

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)

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 7/1/2012 **and ending** 6/30/2013

B Check if applicable:
 Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

C Name of organization Diamond Business Association, Inc.
 Doing Business As _____
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
P. O. Box 740564
 City, town or post office, state, and ZIP code
San Diego CA 92174-0564

D Employer identification number 80-0767111
E Telephone number 619-764-6245
G Gross receipts \$ 36,965

F Name and address of principal officer:
Carlton Stephen Walters P. O. Box 740564, San Diego, CA 92174-0564

H(a) Is this a group return for affiliates? Yes No
H(b) Are all affiliates included? Yes No
 If "No," attach a list. (see instructions)

I Tax-exempt status: 501(c)(3) 501(c) (6) ◀ (insert no.) 4947(a)(1) or 527

J Website: ▶ www.sdbd.org

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 2011 **M State of legal domicile:** CA

H(c) Group exemption number ▶ _____

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>To enhance the growth and improvement of the community by creating partnerships between business owners to administer the assessment district to combat deterioration and promote business and commercial revitalization.</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)	3	4
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	4
	5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	0
	6 Total number of volunteers (estimate if necessary)	6	4
	7a 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	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	7,335	36,965
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	7,335	36,965
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)		0
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		0
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25)	0	0
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	880	42,882
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	880	42,882	
19 Revenue less expenses. Subtract line 18 from line 12	6,455	-5,917	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	6,455	538
	22 Net assets or fund balances. Subtract line 21 from line 20	0	0
		6,455	538

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: Carlton Stephen Walters Date: 2/17/14
 Type or print name and title: Carlton Stephen Walters President

Paid Preparer Use Only

Print/Type preparer's name: Mary Joseph Preparer's signature: Mary Joseph Date: 2/17/2014 Check if self-employed PTIN: P01270486
 Firm's name ▶ MFJ Systems Firm's EIN ▶ 95-3081496
 Firm's address ▶ 2356 Moore Street, San Diego, CA 92110 Phone no. (619) 298-8280

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

