## Part I: Summary

1. **Briefly describe the organization's mission or most significant activities**
   
   THE PURPOSE OF NVIC IS TO PROMOTE AND ENCOURAGE THE HEALTH AND WELFARE OF AMERICAN CHILDREN AND ADULTS THROUGH ITS RESEARCH AND EDUCATION-ORIENTED PROGRAMS TO PREVENT VACCINE INJURIES AND DEATHS AND TO ASSIST INDIVIDUALS (BOTH CHILDREN AND ADULTS) WHO HAVE BEEN VACCINE INJURED

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)**

4. **Number of independent voting members of the governing body (Part VI, line 1b)**

5. **Total number of individuals employed in calendar year 2011 (Part V, line 2a)**

6. **Total number of volunteers (estimate if necessary)**

7a. **Total unrelated business revenue from Part VIII, column (C), line 12**

   - **Prior Year**: 0
   - **Current Year**: 0

7b. **Net unrelated business taxable income from Form 990-T, line 34**

   - **Prior Year**: 0
   - **Current Year**: 0

8. **Contributions and grants (Part VIII, line 1h)**

   - **Prior Year**: 806,933
   - **Current Year**: 813,466

9. **Program service revenue (Part VIII, line 2g)**

   - **Prior Year**: 446
   - **Current Year**: 113

10. **Investment income (Part VIII, column (A), lines 3, 4, and 7d)**

   - **Prior Year**: -23,814
   - **Current Year**: 0

11. **Other revenue (Part VIII, column (A), lines 5, 6, 8c, 9c, 10c, and 11e)**

   - **Prior Year**: 783,565
   - **Current Year**: 813,579

12. **Total revenue—add lines 8 through 11**

   - **Prior Year**: 23,325
   - **Current Year**: 73,875

13. **Grants and similar amounts paid (Part IX, column (A), lines 1-3)**

14. **Benefits paid to or for members (Part IX, column (A), line 4)**

15. **Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)**

16a. **Professional fundraising fees (Part IX, column (A), line 11a)**

16b. **Total fundraising expenses (Part IX, column (D), line 25)**

17. **Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)**

18. **Total expenses**

19. **Revenue less expenses**

20. **Total assets (Part X, line 16)**

21. **Total liabilities (Part X, line 26)**

22. **Net assets or fund balances**

   - **Beginning of Year**: 461,597
   - **End of Year**: 630,309

### Part II: Signature Block

**Signature of officer**

KATHRYN M WILLIAMS

**Type or print name and title**

VICE PRESIDENT

**Preparer's signature**

RICHARD M JONES CPA

**Date**

2013-01-03

**Preparer's firm's name, address, and ZIP + 4**

KENDALL PREBOLA AND JONES CPAS

PO BOX 259

BEDFORD, PA 15522-0259

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

For Paperwork Reduction Act Notice, see the separate instructions.
THE PURPOSE OF NVIC IS TO PROMOTE AND ENCOURAGE THE HEALTH AND WELFARE OF AMERICAN CHILDREN AND ADULTS THROUGH ITS RESEARCH AND EDUCATION-ORIENTED PROGRAMS TO PREVENT VACCINE INJURIES AND DEATHS AND TO AID THOSE (PARENTS, CITIZENS, AND INDIVIDUALS) WHO HAVE BEEN VACCINE INJURED. NVIC IS THE OLDEST AND LARGEST CONSUMER HEALTH ORGANIZATION IN AMERICA PROVIDING VACCINE AND DISEASE RISK INFORMATION TO THE GENERAL PUBLIC, ADVOCATING REFORMS IN THE MASS VACCINATION SYSTEM AND ENDORSING INDEPENDENT SCIENTIFIC RESEARCH IN VACCINE SAFETY. NVIC IS RESIDENT IN ALL 50 STATES WITH A MULTI-FACETED, INCLUDING PUBLIC CONFERENCES, SYMPOSIA, WORKSHOPS, TELEVISION, RADIO AND PRINT MEDIA, AND EDUCATIONAL MATERIALS. ALSO AVAILABLE UPON REQUEST ARE TAPE, NEWSLETTERS AND OTHER VISUAL AND PRINTED MATERIALS AND IT MAINTAINS AN INTERNET WEBSITE HTTP://WWW.NVIC.ORG

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

Yes
No

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

Yes
No

4. Describe the organization's program service accomplishments for each of its three largest program services, as measured by the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

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4a (Code) [Expenses] $388,294 including grants of $ [Revenue] $0

NATIONAl PUBLIC EDUCATION PROGRAMS NVIC PUBLIC EDUCATION & MEDIA RELATIONS'S PRE-EDUCATION, PRO-CONCERTED POSITION ON VACCINATION NEWS OUTSIDE OF VACCIATION NEWS OUTSIDE OF NVIC, PRODUCED THE THIRD ANNUAL VACCINE AWARENESS WEEK (VAW) WITH THE SUPPORT OF 50 STATES AND 2,500 MEDICAL AND PUBLIC HEALTH PROFESSIONALS EN HANCING MID YEAR VACCINATION RATES. IN FY2012, NVIC PRODUCED A 2ND-SECOND ANNUAL VACCINE AWARENESS WEEK VIDEO CAMPAIGN WHICH WAS VIEWED BY 1.5 MILLION VACCI NATED INDIVIDUALS. NVIC PRODUCED A 2ND-SECOND ANNUAL VACCINE AWARENESS WEEK VIDEO CAMPAIGN WHICH WAS VIEWED BY 1.5 MILLION VACCINATED INDIVIDUALS.

4b (Code) [Expenses] $100,000 including grants of $ [Revenue] $0

VACCINATION AND HEALTH RESEARCH PROGRAM SINCE ITS FOUNDING IN 1982, NVIC HAS ADVOCATED FOR SCIENTIFIC RESEARCH, INCLUDING BENCH SCIENCE AND TRANSLATIONAL RESEARCH TO INVESTIGATE THE CAUSES OF VACCINE INJURY AND REVEAL THE TOXICITY OF VACCINE INGREDIENTS. NVIC HAS LED THE CALL FOR WELL-DESIGNED STUDIES TO INVESTIGATE THE TOXICITY OF VACCINE INGREDIENTS. NVIC HAS LED THE CALL FOR WELL-DESIGNED STUDIES TO INVESTIGATE THE TOXICITY OF VACCINE INGREDIENTS. NVIC HAS LED THE CALL FOR WELL-DESIGNED STUDIES TO INVESTIGATE THE TOXICITY OF VACCINE INGREDIENTS. NVIC HAS LED THE CALL FOR WELL-DESIGNED STUDIES TO INVESTIGATE THE TOXICITY OF VACCINE INGREDIENTS.

4c (Code) [Expenses] $56,109 including grants of $ [Revenue] $0

ADVOCACY AND NETWORKING ACTIVITIES DURING FY2012, NVIC'S FREE ONLINE ADVOCACY PORTAL, WHICH HELPS CITIZENS TAKE ACTION TO PROTECT PARENTAL AND INFORMED CONSENT RIGHTS IN STATE PUBLIC HEALTH LAWS, REALIZED SIGNIFICANT GROWTH. ABOUT 10,000 NEW USERS WERE ENGAGED IN EVERY MONTH, AN INCREASE OF 18% FROM FY2011. VOLUNTEER ADVOCACY DIRECTORS WERE TRAINED IN 50 STATES AND 100 REPORTS TO SUPPORT ACTIVISTS WHO WERE TRAINED TO SUPPORT THE CALL FOR WELL-DESIGNED STUDIES TO INVESTIGATE THE CAUSES OF VACCINE INJURY AND REVEAL THE TOXICITY OF VACCINE INGREDIENTS. NVIC CONSULTED WITH THE GOVERNOR OF HAWAII TO SECURE THE ADDITION OF A BILL THAT WOULD PROVIDE MEDICAL EXEMPTIONS TO VACCINATION IN PUBLIC SCHOOLS FOR INDIVIDUALS WITH MEDICAL CONDITIONS THAT PREVENT THEM FROM VACCINATING.

4d Other program services (Describe in Schedule O) [Expenses] $5,394 including grants of $ [Revenue] $0

LOBBYING ACTIVITIES

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Form 990 (2011) Page 2

4e Total program service expenses $589,602

Form 990 (2011)
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A

2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?

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

4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III

6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I

7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II

8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III

9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV

10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent 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 as applicable
   a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI
   b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII
   c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII
   d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX
   e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part 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

12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII
   b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional

13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States?
   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, Part I

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 U S? If "Yes," complete Schedule F, Part II and IV

16 Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the U S? If "Yes," complete Schedule F, Part III and IV

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

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

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

20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H
   b If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements
21 Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If “Yes,” complete Schedule I, Parts I and II. Yes

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. No

23 Did the organization answer “Yes” to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization’s current and former officers, directors, trustees, key employees, and highest compensated employees? If “Yes,” complete Schedule J. No

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? If “Yes,” answer questions 24b-24d and complete Schedule K. If “No,” go to line 25. No

24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .

24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .

24d Did the organization act as an “on behalf of” issuer for bonds outstanding at any time during the year? .

25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If “Yes,” complete Schedule L, Part I. No

25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization’s prior Forms 990 or 990-EZ? If “Yes,” complete Schedule L, Part I. No

26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization’s tax year? If “Yes,” complete Schedule L, Part II. No

27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If “Yes,” complete Schedule L, Part III. No

28 Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)

28a A current or former officer, director, trustee, or key employee? If “Yes,” complete Schedule L, Part IV. No

28b A family member of a current or former officer, director, trustee, or key employee? If “Yes,” complete Schedule L, Part IV. Yes

28c 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 owner? If “Yes,” complete Schedule L, Part IV. No

29 Did the organization receive more than $25,000 in non-cash contributions? If “Yes,” complete Schedule M. No

30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If “Yes,” complete Schedule M. No

31 Did the organization liquidate, terminate, or dissolve and cease operations? If “Yes,” complete Schedule N, Part I. No

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If “Yes,” complete Schedule N, Part II. No

33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If “Yes,” complete Schedule R, Part I. No

34 Was the organization related to any tax-exempt or taxable entity? If “Yes,” complete Schedule R, Parts II, III, IV, and V, line 1. No

35a Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)? No

35b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If “Yes,” complete Schedule R, Part V, line 2. No

36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If “Yes,” complete Schedule R, Part V, line 2. No

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. No

38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Yes
<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable</td>
<td>1b</td>
<td>0</td>
</tr>
<tr>
<td>1c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return</td>
<td>2a</td>
<td>8</td>
</tr>
<tr>
<td>2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3a Did the organization have unrelated business gross income of $1,000 or more during the year?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3b If &quot;Yes,&quot; has it filed a Form 990-T for this year? If &quot;No,&quot; provide an explanation in Schedule O</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4b Didthe organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6a Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6b If &quot;Yes,&quot; did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b Did the organization notify the donor of the value of the goods or services provided?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7d If &quot;Yes,&quot; indicate the number of Forms 8282 filed during the year</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the sponsoring organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>9 Sponsoring organizations maintaining donor advised funds.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9a Did the organization make any taxable distributions under section 4966?</td>
<td>9a</td>
<td></td>
</tr>
<tr>
<td>9b Did the organization make a distribution to a donor, donor advisor, or related person?</td>
<td>9b</td>
<td></td>
</tr>
<tr>
<td>10 Section 501(c)(7) organizations. Enter</td>
<td>10a</td>
<td></td>
</tr>
<tr>
<td>10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</td>
<td>10b</td>
<td></td>
</tr>
<tr>
<td>11 Section 501(c)(12) organizations. Enter</td>
<td>11a</td>
<td></td>
</tr>
<tr>
<td>11b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)</td>
<td>11b</td>
<td></td>
</tr>
<tr>
<td>12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?</td>
<td>12a</td>
<td></td>
</tr>
<tr>
<td>12b If &quot;Yes,&quot; enter the amount of tax-exempt interest received or accrued during the year</td>
<td>12b</td>
<td></td>
</tr>
<tr>
<td>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</td>
<td>13a</td>
<td></td>
</tr>
<tr>
<td>13b Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans</td>
<td>13b</td>
<td></td>
</tr>
<tr>
<td>13c Enter the aggregate amount of reserves on hand</td>
<td>13c</td>
<td></td>
</tr>
<tr>
<td>14a Did the organization receive any payments for indoor tanning services during the tax year?</td>
<td>14a</td>
<td></td>
</tr>
<tr>
<td>14b If &quot;Yes,&quot; has it filed a Form 720 to report these payments? If &quot;No,&quot; provide an explanation in Schedule O</td>
<td>14b</td>
<td></td>
</tr>
</tbody>
</table>
### 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 to any question in this Part VI.

#### Section A. Governing Body and Management

<table>
<thead>
<tr>
<th>Line</th>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a</td>
<td>Enter the number of voting members of the governing body at the end of the tax year</td>
<td>10</td>
<td></td>
</tr>
<tr>
<td>1b</td>
<td>Enter the number of voting members included in line 1a, above, who are independent</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>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?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>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?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Did the organization become aware during the year of a significant diversion of the organization's assets?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Did the organization have members or stockholders?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>7a</td>
<td>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?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>7b</td>
<td>Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>The governing body?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Each committee with authority to act on behalf of the governing body?</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>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?</td>
<td>No</td>
<td></td>
</tr>
</tbody>
</table>

#### Section B. Policies

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

<table>
<thead>
<tr>
<th>Line</th>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>10a</td>
<td>Did the organization have local chapters, branches, or affiliates?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>10b</td>
<td>If &quot;Yes,&quot; 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?</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>11a</td>
<td>Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>11b</td>
<td>Describe in Schedule O the process, if any, used by the organization to review the Form 990</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>12a</td>
<td>Did the organization have a written conflict of interest policy?</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>12b</td>
<td>If &quot;No,&quot; go to line 13</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12c</td>
<td>Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Did the organization have a written whistleblower policy?</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Did the organization have a written document retention and destruction policy?</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>15a</td>
<td>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?</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>15b</td>
<td>If &quot;Yes,&quot; to line 15a or 15b, describe the process in Schedule O (see instructions)</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>16a</td>
<td>Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>16b</td>
<td>If &quot;Yes,&quot; 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?</td>
<td>Yes</td>
<td></td>
</tr>
</tbody>
</table>

#### Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed:

AL, AK, AZ, AR, CA, CO, CT, FL, GA, IL, KS, KY, ME, MD, MA, MI, MN, MS, MO, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (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

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. See Additional Data Table

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

KATHRYN M WILLIAMS VICE PRESIDENT
407 CHURCH STREET SUITE H
VIENNA, VA 22180
(703) 938-0342
### 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, and **current** key employees. 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, 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.

List persons in the following order: individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons.

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

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Average hours per week (describe hours for related organizations in Schedule O)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) BARBARA LOE ARTHUR PRESIDENT</td>
<td>40 00</td>
<td>X</td>
<td>X</td>
<td>45,000</td>
<td>0</td>
</tr>
<tr>
<td>(2) KATHRYN WILLIAMS VICE PRESIDENT</td>
<td>40 00</td>
<td>X</td>
<td>X</td>
<td>25,375</td>
<td>0</td>
</tr>
<tr>
<td>(3) PAUL MULHAUSER SECRETARY</td>
<td>2 00</td>
<td>X</td>
<td>X</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(4) CLIFFORD SHOEMAKER JD TREASURER</td>
<td>2 00</td>
<td>X</td>
<td>X</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(5) CAROL HALL BOARD MEMBER</td>
<td>2 00</td>
<td>X</td>
<td></td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(6) JUDY BRAIMAN BOARD MEMBER</td>
<td>2 00</td>
<td>X</td>
<td></td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(7) GREG BURGESS BOARD MEMBER</td>
<td>2 00</td>
<td>X</td>
<td></td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(8) STEPHANIE CHRISTNER DO BOARD MEMBER</td>
<td>2 00</td>
<td>X</td>
<td></td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(9) VICKY DEBOLD PHD BOARD MEMBER</td>
<td>2 00</td>
<td>X</td>
<td></td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(10) CLAIRE OWOSKIN BOARD MEMBER</td>
<td>2 00</td>
<td>X</td>
<td></td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(11) THERESA K WRANGHAM EXECUTIVE DIRECTOR</td>
<td>40 00</td>
<td>X</td>
<td></td>
<td>34,211</td>
<td>0</td>
</tr>
</tbody>
</table>

---

*Form 990 (2011)*
### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Average hours per week (describe hours for related organizations in Schedule O)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
</table>

#### Line 1b Sub-Total

#### Line c Total from continuation sheets to Part VII, Section A

#### Line d Total (add lines 1b and 1c)

<p>| | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Line 2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization

**Yes** | **No**
---|---
3 | No
4 | No
5 | No

### Section B. Independent Contractors

1. 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.

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization

**Yes** | **No**
---|---
0 | 0
### Statement of Revenue

**Part VIII**

#### Contributions, Gifts, Grants and Other Similar Amounts

<table>
<thead>
<tr>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512, 513, or 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Federated campaigns</td>
<td>1a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Membership dues</td>
<td>1b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Fundraising events</td>
<td>1c</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Related organizations</td>
<td>1d</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Government grants (contributions)</td>
<td>1e</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f All other contributions, gifts, grants, and similar amounts not included above</td>
<td>1f</td>
<td>813,466</td>
<td></td>
</tr>
<tr>
<td>g Noncash contributions included in lines 1a-1f</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h Total. Add lines 1a-1f</td>
<td></td>
<td></td>
<td>813,466</td>
</tr>
</tbody>
</table>

#### Program Service Revenue

<table>
<thead>
<tr>
<th>(A)</th>
<th>(B)</th>
<th>(C)</th>
<th>(D)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f All other program service revenue</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Total. Add lines 2a-2f</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Other Revenue

<table>
<thead>
<tr>
<th>(A)</th>
<th>(B)</th>
<th>(C)</th>
<th>(D)</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 Investment income (including dividends, interest and other similar amounts)</td>
<td></td>
<td></td>
<td>113</td>
</tr>
<tr>
<td>4 Income from investment of tax-exempt bond proceeds</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Royalties</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6a Gross rents</td>
<td>(i) Real</td>
<td>(i) Personal</td>
<td></td>
</tr>
<tr>
<td>b Less rental expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Rental income or (loss)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Net rental income or (loss)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a Gross amount from sales of assets other than inventory</td>
<td>(i) Securities</td>
<td>(ii) Other</td>
<td></td>
</tr>
<tr>
<td>b Less cost or other basis and sale expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Gain or (loss)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Net gain or (loss)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8a Gross income from fundraising events (not including contributions reported on line 1c)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Less direct expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Net income or (loss) from fundraising events</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9a Gross income from gaming activities See Part IV, line 19</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Less direct expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Net income or (loss) from gaming activities</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a Gross sales of inventory, less returns and allowances</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Less cost of goods sold</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Net income or (loss) from sales of inventory</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Miscellaneous Revenue</td>
<td>Business Code</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d All other revenue</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Total. Add lines 11a-11d</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Total revenue. See Instructions</td>
<td></td>
<td></td>
<td>813,579</td>
</tr>
</tbody>
</table>

---
### Statement of Functional Expenses

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

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

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

<table>
<thead>
<tr>
<th>Description</th>
<th>(A) Total expenses</th>
<th>(B) Program service expenses</th>
<th>(C) Management and general expenses</th>
<th>(D) Fundraising expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Grants and other assistance to governments and organizations in the</td>
<td>73,875</td>
<td>73,875</td>
<td></td>
<td></td>
</tr>
<tr>
<td>United States. See Part IV, line 21</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Grants and other assistance to individuals in the United States. See</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Part IV, line 22</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Grants and other assistance to governments, organizations, and</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>individuals outside the United States. See Part IV, lines 15 and 16</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Benefits paid to or for members</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Compensation of current officers, directors, trustees, and key</td>
<td>106,994</td>
<td>96,357</td>
<td>9,117</td>
<td>1,520</td>
</tr>
<tr>
<td>employees</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Compensation not included above, to disqualified persons (as defined</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Other salaries and wages</td>
<td>152,201</td>
<td>136,152</td>
<td>9,849</td>
<td>6,200</td>
</tr>
<tr>
<td>8. Pension plan contributions (include section 401(k) and section 403(b)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>employer contributions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Other employee benefits</td>
<td>635</td>
<td>569</td>
<td>47</td>
<td>19</td>
</tr>
<tr>
<td>10. Payroll taxes</td>
<td>20,106</td>
<td>18,036</td>
<td>1,471</td>
<td>599</td>
</tr>
<tr>
<td>11. Fees for services (non-employees)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Management</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Legal</td>
<td>3,300</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Accounting</td>
<td>12,149</td>
<td>11,421</td>
<td>485</td>
<td>243</td>
</tr>
<tr>
<td>d. Lobbying</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. Professional fundraising. See Part IV, line 17</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. Investment management fees</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g. Other</td>
<td>1,842</td>
<td>1,652</td>
<td>135</td>
<td>55</td>
</tr>
<tr>
<td>12. Advertising and promotion</td>
<td>125,508</td>
<td>125,508</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. Office expenses</td>
<td>17,283</td>
<td>15,574</td>
<td>1,585</td>
<td>124</td>
</tr>
<tr>
<td>14. Information technology</td>
<td>6,177</td>
<td>4,798</td>
<td>343</td>
<td>1,036</td>
</tr>
<tr>
<td>15. Royalties</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16. Occupancy</td>
<td>10,200</td>
<td>9,588</td>
<td>408</td>
<td>204</td>
</tr>
<tr>
<td>17. Travel</td>
<td>21,084</td>
<td>21,084</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18. Payments of travel or entertainment expenses for any federal, state,</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>or local public officials</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19. Conferences, conventions, and meetings</td>
<td>31,532</td>
<td>31,532</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20. Interest</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21. Payments to affiliates</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22. Depreciation, depletion, and amortization</td>
<td>8,945</td>
<td>8,409</td>
<td>357</td>
<td>179</td>
</tr>
<tr>
<td>23. Insurance</td>
<td>5,010</td>
<td>4,709</td>
<td>201</td>
<td>100</td>
</tr>
<tr>
<td>24. Other expenses Itemize expenses not covered above (List miscellaneous</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>expenses in line 24f if line 24f amount exceeds 10% of line 25, column (A)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>amount, list line 24f expenses on Schedule O)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. POSTAGE AND SHIPPING</td>
<td>16,999</td>
<td>10,478</td>
<td>3,680</td>
<td>2,841</td>
</tr>
<tr>
<td>b. PRINTING &amp; DUPLICATION</td>
<td>15,573</td>
<td>12,067</td>
<td>662</td>
<td>2,844</td>
</tr>
<tr>
<td>c. BANK AND SERVICE CHARGE</td>
<td>6,477</td>
<td>103</td>
<td></td>
<td>6,374</td>
</tr>
<tr>
<td>d. LICENSES &amp; PERMITS</td>
<td>6,433</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. All other expenses</td>
<td>8,566</td>
<td>7,793</td>
<td>773</td>
<td></td>
</tr>
<tr>
<td>25. Total functional expenses. Add lines 1 through 24f</td>
<td>650,889</td>
<td>589,602</td>
<td>35,649</td>
<td>25,638</td>
</tr>
<tr>
<td>this line only if the organization reported in column (B) joint costs from</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a combined educational campaign and fundraising solicitation.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Balance Sheet

<table>
<thead>
<tr>
<th></th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Cash—non-interest-bearing</td>
<td>332,522</td>
</tr>
<tr>
<td>2</td>
<td>Savings and temporary cash investments</td>
<td>77,390</td>
</tr>
<tr>
<td>3</td>
<td>Pledges and grants receivable, net</td>
<td>20,554</td>
</tr>
<tr>
<td>4</td>
<td>Accounts receivable, net</td>
<td>1,045</td>
</tr>
<tr>
<td>5</td>
<td>Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees</td>
<td>Complete Part II of Schedule L</td>
</tr>
<tr>
<td>6</td>
<td>Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)</td>
<td>Complete Part II of Schedule L</td>
</tr>
<tr>
<td>7</td>
<td>Notes and loans receivable, net</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Inventories for sale or use</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Prepaid expenses and deferred charges</td>
<td>15,058</td>
</tr>
<tr>
<td>10a</td>
<td>Land, buildings, and equipment cost or other basis</td>
<td>35,818</td>
</tr>
<tr>
<td>10b</td>
<td>Less accumulated depreciation</td>
<td>25,750</td>
</tr>
<tr>
<td>11</td>
<td>Investments—publicly traded securities</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Investments—other securities</td>
<td>See Part IV, line 11</td>
</tr>
<tr>
<td>13</td>
<td>Investments—program-related</td>
<td>See Part IV, line 11</td>
</tr>
<tr>
<td>14</td>
<td>Intangible assets</td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Other assets</td>
<td>See Part IV, line 11</td>
</tr>
<tr>
<td>16</td>
<td>Total assets. Add lines 1 through 15 (must equal line 34)</td>
<td>461,597</td>
</tr>
<tr>
<td>17</td>
<td>Accounts payable and accrued expenses</td>
<td>4,562</td>
</tr>
<tr>
<td>18</td>
<td>Grants payable</td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Deferred revenue</td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Tax-exempt bond liabilities</td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Escrow or custodial account liability</td>
<td>Complete Part IV of Schedule D</td>
</tr>
<tr>
<td>22</td>
<td>Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons</td>
<td>Complete Part II of Schedule L</td>
</tr>
<tr>
<td>23</td>
<td>Secured mortgages and notes payable to unrelated third parties</td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>Unsecured notes and loans payable to unrelated third parties</td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24)</td>
<td>Complete Part X of Schedule D</td>
</tr>
<tr>
<td>26</td>
<td>Total liabilities. Add lines 17 through 25</td>
<td>4,562</td>
</tr>
</tbody>
</table>

#### Organizations that follow SFAS 117, check here and complete lines 27 through 29, and lines 33 and 34.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>27</td>
<td>Unrestricted net assets</td>
</tr>
<tr>
<td>28</td>
<td>Temporarily restricted net assets</td>
</tr>
<tr>
<td>29</td>
<td>Permanently restricted net assets</td>
</tr>
</tbody>
</table>

#### Organizations that do not follow SFAS 117, check here and complete lines 30 through 34.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>30</td>
<td>Capital stock or trust principal, or current funds</td>
</tr>
<tr>
<td>31</td>
<td>Paid-in or capital surplus, or land, building or equipment fund</td>
</tr>
<tr>
<td>32</td>
<td>Retained earnings, endowment, accumulated income, or other funds</td>
</tr>
<tr>
<td>33</td>
<td>Total net assets or fund balances</td>
</tr>
<tr>
<td>34</td>
<td>Total liabilities and net assets/fund balances</td>
</tr>
</tbody>
</table>
**Part XI  Reconciliation of Net Assets**

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

1. Total revenue (must equal Part VIII, column (A), line 12) - 813,579
2. Total expenses (must equal Part IX, column (A), line 25) - 650,889
3. Revenue less expenses (Subtract line 2 from line 1) - 162,690
4. Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) - 457,035
5. Other changes in net assets or fund balances (explanation in Schedule O) - 0
6. Net assets or fund balances at end of year (Combine lines 3, 4, and 5, must equal Part X, line 33, column (B)) - 619,725

**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 ✅ 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 No
   - 2b Were the organization's financial statements audited by an independent accountant? - 2b Yes
   - 2c If "Yes," to 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.
     - 2c Yes
   - 2d 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 ✗ Consolidated basis ✗ Both consolidated and separate basis
2a

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 Act and OMB Circular A-133? - 3a 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.
### Part I: Reason for Public Charity Status

(All organizations must complete this part.) See instructions

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>A church, convention of churches, or association of churches section 170(b)(1)(A)(i).</td>
</tr>
<tr>
<td>2</td>
<td>A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)</td>
</tr>
<tr>
<td>3</td>
<td>A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).</td>
</tr>
<tr>
<td>4</td>
<td>A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state.</td>
</tr>
<tr>
<td>5</td>
<td>An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)</td>
</tr>
<tr>
<td>6</td>
<td>A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).</td>
</tr>
<tr>
<td>7</td>
<td>An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)</td>
</tr>
<tr>
<td>8</td>
<td>A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)</td>
</tr>
<tr>
<td>9</td>
<td>An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)</td>
</tr>
<tr>
<td>10</td>
<td>An organization organized and operated exclusively to test for public safety See section 509(a)(4).</td>
</tr>
<tr>
<td>11</td>
<td>An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.</td>
</tr>
<tr>
<td>a</td>
<td>Type I</td>
</tr>
<tr>
<td>b</td>
<td>Type II</td>
</tr>
<tr>
<td>c</td>
<td>Type III - Functionally integrated</td>
</tr>
<tr>
<td>d</td>
<td>Type III - Other</td>
</tr>
</tbody>
</table>

#### (e) By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) |

#### (f) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box |

#### (g) Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? |

(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? Yes No

(ii) a family member of a person described in (i) above? Yes No

(iii) a 35% controlled entity of a person described in (i) or (ii) above? Yes No

#### (h) Provide the following information about the supported organization(s) |

<table>
<thead>
<tr>
<th>Name of supported organization</th>
<th>EIN</th>
<th>Type of organization (described on lines 1–9 above or IRC section (see instructions))</th>
<th>Is the organization in col (i) listed in your governing document?</th>
<th>Did you notify the organization in col (i) of your support?</th>
<th>Is the organization in col (i) organized in the U S?</th>
<th>Amount of support?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

Total
### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2007</th>
<th>(b) 2008</th>
<th>(c) 2009</th>
<th>(d) 2010</th>
<th>(e) 2011</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received (Do not include any &quot;unusual grants&quot;)</td>
<td>292,577</td>
<td>272,706</td>
<td>371,729</td>
<td>806,933</td>
<td>813,466</td>
<td>2,557,411</td>
</tr>
<tr>
<td>2 Tax revenues levied for the organization’s benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong> Add lines 1 through 3</td>
<td>292,577</td>
<td>272,706</td>
<td>371,729</td>
<td>806,933</td>
<td>813,466</td>
<td>2,557,411</td>
</tr>
<tr>
<td>5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>828,467</td>
</tr>
<tr>
<td><strong>Public Support</strong> Subtract line 5 from line 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1,728,944</td>
</tr>
</tbody>
</table>

### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2007</th>
<th>(b) 2008</th>
<th>(c) 2009</th>
<th>(d) 2010</th>
<th>(e) 2011</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7 Amounts from line 4</td>
<td>292,577</td>
<td>272,706</td>
<td>371,729</td>
<td>806,933</td>
<td>813,466</td>
<td>2,557,411</td>
</tr>
<tr>
<td>8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td>51</td>
<td>495</td>
<td>446</td>
<td>113</td>
<td></td>
<td>1,105</td>
</tr>
<tr>
<td>9 Net income from unrelated business activities, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total support</strong> (Add lines 7 through 10)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2,558,516</td>
</tr>
<tr>
<td>12 Gross receipts from related activities, etc (See instructions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>180,918</td>
</tr>
</tbody>
</table>

#### First Five Years
If the Form 990 is for the organization’s first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here.

### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th></th>
<th>(a) 2007</th>
<th>(b) 2008</th>
<th>(c) 2009</th>
<th>(d) 2010</th>
<th>(e) 2011</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>14 Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))</td>
<td>67,580 %</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15 Public Support Percentage for 2010 Schedule A, Part II, line 14</td>
<td>82,140 %</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### 33 1/3% support test—2011
If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.

#### 33 1/3% support test—2010
If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.

#### 10%-facts-and-circumstances test—2011
If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization.

#### 10%-facts-and-circumstances test—2010
If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization.

#### Private Foundation
If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions.
### Part III  Support Schedule for Organizations Described in IRC 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

#### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2007</th>
<th>(b) 2008</th>
<th>(c) 2009</th>
<th>(d) 2010</th>
<th>(e) 2011</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received (Do not include any &quot;unusual grants&quot;)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization’s tax-exempt purpose</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Tax revenues levied for the organization’s benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Total. Add lines 1 through 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a Amounts included on lines 1, 2, and 3 received from disqualified persons</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b 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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Public Support (Subtract line 7c from line 6)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2007</th>
<th>(b) 2008</th>
<th>(c) 2009</th>
<th>(d) 2010</th>
<th>(e) 2011</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 Amounts from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Total support (Add lines 9, 10c, 11 and 12)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14 First Five Years If the Form 990 is for the organization’s first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section C. Computation of Public Support Percentage

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>15</td>
<td>Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))</td>
</tr>
<tr>
<td>16</td>
<td>Public support percentage from 2010 Schedule A, Part III, line 15</td>
</tr>
</tbody>
</table>

#### Section D. Computation of Investment Income Percentage

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>17</td>
<td>Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))</td>
</tr>
<tr>
<td>18</td>
<td>Investment income percentage from 2010 Schedule A, Part III, line 17</td>
</tr>
</tbody>
</table>

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>19a</td>
<td>33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization</td>
</tr>
<tr>
<td>19b</td>
<td>33 1/3% support tests—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization</td>
</tr>
</tbody>
</table>

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>20</td>
<td>Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions</td>
</tr>
</tbody>
</table>
### Supplemental Information

Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

<table>
<thead>
<tr>
<th>Facts And Circumstances Test</th>
</tr>
</thead>
<tbody>
<tr>
<td>Explanation</td>
</tr>
<tr>
<td></td>
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<tr>
<td></td>
</tr>
</tbody>
</table>

Schedule A (Form 990 or 990-EZ) 2011
Form 990, Special Condition Description:

<table>
<thead>
<tr>
<th>Special Condition Description</th>
</tr>
</thead>
</table>

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

<table>
<thead>
<tr>
<th>Code</th>
<th>Expenses $ 47,437 including grants of $</th>
<th>(Revenue $ )</th>
</tr>
</thead>
<tbody>
<tr>
<td>Support Activities Counseling Service &amp; Community Support Forums - For the past three decades, NVIC has operated a Vaccine Reaction Registry and Vaccine Reaction Counseling Service for families. During FYE 2012, NVIC responded to several hundred Vaccine Injury Reports and over 2,300 phone, email and letter inquiries asking for information about how to: * identify a Vaccine Reaction, * report a Vaccine Reaction to the Federal Government, * file for Federal Vaccine Injury Compensation, * find information about State Vaccine Laws, and * ask doctors questions when making a Vaccine Decision. NVIC org features an online memorial for Vaccine victims, where descriptions and photos of Vaccine Reactions, Injuries, and Deaths can be posted online. The Vaccine Freedom Wall is an online forum for visitors to post real-life descriptions of intimidation, denial of medical care or loss of employment or health insurance coverage for trying to make voluntary vaccination choices. There were 155 new harassment reports posted on the Vaccine Freedom Wall.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Code</th>
<th>Expenses $ 9,934 including grants of $</th>
<th>(Revenue $ )</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lobbying Activities</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
# SCHEDULE C

## Political Campaign and Lobbying Activities

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

- 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-EZ, line 35c (Proxy Tax), then**

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

---

### Part I-A: Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1. Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV.
2. Political expenditures
   - $__________________
3. Volunteer hours

### Part I-B: Complete if the organization is exempt under section 501(c)(3).

1. Enter the amount of any excise tax incurred by the organization under section 4955
   - $__________________
2. Enter the amount of any excise tax incurred by organization managers under section 4955
   - $__________________
3. If the organization incurred a section 4955 tax, did it file Form 4720 for this year?
   - Yes [ ] No [ ]
4a. Was a correction made?
   - Yes [ ] No [ ]
   - If "Yes," describe in Part IV.

### Part I-C: Complete if the organization is exempt under section 501(c) except section 501(c)(3).

1. Enter the amount directly expended by the filing organization for section 527 exempt function activities
   - $__________________
2. Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities
   - $__________________
3. Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b
   - $__________________
4. Did the filing organization file Form 1120-POL for this year?
   - Yes [ ] No [ ]
5. Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

<table>
<thead>
<tr>
<th>(a) Name</th>
<th>(b) Address</th>
<th>(c) EIN</th>
<th>(d) Amount paid from filing organization's funds</th>
<th>(e) Amount of political contributions received and promptly and directly delivered to a separate political organization</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

---

For Privacy Act and Paperwork Reduction Act Notice, see the instructions for Form 990.

**Cat No 50084S Schedule C (Form 990 or 990-EZ) 2011**
Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member’s name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check if the filing organization checked box A and “limited control” provisions apply

### Limits on Lobbying Expenditures
(The term "expenditures" means amounts paid or incurred.)

<table>
<thead>
<tr>
<th></th>
<th>(a) Filing Organization’s Totals</th>
<th>(b) Affiliated Group Totals</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a</td>
<td>Total lobbying expenditures to influence public opinion (grass roots lobbying)</td>
<td>9,934</td>
</tr>
<tr>
<td>b</td>
<td>Total lobbying expenditures to influence a legislative body (direct lobbying)</td>
<td>9,934</td>
</tr>
<tr>
<td>c</td>
<td>Total lobbying expenditures (add lines 1a and 1b)</td>
<td>9,934</td>
</tr>
<tr>
<td>d</td>
<td>Other exempt purpose expenditures</td>
<td>640,955</td>
</tr>
<tr>
<td>e</td>
<td>Total exempt purpose expenditures (add lines 1c and 1d)</td>
<td>650,889</td>
</tr>
<tr>
<td>f</td>
<td>Lobbying nontaxable amount (Enter the amount from the following table in both columns)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>If the amount on line 1e, column (a) or (b) is:</th>
<th>The lobbying nontaxable amount is:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not over $500,000</td>
<td>20% of the amount on line 1e</td>
</tr>
<tr>
<td>Over $500,000 but not over $1,000,000</td>
<td>$100,000 plus 15% of the excess over $500,000</td>
</tr>
<tr>
<td>Over $1,000,000 but not over $1,500,000</td>
<td>$175,000 plus 10% of the excess over $1,000,000</td>
</tr>
<tr>
<td>Over $1,500,000 but not over $17,000,000</td>
<td>$225,000 plus 5% of the excess over $1,500,000</td>
</tr>
<tr>
<td>Over $17,000,000</td>
<td>$1,000,000</td>
</tr>
</tbody>
</table>

| g  | Grassroots nontaxable amount (enter 25% of line 1f) | 30,658 |
| h  | Subtract line 1g from line 1a If zero or less, enter -0- | 0 |
| i  | Subtract line 1f from line 1c If zero or less, enter -0- | 0 |
| j  | If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? | Yes | No |

### 4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

#### Lobbying Expenditures During 4-Year Averaging Period

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2008</th>
<th>(b) 2009</th>
<th>(c) 2010</th>
<th>(d) 2011</th>
<th>(e) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td>Lobbying non-taxable amount</td>
<td>79,306</td>
<td>58,382</td>
<td>112,151</td>
<td>122,633</td>
</tr>
<tr>
<td>b</td>
<td>Lobbying ceiling amount (150% of line 2a, column(e))</td>
<td>558,708</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Total lobbying expenditures</td>
<td>9,125</td>
<td>9,934</td>
<td>19,059</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Grassroots non-taxable amount</td>
<td>19,827</td>
<td>14,596</td>
<td>28,038</td>
<td>30,658</td>
</tr>
<tr>
<td>e</td>
<td>Grassroots ceiling amount (150% of line 2d, column (e))</td>
<td>139,679</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>Grassroots lobbying expenditures</td>
<td>9,125</td>
<td>9,934</td>
<td>19,059</td>
<td></td>
</tr>
</tbody>
</table>
### 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)).

<table>
<thead>
<tr>
<th></th>
<th>(a)</th>
<th>(b)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>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</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Volunteers?</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Media advertisements?</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Mailings to members, legislators, or the public?</td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Publications, or published or broadcast statements?</td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>Grants to other organizations for lobbying purposes?</td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Direct contact with legislators, their staffs, government officials, or a legislative body?</td>
<td></td>
</tr>
<tr>
<td>h</td>
<td>Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?</td>
<td></td>
</tr>
<tr>
<td>i</td>
<td>Other activities? If &quot;Yes,&quot; describe in Part IV</td>
<td></td>
</tr>
<tr>
<td>j</td>
<td>Total lines 1c through 1i</td>
<td></td>
</tr>
<tr>
<td>2a</td>
<td>Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>If &quot;Yes,&quot; enter the amount of any tax incurred under section 4912</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>If &quot;Yes,&quot; enter the amount of any tax incurred by organization managers under section 4912</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?</td>
<td></td>
</tr>
</tbody>
</table>

### Part III-A
Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Were substantially all (90% or more) dues received nondeductible by members?</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Did the organization make only in-house lobbying expenditures of $2,000 or less?</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Did the organization agree to carryover lobbying and political expenditures from the prior year?</td>
<td></td>
</tr>
</tbody>
</table>

### Part III-B
Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Dues, assessments and similar amounts from members</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Current year</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Carryover from last year</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Total</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Taxable amount of lobbying and political expenditures (see instructions)</td>
<td></td>
</tr>
</tbody>
</table>

### Part IV
Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i. Also, complete this part for any additional information.

| Identifier | Return Reference | Explanation |
**SCHEDULE D**

(Form 990)

**Supplemental Financial Statements**

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

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

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

<table>
<thead>
<tr>
<th>1. Total number at end of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Donor advised funds</td>
</tr>
<tr>
<td>2. Aggregate contributions to (during year)</td>
</tr>
<tr>
<td>3. Aggregate grants from (during year)</td>
</tr>
<tr>
<td>4. Aggregate value at end of year</td>
</tr>
</tbody>
</table>

| 5. Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 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 advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit |
|---|---|
| Yes | No |

### Part II  Conservation Easements

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

<table>
<thead>
<tr>
<th>1. Purpose(s) of conservation easements held by the organization (check all that apply)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preservation of land for public use (e.g., recreation or pleasure)</td>
</tr>
<tr>
<td>Protection of natural habitat</td>
</tr>
<tr>
<td>Preservation of open space</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of conservation easements</td>
</tr>
<tr>
<td>Total acreage restricted by conservation easements</td>
</tr>
<tr>
<td>Number of conservation easements on a certified historic structure included in (a)</td>
</tr>
<tr>
<td>Number of conservation easements included in (c) acquired after 8/17/06</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3. Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year</th>
</tr>
</thead>
</table>

| 4. Number of states where property subject to conservation easement is located |

| 5. Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? |
|---|---|
| Yes | No |

<table>
<thead>
<tr>
<th>6. Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year</th>
</tr>
</thead>
<tbody>
<tr>
<td>$</td>
</tr>
</tbody>
</table>

| 7. Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? |
|---|---|
| Yes | No |

| 8. In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements |

<table>
<thead>
<tr>
<th>9. Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year</th>
</tr>
</thead>
</table>

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

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

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items |

<table>
<thead>
<tr>
<th>(i) Revenues included in Form 990, Part VIII, line 1</th>
</tr>
</thead>
<tbody>
<tr>
<td>(ii) Assets included in Form 990, Part X</td>
</tr>
</tbody>
</table>

1b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items |

<table>
<thead>
<tr>
<th>(i) Revenues included in Form 990, Part VIII, line 1</th>
</tr>
</thead>
<tbody>
<tr>
<td>(ii) Assets included in Form 990, Part X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Revenues included in Form 990, Part VIII, line 1</td>
</tr>
<tr>
<td>(b) Assets included in Form 990, Part X</td>
</tr>
</tbody>
</table>
**Part III** Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)
   - [ ] Public exhibition
   - [ ] Scholarly research
   - [ ] Preservation for future generations
   - [ ] Loan or exchange programs
   - [ ] Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

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" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

<table>
<thead>
<tr>
<th>1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?</th>
<th>[ ] Yes [ ] No</th>
</tr>
</thead>
<tbody>
<tr>
<td>b If &quot;Yes,&quot; explain the arrangement in Part XIV and complete the following table</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Amount</td>
</tr>
<tr>
<td></td>
<td>1c</td>
</tr>
<tr>
<td></td>
<td>1d</td>
</tr>
<tr>
<td></td>
<td>1e</td>
</tr>
<tr>
<td></td>
<td>1f</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2a Did the organization include an amount on Form 990, Part X, line 21?</th>
<th>[ ] Yes [ ] No</th>
</tr>
</thead>
<tbody>
<tr>
<td>b If &quot;Yes,&quot; explain the arrangement in Part XIV</td>
<td></td>
</tr>
</tbody>
</table>

**Part V** Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

<table>
<thead>
<tr>
<th>1a Beginning of year balance</th>
<th>(a) Current Year</th>
<th>(b) Prior Year</th>
<th>(c) Two Years Back</th>
<th>(d) Three Years Back</th>
<th>(e) Four Years Back</th>
</tr>
</thead>
<tbody>
<tr>
<td>b Contributions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Investment earnings or losses</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Grants or scholarships</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Other expenditures for facilities and programs</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f Administrative expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g End of year balance</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2 Provide the estimated percentage of the year end balance held as
   - [ ] Board designated or quasi-endowment
   - [ ] Permanent endowment
   - [ ] Term endowment

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by
   - [ ] unrelated organizations
   - [ ] related organizations
   - [ ] If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 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.

<table>
<thead>
<tr>
<th>Description of property</th>
<th>(a) Cost or other basis (investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Accumulated depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Land</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b Buildings</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Leasehold improvements</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Equipment</td>
<td>35,818</td>
<td>25,750</td>
<td>10,068</td>
<td></td>
</tr>
<tr>
<td>e Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) 10,068
**Part VII Investments—Other Securities.** See Form 990, Part X, line 12.

<table>
<thead>
<tr>
<th>(a) Description of security or category (including name of security)</th>
<th>(b) Book value</th>
<th>(c) Method of valuation Cost or end-of-year market value</th>
</tr>
</thead>
</table>

1. Financial derivatives
2. Closely-held equity interests

Other

Total. (Column (b) should equal Form 990, Part X, col (B) line 12.)

**Part VIII Investments—Program Related.** See Form 990, Part X, line 13.

<table>
<thead>
<tr>
<th>(a) Description of investment type</th>
<th>(b) Book value</th>
<th>(c) Method of valuation Cost or end-of-year market value</th>
</tr>
</thead>
</table>

Total. (Column (b) should equal Form 990, Part X, col (B) line 13.)

**Part IX Other Assets.** See Form 990, Part X, line 15.

<table>
<thead>
<tr>
<th>(a) Description</th>
<th>(b) Book value</th>
</tr>
</thead>
</table>

Total. (Column (b) should equal Form 990, Part X, col (B) line 15.)

**Part X Other Liabilities.** See Form 990, Part X, line 25.

<table>
<thead>
<tr>
<th>(a) Description of Liability</th>
<th>(b) Amount</th>
</tr>
</thead>
</table>

Federal Income Taxes

Total. (Column (b) should equal Form 990, Part X, col (B) line 25.)

2. FIN 48 (ASC 740) Footnote In Part XIV, 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 (ASC740).
### Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (Form 990, Part VIII, column (A), line 12)</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (Form 990, Part IX, column (A), line 25)</td>
</tr>
<tr>
<td>3</td>
<td>Excess or (deficit) for the year Subtract line 2 from line 1</td>
</tr>
<tr>
<td>4</td>
<td>Net unrealized gains (losses) on investments</td>
</tr>
<tr>
<td>5</td>
<td>Donated services and use of facilities</td>
</tr>
<tr>
<td>6</td>
<td>Investment expenses</td>
</tr>
<tr>
<td>7</td>
<td>Prior period adjustments</td>
</tr>
<tr>
<td>8</td>
<td>Other (Describe in Part XIV)</td>
</tr>
<tr>
<td>9</td>
<td>Total adjustments (net) Add lines 4 - 8</td>
</tr>
<tr>
<td>10</td>
<td>Excess or (deficit) for the year per financial statements Combine lines 3 and 9</td>
</tr>
</tbody>
</table>

#### Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue, gains, and other support per audited financial statements</td>
</tr>
<tr>
<td>a</td>
<td>Amounts included on line 1 but not on Form 990, Part VIII, line 12</td>
</tr>
<tr>
<td>b</td>
<td>Net unrealized gains on investments</td>
</tr>
<tr>
<td>c</td>
<td>Donated services and use of facilities</td>
</tr>
<tr>
<td>d</td>
<td>Recoveries of prior year grants</td>
</tr>
<tr>
<td>e</td>
<td>Add lines 2a through 2d</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
</tr>
<tr>
<td>a</td>
<td>Amounts included on Form 990, Part VIII, line 12, but not on line 1</td>
</tr>
<tr>
<td>b</td>
<td>Investment expenses not included on Form 990, Part VIII, line 7b</td>
</tr>
<tr>
<td>c</td>
<td>Other (Describe in Part XIV)</td>
</tr>
<tr>
<td>d</td>
<td>Add lines 4a and 4b</td>
</tr>
<tr>
<td>5</td>
<td>Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)</td>
</tr>
</tbody>
</table>

#### Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total expenses and losses per audited financial statements</td>
</tr>
<tr>
<td>a</td>
<td>Amounts included on line 1 but not on Form 990, Part IX, line 25</td>
</tr>
<tr>
<td>b</td>
<td>Donated services and use of facilities</td>
</tr>
<tr>
<td>c</td>
<td>Prior year adjustments</td>
</tr>
<tr>
<td>d</td>
<td>Other losses</td>
</tr>
<tr>
<td>e</td>
<td>Add lines 2a through 2d</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
</tr>
<tr>
<td>a</td>
<td>Amounts included on Form 990, Part IX, line 25, but not on line 1</td>
</tr>
<tr>
<td>b</td>
<td>Investment expenses not included on Form 990, Part VIII, line 7b</td>
</tr>
<tr>
<td>c</td>
<td>Other (Describe in Part XIV)</td>
</tr>
<tr>
<td>d</td>
<td>Add lines 4a and 4b</td>
</tr>
<tr>
<td>5</td>
<td>Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)</td>
</tr>
</tbody>
</table>

### Part XIV Supplemental Information

Complete this part to 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, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

<table>
<thead>
<tr>
<th>Identifier</th>
<th>Reference</th>
<th>Description</th>
</tr>
</thead>
</table>
**Schedule I**  
**Grants and Other Assistance to Organizations, Governments and Individuals in the United States**

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

Attach to Form 990

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>NATIONAL VACCINE INFORMATION CENTER</td>
<td>54-1951769</td>
</tr>
</tbody>
</table>

**Part I  General Information on Grants and Assistance**

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees’ eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [Yes] [No]

2. Describe in Part IV the organization’s procedures for monitoring the use of grant funds in the United States.

**Part II  Grants and Other Assistance to Governments and Organizations in the United States**

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC Code section if applicable</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) GEORGE MASON UNIVERSITY 4400 UNIVERSITY DRIVE FAIRFAX, VA 22030</td>
<td>54-0836354</td>
<td>501 (C)(3)</td>
<td>73,875</td>
<td>BOOK</td>
<td>COMPARISON OF HEALTH AND UTILIZATION OUTCOMES AMONG FULLY AND NEVER VACCINATED CHILDREN</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

3. Enter total number of other organizations listed in the line 1 table.
**Part III** Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Number of recipients</th>
<th>(c) Amount of cash grant</th>
<th>(d) Amount of non-cash assistance</th>
<th>(e) Method of valuation (book, FMV, appraisal, other)</th>
<th>(f) Description of non-cash assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
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<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Part IV** Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

<table>
<thead>
<tr>
<th>Identifier</th>
<th>Return Reference</th>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>PROCEDURE FOR MONITORING GRANTS IN THE U S</td>
<td>PART I, LINE 2</td>
<td>SCHEDULE I, PART I, LINE 2. GRANTS ARE MONITORED THROUGH NARRATIVE AND FINANCIAL REPORTS DUE AT SPECIFIC TIMES DURING THE GRANT PERIOD</td>
</tr>
</tbody>
</table>
### Part I: Excess Benefit Transactions

<table>
<thead>
<tr>
<th></th>
<th>(a) Name of disqualified person</th>
<th>(b) Description of transaction</th>
<th>(c) Corrected?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
</tr>
</tbody>
</table>

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: $______

### Part II: Loans to and/or From Interested Persons

<table>
<thead>
<tr>
<th></th>
<th>(a) Name of interested person and purpose</th>
<th>(b) Loan to or from the organization?</th>
<th>(c) Original principal amount</th>
<th>(d) Balance due</th>
<th>(e) In default?</th>
<th>(f) Approved by board or committee?</th>
<th>(g) Written agreement?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>To From</td>
<td></td>
<td></td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Total: $______

### Part III: Grants or Assistance Benefitting Interested Persons

<table>
<thead>
<tr>
<th></th>
<th>(a) Name of interested person</th>
<th>(b) Relationship between interested person and the organization</th>
<th>(c) Amount of grant or type of assistance</th>
</tr>
</thead>
</table>
### Part IV  Business Transactions Involving Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

<table>
<thead>
<tr>
<th>(a) Name of interested person</th>
<th>(b) Relationship between interested person and the organization</th>
<th>(c) Amount of transaction</th>
<th>(d) Description of transaction</th>
<th>(e) Sharing of organization's revenues?</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) PAUL F ARTHUR</td>
<td>FAMILY RELATIONSHIP WITH BARBARA L ARTHUR, A CURRENT DIRECTOR AND OFFICER</td>
<td>31,000</td>
<td>PAYMENT FOR EMPLOYEE SERVICES</td>
<td>No</td>
</tr>
<tr>
<td>(2) CHRISTIAN FISHER</td>
<td>FAMILY RELATIONSHIP WITH BARBARA L ARTHUR, A CURRENT DIRECTOR AND OFFICER</td>
<td>27,438</td>
<td>PAYMENT FOR EMPLOYEE SERVICES</td>
<td>No</td>
</tr>
</tbody>
</table>

### Part V  Supplemental Information
Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

<table>
<thead>
<tr>
<th>Identifier</th>
<th>Return Reference</th>
<th>Explanation</th>
</tr>
</thead>
</table>

Schedule L (Form 990 or 990-EZ) 2011
## Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990 or 990-EZ.

### Name of the organization
NATIONAL VACCINE INFORMATION CENTER

### Employer identification number
54-1951769

<table>
<thead>
<tr>
<th>Identifier</th>
<th>Return Reference</th>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>FORM 990, PART VI, SECTION B, LINE 11</td>
<td>WHEN THE 990 DRAFT IS RECEIVED FROM THE AUDITOR IT IS REVIEWED BY EXECUTIVE STAFF INCLUDING THE BOOKKEEPER, DIRECTOR OF OPERATIONS AND THE EXECUTIVE DIRECTOR. ALL THREE WILL BE LOOKING FOR CONSISTENCY WITH THE AUDIT AND THE FIGURES PROVIDED TO THE AUDITOR. A DISCUSSION WILL TAKE PLACE AND ANY REMAINING INCONSISTENCIES WILL BE FORWARD TO THE AUDITOR FOR CLARIFICATION.</td>
<td></td>
</tr>
<tr>
<td>FORM 990, PART VI, SECTION B, LINE 12C</td>
<td>THE CONFLICT OF INTEREST AND NON-DISCLOSURE AGREEMENT IS REQUIRED TO BE SIGNED ANNUALLY BY ALL STAFF, VOLUNTEERS AND DIRECTORS AND IS REVIEWED AT HIRE/RECRUITMENT OF DIRECTORS, STAFF AND VOLUNTEERS, AS WELL AS ANNUALLY FOR RENEWAL PURPOSES.</td>
<td></td>
</tr>
<tr>
<td>FORM 990, PART VI, SECTION C, LINE 19</td>
<td>THESE DOCUMENTS ARE KEPT AT THE NVIC OFFICE IN VIENNA, VA AND ARE AVAILABLE UPON REQUEST</td>
<td></td>
</tr>
</tbody>
</table>

FORM 990, THE CONFLICT OF INTEREST AND NON-DISCLOSURE AGREEMENT IS REQUIRED TO BE SIGNED ANNUALLY BY ALL STAFF, VOLUNTEERS AND DIRECTORS AND IS REVIEWED AT HIRE/RECRUITMENT OF DIRECTORS, STAFF AND VOLUNTEERS, AS WELL AS ANNUALLY FOR RENEWAL PURPOSES.