

Return of Organization Exempt From Income TaxUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)**2012****Open to Public
Inspection**Department of the Treasury
Internal Revenue Service

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

A For the 2012 calendar year, or tax year beginning		, 2012, and ending		
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C AFRICAN LEADERSHIP, INC P.O. BOX 2888 BRENTWOOD, TN 37024		D Employer Identification Number 31-1736706	
			E Telephone number (615) 595-8238	
			G Gross receipts \$ 3,618,425.	
			H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'No,' attach a list. (see instructions)	
F Name and address of principal officer: JOHN WALTER SAME AS C ABOVE		I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ WWW.AFRICANLEADERSHIPINC.ORG				
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of Formation: 2000	M State of legal domicile: TN	

Part I Summary			
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>AFRICAN LEADERSHIP SERVES LEADERS WHO MATTER IN THE HARD PLACES THROUGH APPLIED EDUCATION AND COMMUNITY INVESTMENT PROGRAMS.</u>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	6
	4	Number of independent voting members of the governing body (Part VI, line 1b)	5
	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	25
	6	Total number of volunteers (estimate if necessary)	250
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	0.
7b	Net unrelated business taxable income from Form 990-T, line 34	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)		3,128,918.
	9 Program service revenue (Part VIII, line 2g)		2,667,188.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		22,609.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		135,860.
	12 Total revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,287,387.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		1,558,502.
	14 Benefits paid to or for members (Part IX, column (A), line 4)		1,192,977.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		906,335.
	16a Professional fundraising fees (Part IX, column (A), line 11e)		946,221.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 576,646.		1,036,876.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,132,482.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		3,501,713.
Net Assets or Fund Balances	19 Revenue less expenses. Subtract line 18 from line 12		3,271,680.
	20 Total assets (Part X, line 16)		-214,326.
	21 Total liabilities (Part X, line 26)		-346,426.
	22 Net assets or fund balances. Subtract line 21 from line 20		1,161,500.

Part II Signature Block					
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.					
Sign Here	Signature of officer		Date		
	JOHN WALTER		PRESIDENT		
Paid Preparer Use Only	Print/Type preparer's name		Preparer's signature		Date
	SARA G. MOON				
	Firm's name ▶ FRASIER, DEAN & HOWARD, PLLC		Check <input checked="" type="checkbox"/> if self-employed		PTIN P00034774
	Firm's address ▶ 3310 WEST END AVENUE, STE. 550 NASHVILLE, TN 37203		Firm's EIN ▶ 62-1073578		Phone no. (615) 383-6592

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No