

990

Return of Organization Exempt From Income Tax

OMB No. 1545-

0047 2022

Open to Public Inspection

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundation): Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury Internal Revenue Service

A For the 2022 calendar year, or tax year beginning 01-01-2022, and ending 12-31-2022

- B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending

C Name of organization: CONGRESSIONAL BLACK CAUCUS POLITICAL EDUCATION AND LEADERSHIP INSTITUTE. Doing business as. Number and street (or P.O. box if mail is not delivered to street address) Room/suite: 413 NEW JERSEY AVE SE. City or town, state or province, country, and ZIP or foreign postal code: WASHINGTON, DC 20003

D Employer identification number: 52-2270607. E Telephone number: (202) 785-3634. G Gross receipts \$ 2,015,119

F Name and address of principal officer: 413 NEW JERSEY AVE SE WASHINGTON, DC 20003

H(a) Is this a group return for subordinates? Yes No. H(b) Are all subordinates included? Yes No. H(c) Group exemption number

I Tax-exempt status: 501(c)(3) 501(c)(4) (insert no.) 4947(a)(1) or 527

J Website: https://www.cbcinstitute.org/

K Form of organization: Corporation Trust Association Other

L Year of formation: 2000 M State of legal domicile: DC

Part I Summary

1 Briefly describe the organization's mission or most significant activities: THE CONGRESSIONAL BLACK CAUCUS POLITICAL EDUCATION LEADERSHIP INSTITUTE'S MISSION IS TO PROVIDE POLITICAL EDUCATION AND TRAINING TO THE NEXT GENERATION OF AFRICAN AMERICAN LEADERSHIP.

Table with 2 columns: Description, Amount. Rows 2-7b: 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 3 20. 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 0. 5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 5 0. 6 Total number of volunteers (estimate if necessary) 6 25. 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. 7b Net unrelated business taxable income from Form 990-T, Part I, line 11 7b

Table with 3 columns: Description, Prior Year, Current Year. Rows 8-12: 8 Contributions and grants (Part VIII, line 1h) 8 0. 9 Program service revenue (Part VIII, line 2g) 9 3,896,249 1,975,277. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 0. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 33,636 39,842. 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 3,929,885 2,015,119

Table with 3 columns: Description, Prior Year, Current Year. Rows 13-19: 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 13 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 14 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 452,672 526,442. 16a Professional fundraising fees (Part IX, column (A), line 11e) 16a 0. 16b Total fundraising expenses (Part IX, column (D), line 25) 16b 0. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 17 793,582 2,259,143. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 1,246,254 2,785,585. 19 Revenue less expenses. Subtract line 18 from line 12 19 2,683,631 -770,466

Table with 3 columns: Description, Beginning of Current Year, End of Year. Rows 20-22: 20 Total assets (Part X, line 16) 20 7,550,684 6,303,540. 21 Total liabilities (Part X, line 26) 21 154,902 59,164. 22 Net assets or fund balances. Subtract line 21 from line 20 22 7,395,782 6,244,376

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: VANESSA GRIDDINE-JONES Executive Director. Date: 2023-05-21

Paid Preparer Use Only: Print/Type preparer's name, Preparer's signature, Date, Check if self-employed, PTIN P01479118, Firm's name Centric Business Solutions LLC, Firm's EIN 46-4149419, Firm's address 12138 Central Ave Suite 656 Mitchellville, MD 20721, Phone no. (202) 827-7444

May the IRS discuss this return with the preparer shown above? See Instructions. Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission:

THE CONGRESSIONAL BLACK CAUCUS POLITICAL EDUCATION LEADERSHIP INSTITUTE'S MISSION IS TO PROVIDE POLITICAL EDUCATION AND TRAINING TO THE NEXT GENERATION OF AFRICAN AMERICAN LEADERSHIP.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

[] Yes [X] No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

[] Yes [X] No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 888,944 including grants of \$) (Revenue \$)

TUNICA POLICY CONFERENCE -CBCPELIS TUNICA POLICY CONFERENCE IS REPRESENTATIVE OF THE ORGANIZATIONS ONGOING COMMITMENT TO MEETING ITS OVERALL MISSION OF EDUCATING TODAY'S VOTERS AND TRAINING TOMORROW'S LEADERS.

4b (Code:) (Expenses \$ 405,427 including grants of \$) (Revenue \$)

TWENTY FIRST CENTURY COUNCIL - THE TWENTY FIRST CENTURY COUNCIL PROGRAM ENABLES THE INSTITUTE TO PROVIDE UNIQUE AND INNOVATIVE SERVICES THAT INVOLVE 1 SOCIAL POLICY-PUBLIC AND PRIVATE - ANALYSIS, 2 STRATEGIC TYPES OF PROGRAM RESEARCH, AND 3 IDENTIFICATION OF CRITICAL POLICY ISSUES AND CREATIVE OPTIONS FOR ADDRESSING SUCH ISSUES.

4c (Code:) (Expenses \$ 362,133 including grants of \$) (Revenue \$)

ACT/WFF - Our Advocacy and Campaign Training ACT Workshops are supported by a generous grant from the Walton Family Foundation. ACT is an abbreviated version of the boot camp with an added component focused on education equity and advocacy. For two days in cities across the country, ACT targets future leaders who are passionate about civic engagement and advocacy, and those interested in education policy and improving access to high quality educational opportunities for all Americans.

4d Other program services (Describe in Schedule O.) (Expenses \$ 153,237 including grants of \$) (Revenue \$)

4e Total program service expenses 1,809,741

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 21 regarding organizational requirements, such as political activities, lobbying, and financial reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 22 through 38 regarding tax-exempt bond issues, excess benefit transactions, and related party transactions.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Main form area containing questions 2a through 17, including sub-questions and input fields for various tax compliance items.

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year... 1b Enter the number of voting members included in line 1a, above, who are independent... 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a The governing body? 8b Each committee with authority to act on behalf of the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11b Describe on 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 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 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? 15a The organization's CEO, Executive Director, or top management official 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on 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? 16b 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?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed
18 Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[] Own website [] Another's website [] Upon request [] Other (explain in Schedule O)
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records:
STAFF 413 NEW JERSEY AVE SE WASHINGTON, DC 20003 (202) 785-3634

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

Check if Schedule O contains a response or note to any line in this Part VII

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, or 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.

See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee;	Officer	Key employee	Highest compensated employee			
(1) REPRESENTATIVE BENNIE THOMPSON Chairman	1.00 0.00	X		X			0	0	0
(2) REPRESENTATIVE JAMES CLYBURN Director	1.00 0.00	X					0	0	0
(3) REPRESENTATIVE CEDRIC RICHMOND Director	1.00 0.00	X					0	0	0
(4) JANICE GRIFFIN Secretary	1.00 0.00	X		X			0	0	0
(5) ART COLLINS Director	1.00 0.00	X					0	0	0
(6) WILLIAM KIRK Director	1.00 0.00	X					0	0	0
(7) JENNIFER STEWART Treasurer	1.00 0.00	X		X			0	0	0
(8) PATRICIA FORD Director	1.00 0.00	X					0	0	0
(9) LACY JOHNSON Director	1.00 0.00	X					0	0	0
(10) DERRICK JOHNSON Director	1.00 0.00	X					0	0	0
(11) JOHN HAYSBERT Director	1.00 0.00	X					0	0	0
(12) ANGELA RYE Director	1.00 0.00	X					0	0	0
(13) HASAN SOLOMON Director	1.00 0.00	X					0	0	0
(14) LAKEITHA ANDERSON Director	1.00 0.00	X					0	0	0
(15) BEVERLY PERRY Director	1.00 0.00	X					0	0	0
(16) CLEO FIELDS Director	1.00 0.00	X					0	0	0
(17) EARL HILLIARD Director	1.00 0.00	X					0	0	0

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

Table with 5 columns: (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax under sections 512 - 514. Rows include 1a-f (Federated campaigns, Membership dues, Fundraising events, etc.) and 1g Total.

Table for Program Service Revenue. Columns: Business Code, (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax. Rows include 2a-2f (21ST CENTURY COUNCIL, BOOT CAMP, FELLOWSHIP PROGRAM, etc.) and 2g Total.

Table for Other Revenue. Columns: (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax. Rows include 3-10 (Investment income, Rental income, Net gain or loss, etc.) and 11a-11d (Interest, Dividends, etc.) and 11e Total.

Table for Total Revenue. Columns: (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax. Rows include 12 Total revenue. See instructions.

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).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0			
2 Grants and other assistance to domestic individuals. See Part IV, line 22	0			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	216,667		216,667	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	179,292	22,000	157,292	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0			
9 Other employee benefits	106,497		106,497	
10 Payroll taxes	23,986	2,021	21,965	
11 Fees for services (non-employees):				
a Management	0			
b Legal	0			
c Accounting	0			
d Lobbying	0			
e Professional fundraising services. See Part IV, line 17	0			
f Investment management fees	0			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	556,298	391,790	164,508	
12 Advertising and promotion	99,361	41,233	58,128	
13 Office expenses	46,620	20,740	25,880	
14 Information technology	0			
15 Royalties	0			
16 Occupancy	64,378		64,378	
17 Travel	74,806	68,060	6,746	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	1,188,588	1,179,972	8,616	
20 Interest	0			
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	38,498		38,498	
23 Insurance	19,019		19,019	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Printing and Publications	46,399	42,056	4,343	
b Ground transportation	21,742	5,075	16,667	
c Bank & Merchant Fees	17,569	10,544	7,025	
d Property taxes	16,463		16,463	
e All other expenses	69,402	26,250	43,152	
25 Total functional expenses. Add lines 1 through 24e	2,785,585	1,809,741	975,844	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part IX

		(A) Beginning of year		(B) End of year
Assets	1 Cash-non-interest-bearing	3,860,240	1	3,461,093
	2 Savings and temporary cash investments	367,383	2	329,843
	3 Pledges and grants receivable, net		3	0
	4 Accounts receivable, net	2,065,750	4	1,321,873
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	0
	7 Notes and loans receivable, net		7	0
	8 Inventories for sale or use		8	0
	9 Prepaid expenses and deferred charges	39,964	9	0
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,639,956		
	b Less: accumulated depreciation	10b 449,489	1,217,083	10c 1,190,467
	11 Investments—publicly traded securities		11	0
	12 Investments—other securities. See Part IV, line 11		12	0
	13 Investments—program-related. See Part IV, line 11		13	0
	14 Intangible assets		14	0
	15 Other assets. See Part IV, line 11	264	15	264
16 Total assets: Add lines 1 through 15 (must equal line 33)	7,550,684	16	6,303,540	
Liabilities	17 Accounts payable and accrued expenses		17	
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D	154,902	25	59,164	
26 Total liabilities. Add lines 17 through 25	154,902	26	59,164	
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	6,945,782	27	5,794,376
	28 Net assets with donor restrictions	450,000	28	450,000
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	7,395,782	32	6,244,376
33 Total liabilities and net assets/fund balances	7,550,684	33	6,303,540	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,015,119
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,785,585
3	Revenue less expenses. Subtract line 2 from line 1	3	-770,466
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	7,395,782
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-380,940
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (A))	10	6,244,376

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
2c	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.		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		No
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

Additional Data

Return to Form

Software ID: 22015565

Software Version: 2022v5.0

Form 990, Special Condition Description:

Special Condition Description

Supplemental Financial Statements

2022

Open to Public Inspection

Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury Internal Revenue Service

Name of the organization CONGRESSIONAL BLACK CAUCUS POLITICAL EDUCATION AND LEADERSHIP INSTITUTE

Employer identification number

52-2270607

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two questions about donor/donor advisor notification.

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Description, Held at the End of the Year. Rows include purpose(s) of conservation easements, number of easements, acreage, and monitoring expenses.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Description, Amount. Rows include questions about reporting art, historical treasures, or other similar assets.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** 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):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** 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? . . . **Yes** **No**

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on 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? **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on 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					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶
 - b** Permanent endowment ▶
 - c** Term endowment ▶
- The percentages on 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:
- | | Yes | No |
|--|---------------|----|
| (i) Unrelated organizations | 3a(i) | |
| (ii) Related organizations | 3a(ii) | |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. 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		288,010		288,010
b Buildings		1,247,509	382,296	865,213
c Leasehold improvements		22,502	4,107	18,395
d Equipment				
e Other		81,935	63,086	18,849
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				1,190,467

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)		

Part IX Other Assets.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	59,164

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 :			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
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 XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation

Additional Data

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SCHEDULE O
(Form 990)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.**▶ **Go to www.irs.gov/Form990 for the latest information.**

OMB No. 1545-0047

2022**Open to Public Inspection**Name of the organization
CONGRESSIONAL BLACK CAUCUS POLITICAL EDUCATION AND LEADERSHIP INSTITUTE**Employer identification number**

52-2270607

Return Reference	Explanation
Form 990, Part III, Line 4d	OTHER PROGRAM SERVICES 4: FELLOWSHIP PROGRAM - The Congressional Black Caucus Institute (CBCI) launched the first of its kind, Government Relations Fellowship, answering the call by Congressional Black Caucus Members to diversify lobbying firms and corporate government relations offices. The program is designed to create a pipeline of Government Relations and Public Policy professionals. OTHER PROGRAM SERVICES 5: BOOT CAMP - THE INSTITUTES POLITICAL CANDIDATE TRAINING PROGRAM, BOOT CAMP PROVIDES A COMPLETE TRAINING CURRICULUM FOR AFRICAN AMERICAN CANDIDATES AND CAMPAIGN WORKERS. THIS PROGRAM INSTRUCTS PARTICIPANTS IN THE EXPERTISE AND TECHNIQUES REQUIRED FOR CONDUCTING A SUCCESSFUL CAMPAIGN FOR ELECTIVE OFFICE. IN ADDITION TO TRAINING CANDIDATES FOR ELECTIVE OFFICE, THIS PROGRAM ALSO TRAINS TACTICIANS AND KEY STAFF WHO WILL CONDUCT SUCH CAMPAIGNS. INSTRUCTION IS ASLO PROVIDED TO LAUNCH EFFECTIVE VOTER PARTICIPATION AND EDUCATION INITIATIVES, INCLUDING GET OUT THE VOTE EFFORTS. OTHER PROGRAM SERVICES 6: OTHER PROGRAM SERVICES 7: UN-ECOSOC/GADI -CBCI has been granted consultative status in United Nations Economic and Social Council, our mission and focus includes:Platform for the African Diaspora at the UN Increase the awareness and the importance of the UN in the African-American community Increase the number of African-Americans in foreign affairs careers Promote UN 17 SDGS Sustainable Development Goals Highlight and support he UN High Commission on Human Rights 4-point agenda towards transformative change for racial justice and equality
Form 990, Part VI, Section B, Line 11b	No review was or will be conducted.
Form 990, Part VI, Section B, Line 12c	BOARD CONTINUOUSLY REVIEWS AND MONITORS COMPLIANCE WITH THE ORGANIZATION'S CONFLICT OF INTEREST POLICY.
Form 990, Part VI, Section B, Line 15a	THE EXECUTIVE DIRECTOR'S COMPENSATION IS ANNUALLY REVIEWED BY THE BOARD OF DIRECTORS.
Form 990, Part VI, Section C, Line 19	CBCPELI MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.
Form 990, Part XI, Line 9	A/R Adjustment = -\$380940
Part III, Line 1 Organization Mission	THE CONGRESSIONAL BLACK CAUCUS POLITICAL EDUCATION LEADERSHIP INSTITUTE'S MISSION IS TO PROVIDE POLITICAL EDUCATION AND TRAINING TO THE NEXT GENERATION OF AFRICAN AMERICAN LEADERSHIP.

Additional Data

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