line 4) . . . 14 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 139,128 153,773 15 Professional fundraising fees (Part IX, column (A), line 11e) 16a Total fundraising expenses (Part IX, column (D), line 25) ▶ 135,550 123,062 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 274,678 276,835 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 19 Revenue less expenses. Subtract line 18 from line 12 19,666 5,342 **Beginning of Current Year** End of Year 13,910 5.932 20 Total assets (Part X, line 16) 21 231,894 218,574 Total liabilities (Part X, line 26) . 22 (212,642)Net assets or fund balances. Subtract line 21 from line 20 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Signature of Office 2012 Here Type or print name and title Print/Type preparer's name Preparer's signature Date **Paid** Check I if self-employed

O €₹

Preparer

Use Only

Firm's name

Firm's address ▶

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

For Paperwork Reduction Act Notice, see the separate instructions.

Firm's EIN ▶

Form 990	<u> </u>	Page 2
Part		_
	Check if Schedule O contains a response to any question in this Part III	<u> U</u>
1	Briefly describe the organization's mission:	
	We produce morally and technically excellent leaders. The institute coaches, trains and equips leaders in our nat church, leader among youth, committed to moral and technical excellence, reconciliation and empowerment of the underserved and spiritually neglected to impact and influence the world through moral and technical leadership of	e economically
	Did the appropriate undertake only specificant appropriate during the year which were not listed on the	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	□ Yes ☑ No
2	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any progra services?	☐Yes ☑No
_	If "Yes," describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program service expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to regrants and allocations to others, the total expenses, and revenue, if any, for each program service reported	
4a	(Code:) (Expenses \$ 113,331 including grants of \$) (Revenue \$ Tom Skinner Campus Ministry: Evangelistic outreach, discipleship training, intercessory prayer, and leadership to A Homecoming Praise Service, A leadership Retreat, Plans for a leadership Excellence Program at Howard University and technically excellent leadership. Pewer lumbes with professionals with the leadership and technically excellent leadership.	rsity to equip
	students with the key skills of morally and technically excellent leadership. Power lunches with professionals we excellence in their lives and careers. The lunches demonstrate how faith is expressed in different professions su	
	medicine and education. Noonday prayer gathering where students pray for the power and presence of God to in	
	the campus of Howard University including the President and his administration, faculty, students and their famil	
	(0.1	
4b	(Code.) (Expenses \$ 85,358 including grants of \$) (Revenue \$	85,500)
	Ballou Automotive Technology Center at Ballou High School - This outstanding career and technology program hexcellence and scholarship in a safe, physically upgraded environment at Ballou High School in Southeast Wash	
	closely with the VP of Darcars Automotive Dealers, Toyota has provided 70 automotive students with paid interns	
	employment with assigned mentors, job shadowing throughout the schoolyear, scholarships to two year commu	
	advanced automotive courses, and full time jobs at Darcars' 26 DC area dealerships in a full-range of lucrative ca	
	(O-d) (D)	24.000 \
4c	(Code:) (Expenses \$ 33,455 including grants of \$) (Revenue \$ General Programs-Continue to support programs that produce a pipeline of high performing middle managers an	34,000)
	leaders to meet the needs of underserved communities. These program allow a group of gifted and talented your	
	intangible skills of leadership including strength of character, integrity, resiliency and the value of empowering re	
	Participants also spend time in community service programs with organizations like Habitat for Humanity, Faith a	
	Congressional Black Caucus Foundation, NAACP Policy Institute, and the National Urban League Policy Institute	
A ol	Other program services (Describe in Schedule O.)	
4d	Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 232,144	

	0 (2011)			Page 3
Part	V Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
	complete Schedule A	1	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
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		1
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? <i>If "Yes," complete Schedule C, Part II</i>	4		/
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		1
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		√
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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,"			
10	complete Schedule D, Part IV	9		✓
11	endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10	,	✓_
_	VII, VIII, IX, or X as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	-		
	complete Schedule D, Part VI	11a	1	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		✓
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
	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		1
12 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		1
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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		7
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
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		√
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.			
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	15 16		√
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17		✓
19	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		√
00	If "Yes," complete Schedule G, Part III	19		√
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		i

Part	Checklist of Required Schedules (continued)			ugo .
•	Dalib and the state of the stat		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
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		✓
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		✓
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		√
c b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b		√
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d	-	<u>/</u>
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		√
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		√
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		√
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		· ·
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 b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		√
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		√
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		√
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		√
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		✓
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		~
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
b	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		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
00	Part VI	37		✓
38 	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	√	

Part	V Statements Regarding Other IRS Filings and Tax Compliance			
•	Check if Schedule O contains a response to any question in this Part V			
	Check if Schedule O Contains a response to any question in this Part V	<u>···</u>	Yes	No
4.	54 % & 14 B 0 (5 400 5 4 0 %)		res	NO
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	4		1
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	4		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	ļ		
	reportable gaming (gambling) winnings to prize winners?	1c	✓	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 2			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	✓	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			<u> </u>
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i>	3b	-	١
4a		30		-
40	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			,
_	account)?	4a		✓
þ	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.	l		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	 		
	organization solicit any contributions that were not tax deductible?	6a		/
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	L Va		-
_		۱.,		
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		\
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f		'
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	\vdash		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g		<u> </u>
8	· · · · · · · · · · · · · · · · · · ·	7h		
0	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		✓
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		✓
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		✓
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1		
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
-				
	<u></u>			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		L
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	L I		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
		44		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		✓
n	If "Yes" has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	174h		

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Part	, , , , , , , , , , , , , , , , , , , ,			
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S			ions.
Sacti	Check if Schedule O contains a response to any question in this Part VI	<u>: :</u>	•	<u>. LJ</u>
<u>oecu</u>	on A. Governing body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	Γ		
	If there are material differences in voting rights among members of the governing body, or	1		
	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 . 1b]		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			,
3	any other officer, director, trustee, or key employee?	2	-	/
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .	١,	1	,
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	3	 	✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		✓
6	Did the organization have members or stockholders?	6		7
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	٦		<u>' </u>
	one or more members of the governing body?	7a		1
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			1
_	stockholders, or persons other than the governing body?	7b		_
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	ļ		
_	the year by the following:	<u> </u>		
a b	The governing body?	8a	√	-
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	8b	V	
•	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1
Section	on B. Policies (This Section B requests information about policies not required by the Internal Rever	_	ode.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		✓
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
44	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	✓	
b 12a	Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13	120	1	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b		
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120	<u> </u>	
	describe in Schedule O how this was done	12c		1
13	Did the organization have a written whistleblower policy?	13		1
14	Did the organization have a written document retention and destruction policy?	14		1
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a		√
b	Other officers or key employees of the organization	15b	ļ	✓_
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	.54	-	
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed Maryland			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection, indicate how you made these available. Check all that apply	า 501(c)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply			
19	☐ Own website ☐ Another's website ☑ Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict or	f into	oot -	olici
	and financial statements available to the public during the tax year.	i intel	est p	опсу,
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the		
	organization: ► Skinner Leadership Institute, Inc. 5875 Solomons Island Rd Tracy's Landing, MD 20779-9701 301			

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Dago	

Earm	$\alpha \alpha \alpha$	(2011)	

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

-										
Check if Sche	edule O contains a res	sponse to any questio	n 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 noi	any relate	d orga	anız	atio	n c	ompe	nsa	ited any currer	t officer, director	r, or trustee.
(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule	do n box, office of directo	ot ch	Pos eck s pe	tion more	e than oth or/trust Highest compensated employee	one i an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated
	0)		stee			nsated				
(1) Rev. John Jenkins	_	,								
Chairman	0	/	_	<u> </u>			_	0	0	0
(2) Mr. Mark Christensen		,								
Eive Chairman	0	✓	<u> </u>	┝			⊢	0	0	0
(3) Pastor Bruce Clark Secretary	0	1						0	o	0
(4) Ms. Rosemary Trible	-	-					-			<u> </u>
Treasaurer	0	1						· 0	o	o
(5) Dr. Maya Angelou		<u> </u>	 		\vdash		┢	 		
Director	0	 ✓						0	o	0
(6) Mr. Robert Brown										
Director	0	✓						0	0	0
(7) Rev. H. Beecher Hicks										
Director	0	✓						0	0	0
(8) Dr. Barbara Williams-Skinner										
Executive Director	40				✓			65,000	0	0
(9) Bishop Donald Hilliard										
Director	0	✓						0	0	0
(10)										
(11)										
(12)										
(13)										
(14)	_									

Pain	VII Section A. Officers, Directors, Trust	tees, Key E	mplo <u>y</u>	/ees			lighe	st C	ompensated E	mployees (d	ontinue:	ed)		_
						C) ition					İ			
	(A)	(B)			neck	more	than e		(D)	(E)			(F)	
	Name and title	Average hours per					ıs both or/trus		Reportable compensation	Reportabl compensation			mated ount of	
		week	_	_	_	_		<u> </u>	from	related		0	ther	
		(describe hours for	Individual trustee or director	stit	Officer	Key employee	항	Former	the organization	organizatio (W-2/1099-M			ensation m the	
		related	dual	<u>₹</u>	4	풀) year	욕	(W-2/1099-MISC)	(** 2. 1000 ***	,,,,	orga	nization	
		organizations in Schedule	7 7	<u>a</u>	1	ove	ging						related iizations	
		O)	stee	Institutional trustee	İ	"	Highest compensated employee					9		
				ď			藍							
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(16)														
(17)														
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(23)											-			_
35.07														
(24)						H								_
<u> </u>														
(25)											-			_
3											l			
1b	Sub-total			•										_
С	Total from continuation sheets to Part	VII, Section	n A					▶		-				
d	Total (add lines 1b and 1c)							▶						
2	Total number of individuals (including but	not limited	to th	ose	list	ed a	above	e) w	ho received m	ore than \$10	، 000,000	of		
	reportable compensation from the organi	zation 🕨												
_													Yes No)
3	Did the organization list any former of							mp	loyee, or high	est comper	nsated			_
	employee on line 1a? If "Yes," complete \$										• •	3	✓	_
4	For any individual listed on line 1a, is the													
	organization and related organizations individual	greater tha	an \$1	50,	UUU	? 11	"Yes	s, "	complete Sch	edule J foi	· such			
_										 *!		4	✓	
5	Did any person listed on line 1a receive of for services rendered to the organization?										ividuai			_
Soction	on B. Independent Contractors	700, 0	Ompre			-		<i>-</i> - 3	den person	· · ·	· · ·	5	_ ₹	_
1	Complete this table for your five highest of	component	ad ind	lone	and.	ant.	contr	oot c	are that receive	d more the	\$100 ·	000 of		_
•	compensation from the organization. Rep													
	year	orr compo	ioutio		, .,		210110	u. ,	car chang wit		ne orga	unzauc	ni 3 tax	
	(A)								(B)			(C)		_
	Name and business add	ress							Description of s	ervices	С	ompens	ation	
None														_
														_
														_
														_
														_
2	Total number of independent contracto							th	ose listed abo	ve) who				_
	received more than \$100,000 of compens	ation from	the or	aan	izat	เดก	▶							

Par	t 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
nts	1a	Federated campaigns 1a	_				
Sra Tour	b	Membership dues 1b					
Am Am	С	Fundraising events 1c					
F	d	Related organizations 1d					
IS,	е	Government grants (contributions) 1e					
ar S	f	All other contributions, gifts, grants,					
를 돌		and similar amounts not included above 1f	175,292				
Contributions, Giffs, Grants and Other Similar Amounts	g	Noncash contributions included in lines 1a-1f \$					
	h	Total. Add lines 1a-1f	▶	175,292			
Program Service Revenue			Isiness Code				j
<u>8</u>	2a	Seminars & Registrations		106,531	106,531	0	0
8	b			-		_	
Ĭ,	c						
S.	d		_			-	
gra	e f	All other program service revenue .					
ξ	g		▶	106,531			
	3	Investment income (including dividends					
	}	and other similar amounts)		2	2		
	4	Income from investment of tax-exempt bond;	oroceeds ►	-			
	5	Royalties	[
		(i) Real	ii) Personal		-		
	6a	Gross rents					
	b	Less rental expenses					
	С	Rental income or (loss)					
	d	Net rental income or (loss)					
	7a	Gross amount from sales of (i) Securities	(II) Other				
	ا .	assets other than inventory			İ		
	Ь	Less cost or other basis					
	_	and sales expenses					
	C d	Gain or (loss)	•				
	"	Net gain or (loss)			-		
en l	8a	Gross income from fundraising					
venue		events (not including \$					
		of contributions reported on line 1c).					
er		See Part IV, line 18 a					
Other Re	b	Less: direct expenses b					
	С	Net income or (loss) from fundraising ever	nts >				/ / /
	9a	Gross income from gaming activities.					
		See Part IV, line 19 a					
	b	Less: direct expenses b					
	C	Net income or (loss) from gaming activitie	s 🕨	·			
	10a	Gross sales of inventory, less returns and allowances a	-				
	b	Less: cost of goods sold b Net income or (loss) from sales of invento	rv .				
	С		siness Code				
	11a	Other Misc.		352	352		
	b	Other Image		352	352		
	C						
	ď	All other revenue					
	e		▶	·			
	12	Total revenue. See instructions	▶ ↑	282,177			<u></u>

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response to any question in this Part IX							
	ot include amounts reported on lines 6b, 7b, o, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses		
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21						
2	Grants and other assistance to individuals in the United States. See Part IV, line 22			,, <u>.</u> , ., ., ., ., .			
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	65,000	55,250	9,750			
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 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	47,000	39,950	7,050			
9	Other employee benefits	3,412	2900	512			
10	Payroll taxes	10,971	9,325	1,646			
11 a	Fees for services (non-employees) Management	·					
b	Legal						
С	Accounting	10,200	5,100	5,100			
d	Lobbying						
e	Professional fundraising services See Part IV, line 17						
f	Investment management fees						
	Other	29,138	20 120	_			
g 40			29,138				
12	Advertising and promotion	5,186	4,408	778			
13	Office expenses	6,515	5,538	977			
14	Information technology						
15	Royalties						
16	Occupancy	17,575	14,939	2,636			
17	Travel	13,029	11,726	1,303			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials						
19	Conferences, conventions, and meetings	22,062	22,062				
20	Interest						
21	Payments to affiliates						
22	Depreciation, depletion, and amortization .	7,575		7,575			
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)				<u>,,, , , , , , , , , , , , , , , , , , </u>		
а	Bank Charges	3,806		3,806			
b	Contributions	22,392	22,392				
С	Telephone	6,531	5,551	980			
d	Other Expenses, Insurance, etc.	6,443	3,865	2578			
е	All other expenses						
25	Total functional expenses. Add lines 1 through 24e	276,835	232,144	44,691			
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)						

2 Savings and temporary cash investments 3 3	l P	art x	Balance Sneet			
2 Savings and temporary cash investments 3 3	•	,				
2 Savings and temporary cash investments 3 3		1	Cash – non-interest-bearing	2.218	1	1,815
3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Receivables from other disqualified persons (as defined under section 4596(f(I)), persons described in section 4595(f(I)), persons described in section 501(c(I)) voluntary employers the enforcing organizations (see instructions) 6 Receivables from other disqualified persons (see instructions) 7 Notes and loans receivable, net 8 Inventiones for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment. cost or other basis Complete Part VI of Schedule D 10a 88,848 10b 43,732 11,682 10c 4.111 11 Investments—publicly traded securities 12 Investments—other securities. See Part IV, line 11 12 Investments—other securities. See Part IV, line 11 13 Intangible assets 11 Intangible assets 11 Intangible assets 11 Intangible assets 11 Intangible assets 11 Intangible assets 12 Interpretation of the discribing the securities of the securities of the securities of the securities of the securities of the securities of the securities of the securities of the securities of the securities of the securities of the securities of the securities of the securities of the securities of the securities of the securities of the securities of the securities of the securities of the securities of the securities of the securities of the securities of the securities of the securities of the securities of the securities of the securities of the securities of the securities of the securities of the securities of the securities of the securities of the securities of the securities of the securities of the securities of the		2	L L			
A Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule D Schedule L Schedule D Sched		ı				
Seceivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule L Schedule					⊢	
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15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 13,910 16 5,932 17 Accounts payable and accrued expenses 4,271 17 8,361 18 Grants payable 18 18 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 14,513 24 8,936 25 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 25 Organizations that follow SFAS 117, check here ▶ and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34. 29 Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Pad-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 217,984 33 -212,644 33 -212,644 33 -212,644 33 -212,644 33 -212,644 33 -212,644 33 -212,644 33 -212,644 33 -212,644 33 -212,644 33 -212,644 33 -212,644 33 -212,644 33 -212,644 34 -212,644 34 -212,644 34 -212,644 34 -212,644 34 -212,644 34 -212,644 34 -212,644 34 -212,644 34 -212,644 34 -212,644 34 -212,644 34 -212,644 34 -212,644 34 -212,644 34 -212,644 34 -212,644 34 -212,644 34 -			· -	-		
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19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L. 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 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. 25 Total liabilities. Add lines 17 through 25 26 Total liabilities. Add lines 17 through 25 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets 29 Paid-in or capital surplus, or land, building, or equipment fund 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment funds 32 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 32 -217,984 33 -212,642			· · · · · · · · · · · · · · · · · · ·			
20 Tax-exempt bond liabilities				-		
21 Escrow or custodial account liability. Complete Part IV of Schedule D. 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L. 23 Secured mortgages and notes payable to unrelated third parties. 24 Unsecured notes and loans payable to unrelated third parties. 25 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. 26 Total liabilities. Add lines 17 through 25 25. 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 30 -217,984 33 -212,642	ļ	20	I			· · · · · · · · · · · · · · · · · · ·
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25 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	_		· · · · · · · · · · · · · · · · · · ·	44.540		
parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 26 Total liabilities. Add lines 17 through 25 Corganizations that follow SFAS 117, check here ▶ □ and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. 29 Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 34 212,642			, ,	14,513	24	8,936
of Schedule D		25		70.007		***
26 Total liabilities. Add lines 17 through 25			(0.4.1.1.5)	13,531		/3,63/
Organizations that follow SFAS 117, check here ▶ □ and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets	l	200	Tabel Bakiliata - Add base 47 theres had	224 004		240.574
lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets		20		231,094	20	218,574
27 Unrestricted net assets	89					
28 Temporarily restricted net assets	3alanc	27	Unrestricted net assets		27	
Permanently restricted net assets		28			28	
Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds	<u> </u>	29			29	
Complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds	֖֡֝֟֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓		Organizations that do not follow SFAS 117, check here ▶ □ and			
30 Capital stock or trust principal, or current funds	2		complete lines 30 through 34.			
31 Paid-in or capital surplus, or land, building, or equipment fund	ğ	30	Capital stock or trust principal, or current funds		30	
32 Retained earnings, endowment, accumulated income, or other funds 32	386	31			-	
33 Total net assets or fund balances -217,984 33 -212,642 34 Total liabilities and net assets/fund balances 13,910 34 5,932 34 35 35 36 37 38 38 38 38 38 38 38	As	32			32	
34 Total liabilities and net assets/fund balances	det	33		-217,984	33	-212,642
	z		Total liabilities and net assets/fund balances	13,910		5,932

Form 9	990 (2011)			Pε	age 1 2	
Par	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI	<u></u>	<u></u>	<u></u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		28	2,177	
2						
3						
4						
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		-21	2,642	
Par	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII					
				Yes	No	
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	plain in				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	1		
b	Were the organization's financial statements audited by an independent accountant?		2b		1	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or of the audit, review, or compilation of its financial statements and selection of an independent account		2c	1		
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.					
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the yellissued on a separate basis, consolidated basis, or both.	ar were				

If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

3a

3b

Form **990** (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.

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

OMB No 1545-0047 2011 Open to Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number 52-1830868 Skinner Leadership Institute, Inc. Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a Type I **b** Type II c Type III-Functionally integrated d Type III-Other e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disgualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and Yes No 11g(ı) (ii) A family member of a person described in (i) above? . . . 11g(II) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(m) Provide the following information about the supported organization(s) (i) Name of supported (iii) Type of organization (vii) Amount of (iv) is the organization (ii) EIN (v) Did you notify (vi) Is the in col (i) listed in your organization in col organization (described on lines 1-9 the organization in support col (i) of your governing document? (i) organized in the above or IRC section support? (see instructions)) Yes Yes No (A) (B) (C) (D) (E)

Total

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.)

<u>Secti</u>	on A. Public Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	279,195	163,316	266,706	213,087	175,292	1,097,596
2	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 .	279,195	163,316	266,706	213,087	175,292	1,097,596
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)						
6	Public support. Subtract line 5 from line 4.						1,097,596
	on B. Total Support		<u>-</u>				
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	279,195	163,316	266,706	213,087	175,292	1,097,596
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources			4	3	2	9
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.)	426		31	85	352	894
11	Total support. Add lines 7 through 10						1,098,499
12	Gross receipts from related activities, etc.					12	1,098,499
13	First five years. If the Form 990 is for th	_			, or fifth tax ye	ear as a sectio	
	organization, check this box and stop her			<u> </u>	<u> </u>	<u> </u>	▶ □
	on C. Computation of Public Suppor						
14	Public support percentage for 2011 (line 6		-			14	99.9 %
15	Public support percentage from 2010 Sch 33 ¹ / ₃ % support test—2011. If the organization				 Nuna 14 ia 221	15	99.56 %
108	box and stop here . The organization qual			·			
ь	331/3% support test—2010. If the organ	•		-			. ► ✓
	check this box and stop here . The organi						. ► □
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization med	11. If the orga	nization did no	ot check a box	on line 13, 16		lıne 14 is
	Part IV how the organization meets the "forganization						
b	10%-facts-and-circumstances test-20						
	15 is 10% or more, and if the organizate Explain in Part IV how the organization mean protect organization.						publicly
18	supported organization	not check a l	 hox on line 12	 16a 16b 17a		k this haveard	. •
	instructions					· · · · ·	. ▶ 🔲

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.)

	in the organization lans to quality	under the te	isted bei	ow, piease ci	Jinpiele Fait	11. <i>)</i>		
	on A. Public Support							
Calen	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 20)11	(f) Total
1	Gifts, grants, contributions, and membership fees			Ì				
_	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		İ					
	organization's tax-exempt purpose							
3	Gross receipts from activities that are not an		<u> </u>					
	unrelated trade or business under section 513							
4	Tax revenues levied for the		<u> </u>	 			-	
•	organization's benefit and either paid							
	to or expended on its behalf .		İ					
5	The value of services or facilities		1					
3	furnished by a governmental unit to the		1					
_	_		<u> </u>				\longrightarrow	
6	Total. Add lines 1 through 5		ļ					
7a	Amounts included on lines 1, 2, and 3							
	received from disqualified persons .		<u> </u>					
b	Amounts included on lines 2 and 3							
	received from other than disqualified							
	persons that exceed the greater of \$5,000		i					
	or 1% of the amount on line 13 for the year							
С	Add lines 7a and 7b							
8	Public support (Subtract line 7c from							
	line 6)							
Secti	on B. Total Support							
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 20)11	(f) Total
9	Amounts from line 6							
10a	Gross income from interest, dividends,							
	payments received on securities loans, rents,							
	royalties and income from similar sources .							
b	Unrelated business taxable income (less							
	section 511 taxes) from businesses							
	acquired after June 30, 1975						1	
С	Add lines 10a and 10b							
11	Net income from unrelated business		-				_	
• •	activities not included in line 10b, whether						l	
	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.)		1]			
13	Total support. (Add lines 9, 10c, 11,		 	-	-			
	and 12.)							
14	First five years. If the Form 990 is for the	e organizatio	n'e firet econo	d third fourth	or fifth toy	or oc c	soction.	501(a\/2\
17	organization, check this box and stop he							
Secti	on C. Computation of Public Suppor			• • • •	• • • •	<u> </u>	• •	· ·
				2 (6)		Tacl		
15 16	Public support percentage for 2011 (line 8					15		<u>%</u>
16 Secti	Public support percentage from 2010 Schoon D. Computation of Investment Inc			· · · · ·	<u>· · · · · </u>	16		%
17	Investment income percentage for 2011 (I			v line 10!:	mn (f)	1471		01
						17		%
18	Investment income percentage from 2010					18	001-0/	<u>%</u>
19a	331/3% support tests – 2011. If the organi	zation did not	The erganization	c on line 14, al	na line 15 is m	ore than	331/3%,	
	17 is not more than 331/3%, check this box							
b	331/3% support tests—2010. If the organiz							
	line 18 is not more than 331/3%, check this t						-	
20	Private foundation If the organization du	a not check a	nov on line 14	100 or 10h d	nack this hav	224 222	Inctructi	ana 🕨 🗆

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

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Employer identification number

52-1830868

2011

Department of the Treasury Internal Revenue Service Name of the organization

Skinner Leadership Institute

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

Part 6-11b Review of the 990 - With our input, a draft of the 990 is prepared by our accountant and provided for our review. It is copied
and reviewed by the executive committee. Any changes are noted and forwarded to the accountant for modification and finalization
Part 6 - 19 - All financial statements governing documents and policies are provided to the public upon request.
A believe of the December of Discourse and the december of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Company of the Com
A listing of the Board of Directors is attached
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Dr. Maya Angelou 3240 Valley Road Winston-Salem, NC 27106 336-724-0509 Office 336-722-0716 Fax mrsclay1@bellsouth com

Mr. Robert Brown

B & C Associates 808 Greensboro Road High Point, NC 27260 336-884-0744 Office 336-884-5311 Fax rjbrown@bandcassociates.com

Mr. Mark Christensen, Vice Chair Christensen & Ehret 222 West Adams Street, 21 Floor Chicago, IL 60606 312/634-1014 Office 312/634-1018 Fax mchristensen@christensenlaw.com

Pastor Bruce Clark, Secretary

Advance Church 2209 Nees Lane Silver Spring, MD 20905 301/879-0980 Advance.pastorb@gmail.com www advancechurch org

Rev. H. Beecher Hicks, Jr. Metropolitan Baptist Church 96 Harry S Truman Drive Suite 300 Largo, Maryland 20774 202-238-5011 Office 301-324-0378 Fax drhbhicks@aol.com

Bishop Donald Hilliard, Jr.

The Cathedral International Church 205 Smith Street Perth Amboy, NJ 08861 732/826-5293 Ext. 1134 Office 732/826-5449 Fax bishop@thecathedral.org

Rev. John K. Jenkins, Sr., Chair First Baptist Church of Glenarden 3600 Brightseat Road Landover, MD 20785 301/773-3600 Office 301/341-5660 Fax pastoroffice@fbcglenarden org

Dr. Barbara Williams-Skinner

Skinner Leadership Institute 5875 Solomon's Island Road Tracy's Landing, MD 20779 301-261-9800 Office 301-318-9841 Cell 443-458-4938Fax dr williams skinner@gmail.com

Mrs. Rosemary Trible, Treasurer Christopher Newport University 812 Riverside Drive Newport News, VA 23606 757/594-7371 757/827-6704 Office 757-838-6486 Fax rtrible@cnu edu