Department of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

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

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

Open to Public

OMB No. 1545-0047

A	For th	ne 2011 calendar year, or tax year beginning and ending	
В	Check i	C Name of organization	D Employer identification number
•	applical	I NATIONAL ASSOCIATION FOR THE ADVANCEMENT	- amproyor rashanadan hamber
	Addr	OF COLORED PEOPLE (NAACP)	
	Nam chan	e Doing Business As	13-1084135
	Initia		
	Term	1905 MOTING HODE DETTE	410-580-5777
Ī		nded Cia	
$\Box$	Appl		
_	pend	F Name and address of principal officer: BRENDA WATKINS NOBL	H(a) Is this a group return
		4805 MOUNT HOPE DRIVE, BALTIMORE, MD 2121	for affiliates? Yes X No
1 7	Γαν-ρι		
		tempt status: [X] 501(c)(3)	527 If "No," attach a list. (see instructions)
			H(c) Group exemption number
	art I	Summary	ear of formation: 1909 M State of legal domicile: MD
نت.	1		
9	'	Briefly describe the organization's mission or most significant activities: TO ENSUR	E THE POLITICAL,
Ē		EDUCATIONAL, SOCIAL, AND ECONOMIC EQUALITY O	F RIGHTS OF ALL PERSONS
Vē.	2	Check this box if the organization discontinued its operations or disposed of m	1 1
Ĝ	3	Number of voting members of the governing body (Part VI, line 1a)	3 64
Activities & Governance	4	Number of independent voting members of the governing body (Part VI, line 1b)	4 64
ţį.	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5 157
ξ	6	Total number of volunteers (estimate if necessary)	6 5000
Ac	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	7a 0.
	b	Net unrelated business taxable income from Form 990-T, line 34	7b 0.
			Prior Year Current Year
9	8	Contributions and grants (Part VIII, line 1h)	18,473,930. 18,611,533.
ē	9	Program service revenue (Part VIII, line 2g)	8,682,431. 11,551,741.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	164,661. 154,243.
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,536,323. 1,429,425.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	28,857,345. 31,746,942.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0. 0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0. 0.
es es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	10,409,956. 11,610,417.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	467,732. 626,088.
ďx	b	Total fundraising expenses (Part IX, column (D), line 25)  3,464,548.	
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	17,553,726. 19,047,670.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	28,431,414. 31,284,175.
	19	Revenue less expenses. Subtract line 18 from line 12	425,931. 462,767.
ts or			Beginning of Current Year End of Year
alar	20	Total assets (Part X, line 16)	17,346,941. 18,653,803.
Net Asset Fund Balan	21	Total liabilities (Part X, line 26)	3,879,389. 6,691,895.
왕	22	Net assets or fund balances. Subtract line 21 from line 20	13,467,552. 11,961,908.
Pa	ırt II	Signature Block	
Unde	er pena	alties of perjury, I declare that I have examined this return, including accompanying schedules and sta	tements, and to the best of my knowledge and belief it is
true,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which prep	arer has any knowledge
			and the drift interesting to
Sign	1	Signature of officer	Date / /
Here		BRENDA WATKINS NOEL, CFO	May 0 11/5/12
		Type or print name and title	11/5/12
	- 0	Print/Type preparer's name Preparer's signature	Date Check PTIN
Paid		NORMAM GRAVES	
Prep		Firm's name BERT SMITH & CO.	
Use		Firm's address 1090 VERMONT AVE., NW	Firm's EIN 52-1094722
		WASHINGTON, DC 20005	Dhamas (200) 200 mgs
May	the II	RS discuss this return with the preparer shown above? (see instructions)	Phone no. (202) 393-5600
	1 01-2		X Yes No
13200	01-2	3-12 Pin For Faper work neutrion Act Notice, see the separate instructions.	Form <b>990</b> (2011)

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SEE SCHEDULE O FOR CONTINUATION(S)

			Yes	N <sub>-</sub>
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		res	No
	If "Yes," complete Schedule A	1	x	
2	is the organization required to complete Schedule B, Schedule of Contributors	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			v
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	3		X
	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	-	Α	
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	3		
	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,			Α.
	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			
9	Schedule D, Part III  Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide	8_		X
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV			.,
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	9_		X
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V			
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	10		X
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	110	41	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	х	
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	- 10		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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	- 10		
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
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	
12a	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	(2)
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	120		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
1 <b>4</b> 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		X
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		X
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		X
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	17	X	
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		X
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		X
20a	bid the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the		Yes	No
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
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		X
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			]
04-	Schedule J	23	X	
248	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	1		]
	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		x
b		24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	04-		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c	-	
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	240		
	disqualified person during the year? If "Yes," complete Schedule L, Part I	05-		17
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	25a		X
	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	OFL		- v
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	25b		X
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20		A
	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		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L., Part IV	<u> </u>		
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	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		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M			
31	Did the organization liquidate, terminate, or dissolve and cease operations?	30		X
•	If "Yes," complete Schedule N, Part I	24		•
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		X
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		Α_
	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?	- 33		- 1
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of	000		
	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?	000		
	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		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	<u> </u>		
	Note, All Form 990 filers are required to complete Schedule O	38	х	
				2011)

	Check if Schedule O contains a response to any question in this Part V					
			***************************************		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	290		165	NO
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	230			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and rules for reportable payments.		ble caming			
Ū	(gambling) winnings to prize winners?	•		1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		********************	"	-42	
	filed for the calendar year ending with or within the year covered by this return	2a	157			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retuin			2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions		**************************************			
За	Did the second still have second to the second seco			3a		Х
			***************************************	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other					
	financial account in a foreign country (such as a bank account, securities account, or other financial			4a		х
b	If "Yes," enter the name of the foreign country: ▶		*****************	74		
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accou	nts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa			5b		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to					
	any contributions that were not tax deductible?			6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contribu			-		
	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 se	rvices p	rovided to the payor?	7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w					
	to file Form 82827			7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	ontra	t?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont	ract?		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file F	orm 88	99 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation f	le a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D	id the s	upporting			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any tin	ne 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:	ı	1			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:	1	ı			
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1	? l	12a		-
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				<u> </u>	
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	1	I			
	organization is licensed to issue qualified health plans	13b				
C	Enter the amount of reserves on hand	13c			-	
				14a		X
D	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu	ie ()		14b	000	100
				Form	990	(2011)

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

Sec	Check if Schedule O contains a response to any question in this Part VI tion A. Governing Body and Management			X
<u> </u>	ton A. Governing Body and Management			
12	Enter the number of voting members of the governing body at the end of the tax year 1a 64		Yes	No
••	If there are material differences in voting rights among members of the governing body, or if the governing		İ	
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
ь	Fortunal transfer of continuous c			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
_	officer, director, trustee, or key employee?			v
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	_2		X
•	of officers, directors, or trustees, or key employees to a management company or other person?	2		v
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	3		X
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	v	X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	0	_X_	
	more members of the governing body?	<b>-</b> -	v	
Ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	7a	X	
-				v
8	persons other than the governing body?  Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7b		X
	The governing body?	_		
b	Each committee with authority to act on behalf of the governing body?	8a	X	
9	Each committee with authority to act on behalf of the governing body?  Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	8b	Х	
9				
Sec	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
500	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
10-	Did the organization have local chapters, hypothes, or affiliates?		Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a	X	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
44-	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X	
_	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		=	
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
4.0	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," 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 take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b	=	
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed AK, AL, AZ, CA, CO, CT, DE, FL, GA	HI	,IA	, ID
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finar	ncial	
	statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion:	- 11	
	BRENDA WATKINS NOEL - 410-580-5712			
	4805 MOUNT HOPE DRIVE, BALTIMORE, MD 21215	THE PERSON NEW YORK		
32008			990	00441

Form 990 (2011)	OF COLORED	PEOPLE (NAACP)	13-1084135	Page 7
Part VII Compensation	n of Officers, Direc	tors, Trustees, Key Emi	ployees, Highest Compensated	rayer
	nd Independent Co		, , , , , , , , , , , , , , , , , , ,	

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

#### 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 organizatio  (A)  Name and Title	(B) Average hours per	(do	POsition onot check more than one to unless person is both an ore and a director/trustee)					(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (describe hours for related organizations in Schedule O)	Trustee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) ROSLYN BROCK										
BOARD MEMBER/CHAIRMAN	10.00	X	_		_			0.	0.	0
(2) OPHELIA AVERITT										
BOARD MEMBER	1.00	X	_					0.	0.	0
(3) HON FRED L. BANKS	4 00							_		
BOARD MEMBER	1.00	X	-					0.	0.	0
(4) DR. WILLIAM BARBER III	1 00	l						_		
BOARD MEMBER	1.00	X	-					0.	0.	0
(5) GARY BLEDSOE	1 00									
BOARD MEMBER	1.00	X				_		0.	0.	0
(6) KAREN BOYKIN TOWNS	1 00	1,,							_	
BOARD MEMBER	1.00	X						0.	0.	0
(7) CORA BRECKENRIDGE	1 00									
BOARD MEMBER (8) AMOS BROWN	1.00	X						0.	0.	0
BOARD MEMBER	1.00	v						0		
(9) CLAYOLA BROWN	1.00	^	Н					0.	0.	0
BOARD MEMBER	1.00	v						0.	_	
(10) DEBRA BROWN	1.00	1						0.	0.	0
BOARD MEMBER	1.00	x						0.	0.	0
(11) JESSICA BUTLER GRANT	1					-		0.	0.	0
BOARD MEMBER	1.00	x		ŀ				0.	0.	0
(12) BISHOP CLARENCE CARR		-					$\Box$		0.	0
BOARD MEMBER	1.00	х						0.	0.	0
(13) DONALD CASH									0.	0
BOARD MEMBER	1.00	х		- 1				0.	0.	0
(14) WILLIAM E. COFIELD								•	0.	
BOARD MEMBER	1.00	x						0.	0.	0
(15) CAROLYN COLEMAN									0.	
BOARD MEMBER/ASSISTANT SECRETARY	4.00	X						0.	0.	0
(16) JAMES W. CROWELL III										
BOARD MEMBER	1.00	X						0.	0.	0
(17) HAROLD CRUMPTON							2			
BOARD MEMBER	1.00	x		-				0.	0.	0

Form 990 (2011)

(A)	(B)				<b>C)</b>			(D)	(E)	(F)	
Name and title	Average hours per week	offi	not c , unle cer er	ss pe	more rson	than	h an	Reportable compensation from	Reportable compensation from related	Estimat amount other	of
	(describe hours for related organizations in Schedule O)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compens from the organization and relations organizations	ation ne ition ited
(18) REV THERESA A. DEAR										7	
BOARD MEMBER	1.00	X						0.	0.		0
(19) EDWARD DUBOSE											
BOARD MEMBER	1.00	X						0.	0.		0
(20) HAZEL N. DUKES											
BOARD MEMBER	1.00	X						0.	0.		0
(21) WILLIS EDWARDS											
SOARD MEMBER	1.00	X						0.	0.		0
(22) KATHERINE T. EGLAND											
BOARD MEMBER	1.00	X						0.	0.		0
(23) SCOTT X. ESDAILE											
BOARD MEMBER	1.00	X						0.	0.		0
(24) MYRLIE EVERS WILLIAMS	1										
BOARD MEMBER	1.00	X						0.	0.		0
(25) JAMES GALLMAN											
BOARD MEMBER	1.00	X						0.	0.		0
(26) DR. DAVID GOATLEY											
SOARD MEMBER	1.00							0.	0.		0
1b Sub-total								0.	0.		0
c Total from continuation sheets to Part V								1,385,346.	0.	87,9	
d Total (add lines 1b and 1c)								1,385,346.	0.	87,9	
2 Total number of individuals (including but r	not limited to th	ose	liste	d ab	ove	) wt	o re	ceived more than \$100	000 of reportable	7 : 1 -	. =
compensation from the organization											
										Yes	No

line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person ... Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
PRINT MAIL COMMUNICATIONS		
7201 LOCKPORT PLACE, LORTON, VA 22079	DIRECT MAIL	1,035,821.
KABATECK BROWN KELLNER LLP, 644 S.		270337021.
FIGUEROA ST., , LOS ANGELES, CA 90071	LEGAL SERVICES	640,000.
ARAMARK, 1001 AVENIDS DE LAS AMERICAS,		
HOUSTON, TX 77010	FOOD SERVICES	590,044.
L & E MERIDIAN, 7400 FULLERTON RD, SUITE		370/044.
110, SPRINGFIELD, VA 22153	DIRECT MAIL	410,511.
21ST CENTURY EXPO GROUP, INC., 2404	CONVENTION STAGING &	
FAIRLAWN STREET, TEMPLE HILLS, MD 20748	SETUP	322,744.
2 Total number of independent contractors (including but not limited to those liste	ed above) who received more than	7-21.128
\$100,000 of compensation from the organization		
SEE PART VII, SECTION A CONTINUATION SH	HEETS	Form 990 (2011)

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Form 990 (2011)

OF COLORED PEOPLE (NAACP)

13-1084135

Part VII Section A. Officers, Directors, T	rustees, Key E	mple	yee	s, a	nd F	ligh	est	Compensated Employ	rees (continued)	
(A) Name and title	(B) Average hours	(c	heck	Pos			ly)	( <b>D)</b> Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(27) BISHOP WILLIAMS H. GRAVES										
BOARD MEMBER	1.00	X						0.	0.	0.
(28) GENERAL HOLIEFIELD										
BOARD MEMBER	1.00	X						0.	0.	0.
(29) ALICE HUFFMAN										
BOARD MEMBER	1.00	X						0.	0.	0.
(30) ARLEYA HORNE										
BOARD MEMBER	1.00	X					<u> </u>	0.	0.	0.
(31) LEONARD JAMES III										
BOARD MEMBER	1.00	X			Щ			0.	0.	0.
(32) DERRICK JOHNSON										
BOARD MEMBER	1.00	X						0.	0.	0.
(33) BISHOP ROY HOLMES										
BOARD MEMBER	1.00	X						0.	0.	0.
(34) DR. ERNEST JOHNSON										
BOARD MEMBER	1.00	Х						0.	0.	0.
(35) SHAYLA A. KING	1 00							_		
BOARD MEMBER	1.00	X					_	0.	0.	0.
(36) PAIGE FLOYD	1 00								_	
BOARD MEMBER	1.00	X			-			0.	0.	0.
(37) WILLIAM LUCY	1 00	<b>.</b> ,						_		
BOARD MEMBER (38) BOB LYDIA	1.00	4			$\dashv$	-		0.	0.	0.
	1.00	v						0		_
BOARD MEMBER (39) DR, ANNIE B, MARTIN	1.00	<b>A</b>		$\dashv$				0.	0.	0.
BOARD MEMBER	1.00	v	ł					0		
(40) KAMERON MIDDLEBROOK	1.00	Λ	-		-			0.	0.	0.
BOARD MEMBER	1.00	v						0.	.	•
(41) LORRAINE MILLER	1.00	Δ				$\dashv$		<u>U•</u>	0.	0.
BOARD MEMBER	1.00	Y		1				0		•
(42) JEROME W. MONDESIRE	1.00	*	$\dashv$			-		0.	0.	0.
BOARD MEMBER	1.00	x						0.	٥	0
(43) JULIAN BOND	1.00	*	$\neg$		-	$\neg$		0.	0.	0.
BOARD MEMBER	1.00	x				l		0.	0	0
(44) QUENTIN JAMES	2000		$\dashv$	_	$\neg$	$\dashv$		0.	0.	0.
BOARD MEMBER	1.00	x			- 1			0.	0.	0
(45) ADORA OBI NWEZE			$\dashv$		-	_		0.		0.
BOARD MEMBER	1.00	x						0.	0.	0
(46) HOWARD JEFFERSON			$\dashv$	+		$\dashv$		0.	0.	0.
BOARD MEMBER	1.00	X						0.	0.	0
		<u> 1</u>						0.	0.	0.
Total to Part VII, Section A, line 1c										

OF COLORED PEOPLE (NAACP) Form 990 (2011) 13-1084135

Part VII   Section A. Officers, Directors, (A)	(B)	Inpr	оуее		<u>na r</u> C)	<u> Tigin</u>	est	Compensated Employ			
Name and title	Average			Pos	ition			(D) Reportable	(E) Reportable	(F) Estimated	
	hours	(c	heck	all	that	app	ly)	compensation from	compensation from related	amount of other	
	week	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(47) REV KEITH A. RATCLIFF BOARD MEMBER	1.00	X						0.	0.	0	
(48) MADIE A. ROBINSON	1 2000	-				<u> </u>		0.	0.	0	
BOARD MEMBER	1.00	x						0.	0.	0	
(49) ALFRED J. RUCKS									•		
BOARD MEMBER	1.00	X						0.	0.	0	
(50) ANITA RUSSELL											
BOARD MEMBER	1.00	X					L	0.	0.	0	
(51) LEON RUSSELL											
BOARD MEMBER/VICE CHAIRMAN	4.00	X						0.	0.	0	
52) RABBI DAVID N. SAPERSTEIN											
SOARD MEMBER	1.00	X						0.	0.	0	
53) REV MORRIS L. SHEARIN											
OARD MEMBER	1.00	X						0.	0.	0	
54) MAXINE A. SMITH											
OARD MEMBER	1.00	X						0.	0.	0	
55) LEONARD F. SPRINGS											
OARD MEMBER	1.00	X						0.	0.	0	
56) GLORIA SWEET LOVE	1 00							_			
OARD MEMBER	1.00	X						0.	0.	0	
57) REV OSCAR TILLMAN	1 00								8		
SOARD MEMBER	1.00	X						0.	0.	0	
58) YVONNE WHITE	1 00								Ţ.	_	
OARD MEMBER	1.00	Α					_	0.	0.	0	
59) ROY LEVY WILLIAMS	1.00	<b>.</b>									
OARD MEMBER 60) RICHARD G. WOMACK	1.00	Δ		$\dashv$		_		0.	0.	0	
OARD MEMBER	1.00	v						0.			
61) GREG MATHIS	1.00	Λ						U .	0.	0	
OARD MEMBER	1.00	x						0.	0.	•	
62) JESSE H. TURNER JR	1 200	-		_				0.	U •	0	
OARD MEMBER/TREASURER	4.00	x						0.	0.	0	
63) DEMAR ROBERTS								0.	<u> </u>	0	
OARD MEMBER	1.00	x						0.	0.	0	
64) ZEPHANII SMITH									0.		
OARD MEMBER	1.00	X						0.	0.	0	
65) LILLIE WILSON									•	0	
OARD MEMBER	1.00	X						0.	0.	0	
66) BENJAMIN TODD JEALOUS				$\Box$					<u> </u>		
RESIDENT AND CEO	60.00			X				284,861.	0.	10,346	

Part VII Section A. Officers, Directors, Tru		I		-,-	11011		,	Compensated Employ	ees (continued)	
(A)	(B)	1		- (0	C)			(D)	(E)	(F)
Name and title	Average	١.	Position heck all that a					Reportable	Reportable	Estimated
	hours	(c	hecl	call	that	app	iy)	compensation	compensation	amount of
	per week							from	from related	other
	Wook	ğ				8 8		the organization	organizations	compensatio
		di ce				e e		(W-2/1099-MISC)	(W-2/1099-MISC)	from the
	}	lee or	stee	ļ		sate		(11 2 1033-111100)		organization and related
		Individual trustee or director	Institutional trustee		oyee	Highest compensated employee				organizations
	İ	M M	gage	15	Key employee	Best	Former			3
		=	E	Officer	Ke	훈	ğ			
(67) ROGER VANN										
CHIEF OPERATING OFFICER/CHIEF OF STA	50.00			X				193,949.	0.	24,02
68) STEVEN HAWKINS		ĺ								
CHIEF PROGRAM OFFICER/EXECUTIVE VP	50.00			X				199,759.	0.	18,581
(69) KIM KEENAN										20/503
SENERAL COUNSEL & CORPORATE SECRETAR	40.00			X				214,203.	0.	4,331
(70) BRENDA WATKINS NOEL										-100.
CHIEF FINANCIAL OFFICER	50.00			X				196,377.	0.	4,467
71) HILARY SHELTON										-/30
TAFF	40.00					X		148,469.	0.	25,415
72) MONEESE DELARA										
TAFF	40.00					X		147,728.	0.	81:
					- 1					
			_	_	_		$\Box$			
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						_	_			

Total to Part VII, Section A, line 1c

1,385,346.

87,972.

Form 990 (2011) 13-1084135 Page 9 Part VIII Statement of Revenue (D) Revenue excluded from (A) (B) (C) Total revenue Related or Unrelated exempt function business tax under sections 512, 513, or 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 365,065 b Membership dues 1b Fundraising events 10 d Related organizations <u>1d</u> e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 18246468 Noncash contributions included in lines 1a-1f; \$ h Total. Add lines 1a-1f 18611533 Program Service **Business Code** 2 a IMAGE AWARDS 900099 3,361,516.3,361,516 2,942,119.2,942,119 **b** CONVENTION c MEMBERSHIP 900099 2,847,951.2,847,951 d LEGAL 900099 1,900,000.1,900,000. e LEADERSHIP 500 900099 500,155. 500,155 f All other program service revenue g Total. Add lines 2a-2f 11551741 Investment income (including dividends, interest, and other similar amounts) 154,243 154,243. Income from investment of tax-exempt bond proceeds Royalties ..... 5 (ii) Personal 6 a Gross rents b Less: rental expenses ...... Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 \_\_\_\_\_ a b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 a b Less: direct expenses c Net income or (loss) from garning activities 10 a Gross sales of inventory, less returns and allowances \_\_\_\_\_a b Less: cost of goods sold ..... c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a FREEDOM FUNDS 900099 234,786.1,234,786. b OTHER REVENUE 900099 148,276. 148,276 c REGIONAL CONFERENCES 900099 25,000. 25,000 d All other revenue 900099 21,363 21,363 e Total. Add lines 11a-11d 429,425 31746942 Total revenue. See instructions. 12981166 154,243.

Form 990 (2011)

# 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).

Do	Check if Schedule O contains a response por include amounts reported on lines 6h						(C) T	/D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total ex	penses	Pro	(B) ogram s expens	ervice es	(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							
3	Grants and other assistance to governments,							S-MANNETS - CONTRACTOR
	organizations, and individuals outside the							
	United States. See Part IV, lines 15 and 16							
4	Benefits paid to or for members							
5	Compensation of current officers, directors,							ACERT - ESERT
	trustees, and key employees	1,150	0,895.	<u> </u>	361	,183.	652,789.	136,923
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	10,45	9,522.	5	,915	764.	3,569,368.	974,390
8	Pension plan accruals and contributions (Include							100
	section 401(k) and section 403(b) employer contributions)							
9	Other employee benefits							
10	Payroll taxes							
11	Fees for services (non-employees):							
а	Management							
b	Legal							
C	Accounting							
d	Lobbying							
е	Professional fundraising services. See Part IV, line 17	626	5,088.					626,088
f	Investment management fees							020,000
g	Other	3,653	3,684.	2	,946	341.	554,114.	153,229
12	Advertising and promotion							100/220
13	Office expenses	6,313	3,217.	3	,894	,122.	1,704,350.	714,745
14	Information technology							744/143
15	Royalties							
16	Occupancy	2,170	0,097.		836	,264.	1,093,560.	240,273
17	Travel		2,621.			,592.	363,799.	36,230
18	Payments of travel or entertainment expenses			10			3031133.	30,230
	for any federal, state, or local public officials							
19	Conferences, conventions, and meetings							
20	Interest							
21	Payments to affiliates							
22	Depreciation, depletion, and amortization			<del>                                     </del>				
23	Insurance							
24	Other expenses, Itemize expenses not covered			1 554388	2,75			
	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 0.)							
а	SPECIAL EVENTS	5 842	2,576.	5	267	589.	F.CO. 050	6.000
h	INDIRECT COST ALLOCATIO		,525.			799.	568,059. -4,750,066.	6,928
c	THE THE TOTAL THE CONTROL OF THE CON	417	:, 323 .	ر ا	, 333	, , , , , ,	-4,/50,066.	575,742
d								
	All other expenses							
		21 204	175	2.4	0.60	CFA		
25	Total functional expenses. Add lines 1 through 24e	31,284	1,1/5.	24	063	654.	3,755,973.	3,464,548
26	Joint costs. Complete this line only if the organization			E.				
	reported in column (B) joint costs from a combined			31				
	educational campaign and fundraising solicitation.	right of transportations till, the times, educate					the standard continued to the contract program and the contract and program and the contract and the contrac	The definition of the last of
	Check here if following SOP 98-2 (ASC 958-720)							Water and the second

Form 990 (2011)

PartA	Balance Sheet					
				(A) Beginning of year		( <b>B</b> ) End of year
1	Cash · non-interest-bearing			2,138,035.	1	3,309,944
2	Savings and temporary cash investments				2	
3	Pledges and grants receivable, net				3	
4	Accounts receivable, net	• • • • • • • • • • • • •		4,100,536.	4	4,093,902
5	Receivables from current and former officers, dir					
	employees, and highest compensated employee	s. Com	plete Part II			
	of Schedule L				5	
6	Receivables from other disqualified persons (as					
	4958(f)(1)), persons described in section 4958(c)	nd contributing				
	employers and sponsoring organizations of sect					
s	employees' beneficiary organizations (see instru			6		
Assets 4	Notes and loans receivable, net			7		
8	Inventories for sale or use				8	
9	Prepaid expenses and deferred charges		•••••		9	
10a	Land, buildings, and equipment: cost or other					
	basis. Complete Part VI of Schedule D					
b	Less: accumulated depreciation	10b	6,809,476.	1,013,108.	10c	1,437,541
11	Investments - publicly traded securities				11	
12	Investments - other securities. See Part IV, line 1		4,136,534.	12	4,420,920	
13	Investments - program-related. See Part IV, line 1	1			13	
14	Intangible assets		14			
15	Other assets. See Part IV, line 11	5,958,728.	15	5,391,496		
16	Total assets. Add lines 1 through 15 (must equa	17,346,941.	16	18,653,803		
17	Accounts payable and accrued expenses	2,321,722.	17	1,899,047		
18	Grants payable		18	7.007.00		
19	Deferred revenue		19			
20	Tax-exempt bond liabilities		20			
တ္တ 21	Escrow or custodial account liability. Complete P	Schedule D		21		
22	Payables to current and former officers, directors					
21 22 22	highest compensated employees, and disqualifie	d perso	ns. Complete Part II			
-	of Schedule L				22	
23	Secured mortgages and notes payable to unrelate	ed third	parties		23	
24	Unsecured notes and loans payable to unrelated	third pa	arties		24	
	Other liabilities (including federal income tax, pay					
	parties, and other liabilities not included on lines					
ĺ	Schedule D			1,557,667.	25	4,792,848
26	Total liabilities, Add lines 17 through 25			3,879,389.	26	6,691,895
	Organizations that follow SFAS 117, check her	e 🕨	X and complete			
	lines 27 through 29, and lines 33 and 34.					
27	Unrestricted net assets	8,109,899.	27	5,295,619		
28	Temporarily restricted net assets	5,357,653.	28	6,666,289		
29	Permanently restricted net assets		29			
-	Organizations that do not follow SFAS 117, cho	e and				
5	complete lines 30 through 34.					
30	Capital stock or trust principal, or current funds		30			
31	Paid-in or capital surplus, or land, building, or equ		31			
32	Retained earnings, endowment, accumulated inco	ome, or	other funds		32	
33	Total net assets or fund balances		40	13,467,552.	33	11,961,908
34	Total liabilities and net assets/fund balances			17,346,941.	34	18,653,803
						Form <b>990</b> (201

Part XI   Reconciliation of Net Assets  Check if Schedule O contains a response to any question in this Part XI   X  1 Total revenue (must equal Part VIII, column (A), line 12)   1   31,746,942. 2 Total expenses (must equal Part IX, column (A), line 25)   2   31,284,175. 3 Revenue less expenses. Subtract line 2 from line 1   3   462,767. 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))   4   13,467,552. 5 Other changes in net assets or fund balances (explain in Schedule O)   5   -1,968,411. 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   11,961,908.  Part XII   Financial Statements and Reporting  Check if Schedule O contains a response to any question in this Part XII   X  1 Accounting method used to prepare the Form 990:   Cash   X Accrual   Other   Yes   No  1 Accounting method used to prepare the Form 990:   Cash   X Accrual   Other   Yes   No  2a Were the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  2a Were the organization's financial statements audited by an independent accountant?   2a   X    b Were the organization's financial statements and selection of an independent accountant?   2b   X    c If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:   Separate basis   X Consolidated basis   Both consolidated and separate basis		1990 (2011) OF COLORED PEOPLE (NAACP)	13-10	84135	Pa	no 12	
1 Total revenue (must equal Part VIII, column (A), line 12) 2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses. Subtract line 2 from line 1 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5 Other changes in net assets or fund balances (explain in Schedule O) 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 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) 7 In Accounting method used to prepare the Form 990:  Check if Schedule O contains a response to any question in this Part XII  Accounting method used to prepare the Form 990:  Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  Were the organization's financial statements compiled or reviewed by an independent accountant?  Were the organization's financial statements audited by an independent accountant?  C If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  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 issued on a separate basis, consolidated basis, or both:	PE					He 12	
1 Total revenue (must equal Part VIII, column (A), line 12) 2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses. Subtract line 2 from line 1 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5 Other changes in net assets or fund balances (explain in Schedule O) 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 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) 7 In Accounting method used to prepare the Form 990:  Check if Schedule O contains a response to any question in this Part XII  Accounting method used to prepare the Form 990:  Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  Were the organization's financial statements compiled or reviewed by an independent accountant?  Were the organization's financial statements audited by an independent accountant?  C If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  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 issued on a separate basis, consolidated basis, or both:		Check if Schedule O contains a response to any question in this Part XI				v	
Revenue less expenses. Subtract line 2 from line 1  Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))  Other changes in net assets or fund balances (explain in Schedule O)  Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))  Part XIII Financial Statements and Reporting  Check if Schedule O contains a response to any question in this Part XII  Accounting method used to prepare the Form 990:  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  Were the organization's financial statements audited by an independent accountant?  If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation 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 issued on a separate basis, consolidated basis, or both:			*************			<u> </u>	
Revenue less expenses. Subtract line 2 from line 1  Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))  Other changes in net assets or fund balances (explain in Schedule O)  Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))  Part XIII Financial Statements and Reporting  Check if Schedule O contains a response to any question in this Part XII  Accounting method used to prepare the Form 990:  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  Were the organization's financial statements audited by an independent accountant?  If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation 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 issued on a separate basis, consolidated basis, or both:	1	Total revenue (must equal Part VIII, column (A), line 12)	1	31 74	6 a	12	
A Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))  Other changes in net assets or fund balances (explain in Schedule O)  Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))  Part XII Financial Statements and Reporting  Check if Schedule O contains a response to any question in this Part XII  Accounting method used to prepare the Form 990:  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  Were the organization's financial statements audited by an independent accountant?  b Were the organization's financial statements audited by an independent accountant?  c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  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 issued on a separate basis, consolidated basis, or both:	2	Total expenses (must equal Part IX, column (A), line 25)					
Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))  Other changes in net assets or fund balances (explain in Schedule O)  Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))  Part XII Financial Statements and Reporting  Check if Schedule O contains a response to any question in this Part XII  Accounting method used to prepare the Form 990:  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  Were the organization's financial statements compiled or reviewed by an independent accountant?  Were the organization's financial statements audited by an independent accountant?  If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  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 issued on a separate basis, consolidated basis, or both:	3	Hevenue less expenses. Subtract line 2 from line 1					
Some changes in net assets or fund balances (explain in Schedule O)  Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))  Part XII Financial Statements and Reporting  Check if Schedule O contains a response to any question in this Part XII  Accounting method used to prepare the Form 990:  Cash X Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  2a Were the organization's financial statements compiled or reviewed by an independent accountant?  b Were the organization's financial statements audited by an independent accountant?  c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  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 issued on a separate basis, consolidated basis, or both:	4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (Al)					
Ref assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) 6 11, 961, 908.  Part XII Financial Statements and Reporting  Check if Schedule O contains a response to any question in this Part XII.  1 Accounting method used to prepare the Form 990: Cash X Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  2a Were the organization's financial statements compiled or reviewed by an independent accountant?  2a X  Were the organization's financial statements audited by an independent accountant?  2b X  If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  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 issued on a separate basis, consolidated basis, or both:	5	Other changes in net assets or fund balances (explain in Schedule O)					
Check if Schedule O contains a response to any question in this Part XII.  1 Accounting method used to prepare the Form 990: Cash X Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  2a Were the organization's financial statements compiled or reviewed by an independent accountant?  b Were the organization's financial statements audited by an independent accountant?  c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:		Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (R))					
Check if Schedule O contains a response to any question in this Part XII  1 Accounting method used to prepare the Form 990: Cash X Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  2a Were the organization's financial statements compiled or reviewed by an independent accountant?  2a X  b Were the organization's financial statements audited by an independent accountant?  c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:	Pa	rt XII Financial Statements and Reporting	<u> </u>	11,50.	T 1 3	00.	
1 Accounting method used to prepare the Form 990: Cash X Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  2a Were the organization's financial statements compiled or reviewed by an independent accountant?  b Were the organization's financial statements audited by an independent accountant?  c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:						v	
Accounting method used to prepare the Form 990: Cash X Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  2a Were the organization's financial statements compiled or reviewed by an independent accountant?  b Were the organization's financial statements audited by an independent accountant?  c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:							
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  2a Were the organization's financial statements compiled or reviewed by an independent accountant?  b Were the organization's financial statements audited by an independent accountant?  c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:	1	Accounting method used to prepare the Form 990: Cash X Accrual Other			169	140	
Were the organization's financial statements compiled or reviewed by an independent accountant?  b Were the organization's financial statements audited by an independent accountant?  c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:							
b Were the organization's financial statements audited by an independent accountant?  c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:	2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	<b>O</b> .			7.7	
c if "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:	b Were the organization's financial statements audited by an independent accountant?					_A	
review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:	C	c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for questions at the parties					
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:		review, or compilation of its financial statements and selection of an independent accountant?					
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:		If the organization changed either its oversight process or selection process during the tay year explaining Cabadda C					
separate basis, consolidated basis, or both:	d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued.	dule U.				
Separate basis X Consolidated basis Both consolidated and separate basis		separate basis, consolidated basis, or both:	JOHA		- 1		
		Separate basis X Consolidated basis Both consolidated and separate basis					
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit	3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	odo Avedia				
Act and OMB Circular A-1332		Act and OMB Circular A-133?	igie Audit		ĺ	77	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit	ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	rod oudit	:: Sa		_ <u>X</u> _	
or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		or audits, explain why in Schedule O and describe any steps taken to undergo such audits	IOU AUGIL	0,		ı	

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

NATIONAL ASSOCIATION FOR THE ADVANCEMENT

Employer identification number

Part I Reas	on for Public Chr	OKED PEOPLE	(NAACI	5)				<u> 13</u>	<u>-1084</u>	<u> 135</u>	,
		arity Status (All organi					tructions.				
		n because it is: (For lines									
		nes, or association of chu			ection 170	)(b)(1)(A)(i	).				
		170(b)(1)(A)(ii). (Attach So									
3 A hospita	I or a cooperative hos	pital service organization	described	in section	170(b)(1)	(A)(iii).					
		n operated in conjunction	with a ho	spital desc	ribed in s	ection 170	(b)(1)(A)(ii	i). Enter th	e hospital	's nan	ıе,
city, and											
5 An organ	ization operated for the	e benefit of a college or u	iniversity o	wned or of	perated by	y a govern	mental uni	t describe	d in		
	<b>170(b)(1)(A)(iv).</b> (Comp	•									
		ment or governmental un									
7 X An organ	ization that normally re	eceives a substantial part	of its supp	port from a	governm	ental unit d	or from the	general pi	ublic desc	ribed i	in
section	170(b)(1)(A)(vi). (Comp	lete Part II.)									
		section 170(b)(1)(A)(vi).									
9 An organ	zation that normally re	eceives: (1) more than 33	1/3% of its	s support f	rom contr	ibutions, n	nembershi	p fees, and	d gross re	ceipts	from
activities	related to its exempt fi	unctions · subject to cert	ain except	ions, and (	2) no more	e than 33	1/3% of its	support fi	rom gross	invest	lment
income a	nd unrelated business	taxable income (less sec	tion 511 ta	ax) from bu	sinesses	acquired b	y the orga	nization af	ter June 3	30, 197	75.
See sect	on 509(a)(2). (Comple	te Part III.)									
10 An organ	zation organized and	operated exclusively to te	st for pub	lic safety. S	See sectio	on 509(a)(4	4).				
11 An organ	zation organized and o	operated exclusively for the	he benefit	of, to perfo	orm the fu	nctions of	, or to carr	y out the p	urposes o	of one	or
more pub	licly supported organiz	zations described in secti	ion 509(a)	(1) or section	on 50 <mark>9(a)</mark> (	2). See see	ction 509(a	a)(3). Ched	k the box	that	
describes	the type of supporting	g organization and compl	lete lines 1	1e through	11h.		·				
a Ty	pe≀ b∟	Type Ii	с 🔙 Тур	oe III Fund	tionally in	tegrated		d 🔲	Type III - (	Other	
e By check	ing this box, I certify th	nat the organization is not	t <b>c</b> ontrolle	d directly o	r indirectl	y by one o	r more disc	qualified p	ersons oth	ner tha	ın
foundation	n managers and other	than one or more publicl	y supporte	ed organiza	ations des	cribed in s	section 509	(a)(1) or se	ection 509	)(a)(2).	
f If the orga	anization received a wr	ritten determination from	the IRS th	at it is a Ty	pe I, Type	II, or Type	e III			(-7(-7	
supportin	g organization, check	this box				1949 - 22 - CYCLOS	ap IIvesepssors				
g Since Au	just 17, 2006, has the	organization accepted a	ny gift or c	ontribution	from any	of the foll	owing pers	sons?			
		directly controls, either a								Yes	No
the ç	overning body of the s	supported organization?							11g(i)		-
(ii) A fai	nily member of a perso	on described in (i) above?							11q(ii)		
(iii) A 35	% controlled entity of	a person described in (i)	or (ii) abov	e?					11g(iii)	1	
h Provide th	ne following information	n about the supported or	ganization	n(s).							
(i) Name of supporte	d (ii) EIN	(iii) Type of		organization		u notify the	(vi) Is	the	(vii) An	nount c	of.
organization		organization (described on lines 1-9		isted in your		tion in col.	organizatio	on in col.   ed in the		port	"
	1	above or IRC section	governing	document?	(i) of you	r support?	Ü.S.	.?	***	p 0	
		(see instructions))	Yes	No	Yes	No	Yes	No			
= -								<del>   </del>			
Total						1					
LHA For Paperwork	Reduction Act Notice	, see the Instructions f	or	•		•	Schedul	e A (Form	990 05 00		2041
							~~	- ~ ~ ~ ~ ~ ~ ~ ~	VOV UI 772		Z1111

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2011 OF COLORED PEOPLE (NAACP)

13-1084135 Page 2

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.)

Se	ction A. Public Support			,			
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Gifts, grants, contributions, and			(0/2000	10/2010	(6) 2011	(I) FOCAL
	membership fees received. (Do not						
	include any "unusual grants.")	13900094.	18042312.	17918138	18473930	18702863	87037337.
2	Tax revenues levied for the organ-			_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	20273330.	10702003.	01031331.
	ization'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	13900094.	18042312.	17918138.	18473930.	18702863	87037337.
	The portion of total contributions				202703300	10702005.	07037337.
	by each person (other than a						
	governmental unit or publicly				İ		
	supported organization) included						İ
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4,						87037337.
Se	ction B. Total Support					<u> </u>	07037337.
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	13900094.	18042312.	17918138.	18473930.	18702863	87037337
8	Gross income from interest,		1 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				07037337.
	dividends, payments received on						
	securities loans, rents, royalties				1		
	and income from similar sources	239,409.	-775,467.	116,165.	164,661.	144.187.	-111 045
9	Net income from unrelated business						111/013.
	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.)	483,592.	580,939.	418.206.	1536323.	1429425	1110105
11	Total support. Add lines 7 through 10						91374777.
12	Gross receipts from related activities,	etc. (see instruction	ons)		a seriam material experiences	12	J13/4///.
13	First five years. If the Form 990 is for	the organization's	first, second, third	d, fourth, or fifth ta	ax vear as a sectio		
	organization, check this box and stop	here					222022
Sec	tion C. Computation of Publi	c Support Per	rcentage				
14	Public support percentage for 2011 (li	ne 6, column (f) di	vided by line 11, c	olumn (f))		14	95.25 %
15	Public support percentage from 2010	Schedule A, Part	II, line 14			15	96-02 %
16a	33 1/3% support test - 2011. If the o	rganization did no	t check the box or	n line 13, and line	14 is 33 1/3% or n	nore, check this ho	ox and
	stop here. The organization qualifies a	as a publicly supp	orted organization			2071.776	<b>▶</b> X
b	33 1/3% support test - 2010. If the o	rganization did no	t check a box on li	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	nis box
	and stop here. The organization qualit	fies as a publicly s	upported organiza	ation		******************************	▶□
1/a	10% -racts-and-circumstances test	- 2011. If the orga	anization did not c	heck a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more
	and if the organization meets the "fact	s-and-circumstand	ces" test, check th	is box and stop h	ere. Explain in Pai	t IV how the organ	nization
	meets the "facts-and-circumstances" t	test. The organizat	tion qualifies as a	publicly supported	d organization		
b	10% -facts-and-circumstances test	- 2010. If the orga	anization did not c	heck a box on line	13, 16a, 16b, or	7a, and line 15 is	10% or
	more, and if the organization meets the	e "facts-and-circur	nstances" test, ch	eck this box and	stop here. Explain	in Part IV how the	•
	organization meets the "facts-and-circ	umstances" test.	The organization q	ualifies as a publi	cly supported orga	Inization	
18	Private foundation. If the organization	n did not check a t	oox on line 13, 16a	i, 16b, 17a, or 17b	o, check this box a	nd see instruction	s
					Sche	dule A (Form 990	or 990-EZ) 2011

# Schedule A (Form 990 or 990-EZ) 2011 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)	ganization failed to qualify under Part II. If the organization fails to
gualify under the tests listed below, places complete Dew U.S.	

Se	ction A. Public Support	COW, Piedse COM	ipiete Fart II.J				
Cal	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and				15,25.0	10,2011	(i) rotal
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per- formed, 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 bus-						
	iness under section 513		12				
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf		ļ				
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 5						
7 a	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	· · · · · · · · · · · · · · · · · · ·					
С	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)						
	tion B. Total Support			<b>,</b>			
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties						1
	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						
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is						
	regularly carried on						
	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part IV.)					_	
	Total support (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organization's	first, second, thin	d, fourth, or fifth to	ax year as a sectio	n 501(c)(3) organi	zation,
	check this box and stop here		*******************		*******************		
	tion C. Computation of Public	c Support Per	rcentage				
15	Public support percentage for 2011 (lin	re 8, column (f) di	ivided by line 13, c	olumn (f))	******************	15	%
16	Public support percentage from 2010	Schedule A, Part	III, line 15			16	%
	tion D. Computation of Inves				V		
17	nvestment income percentage for 201	1 (line 10c, colum	กก (f) divided by lin	e 13, column (f))	***************************************	17	%
18	nvestment income percentage from 20	010 Schedule A, F	Part III, line 17 🚃			18	94
19a	$33  ext{ 1/3\% support tests} - 2011. If the o$	organization did n	ot check the box of	on line 14, and line	15 is more than 3	3 1/3%, and line	17 is not
- 1	more than 33 1/3%, check this box and	d stop here. The	organization quali	fies as a publicly s	supported organiza	ation	
b:	33 1/3% support tests - 2010. If the o	organization did no	ot check a box on	line 14 or line 19a	a, and line 16 is mo	re than 33 1/3%	and
	ine 18 is not more than 33 1/3%, chec	k this box and st	op here. The orga	nization qualifies a	as a publicly suppo	orted organization	
20 [	Private foundation. If the organization	did not check a t	box on line 14, 19a	a, or 19b, check th	nis box and see ins	tructions	
	01-24-12						0 or 990-EZ) 2011

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

# **Political Campaign and Lobbying Activities**

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

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. See separate instructions.

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.

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

If the organization answered "Yes" to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-F7, Part V, line 35c (Pr

	L ASSOCIATION F RED PEOPLE (NA		NCEMENT	Employer identification number
Part I-A Complete if the ord	ganization is exempt u	nder section 501/c	or is a section 5	13-1084135
Provide a description of the organic     Political expenditures     Volunteer hours	zation's direct and indirect pol	itical campaign activitie	s in Part IV.	<b>▶</b> \$
	janization is exempt u			
1 Enter the amount of any excise tax	incurred by the organization (	Inder section 4955	,,(0).	N. 6
2 Enter the amount of any excise tax	incurred by organization man	aners under section 494		
3 If the organization incurred a section	n 4955 tax. did it file Form 47	20 for this year?		Yes N
4a Was a correction made?	Miles State Course -	o tot allo your .	***************************************	Yes N
h If "Voc " decorbe in Dart (//				
Part I-C Complete if the org	anization is exempt ur	nder section 501(c	), except section	501(c)(3).
1 Enter the amount directly expended	by the filing organization for	section 527 exempt fun	ction activities	<b>▶</b> s
2 Enter the amount of the filing organ	ization's funds contributed to	other organizations for	section 527	
exempt function activities				<b>▶</b> \$
3 Total exempt function expenditures	. Add lines 1 and 2. Enter here	and on Form 1120-PO	L,	
				<b>.</b> .
line 17b				\$
line 17b  Did the filing organization file Form  Enter the names, addresses and en	1120-POL for this year?	(EIN) of all section 527 p	political organizations to	Yes N
4 Did the filing organization file Form 5 Enter the names, addresses and en made payments. For each organiza contributions received that were propolitical action committee (PAC). If	nployer identification number of the listed, enter the amount promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed.	(EIN) of all section 527 p aid from the filing organ o a separate political or ovide information in Pa	political organizations to nization's funds. Also er ganization, such as a s	Yes N  which the filing organization  ater the amount of political
4 Did the filing organization file Form 5 Enter the names, addresses and en made payments. For each organiza contributions received that were pre-	1120-POL for this year? ployer identification number ( tion listed, enter the amount p pmptly and directly delivered t	(EIN) of all section 527 paid from the filing organ to a separate political or	political organizations to nization's funds. Also er ganization, such as a s	yes No which the filing organization of the the amount of political eparate segregated fund or a rom (e) Amount of political contributions received an
4 Did the filing organization file Form 5 Enter the names, addresses and en made payments. For each organiza contributions received that were propolitical action committee (PAC). If:	nployer identification number of the listed, enter the amount promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed.	(EIN) of all section 527 p aid from the filing organ o a separate political or ovide information in Pa	political organizations to nization's funds. Also er ganization, such as a s rt IV.  (d) Amount paid f filing organizatio	yes N  which the filing organization inter the amount of political eparate segregated fund or a  rom n's er -0.  (e) Amount of political contributions received an promptly and directly delivered to a separate political organization.
4 Did the filing organization file Form 5 Enter the names, addresses and en made payments. For each organiza contributions received that were propolitical action committee (PAC). If	nployer identification number of the listed, enter the amount promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed.	(EIN) of all section 527 p aid from the filing organ o a separate political or ovide information in Pa	political organizations to nization's funds. Also er ganization, such as a s rt IV.  (d) Amount paid f filing organizatio	yes N  which the filing organization inter the amount of political eparate segregated fund or a  rom n's er -0.  (e) Amount of political contributions received an promptly and directly delivered to a separate political organization.
4 Did the filing organization file Form 5 Enter the names, addresses and en made payments. For each organiza contributions received that were pro- political action committee (PAC). If:	nployer identification number of the listed, enter the amount promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed.	(EIN) of all section 527 p aid from the filing organ o a separate political or ovide information in Pa	political organizations to nization's funds. Also er ganization, such as a s rt IV.  (d) Amount paid f filing organizatio	yes N  which the filing organization inter the amount of political eparate segregated fund or a  rom n's er -0.  (e) Amount of political contributions received an promptly and directly delivered to a separate political organization.
4 Did the filing organization file Form 5 Enter the names, addresses and en made payments. For each organiza contributions received that were pro- political action committee (PAC). If:	nployer identification number of the listed, enter the amount promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed.	(EIN) of all section 527 p aid from the filing organ o a separate political or ovide information in Pa	political organizations to nization's funds. Also er ganization, such as a s rt IV.  (d) Amount paid f filing organizatio	yes N  which the filing organization inter the amount of political eparate segregated fund or a  rom n's er -0.  (e) Amount of political contributions received an promptly and directly delivered to a separate political organization.
4 Did the filing organization file Form 5 Enter the names, addresses and en made payments. For each organiza contributions received that were propolitical action committee (PAC). If	nployer identification number of the listed, enter the amount promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed.	(EIN) of all section 527 p aid from the filing organ o a separate political or ovide information in Pa	political organizations to nization's funds. Also er ganization, such as a s rt IV.  (d) Amount paid f filing organizatio	yes N  which the filing organization inter the amount of political eparate segregated fund or a  rom n's er -0.  (e) Amount of political contributions received an promptly and directly delivered to a separate political organization.
4 Did the filing organization file Form 5 Enter the names, addresses and en made payments. For each organiza contributions received that were propolitical action committee (PAC). If:	nployer identification number of the listed, enter the amount promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed, promptly and directly delivered the additional space is needed.	(EIN) of all section 527 p aid from the filing organ o a separate political or ovide information in Pa	political organizations to nization's funds. Also er ganization, such as a s rt IV.  (d) Amount paid f filing organizatio	yes N  which the filing organization inter the amount of political eparate segregated fund or a  rom n's er -0.  (e) Amount of political contributions received an promptly and directly delivered to a separate political organization.

Schedule C (Form 990 or 990-EZ) 2011 Part II-A Complete if the or	rganizati	on is exe	PEOPLE (NAA	CP) on 501(c)(3) and fil	13_1	084135	Page 2
(election under se							
A Check   if the filing organiz	zation belon	gs to an aff	filiated group (and list in	n Part IV each affiliated	l group member's nam	e, address, E	IN,
expenses, and sh  B Check  if the filing organiz			expenditures). and "limited control" pro				
				ovisions apply.	1		
Lin (The term "expe	nits on Lob nditures" n	bying Expe neans amo	enditures unts paid or incurred.	)	(a) Filing organization's totals	(b) Affiliated totals	
1a Total lobbying expenditures to in	fluence pub	lic opinion	(grass roots lobbying)				
b Total lobbying expenditures to in	fluence a le	gislative bo	dy (direct lobbying)		334,261.		
c Total lobbying expenditures (add	lines 1a an	d 1b)			334,261.		
d Other exempt purpose expenditu	res	***********			30,949,914.		
e Total exempt purpose expenditur	res (add line	s 1c and 1	d)		31,284,175.		
f Lobbying nontaxable amount. En	ter the amo	unt from th	e following table in bot	h columns.	1,000,000.		
If the amount on line 1e, column (a)			bying nontaxable am				
Not over \$500,000			the amount on line 1e				
Over \$500,000 but not over \$1,00	00,000	\$100,0	00 plus 15% of the exc	ess over \$500,000.			
Over \$1,000,000 but not over \$1,			00 plus 10% of the exc		17		
Over \$1,500,000 but not over \$17	7,000,000		00 plus 5% of the exce				
Over \$17,000,000		\$1,000,					
g Grassroots nontaxable amount (e	nter 25% o	f line 1f)	******************************		250,000.		
h Subtract line 1g from line 1a. If ze	ro or less, e	nter -0-	***************************************		0.		
i Subtract line 1f from line 1c. If zer	•	5.5			0.		
j If there is an amount other than zo		r line 1h or	line 1i, did the organiz	ation file Form 4720			
reporting section 4911 tax for this				***************************************		Yes	☐ No
(Some organi	zations tha	t made a s	eraging Period Under section 501(h) election se instructions for line	n do not have to com	plete all of the five		
	Lobb	ying Expe	nditures During 4-Yea	ar Averaging Period			
Calendar year (or fiscal year beginning in)	(a) 2	2008	(b) 2009	(c) 2010	( <b>d)</b> 2011	( <b>e)</b> Tot	al
2a Lobbying nontaxable amount	1,000	0,000.	1,000,000.	1,000,000.	1,000,000.	4,000,	.000
b Lobbying ceiling amount (150% of line 2a, column(e))						6,000,	
c Total lobbying expenditures	442	2,943.	556,505.	986,958.	334,261.	2,320,	
d Grassroots nontaxable amount	250	,000.	250,000.	250,000.	250,000.	1,000,	000.
e Grassroots ceiling amount (150% of line 2d, column (e))						1,500,	
f Grassroots lobbying expenditures							

Schedule C (Form 990 or 990-EZ) 2011

Schedule C (Form 990 or 990-EZ) 2011 OF COLORED PEOPLE (NAACP)

Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description	(a	1)	(b)	
of ti	e lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or	=			
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
•	Volunteers?				
ı	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
•	100.00.00.00.00.00.00.00.00.00.00.00.00.				
(					
	Publications, or published or broadcast statements?				
1	3 ps. poddo.				
9	5 ,				
r	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
İ	Other activities?				
_ 1	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)?				
	If "Yes," enter the amount of any tax incurred under section 4912		1		
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
Da:	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	لـــــا			
ra	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)(	(5), or se	ction	
	00 1(0)(0).				
1	Were substantially all (90% or more) dues received condeductible by members?			Yes	No
2	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?		1		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?				
Pai	t III-B Complete if the organization is exempt under section 501(c)(4), section	504/ <sub>0</sub> \/	3	-4:	
1	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				
а	expenses for which the section 527(f) tax was paid).  Current year				
b		••••••	2a	·	
c		*******	2b		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		2c		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc		3		
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	ess			
	414				
5	expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)	*************	F		
ar	IV Supplemental Information	***********	5		
om	olete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part for any additional information.	irt II-A; and F	Part II-B, line	e 1. Also, c	omple
			-		

#### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions. 2011
Open to Public Inspection

Name of the organization

NATIONAL ASSOCIATION FOR THE ADVANCEMENT OF COLORED PEOPLE (NACC)

Employer identification number 13-1084135

Pa	rt I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin-		
		(a) Donor advised funds	(b) Funds and other accounts
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 organization inform all donors and donor advisors in		sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be	used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	conferring
	impermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, F	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or e	education) Preservation of an his	storically important land area
	Protection of natural habitat	Preservation of a cert	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quality	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired		
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	e organization during the tax
	year -		
4	Number of states where property subject to conservation ear		
5	Does the organization have a written policy regarding the per		
_	violations, and enforcement of the conservation easements it		Yes No
6 7	Staff and volunteer hours devoted to monitoring, inspecting,		
8	Amount of expenses incurred in monitoring, inspecting, and of Does each conservation easement reported on line 2(d) above	enforcing conservation easements during	the year > \$
•			
9	and section 170(h)(4)(B)(ii)?  In Part XIV, describe how the organization reports conservati		
9	include, if applicable, the text of the footnote to the organization		
	conservation easements.	non's intancial statements that describes	the organization's accounting for
Par	t III Organizations Maintaining Collections o	f Art. Historical Treasures, or O	ther Similar Assets
	Complete if the organization answered "Yes" to Form		aloi Olillidi Assets.
1a	If the organization elected, as permitted under SFAS 116 (AS		ment and halance sheet works of art
	historical treasures, or other similar assets held for public exh	nibition, education, or research in furthera	Ince of public service provide in Part VIV
	the text of the footnote to its financial statements that descri	bes these items	ince of public service, provide, in Part XIV,
b	If the organization elected, as permitted under SFAS 116 (AS		t and halance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of ou	blic service provide the following amounts
	relating to these items:	parameter, extraction of parameters of param	one service, provide the following amounts
	(i) Revenues included in Form 990, Part VIII, line 1		<b>•</b> •
	(ii) Assets included in Form 990, Part X		***************************************
2	If the organization received or held works of art, historical treatments	asures, or other similar assets for financia	al gain provide
	the following amounts required to be reported under SFAS 1		- gonn, provide
а	Revenues included in Form 990, Part VIII, line 1		<b>s</b>
	Assets included in Form 990, Part X		

132051 01-23-12

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

NATIONAL ASSOCIATION FOR THE ADVANCEMENT Schedule D (Form 990) 2011 OF COLORED PEOPLE (NAACP) 13-1084135 Page 2 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply): Public exhibition Loan or exchange programs Scholarly research b Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIV and complete the following table: Amount c Beginning balance 10 d Additions during the year 1d Distributions during the year 1e Ending balance 1f 2a Did the organization include an amount on Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIV Part V Endowment Funds. Complete if the organization answered "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 1a Beginning of year balance Contributions Net investment earnings, gains, and losses d Grants or scholarships Other expenditures for facilities and programs Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment Permanent endowment Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: No (i) unrelated organizations 3a(i) (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIV the intended uses of the organization's endowment funds. Part VI | Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	**********	454,550.		454,550
b Buildings	4	2,622,581.	2,321,876.	300,705
c Leasehold improvements	************	382,174.	355,143.	27,031
d Equipment				277031
e Other		4,787,712.	4,132,457.	655,255
Fotal. Add lines 1a through 1e. (Column (d) r	nust equal Form 990, Part X, colur	nn (B), line 10(c).)		1,437,541

Part VII Investments - Other Securities. Se	PEOPLE (NAAC) e Form 990, Part X line 1	2	13	-1084135	Page 3
(a) Description of security or category			Method of value	ation:	
(including name of security)	(b) Book value		end-of-year ma		
1) Financial derivatives					
(2) Closely-held equity interests					
(3) Other					
(A) CORPORATE BONDS	752,913	END-OF-YEAR	MARKET	VALUE	
(B) MONEY MARKET FUNDS	112,114				
(C) GOVERNMENT SECURITIES	1,026,849		MARKET	VALUE	
(D) EQUITIES	1,206,167		MARKET	VALUE	
(E) MUTUAL FUNDS	1,310,719		MARKET	VALUE	
(F) INVESTMENT LOAN	12,158.		MARKET	VALUE	
(G)				ANDOR	
(H)				-	
(1)					
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)	4,420,920				
Part VIII Investments - Program Related. Se	e Form 990, Part X, line	13.			
(a) Description of investment type	(b) Book value	(c) A	Method of valua and-of-year mar		**
(1)			700,000		
(2)			<del></del>		
(3)					
(4)					
(5)					
(6)					
(7)			<del></del>		
(8)					
(9)	·				
(10)					
otal. (Col (b) must equal Form 990, Part X, col (B) line 13.)					
Part IX Other Assets. See Form 990, Part X, line	5.				
	escription	<del></del>		(b) Book val	hie
(1) OTHER CURRENT ASSETS					323.
(2) INVESTMENT IN AFFILIATES				4,381,	217
(3) DUE FROM AFFILIATES					373.
(4) OTHE ASSETS					583.
(5)					505.
(6)					
(7)					
(8)					
(9)					
(10)					
ptal. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. See Form 990, Part X, lin	15.)			5,391,	496.
(a) Description of liability		(b) Book value			
(1) Federal income taxes		(a) Dook value			
(2) PENSION BENEFITS OBLIGATION	NS	3,292,004.			
(3) LINE OF CREDIT					
(4)		1,500,844.			
(5)		***************************************			
(6)					
(7)					
(8)					
(9)					
(10)					
(11)		1 500			
ntal. (Column (b) must equal rorm 990, Part X, col (B) line 2	(5.)	1 707 Q/Q I			
htal. (Column (b) must equal Form 990, Part X, col (B) line 2 FIN 48 (ASC740) Footnote In Part XIV. provide the text of the footnote to the FIN 48 (ASC740).	e Organization's financial statem	ents that records the	Part and		

NATIONAL	ASSOCIATION	FOR THE	ADVANCEMENT
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	rt XI Reconciliation of Change in Net Assets from Form 990				<u>13-</u>	1084135	Page 4
	The state of the s			State	men		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1			31,746	,942.
2	Total expenses (Form 990, Part IX, column (A), iine 25)		2			31,284	,175
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3	=			,767
4	Net unrealized gains (losses) on investments		4			-234	,074
5	Donated services and use of facilities		5				
8	Investment expenses		6				
7	Prior period adjustments		7				
8	Other (Describe in Part XIV.)		8			-1,734	.337
9	Total adjustments (net). Add lines 4 through 8		9			-1,968	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3:	and 9	10			-1 505	
Pa	t XII Reconciliation of Revenue per Audited Financial Staten	ents Witl	h Revenue	per R	letur	n	
1	Total revenue, gains, and other support per audited financial statements	*******			1	32,038	,272
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:						
а	Net unrealized gains on investments	2a					
b	Donated services and use of facilities	2b	291,	330.	.]		
C	Recoveries of prior year grants	2c			1		
d	Other (Describe in Part XIV.)	2d			1		
	Add lines 2a through 2d				2e	291	,330
3	Subtract line 2e from line 1				3	31,746	9/12
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			17.10.000	-	31,720	, 244.
а	Investment expenses not included on Form 990, Part VIII, line 7b	42					
ь	Other (Describe in Part XIV.)	4b			1		
	Add lines 4a and 4b				1 4.		
5	Total revenue. Add lines 3 and 4c, (This must equal Form 990, Part I, line 12.)				4c	31,746	0.
Par	t XIII Reconciliation of Expenses per Audited Financial State	nents Wit	h Evnenes	e ner	Pote	31,/40	,942.
1	Total expenses and losses per audited financial statements	1101110 1111	ar expense	s per		,	016
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	***************			1	33,543	, 916.
_	Donated services and use of facilities	1 - 1	201	220			
a b	Dries year adjustments	2a	291,	330.	-		
b	Prior year adjustments	2b			4		
C	Other losses	2c			4		
	Other (Describe in Part XIV.)		234,				
e	Add lines 2a through 2d				2e	525	404.
3	Subtract line 2e from line 1				3	33,018	512
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:						
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
b	Other (Describe in Part XIV.)	4b	-1,734,	<u>337.</u>			
C	Add lines 4a and 4b				4c	-1,734	,337.
<u>5</u>	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	***********	*******		5	31,284	
	t XIV Supplemental Information					-	
omp	elete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part	III, lines 1a	and 4; Part IV	lines 1	b and	2b; Part V, line	4; Part
, line	2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also cor	nplete this p	art to provide	any ade	ditiona	information.	• • • • • • • • • • • • • • • • • • • •
AR	T X, LINE 2: NAACP IS EXEMPT FROM INCOME	TAXES	UNDER	SECT	ION		
01	(C)(3) OF THE INTERNAL REVENUE CODE . ACC	CORDING	GLY. NO	PRO	VIS	TON FOR	
			7 3.3			2011 1011	
NC	OME TAXES HAS BEEN MADE IN THE ACCOMPANY	ING FTI	VANCTAL.	SሞΣ	тем	ENTS	
				W 1 2 2	1 1111	DIVID.	
AR	T XI, LINE 8 - OTHER ADJUSTMENTS:						
ET	PENSION OBLIGATION					-1,734	327
						+1174	, , , , ,
				=			
AR	T XIII, LINE 2D - OTHER ADJUSTMENTS:						
ne •	distribution of the control of the c	***********************			Sched	lule D (Form 9	90) 2011
2054 -23-1	2					(, 0,,,,,	, 1 1

Schedule D (Form 990) 2011 OF COLORED PEOPLE (NAACP)  Part XIV Supplemental Information (continued)	13-1084135 Page 5
INREALIZED LOSSES ON INDESCRIPTION	234,074.
PART XIII, LINE 4B - OTHER ADJUSTMENTS:	
NET PENSION OBLIGATION	-1,734,337.

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

# Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service 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.

Open To Public

Internal Navelide Set 4104	Attach to Form 990 or Form 990	0-EZ.	See s	eparate instructions	3.	Inspection
Name of the organization NATI	ONAL ASSOCIATION FOR	R THE	AL	VANCEMENT	Employer ide	entification number
Fundaciona Action	COLORED PEOPLE (NAAC)	P)			13-1084	135
Part I required to complete the	<b>rities.</b> Complete if the organization and nice part.	swered "\	Yes" to	o Form 990, Part IV, i	ine 17. Form 990-E	Z filers are not
1 Indicate whether the organizati	ion raised funds through any of the folio	wing acti	ivities.	Check all that apply		
a X Mail solicitations		itation of	non-g	overnment grants		
b Internet and email solici	tations f Solic	citation of	gover	mment grants		
c X Phone solicitations	g Spec	cial fundra	aising	events		
d In-person solicitations						
2 a Did the organization have a wi	ritten or oral agreement with any individ	lual (inclu	ding o	officers, directors, trus	stees or	
key employees listed in Form !	990, Part VII) or entity in connection wit	h profess	ional 1	fundraising services?	Yes	S X No
b If "Yes," list the ten highest pa	aid individuals or entities (fundraisers) pa	ursuant to	o agre	ements under which	the fundraiser is to	be
compensated at least \$5,000	by the organization.					
(i) Name and address of individu		(iii)	Did		(v) Amount paid	
(i) Name and address of individu or entity (fundraiser)	(ii) Activity	have o	ustody	(iv) Gross receipts	to (or retained by) fundraiser	(vi) Amount paid to (or retained by)
		contrib	ntrol of utions?	from activity	listed in col. (i)	organization
OMP - 1133 19TH STREET NW,	DIRECT MARKETING AND	Yes	No			
SUITE 300 WASHINGTON DC	COMMUNICATION SVCS.	X		4,115,161,	307, 279	3,807,882,
TELEFUND - P.O. BOX 2366,		ŀ				
DENVER CO 80201	TELEMARKETING	Х		250,536,	215,699	34,837,
DONOR SERVICE GROUP (DSG) -						
6715 SUNSET BLVD. LOS	TELEMARKETING	Х		55,722,	47,871,	7,851,
SD&A TELESERVICES - 5757 WE						1
CENTURY BLVD SUITE 300 LO	S TELEMARKETING	х	ļ	44.481.	32,651,	11,830,
SHARE - P.O. BOX 55183,						
BOSTON MA 02205	TELEMARKETING	х	-	21,455.	22,588	-1,133,
,					·	:
Total				4,487,355.	626,088	3,861,267
<ol><li>List all states in which the organ or licensing.</li></ol>	sization is registered or licensed to solic	cit contrib	utions	s or has been notified	lit is exempt from r	egistration
AL, AK, AZ, AR, CA, CO, C	CT, DE, FL, GA, HI, ID, II	I.IN.	TA.	KS KY TA M	E MT) MA MT	MN MC MO
MT, NE, NV, NH, NJ, NM, 1	NY, NC, ND, OH, OK, OR, PA	A.RI.	SC.	SD.TN.TX.U	T. VT. VA. WA	W TW VW
						TANA THE TANE
					<u> </u>	

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SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990 or 990-EZ) 2011

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		(a) Event #1	90-EZ, lines 1 and 6b. List	(c) Other events	
			(0, 2, 0, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	(b) other events	(d) Total events (add col. (a) through
3		(event type)	(event type)	(total number)	col. (c))
1	Gross receipts				
2					
3	Gross income (line 1 minus line 2)				
4	Cash prizes			**************************************	
5	Noncash prizes				
6	Rent/facility costs				
7	Food and beverages				
8	Entertainment Other direct aurages				
9	Other direct expenses			<del></del>	
10		h 9 in column (d)	•••		1
art		answered "Yes" to For	m 990 Part IV line 19 or r	enorted more than	
	\$15,000 on Form 990-EZ, line 6a.			eported more triain	
		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (ad col. (a) through col. (d
1	Gross revenue				
2	Cash prizes				
3	Noncash prizes				
3	Rent/facility costs			· · · · · · · · · · · · · · · · · · ·	
5	Other direct expenses				
6	Volunteer labor	Yes %	Yes% No	☐ Yes % ☐ No	
7	Direct expense summary. Add lines 2 through	n 5 in column (d)	***************************************		(
8	Net gaming income summary. Combine line 1	, column d, and line 7			
Ent					
	er the state(s) in which the organization opera he organization licensed to operate gaming ac		ototoo?		
) If "I	No," explain:		states?		Yes N
	re any of the organization's gaming licenses re	voked, suspended or t	erminated during the tax y	ear?	Yes N
	Yes," explain:		-		

# NATIONAL ASSOCIATION FOR THE ADVANCEMENT Schedule G (Form 990 or 990-EZ) 2011 OF COLORED PROPLE (NAACP) 13-1084135 Page 3 Does the organization operate gaming activities with nonmembers? 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed Indicate the percentage of gaming activity operated in: a The organization's facility b An outside facility 13b 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records: Address -15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? b If "Yes," enter the amount of gaming revenue received by the organization > \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party > \$ c if "Yes," enter name and address of the third party: Name 16 Gaming manager information: Name > Gaming manager compensation > \$\_\_\_\_\_ Description of services provided Director/officer Independent contractor 17 Mandatory distributions: a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$ Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions). SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS: (I) NAME OF FUNDRAISER: OMP (I) ADDRESS OF FUNDRAISER: 1133 19TH STREET NW, SUITE 300, WASHINGTON, DC 20036 (I) NAME OF FUNDRAISER: DONOR SERVICE GROUP (DSG) (I) ADDRESS OF FUNDRAISER: 6715 SUNSET BLVD., LOS ANGELES, CA 90028 132083 Q1-23-12

Schedule G (Form 990 or 990-EZ) 2011

# NATIONAL ASSOCIATION FOR THE ADVANCEMENT Schedule G (Form 990 or 990-EZ) 2011 OF COLORED PEOPLE (NAACP) 13-1084135 Page 4 Part IV | Supplemental Information (continued) (I) NAME OF FUNDRAISER: SD&A TELESERVICES (I) ADDRESS OF FUNDRAISER: 5757 WEST CENTURY BLVD, SUITE 300, LOS ANGELES, CA 90045

132084 05-01-11

Schedule G (Form 990 or 990-EZ) 2011

#### **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.

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990. ► See separate instructions.

NATIONAL ASSOCIATION FOR THE ADVANCEMENT OF COLORED PEOPLE (NAACP)

Employer identification number 13-1084135

P	Part I Questions Regarding Compensation	13-100413	5	
			Yes	No
18	a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 9	eo.	165	140
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.	-		ĺ
	First-class or charter travel Housing allowance or residence for personal	aluse		
	Travel for companions Payments for business use of personal resi			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, che	ef)		
Ь	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	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, direct	tors		<del> </del>
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
		***************************************		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization	nn'e		
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization	a to		
	establish compensation of the CEO/Executive Director. Explain in Part III.			
	Compensation committee Written employment contract			
	X Independent compensation consultant X Compensation survey or study			
	X Approval by the board or compensation con	nmittee		
	The second of the second of companion of	i ii i ii i i i i i i i i i i i i i i		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			ĺ
	organization or a related organization:			ĺ
а	Receive a severance payment or change-of-control payment?	4a		v
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	EAMOUNIAM TO T		
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			ĺ
	contingent on the revenues of:		İ	
а	The organization?	5.0		v
b	Any related organization?	5a		X
	If "Yes" to line 5a or 5b, describe in Part III.	<u>30</u>		
6	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:			
а	The organization?	6.		W
ь	Any related organization?	6a		X
	If "Yes" to line 6a or 6b, describe in Part III.	6b		_ <u>A</u> _
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	_		32
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	7		X
	initial contract exception described in Regulations section 53 4059 4(2/2)2 18 18/2-18 4-2-28 4-2-28			v
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	8		<u>X</u>
	Regulations section 53.4958-6(c)?			
HA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Sebadula 1/5	200:	
		Schedule J (Form	990)	<b>2</b> 011

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OF COLORED PEOPLE (NAACP)

13-1084135 Schedule J (Form 990) 2011

Page 2

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). Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. 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 column (D) and (E) amounts for that individual.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(0)	(Q)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	Retirement and other deferred compensation	Nontaxable benefits	Total of columns (B)(i)-(D)	Compensation reported as deferred in prior Form 990
	ε	284,861.	0.	0.	2,003.	8,343.	295,207.	0
1 BENJAMIN TODD JEALOUS	▣		0	0.	0	0		0.
	8	193,949.	0	0.	3,000.	21,021.	217,97	
2 KOGER VANN		0	0	0.	0	.0	=	
	8	199,759.	0	0.	0	18,581.	218,340.	0.
3 STEVEN HAWKINS	▤	0	0	0	0	0	0.	0
	Ξ	214,203.	0	0.	1,745.	2,586.	218,534.	0
4 KIM KEENAN	€	- 1	0	0	0	0.	0	0
	Ξ	196,377.	0.	0.	2,847.	1,620.	200,844.	0
5 BRENDA WATKINS NOEL	<b>3</b>	0	0.	0.	0.	0	0	0
	Ξ	148,469.	0.	0	4,394.	21,021.	173,884.	0
6 HILARY SHELTON	(1)	0.	0.	0	0			0
	(1)							
The second	(ii)							
at American visit.	ε							
8	8							
	Ξ							
6	3							
	Ξ							
10	<u> </u>							
	ε							
	8							
	€							
12	8							
	Ξ							
13	₿							
	Ξ							
14	3							
	ε							
15	8							
	€							
16	3							
							Schedule	Schedule J (Form 990) 2011

#### **SCHEDULE L**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## **Transactions With Interested Persons**

➤ Complete if the organization answered
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions,

2011

Open To Public Inspection

Name of the organization NATIONAL ASSOCIATION FOR THE ADVANCEMENT Employer identification number OF COLORED PEOPLE (NAACP) 13-1084135 Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b 1 (c) Corrected? (a) Name of disqualified person (b) Description of transaction Yes No 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a (f) Approved by board or (a) Name of interested (b) Loan to or from (c) Original principal (d) Balance due (e) In (g) Written person and purpose the organization? amount default? agreement? committee? To From Yes No Yes No Yes No **Total** Grants or Assistance Benefiting Interested Persons. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 27 (a) Name of interested person (b) Relationship between interested person and (c) Amount and type of the organization assistance

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

Schedule L (Form 990 or 990-EZ) 2011

# NATIONAL ASSOCIATION FOR THE ADVANCEMENT Schedule L (Form 990 or 990-EZ) 2011 OF COLORED PROPILE (NAACR) 13.109413E

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz rever	aring zation
				Yes	N
BUSINESS TRANSACTIONS BEI	LO	0.		1	X
HRESHOLD OF 1% OF REVENU	JE	0.			X
				=	
Dent V. Complement III 6					
Part V Supplemental Information	onal information for responses to questions				
	111 1				

#### **SCHEDULE 0**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ

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.

OMB No. 1545-0047 Open to Public Inspection

1

Name of the organization

NATIONAL ASSOCIATION FOR THE ADVANCEMENT | Employer identification number

OF COLORED PEOPLE (NAACP)	13-1084135
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MI	SSION:
AND TO ELIMINATE RACE-BASED DISCRIMINATION.	
AMENDED FORM 990 - EXPLANATIONS ARE AS FOLLOWS	
PART I: SUMMARY	
LINE 15, CURRENT YEAR COLUMN - WAS PREVIOUSLY REPORTED	AS \$13,344,754
AND HAVE BEEN AMENDED TO \$11,610,417.	
LINE 16, CURRENT YEAR COLUMN - WAS PREVIOUSLY REPORTED	
BEEN REVISED TO \$626,088.	
LINE 17, CURRENT YEAR COLUMN - WAS PREVIOUSLY REPORTED	
AND HAVE BEEN AMENDED TO \$19,047,670.	
LINE 18, CURRENT YEAR COLUMN - WAS PREVIOUSLY REPORTED	
AND HAVE BEEN AMENDED TO \$31,284,175.	
LINE 19, CURRENT YEAR COLUMN - WAS PREVIOUSLY REPORTED	
AND HAVE BEEN AMENDED TO \$462,767.	
PART IX: STATEMENT OF FUNCTIONAL EXPENSES	
LINE 5, COLUMNS A, B, C & D - WERE PREVIOUSLY REPORTED A	S \$1,150,894,
\$920,716, \$115,089, AND \$115,089 RESPECTIVELY AND HAVE B	
\$1,150,895, \$361,183, \$652,789 AND \$136,923 RESPECTIVELY	
LINE 7, COLUMNS A, B, C & D - WERE PREVIOUSLY REPORTED A	S \$12 193 860.
\$5,356,231; \$5,841,404 AND \$996,225 RESPECTIVELY AND HAV	
	edule O (Form 990 or 990-EZ) (2011)

132211 01-23-12

Schedule O (Form 990 or 990-EZ) (2011)  Name of the organization NATIONAL ASSOCIATION FOR THE ADVANCEMENT  OF COLORED PEOPLE (NAACP)	Page 2 Employer identification number 13-1084135
TO \$10,459,522; 5,915,764; \$3,569,368 AND \$974,390 RESPEC	
LINE 11E, COLUMNS A, & D - WERE PREVIOUSLY REPORTED AS \$0  COLUMNS A & D HAVE BEEN AMENDED TO \$626,088.	AND BOTH
LINE 13, COLUMNS A, & D - WERE PREVIOUSLY REPORTED AS \$6,	939,305 AND
\$1,340,833 RESPECTIVELY AND HAVE BEEN REVISED TO \$6,313,2	17 AND
\$714,745 RESPECTIVELY.	
LINE 25, COLUMNS A, & C - WERE PREVIOUSLY REPORTED AS \$33 \$5,490,309 RESPECTIVELY AND HAVE BEEN REVISED TO \$31,284, \$3,755,973 RESPECTIVELY.	
PART XI: RECONCILIATION OF NET ASSETS	
LINE 2 WAS PREVIOUSLY REPORTED AS \$33,018,512 AND HAS BEE	EN AMENDED TO
LINE 3 WAS PREVIOUSLY REPORTED AS \$-1,271,570 AND HAS BEE \$462,767.	N AMENDED TO
LINE 5 WAS PREVIOUSLY REPORTED AS \$-234,074 AND HAS BEEN \$1,968,411.	AMENDED TO
PART XII: FINANCIAL STATEMENTS AND REPORTING	
LINE 2C WAS PREVIOUSLY REPORTED AS "NO" AND HAS BEEN REVI	SED TO "YES."
SCHEDULE C:	
132212 01-23-12 Scher	tule O (Form 990 or 990-F7) (2011)

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization NATIONAL ASSOCIATION FOR THE ADVANCEMENT OF COLORED PEOPLE (NAACP)	Employer identification number 13-1084135
PART IIA-A	
LINES 1D, 1E AND 1F WERE PREVIOUSLY REPORTED AS \$0, \$334,	261 AND
\$66,852 RESPECTIVELY AND HAVE BEEN AMENDED AS \$30,949,914	, \$31,284,175
AND \$1,000,000 RESPECTIVELY.	
LINE 1G WAS PREVIOUSLY REPORTED AS \$16,713 AND THE AMENDE	D AMOUNT IS
\$250,000.	
LINE 1(I) WAS PREVIOUSLY REPORTED AS \$267,409 AND CORRECT	ED AMOUNT IS
\$0	
LINE 2A, COLUMN (D)2011 WAS REPORTED AS \$66,852. THIS LI	NE HAS BEEN
REVISED AND THE CORRECT AMOUNT FOR LINE 2A, COLUMN (D) 201	1 SHOULD BE
\$1,000,000. LINE 2B, COLUMN (E) HAS BEEN CHANGED TO \$6,0	•
2(D), COLUMN (D)2011 HAS BEEN AMENDED TO \$250,000 AND COL	
HAS CHANGED TO \$1,000,000. LINE 2E, COLUMN (E) TOTAL IS	AMENDED TO
\$1,500,000.	
SCHEDULE D:	
PART XI:	
LINE 2 WAS PREVIOUSLY REPORTED AS \$33,018,512 AND HAS BEE	N AMENDED TO
\$31,284,175.	
LINE 3 WAS PREVIOUSLY REPORTED AS \$-1,271,570 AND HAS BEE	N AMENDED TO
\$462,767.	
LINE 8 WAS PREVIOUSLY REPORTED AS \$0 AND HAS BEEN AMENDED	ТО
\$-1,734,337. 132212 01-23-12  Sched	lule O (Form 990 or 990-EZ) (2011)

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization NATIONAL ASSOCIATION FOR THE ADVANCEMENT OF COLORED PEOPLE (NAACP)	Employer identification number 13-1084135
LINE 9 WAS PREVIOUSLY REPORTED AS \$-234,074 AND HAS BEEN	AMENDED TO
\$1,968,411.	
PART XIII:	
LINE 4B WAS PREVIOUSLY REPORTED AS \$0 AND HAS BEEN AMENDE	D TO
\$-1,734,337.	
LINE 5 WAS PREVIOUSLY REPORTED AS \$33,018,512 AND HAS BEE	N AMENDED TO
\$31,284,175.	
PART XIV: HAS BEEN REVISED TO DESCRIBE THE NATURE OF \$-1	,734,337
ADJUSTMENT WHICH IS "NET PENSION OBLIGATION."	
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHME	NTS:
ADVOCACY AROUND ITS NEW AGENDA. THAT RESEARCH-SUPPORTED A	GENDA AND THE
RECOMMENDATIONS TO ADVOCATES THAT FLOWED FROM IT THEN FOR	MED THE BASIS
FOR A SERIES OF TRAININGS THAT EDUCATED MEMBERS AND CREAT	ED CONSENSUS
AROUND OUR KEY ISSUES: ACCESS TO QUALITY PRE-K, EXCELLENT	TEACHING,
FAIRNESS IN STUDENT DISCIPLINE, EQUITY IN SPENDING AND EX	PANDED
LEARNING OPPORTUNITIES FOR STUDENTS BEYOND THE TRADITIONA	L SCHOOL
SETTING. THREE MAJOR OBJECTIVES OF EDUCATION AGENDA: (1)P	REVENTING
RACIAL DISCRIMINATION IN EDUCATIONAL PROGRAMS AND SERVICE	S; (2)
ADVANCING EDUCATIONAL EXCELLENCE; (3) AND PROMOTING AN EQ	UAL
OPPORTUNITY EDUCATION AGENDA. THE EDUCATION PROGRAM ALSO	INCLUDES
ADMINISTRATION OF EDUCATIONAL SCHOLARSHIPS.	
	3
ECONOMIC DEVELOPMENT - THE ECONOMIC DEVELOPMENT PROGRAM I	S BASED ON THE
THEORY THAT COMBINING ORGANIZING, COMMUNITY MOBILIZATION, 1322.12 School	MONITORING OF

Schedule O (Form 990 or 990-EZ) (2011) Page 2 Name of the organization NATIONAL ASSOCIATION FOR THE ADVANCEMENT **Employer identification number** OF COLORED PEOPLE (NAACP) 13-1084135 LENDING PRACTICES, EDUCATION AND IMPROVED ACCESS TO QUALITY PRODUCTS AND SERVICES WILL RESULT IN IMPROVED FINANCIAL SECURITY AND ECONOMIC SOLVENCY. THE OBJECTIVES ARE: TO EMPOWER LOCAL COMMUNITIES WITH THE NECESSARY EDUCATION, RESOURCES AND PARTNERSHIPS TO DEVELOP SUSTAINABLE ECONOMIC MODELS THAT ADVANCE DIVERSITY AND EQUITY; TO ENSURE THAT GOVERNMENT AND INDUSTRY ARE KNOWLEDGEABLE AND COMMITTED TO BRIDGING RACIAL INEQUALITY PARTICULARLY AS IT RELATES TO EMPLOYMENT, WEALTH, LENDING AND BUSINESS OWNERSHIP; AND TO GROW A MOVEMENT OF CONCERNED CITIZENS AND ORGANIZATIONS WHO WORK TOGETHER TO PRODUCE AN INCLUSIVE AND STRONG MIDDLE CLASS ECONOMY FOR THE 21ST CENTURY. THE PROGRAM WILL WORK TO ACHIEVE THESE ADVOCACY OBJECTIVES THROUGH RELATED PROGRAM INITIATIVES FOCUSED ON ECONOMIC EDUCATION & LITERACY, FAIR LENDING ISSUES, EQUITABLE DIVERSITY AND INCLUSION PRACTICES. HEALTH - THE NAACP HEALTH DEPARTMENT WAS CREATED TO WORK ON HEALTH EQUITY AND REDUCE HEALTH DISPARITY IN PROGRAMS AND POLICIES. IN 2011, THE HEALTH DEPARTMENT RELEASED THE NATIONAL CHILDHOOD OBESITY ADVOCACY MANUAL IN PARTNERSHIP WITH THE US SURGEON GENERAL AND THE ROBERT WOOD JOHNSON FOUNDATION. THE FOCUS OF THIS WORK IS TARGETED TOWARD CHANGING SCHOOL POLICIES, IMPROVING THE BUILT ENVIRONMENT FOR PHYSICAL ACTIVITY AND INCREASING ACCESS TO HEALTHY FOODS, PARTICULARLY FRESH FRUITS AND VEGETABLES. IN ADDITION, THE HEALTH DEPARTMENT HOSTED A NATIONAL 2-DAY HIV ADVOCACY IN PARTNERSHIP WITH THE HARVARD UNIVERSITY CENTER FOR AIDS RESEARCH TO ADDRESS THE HIV EPIDEMIC IN THE BLACK COMMUNITY. THE FIRST COLLEGIATE TOUR WAS HOSTED IN 2011 ENTITLED GET HYPE-HEALTHY YOUNG PEOPLE EVERYWHERE, WHERE THE CHAIRMAN OF THE NAACP BOARD AND MEMBERS OF THE FIELD AND HEALTH STAFF ATTENDED UNIVERSITIES TO ADDRESS HEALTHY

LIVING STRATEGIES, HIV PREVENTION AND CIVIC ENGAGEMENT. FINALLY THE

1322 12 01-23-12

Schedule O (Form 990 or 990-EZ) (2011)

Schedule O (Form 990 or 990-EZ) (2011) Page 2 Name of the organization NATIONAL ASSOCIATION FOR THE ADVANCEMENT **Employer identification number** OF COLORED PEOPLE (NAACP) 13-1084135 NAACP FUNDED 7 COMMUNITIES TO IMPLEMENT PROJECT HELP (HEALTHY EATING LIFESTYLES & PHYSICAL ACTIVITY) TO PROMOTE CHRONIC DISEASE PREVENTION THROUGH EDUCATION AND COMMUNITY ACTIVITIES. ENVIRONMENTAL AND CLIMATE JUSTICE - THE ENVIRONMENTAL AND CLIMATE JUSTICE PROGRAM (ECJP) WORKS WITH NAACP UNITS NATIONWIDE TO ADDRESS THREE STRATEGIC OBJECTIVES: REDUCE HARMFUL EMISSIONS, ADVANCE ENERGY EFFICIENCY AND CLEAN ENERGY, AND IMPROVE COMMUNITY RESILIENCE. IN 2011, THE ECJP'S ENGAGEMENT IN LOCAL ORGANIZING IN CHICAGO RESULTED IN THE CLOSURE OF 2 POLLUTING COAL FIRED POWER PLANTS. ADDITIONALLY, PARTICIPATION IN RULEMAKING HEARINGS IN ATLANTA, PHILADELPHIA, AND CHICAGO CONTRIBUTED TO THE FINALIZATION OF THE MERCURY AND AIR TOXICS RULE TO REGULATE POLLUTION FROM COAL FIRED POWER PLANTS. INVOLVEMENT WITH THE FEDERAL EMERGENCY MANAGEMENT AGENCY AND THE AMERICAN RED CROSS RESULTED IN INCREASED SENSITIVITY AND PLANNING AROUND THE SPECIAL NEEDS OF VULNERABLE AND MARGINALIZED COMMUNITIES IN THE CONTEXT OF DISASTERS. LEGAL PROGRAM AND FELLOWS - THE LEGAL DEPARTMENT'S PROGRAMS ADVANCE THE ORGANIZATION'S MISSION BY EDUCATING NAACP UNITS AND THE GENERAL PUBLIC ON VIABLE LEGAL TOOLS; ADVISING THROUGHOUT STRATEGIC ADVOCACY CAMPAIGNS; AND LITIGATING CASES IN THE AREAS OF VOTING, CRIMINAL JUSTICE, EDUCATION, ECONOMIC JUSTICE, ENVIRONMENTAL JUSTICE, AND HEALTH. THE NAACP LAW FELLOWS PROGRAM TRAINS LAW STUDENTS IN THE BREADTH OF CIVIL RIGHTS ADVOCACY AND EXPOSES STUDENTS TO THE VARIETY OF CAREER PATHS WITHIN THE LEGAL PROFESSION.

LEGAL REDISTRICTING - THE REDISTRICTING PROJECT SEEKS TO ENSURE THAT

REDISTRICTING EFFORTS INVOLVING LOCAL ENTITIES SUCH AS SCHOOL BOARDS,

132212

Schedule O (Form 990 or 990-EZ) (2011) Name of the organization NATIONAL ASSOCIATION FOR THE ADVANCEMENT Employer identification number OF COLORED PEOPLE (NAACP) 13-1084135 CITIES, COUNTIES AND PARISHES, AS WELL AS EFFORTS INVOLVING STATE LEGISLATIVE AND OTHER BODIES ARE FAIR, TRANSPARENT, AND CONSISTENT WITH APPLICABLE LEGAL REQUIREMENTS OF THE VOTING RIGHTS ACT AND EQUAL

PROTECTION CLAUSE. THIS WORK INCLUDES TRAINING, PRODUCING MANUALS AND FLYERS, ANALYZING REDISTRICTING PLANS, PREPARING TESTIMONY FOR NAACP UNITS, AND PARTICIPATING IN REDISTRICTING LITIGATION.

VOTING RIGHTS - THE VOTING RIGHTS PROGRAM'S GOAL IS TO STOP THE EXPANSION OF VOTER SUPPRESSION EFFORTS AND EXPAND VOTING RIGHTS FOR ALL AMERICANS WITH A FOCUS ON DISMANTLING THE CONTINUED PRACTICE OF FELONY DISENFRANCHISEMENT. THROUGH THE LAUNCH AND IMPLEMENTATION OF KEY ACTIVITIES, INCLUDING STRATEGIC COMMUNICATIONS, DIRECT ACTIONS AND MOBILIZATION, EDUCATIONAL OUTREACH, PARTNERSHIP DEVELOPMENT AND STATE ADVOCACY CAMPAIGNS, WE HAVE INVIGORATED TENS OF THOUSANDS OF ACTIVISTS, ELEVATED THE ATTACK ON VOTING RIGHTS INTO THE NATIONAL DEBATE, AND BEGUN TO SLOW THE TIDE OF WIDESPREAD VOTER SUPPRESSION OF MILLIONS OF AMERICANS, PARTICULARLY PEOPLE OF COLOR. SOME OF THE TACTICS THAT ARE BEING USED ARE: BUILDING CONSENSUS FOR PASSAGE OF PROGRESSIVE REFORMS, INCLUDING UNIVERSAL REGISTRATION, EARLY VOTING, AND USE OF THE NATIONAL POPULAR VOTE TO DETERMINE THE VICTOR IN PRESIDENTIAL ELECTIONS; ENGAGING THE UNITED NATIONS AND OTHER HUMAN RIGHTS FORUMS; REVERSING STATE-SPONSORED VOTER SUPPRESSION LAWS; AND EDUCATING VOTERS ON THE NEW REQUIREMENTS AND RULES FOR VOTER REGISTRATION AND VOTING.

CRIMINAL JUSTICE - TO ENSURE THAT CRIMINAL JUSTICE REFORM IS A PRIORITY FOR THE NAACP, IN 2010 THE NAACP PASSED A RESOLUTION MANDATING THE CREATION OF CRIMINAL JUSTICE COMMITTEES FOR THE 1200+ ACTIVE NAACP

BRANCHES ACROSS THE COUNTRY. THE ROLE OF THESE COMMITTEES IS TO LEAD 132212

Schedule O (Form 990 or 990-EZ) (2011)

Schedule O (Form 990 or 990-EZ) (2011) Page 2 Name of the organization NATIONAL ASSOCIATION FOR THE ADVANCEMENT **Employer identification number** OF COLORED PEOPLE (NAACP) 13-1084135 EFFORTS AND DEVELOP CRIMINAL JUSTICE CAMPAIGNS ON THE STATE AND LOCAL LEVEL. IN THE LAST TWO YEARS, THE CRIMINAL JUSTICE PROGRAM HAS BEEN WORKING WITH OUR LOCAL AND STATE LEADERSHIP TO IMPLEMENT AND ACTIVATE THESE COMMITTEES. IN ADDITION TO THE RANGE OF CRIMINAL JUSTICE ISSUES THAT OUR STATE AND LOCAL LEADERSHIP DRIVE, THE NATIONAL CRIMINAL JUSTICE PROGRAM ADVANCES FOUR KEY PRIORITY AREAS: SENTENCING REFORM/ENDING MASS INCARCERATION; REMOVING EMPLOYMENT BARRIERS FOR FORMERLY INCARCERATED INDIVIDUALS; LAW ENFORCEMENT ACCOUNTABILITY/RACIAL PROFILING; AND ABOLISHING THE DEATH PENALTY. CIVIC ENGAGEMENT - THE CIVIC ENGAGEMENT PROGRAM INVOLVES GROUPS AND ORGANIZATIONS COMMITTED TO EDUCATING AND EMPOWERING AFRICAN AMERICANS TO VOTE, SERVE THEIR COMMUNITIES, AND PARTICIPATE IN THE POLITICAL PROCESS. TRAINING MANUALS, LITERATURE, AND EXPERTISE ARE PROVIDED TO NAACP UNITS AND COALITION PARTNERS TO ENSURE THE DEVELOPMENT OF SUCCESSFUL VOTER EMPOWERMENT. FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: BROAD BASE OF LARGE COMPANIES AND SMALL VENDORS ARE AVAILABLE FOR MEMBERS TO VIEW, DISCUSS AND PATRONIZE DURING THE WEEK OF SEMINARS AND MEETINGS. IN ADDITION, A JOB FAIR IS CONDUCTED BOTH ONSITE AND VIRTUALLY VIA THE INTERNET. IMAGE AWARDS - THE NAACP IMAGE AWARDS BESTOWS HONORS ON PROJECTS AND INDIVIDUALS OF ALL RACES IN THE MUSIC, FILM, TELEVISION AND LITERARY INDUSTRIES WHO HELPED TO PROMOTE POSITIVE IMAGES OF PEOPLE OF COLOR. THE AWARDS TAKE PLACE ANNUALLY AND THE IMAGE AWARDS SHOW USUALLY AIRS

132212

LIVE ON NETWORK TELEVISION.

Employer identification number 13-1084135

MID LEVEL PROFESSIONALS FOR A WEEKEND OF CRITICAL AND INTENSE DISCOURSE

ABOUT OUR CONTINUING ROLE IN THE PURSUIT OF CIVIL RIGHTS AND SOCIAL

JUSTICE. THIS VITAL GROUP OF INDIVIDUALS, WHO ARE POSITIONED TO

PROVIDE LEADERSHIP AT EVERY LEVEL PROFESSIONALLY AND IN THE CIVIC

ARENA, ALSO HONE THEIR LEADERSHIP SKILLS AND NETWORK WHICH INCREASES

THEIR ABILITY TO ADVANCE PERSONALLY, PROFESSIONALLY AND PROVIDE

LEADERSHIP IN THEIR COMMUNITIES.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

MEMBERSHIP SERVICES - THE NATIONAL MEMBERSHIP DEPARTMENT IS RESPONSIBLE

FOR THE GROWTH IN THE NUMBER OF NAACP MEMBERS THROUGH THE PLANNING,

STRUCTURING AND DIRECTING OF RECRUITMENT CAMPAIGNS THROUGH NAACP UNITS,

CHURCHES, DONORS AND OTHER ORGANIZATIONS. THE MEMBERSHIP DEPARTMENT

PROVIDES DIRECT SERVICE TO INDIVIDUAL MEMBERS AS WELL AS TO LOCAL UNITS

OF THE NAACP. (EXPENSES \$ 2,539,642 REVENUE \$2,847,951).

DIRECT ISSUE EDUCATION - THE NAACP UTILIZES ITS DIRECT MAIL AND

COMMUNICATIONS CAPACITY TO REGULARLY INFORM AND EDUCATE ITS

CONSTITUENTS, STAKEHOLDERS, AND SUPPORTERS ABOUT ITS PROGRAMS AND

OTHER STRATEGIC INITIATIVES (EXPENSES \$2,845,054).

RESEARCH AND POLICY - THIS OVERARCHING DIVISION WAS CREATED LATE IN

2005 TO PROVIDE RESEARCH AND DEVELOP NAACP POLICY ON PUBLIC POLICY

ISSUES AFFECTING PEOPLE OF COLOR IN THE UNITED STATES. (EXPENSES \$
\$1,143,212 REVENUE \$450,000).

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization NATIONAL ASSOCIATION FOR THE ADVANCEMENT OF COLORED PEOPLE (NAACP)	Employer identification number 13-1084135
DISASTER RELIEF - (EXPENSES \$714 REVENUE \$0).	
EXPENSES \$ 6,528,672. INCLUDING GRANTS OF \$ 0. REVENU	E \$ 3,297,951.
FORM 990, PART VI, SECTION A, LINE 6: MEMBERSHIP DUES PRO	
SUBSTANTIAL PORTION OF THE REVENUE USED TO SUPPORT THE EX	EMPT PURPOSE OF
THE ORGANIZATION.	
FORM 990, PART VI, SECTION A, LINE 7A: BOARD OF DIRECTORS ELECTED BY MEMBERS OF THE ORGANIZATION.	AND OFFICERS ARE
FORM 990, PART VI, SECTION B, LINE 11: THE AUDIT COMMITTED DIRECTORS IS RESPONSIBLE FOR REVIEWING THE NAACP'S FORM 9	
FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION FOR REVIEWING THE STATEMENTS AND MONITORING COMPLIANCE WI	
FORM 990, PART VI, SECTION B, LINE 15: DECISIONS INVOLVING THE CHIEF EXECUTIVE OFFICER OF NAACP ARE MADE BY THE EXECUTIVE OFFICER OF THE COMPENSATION PAIR OF THE COMPENSATION PAIR DOWN OF THE PAIR DOWN OF THE PAIR DOWN OF THE PAIR DOWN OF THE PAIR DOWN OF THE PAIR DOWN OF THE PAIR DOWN OF THE PAIR DOWN OF	UTIVE COMMITTEE OF
NON-PROFIT ORGANIZATIONS IN THE METROPOLITAN WASHINGTON,	
SURVEYS OR OTHER APPROPRIATE DOCUMENTATION, AN INDEPENDEN	
COMBINATION THEREOF. DECISIONS INVOLVING COMPENSATION OF	
AND KEY EXECUTIVES ARE MADE BY THE PRESIDENT USING A REVI	
PAID BY COMPARABLE NON-PROFIT ORGANIZATIONS IN THE METROP	-
DC REGION BASED ON SURVEYS OR OTHER APPROPRIATE DOCUMENTA	TION, AN
INDEPENDENT CONSULTANT, OR A COMBINATION THEREOF.	

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization NATIONAL ASSOCIATION FOR THE ADVANCEMENT OF COLORED PEOPLE (NAACP)	Employer identification number 13-1084135
AK, AL, AZ, CA, CO, CT, DE, FL, GA, HI, IA, ID, IL, IN, KS, KY, LA, MA, MD,	ME, MI, MN, MO, MS, MT
NC, ND, NE, NH, NJ, NV, NY, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA,	
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION M	IAKES GOVERNING
DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STAT	'EMENTS AVAILABLE
TO THE PUBLIC VIA THE NAACP WEBSITE AND UPON REQUEST.	
FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:	
NET UNREALIZED LOSSES ON INVESTMENTS:	-234,074.
NET PENSION OBLIGATION	
TOTAL TO FORM 990, PART XI, LINE 5	-1,968,411.
FORM 990, PART XII, 2C	
THE ORGANIZATION HAS NOT CHANGED ITS OVERSIGHT PROCESS OR	SELECTION
PROCESS.	
	DI TE
	And where the contribution of the contribution

Department of the Treasury internal Revenue Service SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

2011 Open to Public Inspection

Employer identification number

13-1084135

OMB No. 1545-0047

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► See separate instructions. NATIONAL ASSOCIATION FOR THE ADVANCEMENT ▶ Attach to Form 990. OF COLORED PEOPLE (NAACP) Name of the organization

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

Part

Direct controlling Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) End-of-year assets **e** Total income 0 Legal domicile (state or foreign country) Primary activity Name, address, and EIN of disregarded entity Part #

(g) Section 512(b)(13) N<sub>o</sub> controlled entity? Yes × Direct controlling NAACP status (if section Public charity 501(c)(3)) LINE 7 Exempt Code section 501(C)(3) Legal domicile (state or foreign country) MARYLAND Primary activity EDUCATE MINORITIES NAACP-SPECIAL CONTRIBUTION FUND - 13-1998814 Name, address, and EIN of related organization 4805 MOUNT HOPE DRIVE BALTIMORE MD 21215

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

Schedule R (Form 990) 2011

132161 01-23-12 LHA

NATIONAL ASSOCIATION FOR THE ADVANCEMENT

OF COLORED PEOPLE (NAACP) Schedule R (Form 990) 2011

13-1084135 Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

Page 2

General or Percentage managing ownership Percentage ownership 100% Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) ड Ξ Yes No 235, 5 Share of end-of-year assets 91 amount in box n 20 of Schedule L K-1 (Form 1065) B Share of total income 1,594,697 ate allocations? Yes No Disproportion-Ξ Type of entity (C corp, S corp, or trust) Share of end-of-year assets <u>e</u> CORP (d)
Direct controlling
entity Share of total income Predominant income (related, unrelated, excluded from tax under sections 512-514) Legal domicite (state or foreign country) В Ö **e** AGAZINE PUBLICATION Primary activity (d)
| Direct controlling entity 9 (C)
Legal
domicile
(state or
foreign
country) Primary activity 9 CRISIS PUBLISHING COMPANY - 13-1530050 Name, address, and EIN of related organization Name, address, and EIN of related organization 4850 MOUNT HOPE DRIVE BALTIMORE, MD 21215 132162 01-23-12 Part IV

Schedule R (Form 990) 2011

## NATIONAL ASSOCIATION FOR THE ADVANCEMENT

OF COLORED PROPLE (NAACP Schedule R (Form 990) 2011

Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.) Part V

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ž × × × × Schedule R (Form 990) 2011 Yes 1,583,235.COST OF MAGAZINE & ADVERTISING × × × × Þ Ē 9 2 10 무 무 9 4 19 = (d) Method of determining amount involved 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds. 24,897.G&A ALLOCATION 126,067.G&A ALLOCATION 1,455,581. TOTAL REVENUE 1,594,697. TOTAL REVENUE During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? 2,772,343 (c) Amount involved (b) Transaction type (a-r) Performance of services or membership or fundraising solicitations for related organization(s) Performance of services or membership or fundraising solicitations by related organization(s) H Д ρι K œ 9 Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity Loans or loan guarantees by related organization(s) Lease of facilities, equipment, or other assets from related organization(s) Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. Lease of facilities, equipment, or other assets to related organization(s) Gift, grant, or capital contribution from related organization(s) Other transfer of cash or property from related organization(s) p Reimbursement paid by related organization(s) for expenses Reimbursement paid to related organization(s) for expenses q Other transfer of cash or property to related organization(s) Gift, grant, or capital contribution to related organization(s) d Loans or loan guarantees to or for related organization(s) Sharing of paid employees with related organization(s) (a) Name of other organization (2) NAACP-SPECIAL CONTRIBUTION (4) NAACP-SPECIAL CONTRIBUTION Purchase of assets from related organization(s) Exchange of assets with related organization(s) (1) CRISIS PUBLISHING COMPANY (3) CRISIS PUBLISHING COMPANY 6) CRISIS PUBLISHING COMPANY 6 CRISIS PUBLISHING COMPANY Sale of assets to related organization(s) 132163 01-23-12 ء ε Q

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NATIONAL ASSOCIATION FOR THE ADVANCEMENT OF COLORED PEOPLE (NAACP)

Schedule R (Form 990) 2011

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

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Firmary activity (Legal dominary income particular (State) (St	(a)	<b>(Q</b> )		(D)	(e)	9	(6)	Ξ	6	(f)	(K)
	name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)	Predominant income par (related, unrelated, excluded from tax under section 512-514) y.	01(c)(3) orgs.?	Share of total income	Share of end-of-year assets	Disproportionate affocations	Code V-UBI amount in box 20 of Schedule K-1	General or managing partner?	Percentage ownership
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