

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

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

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

2009

OMB No 1545-0047

Open to Public

internal ite					_		Inspection	
			C Name of organization	01-01-2009 and ending 12-31-200	9	D Employer ide	ntification number	
B Check — Addre		Please use IRS	National Fire Protection As	sociation		04-165309	0	
_		label or	Doing Business As			E Telephone nu		
Name		type. See	•			(617) 770-3	3000	
Initial	l retur	n Specific Instruc-	Number and Street (of P C	box if mail is not delivered to street addre	ss) Room/suite	G Gross receipts		
Tem	ınated	tions.	1 Batterymarch Park			G Gross receipts		
– Amen	nded r	eturn	City or town, state or cour	ntry, and ZIP + 4		1		
— Applic	cation	pending	Quincy, MA 02169					
		F N:	ame and address of princi	nal officer	H(a) Ta Ab			
			e Mullen			ıs a group returr ates?	⊤Yes ▼ No	
			terymarch Park cy, MA 02169					
		Quint	.y,MA 02109		1 ' '	ll affiliates includ		
Tax-	exem	pt status 🔽 501	(c) (3) ◀ (insert no)	47(a)(1) or		o," attach a list ip exemption nu	(see instructions)	
		: WWW NFPA] H(c) GIOC	ap exemption nu	imber F	
			ration Trust Association	Othor b	Voor of fo	ermation 1896 M	State of legal domicile MA	
Part		Summary	Tation Trust Association	Other F	L fear or io	illiation 1896 M	State of legal doffficile. MA	
			the organization's mission	or most significant activities				
		To promote safe	ty in fire, electrical and re	ated areas				
ଅ								
Ē │								
raovellialice	2	Check this hov	If the organization disc	ontinued its operations or disposed	of more than	25% of its net a	ecate	
3			•				_	
				g body (Part VI, line 1a)				
Activities				the governing body (Part VI, line 11				
5			employees (Part V , line 2a					
≨			volunteers (estimate if ne					
-		•		om Part VIII, column (C), line 12	•		1,652,409	
	ь	net unrelated bu	Silless taxable income iro	m Form 990-T, line 34		7b		
	_					or Year	Current Year	
횰	8			1h)		14,816,306	12,124,100	
	9	3	,	2g)		13,150,542	10,145,059	
24	10			(a), lines 3, 4, and 7d)		-5,500,916	-8,341,295	
	11			es 5, 6d, 8c, 9c, 10c, and 11e)		52,343,527	41,049,338	
1	12			nust equal Part VIII, column (A), lın 	e	74,809,459	54,977,202	
	13			, column (A), lines 1–3)		6,666,573	408,093	
	14		• •	column (A), line 4)		0	0	
	15	•		benefits (Part IX, column (A), lines!	5-			
<u>8</u>		10)				22,336,284	24,318,080	
Expenses	16a	Professional fui	ndraising fees (Part IX, co	lumn (A), line 11e)		0	0	
ਲੇ 📙	ь	Total fundraising e	xpenses (Part IX, column (D), lı	ne 25) ▶ 0				
_	17	Other expenses	s (Part IX, column (A), line	es 11a-11d, 11f-24f)		39,358,298	29,497,536	
1	18	Total expenses	Add lines 13-17 (must	equal Part IX, column (A), line 25)		68,361,155	54,223,709	
1	19	Revenue less e	xpenses Subtract line 18	from line 12		6,448,304	753,493	
8 %		-			_	g of Current	End of Year	
Not Assets or Fund Balances						/ear		
9 1	20					189,414,469	211,209,614	
3일 2	21					48,437,519	44,891,337	
	22			e 21 from line 20		140,976,950	166,318,277	
Part	ш	Signature E						
				kamined this return, including accompanying ation of preparer (other than officer) is base				
- :		l 						
Sign Here		****** Signature of off	 icer		2010- Date	-09-17		
		[,						
		Bruce Mullen Sr Type or print na						
	I	 		Data	Chack if	Dropprovidents	iung number	
n_! !		Preparer's JOSE	EPH M GISO MST	2010-09-14	Check If self-	Preparer's identif		
Paid	[•			empolyed 🕨 🦵			
Prepar	- 1	Firm's name (or yo if self-employed),	urs CBIZ Tofias		EIN ▶			
Jse Or	11 y	address, and ZIP +	4 350 Massachusetts Aven	ue				
			Cambridge, MA 02139			Phone no ▶ (6	17) 761-0600	
1ay th	e IRS	5 discuss this ref		wn above? (see instructions)			▼Yes No	

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

The mission is to reduce the worldwide burden of fire and other hazards on the quality of life by providing and advocating consensus codes and standards, research, training and education

						Form 990 (2009
4e	Total program serv	ice expenses►\$	41,972,223			
	(Expenses \$	9,819,812 inc	luding grants of \$	270,69	3) (Revenue \$	2,925,896)
4d	Other program serv	rices (Describe in Sch	edule O) See also A	dditional Data for [Description	
					ers reside in the United States, i d concentration and exchange o	overall, members represent 122 f ideas
4c	(Code) (Expenses \$		ing grants of \$	37,400) (Revenue \$	14,044,664)
	and enforcement of the		mize the possibility and e	ffects of fire and other		and standards Adoption, use, porary activity NFPA codes and
4b	(Code) (Expenses \$, ,	ing grants of \$	100,000) (Revenue \$	0)
		ciation's technical and gener iference books, fire service			ectrum In addition to codes and ng manuals	l standards, they include
4a	(Code) (Expenses \$	15,161,503 includ	ing grants of \$) (Revenue \$	38,006,642)
4	Section 501(c)(3) a		ions and section 494	7(a)(1) trusts are	gest program services by required to report the amo vice reported	•
	If "Yes," describe the	ese changes on Sched	ule O			
3	_	cease conducting, or r	<u>-</u>	=		┌ Yes ┌ No
	If "Yes," describe the	ese new services on Sc	hedule O			
2		undertake any signific r 990-EZ?			iich were not listed on	┌ Yes ┌ No

Dart TV	Chack	lict of	Deguired	Schedules
	CHECK	เเรียบเ	Reduired	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
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	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
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	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasiendowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI			
	◆ 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			
	◆ 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			
	◆ 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			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
	◆ 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? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	Į		
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	Yes	
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	15		No
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	16		No
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? <i>If</i> "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> " <i>Yes,"</i> complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

Par	t IV Checklist of Required Schedules (continued)			
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	21	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	22	Yes	
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	23	Yes	
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	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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	25a		No
b	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	25b		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	26		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	27		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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		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	32		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	33	Yes	
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	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		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	36		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	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

orm	990 (2009)			Page
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
La	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns Enter -0- if not applicable			
	1a 123			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
_	1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		163	
	Statements filed for the calendar year ending with or within the year covered by this			
h	return			
J	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this			
Ja	return?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
1a	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, securities account, or other financial			
	account)?	4a		Νo
b	If "Yes," enter the name of the foreign country			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? \cdot .	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
5a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		Νo
b	organization solicit any contributions that were not tax deductible?			
_	were not tax deductible?	6b		
, -	Organizations that may receive deductible contributions under section 170(c).	70		N.
а	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?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	7c		N o
d	file Form 8282?	70		110
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No.
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h		
3	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
,	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
LO	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
L1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
L2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	vear 12b			

1 Batterymarch Park Quincy, MA 02169 (617) 770-3000

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.

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body 1a 21			
ь	Enter the number of voting members that are independent 1b 20	-		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νo
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νο
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νο
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νo
6	Does the organization have members or stockholders?	6		Νο
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νο
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A , who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νo
	ction B. Policies (This Section B requests information about policies not required by the Internal venue Code.)			
NO	venue code.)		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?			
		11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
ь	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	Yes	
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b	Yes	
Se	ction C. Disclosure	100	162	
17	List the States with which a copy of this Form 990 is required to be filed ►CA , MA			
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 make 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 makes 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	ie orga	nızatıor	n 🕨
	Bruce Mullen SrV P CFO			

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

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. Use Schedule J-2 if additional space is needed

- 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 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 the organization did	not compen	sate any	/ curi	rent	or fo	rmer	ffice	r, director, trustee	or key employee	
(A) Name and Title	(B) A verage hours	Posit t	(C tion (hat a	ched	ck al	I		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee Individual trustee		Key employee	Former Highest compensated employee		from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

1b	Total .									>	2,686,778	0	757,690

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization \-42

			Yes	No	-
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes		
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule I for such person	5		No	-

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
Field Companies 385 Pleasant St Watertown, MA 02472	Printing & Postage	1,994,637
United Parcel Post PO 7247 Philadelphia, PA 19170	Freight	1,036,620
World Color 1 Edgewater Dr Suite 201B Norwood, MA 02062	Printing	885,422
Donnelly RR & Sons 1145 Comwell St Willard, OH 44890	Printing	876,382
Lane Press 87 Meadowland Dr S Burlington, VT 05403	Printing	709,365
2 Total number of independent contractors (including but not limited to those listed above)) who received more than	

\$100,000 in compensation from the organization >35

Page 8

Part V	4444	Statement o	t kevenue					
	.				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
¥¥-	1a	Federated camp	paigns 1a					
亞克	ь	Membership du	es	10,556,997				
ರ್≝	c	Fundraising eve	ents 1c					
<u>ज</u> ह		_						
ਰੂੁੁਰ	d	_	ations 1d					
ĕΞ	е	Government grants	s (contributions) 1e	1,217,579				
્⊇ જૂ	f		ons, gifts, grants, and 1f	349,524	İ	İ	İ	į
英운		similar amounts no						
<u> </u>	g		butions included in					
Contributions, gifts, grants and other similar amounts	.	lines 1a-1f \$ _	s 1a-1f	▶	12,124,100			
ပဏ	h	Total. A dd filles	> 1d-11		12,121,100			
<u> </u>				Business Code				
릝	2a	Professional Develo	opme	611,430	6,951,970	6,951,970		
ě.	ь	Meetings	_	611,710	1,904,207	1,904,207		
α.	l c	Members Magazine		<u> </u>	, ,	=,== :,== :	4 200 002	
Ģ S		- Members Magazine	E(JINL)	541,800	1,288,882		1,288,882	
Ŕ	d							
Ę	e							
<u> </u>	f	All other progra	ım service revenue					
Program Serwce Revenue		_						
	g		s 2a-2f		10,145,059			
	3	Investment inc	ome (including dividen	 				
			aramounts)	-	3,463,187			3,463,187
	4	Income from inves	tment of tax-exempt bond	proceeds 🕨				
	5	Royalties		 . [2,285,475			2,285,475
			(ı) Real	(II) Personal				
	6a	Gross Rents	10,032,192					
	ь	Less rental	7,589,508					
	_	expenses Rental income	2,442,684					
	C	or (loss)	•					
	d	Net rental inco	me or (loss)	•	2,442,684			2,442,684
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of	79,799,616					
		assets other						
	ь	than inventory Less cost or	91,602,814	1,284				
	"	other basis and	51,002,011	1,201				
	_	sales expenses Gain or (loss)	-11,803,198	-1,284				
	С	` ′	• •		-11,804,482			-11,804,482
	d		s)		-11,604,462			-11,804,482
Other Revenue	8a	Gross income fi events (not incl \$	luding reported on line 1c)					
ē	ь	Less directions	penses b					
₹	°		loss) from fundraising	events 🕨				
_	9a	-		events				
	34	See Part IV, lin	rom gaming activities					
		,	а					
	ь	Less direct exi	penses b					
	l c		loss) from gaming acti	vities				
	10a	Gross sales of						
		returns and allo	owances . a	43,914,741				
	Ь		oods sold b	8,219,412	25 55 55	35 53- 5-		
	С		loss) from sales of inve		35,695,329	35,695,329		
		Miscellaneous	Revenue	Business Code	_			
	11a	Advertising, oth	her	541,800	363,527		363,527	
	ь	Miscellaneous :	Income	900,099	262,323	262,323		
	с							
	d	All other revenu	ue					
	e		ا 11a-11d					
			- ·	· · · · •	625,850			
	12	Total revenue.	See Instructions .	▶	54,977,202	44,813,829	1,652,409	-3,613,136

Part IX Statement of Functional Expenses

Δ	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).							
Do no	ot include amounts reported on lines 6b, p, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses			
1	Grants and other assistance to governments and organizations		expenses	general expenses	expenses			
1	in the U.S. See Part IV, line 21	345,693	345,693					
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	62,400	62,400					
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16							
4	Benefits paid to or for members							
5	Compensation of current officers, directors, trustees, and key employees	3,444,466		3,444,466				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$							
7	Other salaries and wages	14,584,097	12,358,307	2,225,790				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,864,398	1,705,130	1,159,268				
9	Other employee benefits	1,909,477	1,308,497	600,980				
10	Payroll taxes	1,515,642	1,037,409	478,233				
11	Fees for services (non-employees)	, ,	, ,					
 а	Management							
b	Legal							
c	Accounting	84,400		84,400				
d	Lobbying	04,400		04,400				
e	Professional fundraising See Part IV, line 17							
f	Investment management fees	342,842		342,842				
g g	Other	866,564	251,743	614,821				
12	Advertising and promotion	326,598	326,598	014,021				
13		1,678,729	1,387,720	201.000				
	Office expenses	1,676,729	1,367,720	291,009				
14	- '	642.345	642.245					
15	Royalties	, , , , , , ,	642,345					
16	Occupancy	83,266	83,266	202 222				
17 18	Payments of travel or entertainment expenses for any federal,	1,462,548	1,180,315	282,233				
19	state, or local public officials	3,181,673	3,004,193	177,480				
20	Interest	3,181,073	3,004,193	47				
20	Payments to affiliates	4/		4/				
22	Depreciation, depletion, and amortization	1,759,608	1,073,434	686,174				
23	Insurance	389,741	266,765	122,976				
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)	309,741	200,703	122,370				
а	Outside Services	7,918,304	6,717,786	1,200,518				
ь	Postage, Freight & Mail	5,591,206	5,523,755	67,451				
c	Printing Expense	3,179,858	3,139,994	39,864				
d	Contracts	976,254	976,254	35,004				
e	Building & Warehouse	922,117	489,183	432,934				
f	All other expenses	91,436	91,436	132,334				
25	Total functional expenses. Add lines 1 through 24f	54,223,709	41,972,223	12 251 406	0			
26		54,223,709	41,9/2,223	12,251,486				
	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation							

Part X Balance Sheet (A) (B) Beginning of year End of year 18.865.236 33.625.554 1 1 Cash—non-interest-bearing 2 2 3 3 4 4.436.281 4 3.089.482 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 7 11,285,028 10.718.817 8 1.909.780 9 1,503,368 10a Land, buildings, and equipment cost or other basis Complete 99.790.469 10a Part VI of Schedule D 54,515,542 **10c** 10b 47.027.532 52.762.937 ь Less accumulated depreciation 91.076.997 11 102.368.163 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 7.325.605 15 7.141.293 15 16 189,414,469 16 211,209,614 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 7.979,461 7.658.075 17 17 Accounts payable and accrued expenses . 18 18 16,140,707 19 15,932,855 19 20 Tax-exempt bond liabilities 20 Liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D . . . 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties 24.317.351 25 21.300.407 25 Other liabilities Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 48,437,519 26 44,891,337 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. Unrestricted net assets 140,910,950 166,240,277 27 27 28 66.000 28 78.000 Temporarily restricted net assets Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here 🕨 🥅 and complete lines 30 through 34. ö 30 30 Capital stock or trust principal, or current funds Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 140,976,950 166,318,277 33 Total net assets or fund balances 33 34 Total liabilities and net assets/fund balances 189,414,469 34 211,209.614

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990 Cash 🔽 Accrual Other			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
ь	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	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	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both Separate basis Consolidated basis Both consolidated and separated basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	За	Yes	
b	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	3b	Yes	

Form **990** (2009)

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

National Fire Protection Association

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Public Charity Status and Public Support

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

Inspection Employer identification number

									04-1653090			
Pa	rt I	Reas	on for Pul	blic Charity Stat	us (All orga	anızatıons	must compl	ete this par	t.) See inst	ructions		
The	rgani	zation is	not a private	e foundation because	eitis (Forlii	nes 1 throug	h 11, check	only one box)			
1	Γ	A churc	h, conventio	on of churches, or as	sociation of o	churches se	ction 170(b)	(1)(A)(i).				
2	\sqcap	A scho	ol described	ın section 170(b)(1)	(A)(ii). (Att	ach Schedul	e E)					
3	\sqcap	A hospi	tal or a coop	perative hospital serv	vice organiza	tion describ	ed in section	170(b)(1)(A	()(iii).			
4	Γ			organization operate y, and state	ed in conjunc	tion with a h	ospital descr	ribed in secti e	on 170(b)(1)((A)(iii). Ente	rthe	
5	Г	_	-	erated for the benefit	_	or university	owned or op	erated by a g	overnmental	unit describe	– ed in	
_	_			A)(iv). (Complete Pa				470/13/43/	• > / >			
-	<u> </u>			local government or .	_							
7	ı	describ	ed in	t normally receives a A)(vi) (Complete Pa		part of its s	upport from a	government	al unit or fron	n the general	public	
8	\vdash	A comn	nunity trust	described in section	170(b)(1)(A)(vi) (Comp	olete Part II)				
9	굣	A n orga	nization tha	t normally receives	(1) more tha	n 331/3% of	ıts support f	rom contribut	tions, membe	rship fees, a	nd gro	SS
		receipt	from activi	ties related to its ex	empt functio	ns—subject	to certain exc	ceptions, and	l (2) no more	than 331/3%	of	
		ıts supp	ort from gro	ss investment incom	ne and unrela	ted busines	s taxable inc	ome (less se	ction 511 tax	() from busin	esses	
		acquire	d by the org	anızatıon after June 3	30,1975 Se	e section 50	9(a)(2). (Co	mplete Part I	II)			
10	\sqcap	A n orga	nization org	anized and operated	exclusively	to test for pu	ıblıc safety S	ee section 5 0	09(a)(4).			
11	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 a Type I b Type III c Type III - Functionally integrated d Type III - Other											
e f	ı	other th	ian foundatio 509(a)(2) rganization r	ox, I certify that the con managers and other	erthan one c	or more publi	cly supported	d organizatio	ns described	in section 50	9 (a)(1) or
g		Since A		006, has the organiz	ation accept	ed any gift o	r contributioi	n from any of	the			,
		(i) a pe	rson who dır	ectly or indirectly co	ntrols, eithe	r alone or to	gether with pe	ersons descr	ıbed ın (ıı)		Yes	No
		and (III)	below, the g	governing body of the	the support	ed organızat	ion ⁹			11g(i)		
		(ii) a fa	mily membe	r of a person describ	ed ın (ı) abov	/e [?]				11g(ii)		
		(iii) a 3	5% controll	ed entity of a person	described in	ı (ı) or (ıı) ab	ove?			11g(iii)		
h		Provide	the followin	g information about t	the supported	d organizatio	n(s)					
	(i) Name Suppo Ganiz	organization orga e of (ii) (described on col (orted EIN lines 1- 9 above your or IRC section do			organızatı col (ı) lıst your gove	Is the		tify the ion in your t?	(vi) Is the organizati col (i) orga	on in anized	(vii) A mount of support?	
				(see instructions))	Yes	No	Yes	No	Yes	No		
Tota												

instructions

Section A. Public Support Calledard year (or fiscal year beginning in a 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total or an armonic or armonic or an armonic or armonic or an armonic or armonic or an armonic or armonic	F	Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.)						
Calendar year (or fiscal year beginning in) 1 Girts, grants, contributions, and membership fees received (Do not include any "unusual grants of the control	S		a direction tile	20% on mic 5,	., 0. 0 0. 1 410	,		
in) Gifts, grants, contributions, and membership fees received (Do not include any "unusual" grants. ") grants. ") grants. ") The value of services or facilities from parts to the value of services or facilities from the value of services or facilities from such as a proportion of total contributions benefit and other paid to or expended on its behalf The value of services or facilities from such as a proportion of total contributions by each person (other than a proportion of total contributions by each person (other than a proportion of total contributions by each person (other than a proportion of total contributions by each person (other than a proportion of total contributions by each person (other than a proportion of the proportion of the amount shown on line 11, column (f) For public Support. Subtract line 5 from line 4 Section 8. Total Support Calendar year (or fiscal year beginning in) A mounts from line 4 Grassa common interest, dividend or securities to securities to securities and income from similar sources. In the proportion of the p			() 2005	412222	() 2007	(1) 2000	() 2000	// T
membership fest received (Do not include any "unusual grants") 2 Tax revenues levied for the organization's benefit end either population of the property of			(a) 2005	(b) 2006	(c) 2007	(a) 2008	(e) 2009	(f) otal
include any "unusual grants" 2 1 Tax revenues levied for the organization's benefit and either paid to or expended on its benefit and either paid to or expended on its benefit and either paid to or expended on its benefit with a state of the organization without charge to the organization without charge to the organization without charge to the organization included on line 1 that exceeds 2% of the amount shown on line 11, column inine 1 that exceeds 2% of the amount shown on line 11, column inine 1 that exceeds 2% of the amount shown on line 11, column inine 1 that exceeds 2% of the amount shown on line 11, column inine 1 that exceeds 2% of the amount shown on line 11, column inine 1 that exceeds 2% of the amount shown on line 11, column inine 1 that exceeds 2% of the amount shown on line 11, column inine 4 5 Ection B. Total Support Calendar year (or fiscal year beginning inine 4 6 Gross income from interest, dividends, payments received on securities loans, rents, reyel to a securities, whether or assentiates loans, rents, reyel to a sources and income from similar sources 9 Net income from unrelated business activities, whether or care and income from similar sources 10 Other income (Explain in Part IIV) Do not include gain or loss from the safe of capital assets or through 10 of the column (f) where the part of the column (f) avided by line 11 column (f) 1 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. The organization qualifies as a publicly supported organization 1 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f) 1 Section C. Computation of Public Support Percentage 1 Public Support Percentage for 2009 Schedule A, Part III, line 14 1 Sa 31/3% support text—colors. If the organization of his 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 1 I	1							
grants ") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf? 3 The value of services or facilities firms hed by a governmental unit to the services or facilities firms hed by a governmental unit to the services or facilities firms hed by a governmental unit to the services or facilities firms hed by a governmental unit to publicly seach person (other than a governmental unit or publicly supported organization) included on line I that exceeds 2% of the amount shown on line 11, column () 6 Public Support. Subtract line 5 from line 4 5 Arounts from line 4 6 Gross income from services and services or services from the services from the services or services from the services								
2 Tax revenues levide for the organization benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total, Add lines I through 3 5 The portion of total contributions by each person (other than a governmental unit or public.) 5 The portion of total contributions by each person (other than a governmental unit or public.) 6 Public Support, Subtract line 5 from line 1 that creeds 2% of the amount shown on line 11, column (f) 6 Public Support, Subtract line 5 from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from unrelated business as regularly or ontitle business is regularly or ontitle business is regularly or ontitle business is regularly or ontitle business is regularly or ontitle business is regularly or ontitle business is regularly or ontitle business is regularly or ontitle business is regularly or ontitle business is regularly or ontitle business is regularly or ontitle business is regularly or ontitle business is regularly or ontitle business is regularly or ontitle business is regularly or ontitle displacements. 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. The organization of public Support Percentage 14 Public Support Percentage for 2008 Schedule A, Part III, line 14 15 Public Support Percentage for 2008 Schedule A, Part III, line 14 16 33 1/3% support text—2009. If the organization did not check the box on line 13, 16a, or 16b and line 14 is 10% or more, check this box and stop here. The organization qualifies as a publicly supported organization organization organization organization of public supported organization of public supported organization of public supported organization organization organization of public standard organization of public standard organization organization organization organization organization organizatio								
organization is benefit and either pad to or expended on its babilif in the organization without charge in the organization without charge in the organization without charge in the organization without charge in the organization without charge in the organization without charge in the organization in cluded on line it that exceeds 2% of the amount shown on line 11, column (f) in the organization in cluded on line it that exceeds 2% of the amount shown on line 11, column (f) in the organization in cluded on line it that exceeds 2% of the amount shown on line 11, column (f) in the organization in cluded on line it that exceeds 2% of the amount shown on line 11, column (f) in the organization is column in the organization of the organization is column in the organization is column in the organization is column in the organization is column in the organization is column in the organization of the organization is first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here. The organization qualifies as a publicly supported organization is 13, 15a, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization is 13, 15a, 15b, or 17a and line 14 is 10% or more, check this box and stop here. The organization qualifies as a publicly supported organization in Part IV how the organization meets the "facts and circumstances" test, check this box and stop here. The organization meets the "facts and circumstances" test, check this box and stop here. The organization meets the "facts and circumstances" test, check this box and stop here. The organization meets the "facts and circumstances" test, check this box and stop here. The organization meets the "facts and circumstances" test, check this box and stop here. The organization meets the "facts and circumstances" test, check this box and stop here. The organization meets the "facts and circumstances" test, check this box and stop here. Splain in Part IV how the organ	2	-						
paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 1 Total Add inser 1 through 3 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 anomaly of the control of the contr	2							
3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 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 emount shown on line 11, colurn (f) 6 Public Support. Subtract line 5 from line 4 6 Section B. Total Support Calendar year (or fiscel year beginning in) 7 A mounts from line 4 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business sectivities, whether or not the business is regularly carried on 10 Other income (Explain in Part IV) Do not include gen or loss from the sels of capital assets Total support (Add lines? 7 Total support Percentage or 2008 School (See instructions) Section C. Computation of Public Support Percentage 14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 15 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 16 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 17 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 18 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 19 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 19 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 19 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 19 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 19 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 19 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 19 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 19 Public Support Percentage for 2009 (line 6								
furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 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) 6 Public Support. Subtract line 5 from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royslities and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on Other income (Explain in Part IV) Do not include gain or loss from the sele of capital assets 11 Total support (Add lines 7 through 10) 10 Gross receipts from related activities, etc (See instructions) 11 First Five Years (Tithe 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 14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 15 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 16 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 17 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 18 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 19 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 10 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 11 Total support (Add lines 7 through) 10 (line 11 column (f)) 12 Gross receipts from related activities, etc (See instructions) 13 First Five Years (Tithe Forganization and ind not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization meats the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts		behalf						
The portion of total contributions by each person (other than a povernmental untor publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public Support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning included on line 2 that exceeds 2% of the amount shown on line 11, column (f) 7. A mounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9. Net income from unrelated business is regularly carried on 10. Other income from unrelated business activities, whether or not the business is regularly carried on 10. Other income (Explain in Part 11 / 1) D is not include gain or loss from the sale of capital assets to tal support (Add lines 7 through 10) Gross receipts from related activities, etc. (See instructions.) Section C. Computation of Public Support Percentage 14. Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 15. Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 16. Public Support Percentage for 2009 (line 6 column (f) divided by line 11, and line 14 is 33 1/3% or more, check this box and stop here. The organization of paymentation deathers as a publicly supported organization in solve in the organization deather. The organization did not check the box on line 13, 16a, or 16b and line 14 is 10% or more, and interest the organization deather. Explain in Part 1V how the organization meets the "facts and curcumstances" test. The organization qualifies as a publicly supported organization in Part 1V how the organization meets the "facts and curcumstances" test. The organization qualifies as a publicly supported organization qualifies as a publicly supported organization qualifies as a publicly supported organization payments. Explain in Part 1V how the organization meets the "facts and curcumstances" test. The organization qualifies as a publicly	3							
4 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2.96 of the amount shown on line 11, column (f) Public Support. Subtract line 5 from line 4 Gross income form single supports of the sum of the subject of the sum of the subject of the sum of the subject of the s								
5 The portion of total contributions by each person (other then a governmental unt or publicly supported organization) included on line 1 that exceeds 2% of the amounts shown on line 11, column (f) 6 Public Support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning included on securities of the section o	4	-						
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) 6 Public Support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) 7 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business is regularly carried on the business is regularly carried on 10 Other income (Explain in Pert IV) Do not include gain or loss from the sale of capital assets 11 Total support (Add lines 7 through 10) 12 Gross receipts from related activities, etc. (See instructions) 13 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 14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 15 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 16 July Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 17 Lines and stop here. 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 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 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, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the or			,					
governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public Support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total in line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources of the subsiness activities, whether or not the business is regularly carried on 10 Other income (Explain in Part IIV) Do not include gain or loss from the sale of capital assets 11 Total support (Add lines 7 through 12) 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 4 Public Support Percentage for 2008 Schedule A, Part II, line 14 16a 33 1/3% support test—2009, If the organization did not check the box on line 13 or 16a, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization qualifies as a publicly supported organization qualifies as a publicly supported organization qualifies as a publicly supported organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization and in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization qualifies as a publicly supported organization qualifies as a publicly supported organization qualifies as a publicly supported organization qualifies as a publicly supported organization qualifies as a publicly supported organizati	9	,	′					
supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public Support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royelties and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets 11 Total support (Add lines 7 through 10) 12 Gross receipts from related activities, etc (See instructions) 13 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 14 Public Support Percentage for 2008 Schedule A, Part II, line 14 15 Public Support test—2009. 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 b 33 1/3% support test—2008. If the organization did not check the box on line 13, fea, 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, check this box and stop here. Explain in Part IV how 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 qualifies as a publicly supported organization and fifthe organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies		·						
amount shown on line 11, column (f) Public Support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) 7 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business is regularly carried on ont the business is regularly carried on onthe business is regularly carried on from the sale of capital assets 11 Total support (Add lines 7 through 10) 12 Gross receipts from related activities, etc. (See instructions.) 13 First Five Years If the Form 99 0 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 14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 15 Public Support Percentage for 2009 (line 6 column (f) divided by line 13 or 16a, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 15 a 33 1/3% support test—2009. If the organization did not check the box on line 13, 16a, or 16b and line 14 is 10% and stop here. The organization qualifies as a publicly supported organization of percentage for 2009. If the organization did not check the 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, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test, the kis 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 publicles as a publicly supported organization in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a pu		supported organization) included or	n					
6 Public Support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in a capability of the ca								
Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total or fiscal year beginning in) (f) Total supports from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources (f) 2008 (f) 2008 (f) 2008 (f) 2008 (f) 2009 (f) 2008 (f) 2008 (f) 2009 (f) 2008 (f) 2009 (f)								
Section B. Total Support Calendar year (or fiscal year beginning in)	6	• •						
Section B. Total Support Calendar year (or fiscal year beginning in) 7. Amounts from line 4 8. Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from unrelated business activities, whether or not the business activities, whether or not the business is regularly carmed on 10. Other income (Explain in Part IV) Do not include gain or loss from the sale or Capital assets 11. Total support (Add lines 7 through 10) 12. Gross receipts from related activities, etc (See instructions) 13. 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 14. Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 15. Public Support Percentage for 2008 Schedule A, Part III, line 14 16. 33 1/3% support test—2009. 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 17. 10%-facts-and-circumstances test—2009. If the organization did not check the 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, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in Part IV how 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 qualifies as a publicly supported organization organization meets the "facts and	Ü							
Calendar year (or fiscal year beginning in) 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets 1 Total support (Add lines 7 through 10) 2 Gross receipts from related activities, etc (See instructions) 12 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 14 Public Support Percentage for 2008 Schedule A, Part II, line 14 15 Public Support Percentage for 2008 Schedule A, Part II, line 14 16a 33 1/3% support test—2009. 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 17a 10%-facts-and-circumstances sets—2009. 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, 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 qualifies as a publicly supported organization understances 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 unalifies as a publicly supported	S		•	•	•	•	•	•
Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from similar sources Net income (Explain in Part IV) Do not include gain or loss from the sale of capital assets 1 Total support (Add lines 7 through 10) 12 Gross receipts from related activities, etc (See instructions) 13 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 14 Public Support Percentage for 2008 Schedule A, Part II, line 14 15 Public Support Percentage for 2008 Schedule A, Part II, line 14 16a 33 1/3% support test—2009. 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 b 33 1/3% support test—2009. 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 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, check this box and stop here. Explain in Part IV how 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 10%-facts-and-circumstances test—2009. 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. The organization qualifies as a publicly supported organization 11 10 10 10 10 11 11 11 11 11 11 11 11 1			(2) 2005	(b) 2006	(c) 2007	(4) 2008	(a) 2009	(f) Total
Sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets Total support (Add lines 7 through 10) Gross receipts from related activities, etc. (See instructions) 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 4 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 15 Public Support Percentage for 2009 Schedule A, Part II, line 14 16a 33 1/3% support test—2009. 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 b 31/3% support test—2009. If the organization did not check the box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization qualifies as a publicly supported organization unless 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 unless as a publicly supported organization unless as a publicly supported organization unless as a publicly supported organization unless as a publicly supported organization unless as a publicly supported organization unless as a publicly supported organization unless as a publicly supported organization qualifies as a publicly supported organization unless as a publicly supported organization unless as a publicly supported organization unless as a publicly supported organization unless as a publicly supported organization unless as a publicly supported organization unless as a publicly supported organization unless as a publicly supported organization unless as a publicly supported organization unless the "facts and circumstan		,	(4) 2003	(5) 2000	(6) 2007	(4) 2000	(2) 2009	(1) 10tai
dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets 11 Total support (Add lines 7 through 10) 12 Gross receipts from related activities, etc (See instructions) 13 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 14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 15 Public Support Percentage for 2008 Schedule A, Part II, line 14 16a 33 1/3% support test—2009. 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 17a 10%-facts-and-circumstances test—2009. 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, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in Part IV how 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 qualifies as a publicly supported organization qualifies as a publicly supported organization qualifies as a publicly supported organization qualifies as a publicly supported organization qualifies as a publicly supporte								
securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business activities, whether or not the business activities, whether or not the business activities, whether or not the business is regularly carried on 10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets 11 Total support (Add lines 7 through 1.0) 12 Gross receipts from related activities, etc (See instructions) 13 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 14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 15 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 16 33 1/3% support test—2009. 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 17a 10%-facts-and-circumstances test—2009. 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, 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 or more, and if the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization or more, and if the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization or more, and if the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization or more, and if the organization meets the "facts and circumstances" te	8	•						
and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets 11 Total support (Add lines 7 through 10) 12 Gross receipts from related activities, etc (See instructions) 13 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 14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 15 Public Support Percentage for 2008 Schedule A, Part II, line 14 16 33 1/3% support test—2009. 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 17 10%-facts-and-circumstances test—2009. If the organization did not check the 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, 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 publics as a publicly supported organization publics as a publicly supported organization publics as a publicly supported organization publics as a publicly supported organization publics as a publicly supported organization publics as a publicly supported organization publics as a publicly supported organization publics as a publicly supported organization publics as a publicly supported organization publics as a publicly supported organization publics as a publicly supported organization publics as a publicly supported organization publics as a publicly supported organization publics as a publicly supported organiz								
9 Net income from unrelated business activities, whether or not the business activities, whether or not the business is regularly carried on 10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets 11 Total support (Add lines 7 through 10) 12 Gross receipts from related activities, etc (See instructions) 13 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 14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 15 Public Support Percentage for 2009 Schedule A, Part II, line 14 16 33 1/3% support test—2009. 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 17 10%-facts-and-circumstances test—2009. 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, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in Part IV how 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, 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 qualifies as a publicly supported organization qualifies as a publicly supported organization qualifies as a publicly supported organization qualifies as a publicly suppo								
business activities, whether or not the business is regularly carried on 10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets 11 Total support (Add lines 7 through 10) 12 Gross receipts from related activities, etc. (See instructions.) 13 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 14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 15 Public Support Percentage for 2008 Schedule A, Part II, line 14 16a 33 1/3% support test—2009. 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 16 b 33 1/3% support test—2009. 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 17a 10%-facts-and-circumstances test—2009. If the organization did not check has 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, check this box and stop here. Explain in Part IV how 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 part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization qualifies as a publicly supported organization qualifies as a publicly supported organization qualifies as a publicly supported organization qualifies as a publicly supported organization qualifies as a publicly		sources						
not the business is regularly carried on Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets 11 Total support (Add lines 7 through 10) 12 Gross receipts from related activities, etc (See instructions) 13 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 14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 15 Public Support Percentage for 2008 Schedule A, Part II, line 14 16 33 1/3% support test—2009. 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 17 a 10%-facts-and-circumstances test—2009. 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, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in Part IV how 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 part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization part IV how the organizat	9							
carried on 10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets 11 Total support (Add lines 7 through 10) 12 Gross receipts from related activities, etc (See instructions) 13 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 14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 15 Public Support Percentage for 2008 Schedule A, Part II, line 14 16a 33 1/3% support test—2009. 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 10%-facts-and-circumstances test—2009. If the organization did not check the 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, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in Part IV how 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, 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 part IV how the organization meets the "facts and circumstances" test. The o		·						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets 11 Total support (Add lines 7 through 10) 12 Gross receipts from related activities, etc (See instructions) 13 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 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 14								
IV) Do not include gain or loss from the sale of capital assets 17 Total support (Add lines 7 through 10) 18 Gross receipts from related activities, etc (See instructions) 19 Gross receipts from related activities, etc (See instructions) 10 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 10 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 11	10							
from the sale of capital assets 11 Total support (Add lines 7 through 10) 12 Gross receipts from related activities, etc (See instructions) 13 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 14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 15 Public Support Percentage for 2008 Schedule A, Part II, line 14 16 33 1/3% support test—2009. 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 17 a 10%-facts-and-circumstances test—2009. 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 18 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 19 10%-facts-and-circumstances test—2008. 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 and if the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization qualifies as a publicly supported organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization.		• •						
through 10) Gross receipts from related activities, etc (See instructions) 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 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) Public Support Percentage for 2008 Schedule A, Part II, line 14 15 16a 33 1/3% support test—2009. 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 b 33 1/3% support test—2008. 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 17a 10%-facts-and-circumstances test—2009. 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 b 10%-facts-and-circumstances test—2008. 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, 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 organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization organization meets the "facts and circumstances" test.								
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 14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 15 Public Support Percentage for 2008 Schedule A, Part II, line 14 16a 33 1/3% support test—2009. 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 b 33 1/3% support test—2008. 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 17a 10%-facts-and-circumstances test—2009. 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 b 10%-facts-and-circumstances test—2008. 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, check this box and stop here. Explain in Part IV how 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 meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization.	11	•• `						
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 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) Public Support Percentage for 2008 Schedule A, Part II, line 14 15 16a 33 1/3% support test—2009. 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 b 33 1/3% support test—2008. 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 17a 10%-facts-and-circumstances test—2009. 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, 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 Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization organization meets the "facts and circumstances" test.			(6					
Section C. Computation of Public Support Percentage 14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 15 Public Support Percentage for 2008 Schedule A, Part II, line 14 16 33 1/3% support test—2009. 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 17 b 33 1/3% support test—2008. 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 18 10%-facts-and-circumstances test—2009. 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 18 10%-facts-and-circumstances test—2008. 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 organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization organization organization meets the "facts and circumstances" test.		•		•				
Section C. Computation of Public Support Percentage 14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 15 Public Support Percentage for 2008 Schedule A, Part II, line 14 16a 33 1/3% support test—2009. 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 17a 10%-facts-and-circumstances test—2009. 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, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in Part IV how 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, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test.	13		for the organization	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orgar	
Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 14 15 Public Support Percentage for 2008 Schedule A, Part II, line 14 16 33 1/3% support test—2009. 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 b 33 1/3% support test—2008. 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—2009. 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—2008. 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, 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.		check this box and scop here						-1
Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 14 15 Public Support Percentage for 2008 Schedule A, Part II, line 14 16 33 1/3% support test—2009. 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 b 33 1/3% support test—2008. 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—2009. 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—2008. 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, 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.	S	ection C. Computation of Pul	olic Support P	ercentage				-
Public Support Percentage for 2008 Schedule A, Part II, line 14 33 1/3% support test—2009. 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 b 33 1/3% support test—2008. 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 17a 10%-facts-and-circumstances test—2009. 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 b 10%-facts-and-circumstances test—2008. 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.					11 column (f))		14	
 33 1/3% support test—2009. 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—2008. 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 17a 10%-facts-and-circumstances test—2009. 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 b 10%-facts-and-circumstances test—2008. 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 	15	Public Support Percentage for 200	8 Schedule A . Pa	rt II. line 14				
and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2008. 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—2009. 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 b 10%-facts-and-circumstances test—2008. 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.		-	·	·	v on line 13 and	line 14 is 33 1/20/		this hov
b 33 1/3% support test—2008. 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—2009. 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 b 10%-facts-and-circumstances test—2008. 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.	104					iiile 14 13 33 1/3/	o or more, check	
 17a 10%-facts-and-circumstances test – 2009. 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. b 10%-facts-and-circumstances test – 2008. 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. 	ь					6a, and line 15 is	33 1/3% or more	. ,
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. b 10%-facts-and-circumstances test—2008. 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.		box and stop here. The organizatio	n qualıfıes as a pı	ublicly supported	organızatıon			
in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test—2008. 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.	17a		_					
organization b 10%-facts-and-circumstances test—2008. 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.								
b 10%-facts-and-circumstances test—2008. 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.		=	ets the racts and	circumstances"	test The organiz	cation quanties as	a publicly suppo	
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.	ь	-	—2008. If the ora:	anization did not o	check a box on li	ne 13, 16a, 16b. o	or 17a and line	- 1
supported organization			_					
		· · · · · · · · · · · · · · · · · · ·	tion meets the "fa	acts and circums	tances" test The	e organization qua	lıfıes as a publıc	
	18		uon did not chock	a hov on line 12	16a 16h 17a a	or 17h chack this	hov and soo	₽ -1

►□

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.)

Se	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2	009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	13,618,902	10,829,704	11,018,311	14,816,306	12	2,124,100	62,407,323
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	67,789,354	51,768,022	78,608,724	67,956,993	52	2,770,918	318,894,011
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1 through 5	81,408,256	62,597,726	89,627,035	82,773,299	64	,895,018	381,301,334
	A mounts included on lines 1, 2, and 3 received from disqualified persons							0
b	A mounts 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	6,949,846	781,228	17,499,338	4,581,498	4	÷,821,299	34,633,209
c	Add lines 7a and 7b	6,949,846	781,228	17,499,338	4,581,498	4	,821,299	34,633,209
8	Public Support (Subtract line 7c							346,668,125
Se	rom line 6) ction B. Total Support							
	ndar year (or fiscal year	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 20	009	(f) Total
_	beginning in)	81,408,256	62,597,726	89,627,035	82,773,299		,895,018	381,301,334
9 10a	A mounts from line 6 Gross income from interest,	81,408,236	62,397,726	69,627,033	62,773,299	04	,695,016	361,301,334
IVA	dividends, payments received on securities loans, rents, royalties and income from similar sources	13,807,230	19,254,612	17,181,265	15,678,523	15	,780,854	81,702,484
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
c	Add lines 10a and 10b	13,807,230	19,254,612	17,181,265	15,678,523	15	,780,854	81,702,484
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	2,709,786	2,872,297	3,078,920	2,054,266	1	,652,409	12,367,678
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)				391,406		262,323	653,729
13	Total support (Add lines 9,	97,925,272	84,724,635	109,887,220	100,897,494	82	,590,604	476,025,225
14	10c, 11 and 12) First Five Years If the Form 990 is check this box and stop here	for the organizat	lon's first, second	, thırd, fourth, or	l fifth tax year as a	501(c)(3) organ	ızatıon, ▶┌
	ation C. Communication of D. I	lia Comment =						
<u>Se</u> 15	ction C. Computation of Pub Public Support Percentage for 200			13 column (f))		1		72.020.00
19	ablic Support Fercentage for 200	> (ime o coidiilli	(i) divided by line	13 Column (1))		15		72 830 %

Public support percentage from 2008 Schedule A , Part III , line 15 $\,$

15	72 830	%
16	77 380	%

Section D. Computation of Investment Income Percentage

- 17 Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))
- Investment income percentage from 2008 Schedule A, Part III, line 17 18

- 17 17 160 % 18
- 19a 33 1/3% support tests—2009. 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 ${f stop}$ here. The organization qualifies as a publicly supported **▶**▼ organization
- 33 1/3% support tests—2008. 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
- Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV

Supplemental Information. 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. Provide any other additional information. See instructions

Schedule A (Form 990 or 990-EZ) 2009

DLN: 93493267002110

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities),

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

	ction 501(c) (other than section 501(c)(3)) organizations. Complete Parts FA and C below. Do not con ction 527 organizations. Complete Part I-A only	npiete Pa	art I-B				
If th ♣ Se ♣ Se If th	e organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 4 ction 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part ction 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line ction 501(c)(4), (5), or (6) organizations Complete Part III	II-A Do Part II-E	not co 3 Do r	mplet not co	e Part II-B mplete Part	: II-A	
		Employe	erider	ntıfıc a	ition numbe	er	_
ivat	ional Fire Protection Association	04-165	3090				
Par	t I-A Complete if the organization is exempt under section 501(c) or is a s				anizatio	n.	_
1	Provide a description of the organization's direct and indirect political campaign activities in Par	t IV					
2	Political expenditures	ı	-	\$			
3	Volunteer hours						_
Par	t 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	
b	If "Yes," describe in Part IV						
Par	t I-C Complete if the organization is exempt under section 501(c) except :	sectio	n 50	1(c)	(3).		_
1	Enter the amount directly expended by the filing organization for section 527 exempt function ac	tivities	•	\$			_
2	Enter the amount of the filing organization's funds contributed to other organizations for section 5	527					
	exempt funtion activities			\$			_
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 3	17b	•	\$			_
4	Did the filing organization file Form 1120-POL for this year?				☐ Yes	☐ No	
5	State the names, addresses and employer identification number (EIN) of all section 527 politica were made. For each organization listed, enter the amount paid from the filing organization's funde contributions received that were promptly and directly delivered to a separate political organizat fund or a political action committee (PAC). If additional space is needed, provide information in F	s Also e ion, suc	enteri	the ar	nount of po	litical	

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

	nedule C (Form 990 or 990-EZ) 2009			Page 2
Pa	complete if the organization under section 501(h)).	n is exempt under section 501(c)(3) an	d filed Form 5768	(election
	Check I if the filing organization belongs to			
<u> </u>	Check I If the filing organization checked bo Limits on Lobbying I (The term "expenditures" means a		(a) Filing Organization's Totals	(b) A ffiliated Group Totals
1a	Total lobbying expenditures to influence public	opinion (grass roots lobbying)		
ь	Total lobbying expenditures to influence a legis			
c	Total lobbying expenditures (add lines 1a and 1			
d	Other exempt purpose expenditures			
е	Total exempt purpose expenditures (add lines 1	c and 1d)		
f	Lobbying nontaxable amount Enter the amount columns	from the following table in both		
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxable amount is: 20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
	Grassroots nontaxable amount (enter 25% of li	ne 1f)		
h	Subtract line 1g from line 1a If zero or less, ent	er -0-		
i	Subtract line 1f from line 1c If zero or less, ent	er - 0 -		
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1i, did the organization file Form 472	0 reporting	┌ Yes ┌ No

columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbying Expendi	tures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a	Lobbying non-taxable amount					
ь	Lobbying ceiling amount (150% of line 2a, column(e))					
С	Total lobbying expenditures					
d	Grassroots non-taxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

(election under se		er section 501(c)(3) and ha	1		
			Yes	No	(b) A mount
legislation, including any attemp	anızatıon attempt to ınfluence fore t to ınfluence public opinion on a l				
through the use of a Volunteers?				No	
b Paid staff or management (includc Media advertisements?	e compensation in expenses repo	rted on lines 1c through 1i)?	Yes	No	
d Mailings to members, legislatorse Publications, or published or broad			Yes	No	
f Grants to other organizations for		r a legislative hody?	Yes	No	9,74
h Rallies, demonstrations, seminar	s, conventions, speeches, lecture	= 7	163	No	5,74
i Other activities? If "Yes," descrj Total lines 1c through 1i	be in Part IV			No	9,74
Did the activities in line 1 causeIf "Yes," enter the amount of any	the organization to be not describ tax incurred under section 4912	ed in section 501(c)(3)?		No	
c If "Yes," enter the amount of anyd If the filing organization incurred	· •	- -		I	
art III-A Complete if the or 501(c)(6).			n 501(c)(5), c	r section
	ore) dues received nondeductible	by members?			Yes No
	n-house lobbying expenditures of ryover lobbying and political expe				2
art III-B Complete if the o	ganization is exempt und	er section 501(c)(4), sectio			r section
answered "Yes".		are answered "No" OR if Par		line 3	<u></u>
* *	bbying and political expenditures	(do not include amounts of politica	1		
expenses for which the section 5 a Current year	27(1) tax was paid).		2a		
b Carryover from last yearc Total			2b 2c		
	ction 6033(e)(1)(A) notices of no unt on line 2c exceeds the amoun	indeductible section 162(e) dues t on line 3, what portion of the exces	3		
political expenditure next year?	erryover to the reasonable estima	· ·	4		
Taxable amount of lobbying and part IV Supplemental Info	political expenditures (see instruc prmation	tions)	5		
Complete this part to provide the des Also, complete this part for any addit		e 1, Part I-B, line 4, Part I-C, line 5,	and Part	II-B, lıne	· 1ı
Identifier	Return Reference	Expl	anation		
		Combustible Dust Explosions a US House of Reps & Senate-FA House of Reps & Senate-Fire Si 1404/S652 US House of Reps US House of Reps & Senate H Monoxide Poisioning Prevention Renewable Energy Act H R 63: Conservation Act H R 2454 AI Security Act of 2009 H R 149 Reduction Act of 2009 H R 12 Tobacco Control Act of 2009 H R Terrorism Act of 2009 H R 12 Tobacco Control Act of 2009 H R 84 Combustible Dust Explosion an FAA Reathorization H R 1895 Communities Act H R 1404/S Building Code Incentive Act of Mitigation Act of 2009 H R 30 Mitigation Enhancement Act of Responder Innovation and Supp DHS Appropriations Bill Quarte Carbon Monoxide Poisioning Pr American Renewable Energy Ac and Conservative Act H R 245 Security Act of 2009 H R 324 Act S 1733 Clean Energy Jobs 3246 Advanced Vehicle Techn Jobs and American Power Act H Fatility Reduction Act of 2009 Security Improvenment Act of Water Security Act of 2009 H F Through Criminal History Act of	A Reauthor afe Comming & Senate-R 1796 R I 1796 R I Water Using From 194 P Worker I Worker I Worker I R 1194 P Worker I R 1194 P R 2009 H R I R 1499 P R 1499 P R 261 (2009 H R 261 (2009 H R 261 (2009 H R 261 (2009 H R 261 (2009 H R 261 (2009 S 1727/S f 2009 S	orization unities A Flame A lesident 890 An se Efficie lean Ene ire Fight al Facilit emical F Smokin Fire Spr Protecti ct of 200 ct S 76 e Act H 3026 T edisaste 3028 T 2009 H Act of 20 LT96 Re Act of 20 LT96 Re Act of 20 LT96 Re Act of 20 LT96 Re Act of 20 LT96 Re LT96	A S 762 US Act H R Act Quarter 2 Ial Carbon Derican De
		Destruction Prevention Prepare Smoking Prevention & Tobacco Sprinkler Incentive Act of 2009 Against Combustible Dust Expl 2136/S 1791 Honorable Steph Prevention Act H R 915 FAA R Standup Act S 762 Fire Safe C 652 Flame Act H R 2592 Safe 2009 H R 3026 The Hazard M	Act of 20 HR 849 losion and anie Tubb Reauthoriza ommunitie Building C	09 H R Worker Fires A s Jones ation H I es Act H Code Ind	256 Family 1194 Fire Protection ct of 2009 H College Fire R 1895 R 1404/S entive Act o

261 Chemical Facility Security Improvement Act of 2009 H R 2868 Chemical & Water Security Act of 2009 H R 1727/S 1684 Managing Arson Through Criminal History Act of 2009 H R 1194 Fire Sprinkler Incentive Act of 2009 H R 849 Worker Protection Against Combustible Dust Explosions and Fires Act of 2009 H R 2136/S 1791 Honorable Stephanie Tubbs Jones College Fire Prevention Act H R 915 FAA Reauthorization H R 1895 Standup Act H R 4104 Emergency Responders Highway Safety Act of 2009 S 762 Fire Safe Communities Act H R 2592 Safe Building Code Incentive Act of 2009 H R 3791 Fire Grants Reauthorization Act H R 3026

The Hazard Mitigation Act of 2009

DLN: 93493267002110

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions.

Name of the organization **Employer identification number** National Fire Protection Association 04-1653090

Part	Organizations Maintaining Donor Acorganization answered "Yes" to Form 99		unds or Accounts	. Complete if the
	-	(a) Donor advised funds	(b) Funds and ot	her accounts
1 To	otal number at end of year			
2 A g	ggregate contributions to (during year)			
3 A g	ggregate grants from (durıng year)			
4 A g	ggregate value at end of year			
	ıd the organızatıon ınform all donors and donor advı ınds are the organızatıon's property, subject to the o	_	or advised	┌ Yes ┌ No
us	ld the organization inform all grantees, donors, and sed only for charitable purposes and not for the ben onferring impermissible private benefit	5 5	•	┌Yes ┌No
Part 1	Conservation Easements. Complete	ıf the organızatıon answered "Yes" t	o Form 990, Part IV	, line 7.
7 7 2 C	urpose(s) of conservation easements held by the or Preservation of land for public use (e g , recreati Protection of natural habitat Preservation of open space omplete lines 2a-2d if the organization held a quali	on or pleasure) Preservation of an Preservation of a c	historically important certified historic struct of a conservation	
ea	asement on the last day of the tax year	,		
_				End of the Year
_	otal number of conservation easements		2a	
	otal acreage restricted by conservation easements		2b	
_	umber of conservation easements on a certified his	, ,	2c	
d N	umber of conservation easements included in (c) ac	cquired after 8/17/06	2d	
	umber of conservation easements modified, transfe ne taxable year 🟲	rred, released, extinguished, or terminate	ed by the organization o	luring
4 N	umber of states where property subject to conserva	ation easement is located 🕨		
5 Do	oes the organization have a written policy regarding of the conservation easements it holds?	the periodic monitoring, inspection, hand	—— dling of violations, and	┌ Yes ┌ No
6 St	taff and volunteer hours devoted to monitoring, insp	pecting and enforcing conservation easem	nents during the year 🕨	
7 A i	mount of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easements	s during the year ► \$ _	
	oes each conservation easement reported on line 2 70(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of sec	tion	┌ Yes ┌ No
ba	n Part XIV, describe how the organization reports coalance sheet, and include, if applicable, the text of the organization's accounting for conservation easen Organizations Maintaining Collection	the footnote to the organization's financial nents	statements that desc	rıbes
	Complete if the organization answered "			
ar	the organization elected, as permitted under SFAS rt, historical treasures, or other similar assets held rovide, in Part XIV, the text of the footnote to its fin	116, not to report in its revenue stateme for public exhibition, education or researce	ch in furtherance of pub	
_ hi	the organization elected, as permitted under SFAS istorical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research i		
(i)) Revenues included in Form 990, Part VIII, line 1		► \$	
(ii	i) Assets included in Form 990, Part X		- \$	
2 If	the organization received or held works of art, histo llowing amounts required to be reported under SFA		or financial gain, provid	e the
a Re	evenues included in Form 990, Part VIII, line 1		► \$	
Ь Δ.	ssets included in Form 990, Part X		b. .	

Par	Organizations Maintaining Co	ollections of Art	, His	torical Tre	easur	es, or Ot	her Simila	ır Asse	ets (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	e following th	nat are	a sıgnıfıcar	nt use of its c	ollectio	n	
а	Public exhibition		d	┌ Loan o	rexch	ange progra	ıms			
ь	Scholarly research		e	┌ Other						
c	Preservation for future generations									
4	Provide a description of the organization's c	ollections and expla	ın hov	vthey further	the or	ganızatıon's	s exempt pur	pose in		
5	During the year, did the organization solicit assets to be sold to raise funds rather than			•				Г	Yes	┌ No
Paı	t IV Escrow and Custodial Arrang					answered	"Yes" to Fo	rm 990	ɔ <u>,</u>	
	Part IV, line 9, or reported an ar		•	•						
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?				ions or	other asse	ts not	Г	Yes	┌ No
Ь	If "Yes," explain the arrangement in Part XI	V and complete the	follow	ıng table						
_	De sussiana hadan							A mou	111t	
q	Beginning balance						lc			
d	Additions during the year					<u> </u>	ld			
e	Distributions during the year						le l			
f	Ending balance					<u></u>	Lf			_
2a	Did the organization include an amount on F		e 21?					J	Yes	No
	If "Yes," explain the arrangement in Part XIV			anad !!\/aa	." +o	2	Dowt IV loop	10		
Рa	rt V Endowment Funds. Complete	(a)Current Year		<u>wered "Yes</u>)Prior Year			(d)Three Years		e)Four Ye	ears Back
1a	Beginning of year balance	4,987,694		177,505			(,		,	
ь	Contributions	0		6,000,000						
с	Investment earnings or losses	1,405,530		-1,189,811						
d	Grants or scholarships									
e	Other expenditures for facilities									
	and programs							-+		
f	Administrative expenses	6,393,224		4,987,694				-+		
g	End of year balance	, ,		4,367,034						
2	Provide the estimated percentage of the year		as							
а	Board designated or quasi-endowment	%								
Ь	Permanent endowment ► 100 000 % %									
с -	Term endowment ► %									
3а	Are there endowment funds not in the posse organization by	ssion of the organiz	ation t	nat are heid	and ad	ministered	for the		Yes	No
	(i) unrelated organizations							3a(i)	+ +	No
	(ii) related organizations							3a(ii)		Νο
Ь	If "Yes" to 3a(II), are the related organization							3Ь	Yes	
4	Describe in Part XIV the intended uses of the									
Par	t VI Investments—Land, Building	s, and Equipme	<u>nt. S</u>			· ·				
	Description of investment			(a) Cost or o basis (investr		(b) Cost or oth basıs (other)			(d) Boo	k value
1a	Land			1,91	19,353				1	1,919,353
b	Buildings			68,83	36,458		25,1	.68,231	43	3,668,227
c	Leasehold improvements			13,61	18,742		8,9	77,036		1,641,706
d	Equipment			13,98	38,397		12,3	342,846	1	1,645,551
е	Other			1,42	27,519		5	39,419		888,100

52,762,937

Part VII Investments—Other Securities. See	Form 990, Part X, line 12	
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		·
Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	•	
Part VIII Investments—Program Related. Se	e Form 990, Part X, line :	13.
(a) Description of investment type	(b) Book value	(c) Method of valuation
	(-,	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, III	ne 15.	
(ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15. Otion	(b) Book value
Part IX Other Assets. See Form 990, Part X, III (a) Description (b) Should equal Form 990, Part X, col (B) line in Part X Other Liabilities. See Form 990, Part X	ne 15. ption	
Part IX Other Assets. See Form 990, Part X, III (a) Description (b) Should equal Form 990, Part X, col (B) line in the second of the second o	ne 15. ption	
Total. (Column (b) should equal Form 990, Part X, col (B) line 2 Part X Other Liabilities. See Form 990, Part X	ne 15. ption 5)	
Total. (Column (b) should equal Form 990, Part X, col (B) line 3 Part X Other Liabilities. See Form 990, Part > (a) Description of Liability Federal Income Taxes	5)	
Total. (Column (b) should equal Form 990, Part X, col (B) line 2 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	ne 15. ption 5)	
Total. (Column (b) should equal Form 990, Part X, col (B) line 3 Part X Other Liabilities. See Form 990, Part > (a) Description of Liability Federal Income Taxes	5)	
Total. (Column (b) should equal Form 990, Part X, col (B) line 3 Part X Other Liabilities. See Form 990, Part > (a) Description of Liability Federal Income Taxes	5)	
Total. (Column (b) should equal Form 990, Part X, col (B) line 3 Part X Other Liabilities. See Form 990, Part > (a) Description of Liability Federal Income Taxes	5)	
Total. (Column (b) should equal Form 990, Part X, col (B) line 3 Part X Other Liabilities. See Form 990, Part > (a) Description of Liability Federal Income Taxes	5)	
Total. (Column (b) should equal Form 990, Part X, col (B) line 3 Part X Other Liabilities. See Form 990, Part > (a) Description of Liability Federal Income Taxes	5)	
Total. (Column (b) should equal Form 990, Part X, col (B) line 3 Part X Other Liabilities. See Form 990, Part > (a) Description of Liability Federal Income Taxes	5)	
Total. (Column (b) should equal Form 990, Part X, col (B) line 3 Part X Other Liabilities. See Form 990, Part > (a) Description of Liability Federal Income Taxes	5)	
Total. (Column (b) should equal Form 990, Part X, col (B) line 3 Part X Other Liabilities. See Form 990, Part > (a) Description of Liability Federal Income Taxes	5)	
Total. (Column (b) should equal Form 990, Part X, col (B) line 3 Part X Other Liabilities. See Form 990, Part > (a) Description of Liability Federal Income Taxes	5)	
Total. (Column (b) should equal Form 990, Part X, col (B) line 3 Part X Other Liabilities. See Form 990, Part > (a) Description of Liability Federal Income Taxes	5)	
Total. (Column (b) should equal Form 990, Part X, col (B) line 3 Part X Other Liabilities. See Form 990, Part > (a) Description of Liability Federal Income Taxes	5)	
Total. (Column (b) should equal Form 990, Part X, col (B) line 3 Part X Other Liabilities. See Form 990, Part > (a) Description of Liability Federal Income Taxes	5)	
Total. (Column (b) should equal Form 990, Part X, col (B) line 3 Part X Other Liabilities. See Form 990, Part > (a) Description of Liability Federal Income Taxes	5)	
Total. (Column (b) should equal Form 990, Part X, col (B) line 3 Part X Other Liabilities. See Form 990, Part > (a) Description of Liability Federal Income Taxes	5)	

Schedule D (Form 990) 2009

	its	3XII Reconciliation of Change in Net Assets from Form 990 to Financial Statemer
54,977,202	1	Total revenue (Form 990, Part VIII, column (A), line 12)
54,223,709	2	Total expenses (Form 990, Part IX, column (A), line 25)
753,493	3	Excess or (deficit) for the year Subtract line 2 from line 1
20,058,970	4	Net unrealized gains (losses) on investments
	5	Donated services and use of facilities
	6	Investment expenses
	7	Prior period adjustments
4,528,864	8	Other (Describe in Part XIV)
24,587,834	9	Total adjustments (net) Add lines 4 - 8
25,341,327	10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9
		XII Reconciliation of Revenue per Audited Financial Statements With Revenue p
102,649,573	1	Total revenue, gains, and other support per audited financial statements
· · ·		A mounts included on line 1 but not on Form 990, Part VIII, line 12
		Net unrealized gains on investments
		Donated services and use of facilities
		Recoveries of prior year grants
		Other (Describe in Part XIV)
47,672,371	2e	Add lines 2a through 2d
54,977,202	3	Subtract line 2e from line 1
		A mounts included on Form 990, Part VIII, line 12, but not on line 1
		Investment expenses not included on Form 990, Part VIII, line 7b . 4a
		Other (Describe in Part XIV) 4b
0	4c	A dd lines 4a and 4b
54,977,202	5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)
	per R	Reconciliation of Expenses per Audited Financial Statements With Expenses
77,306,748	1	Total expenses and losses per audited financial
		A mounts included on line 1 but not on Form 990, Part IX, line 25
		Donated services and use of facilities
		Prior year adjustments
		Other losses
		Other (Describe in Part XIV)
23,083,039	2e	Add lines 2a through 2d
54,223,709	3	Subtract line 2e from line 1
· · · ·		A mounts included on Form 990, Part IX, line 25, but not on line 1:
		Investment expenses not included on Form 990, Part VIII, line 7b 4a
		Other (Describe in Part XIV)
	1	
0	4c	Add lines 4a and 4b

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

Ident if ier	Return Reference	Explanation
Part V , Line 4	Description of Intended Use of Endowment Funds	At all times the endowment fund shall be used exclusively for the accomplishment and support of charitable, educational, scientific, and literary purposes. The Endowment is held by the Fire Protection Research Foundation, a related entity listed on Schedule R
Part X	Description of Uncertain Tax Positions Under FIN 48	Tax Status and Uncertain Tax Positions NFPA is recognized by the internal Revenue Service as an organization described in Section 501(c)(3) of the Internal Revenue Code and is generally exempt from Federal and state income taxes on related income A provision for taxes is considered to the extent that NFPA has unrelated activities, but such considerations are not significant Accordingly, no provision for income taxes is made in the financial statements NFPA accounts for the effect of any uncertain tax positions based on a "more likely than not" threshold to the recognition of the tax positions being sustained based on the technical merits of the position under scrutiny by the applicable taxing authority. If a tax position or positions are deemed to result in uncertainties of those positions, the unrecognized tax benefit is estimated based on a "cumulative probability assessment" that aggregates the estimated tax liability for all uncertain tax positions. Interest and penalties assessed, if any, are accrued as income tax expense. NFPA has identified its tax status as a tax exempt entity as a tax position however, NFPA has determined that such tax position does not result in an uncertainty requiring recognition. In addition to its tax status, NFPA has other tax positions that have been determined to be highly certain and, therefore, no reserve for the unrecognized tax liability is deemed necessary. NFPA is not currently under examination by any taxing jurisdiction. Its Federal and state income tax returns are generally open for examination for the past 3 years.
Part XI, Line 8 - O ther Adjustments		Pension costs other than periodic costs 4529078 Miscellaneous -214
Part XII, Line 2d - Other Adjustments		Cost of Goods Sold 8219412 Investment Real Estate Expenses 6406710 Rental Expenses Building 1 1182798 Loss on the sale of assets 1283 Realized Loss on Investments 11803198
Part XIII, Line 2d - Other Adjustments		Realized loss on Investments 11803198 Cost of Goods Sold 8219412 Pension Cost other than periodic benefit costs - 4529078 Real Estate Investment Expenses 6406710 Building 1 Expenses 1182798 Miscellaneous -1

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493267002110

OMB No 1545-0047

Statement of Activities Outside the United States ► Complete if the organization answered "Yes" to Form 990,

> Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. ▶ See separate instructions.

Open to Public **Inspection**

Department of the Treasury Internal Revenue Service

SCHEDULE F

(Form 990)

Totals.

	me of the organization tional Fire Protection Asso	ciation				Employer ide	ntification number
						04-1653090	
P		rmation on Ac 990, Part IV, lır		de the United States	s. Complete	e if the organ	nization answered
1	For grantmakers. Do	the amount	of the grant	s or			
	assistance, the grant						
	the grants or assistar						
2	For grant makers. Descr United States	ube in Part IV the	organization's pi	ocedures for monitoring tl	he use of grai	nt funds outsıd	e the
3	Activites per Region (U	se Schedule F-1	(Form 990) If ad	ditional space is needed)			
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in	ıs a progr describe sp	ty listed in (d) ram service, pecific type of s) in region	(f) Total expenditures for region
Eur	rope	1	1	the region) Program services	The promoti		40,764
	XICO	1		program services	Standards	NFPA Codes &	
C a	nada	1	1	program services	The promoti adoption of I Standards	on of and NFPA Codes &	157,154
C h	ına	1	1	program services	The promoti adoption of I Standards	on of and NFPA Codes &	34,161
	·						
		1	I	i			

401,313

P	art IV, line 15, for a	ssistance to Organ ny recipient who rec rm 990) if additional	eived more than \$5	ies Outside the Ur ,000. Check this bo	nited States. Com x if no one recipient	plete if the organiza received more tha	tion answered "Yes n \$5,000	" to Form 990, ▶ 厂
1 (a) Nam organiza		(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
tax-ex	empt by the IRS, or	nent organizations lis for which the grante r organizations or en	e or counsel has pr	ovided a section 50	1(c)(3) equivalency	letter	· *	
				· ·	·			(Form 990) 2009

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed.

	1 ± (101111 330) 11 ac	authorial opace	10 11004041				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
-							
-							1
_							1

Schedule F (Form 990) 2009

Identifier	ReturnReference	ın Part I, line 2, and any additional information. Explanation
Procedure for Monitoring Grants	Retarmenence	Schedule F, Part I, Line 2 NFPA receives monthly updates from
Outside the U S		their consultants along with proof of expenses
Outside the O 5		their consultants along with proof of expenses
+		

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Schedule I (Form 990)

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

OMB No 1545-0047

2009

DLN: 93493267002110

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Quincy, MA 02169

National Fire Protection Association

Employer identification number

04-1653090

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.

(a) Name and address of **(b)** EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (a) Description of (h) Purpose of grant ıf applıcable non-cash assistance organization grant cash valuation or assistance (book, FMV, appraisal or government assistance other) The Home Fire Sprinkler 510620405 501(c)3 100,000 Program Contribution CoalitionOne Batterymarch Quincy, MA 02169 National Volunteer Fire 391274172 501(c)3 15,000 Contribution Council7852 Walker Dr Greenbelt, MD 20770 Center For Campus Safety 141916059 501(c)3 10,000 Contribution 10 State St Newburyport, MA 01950 National Fallen Fire Fighters 521832634 501(c)3 10,000 Contribution 16825 S Seton Ave Emmitsburg, MD 21727 The Fire Protection 521256543 501(c)3 197,323 General Contributions Research Foundation1 & Program Batterymarch Park Contributions

art III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, I	Part IV, line 22
	Use Schedule I-1 (Form 990) if additional space is needed.	

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
See Additional Data Table					

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.								
Identifier	Return Reference	Explanation						
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 NFPA requires periodic reports from the recipients						
Other Information	Part IV	Schedule I, Part III Grants and other assistance to individuals in the US NFPA issues a number of scholarships each year for outstanding achievements. The following are the scholarships given out this year, The Percy Bugbee Scholarship, The Charles Morgan Scholarship, The George Miller Scholarship, The Jablonsky Scholarship, The David Gratz Scholarship, The Art Cote Scholarship and the Frank Fee Scholarship						

Compensation Information

DLN: 93493267002110

OMB No 1545-0047

Open to Public Inspection

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Name of the organization National Fire Protection Association **Employer identification number**

04-1653090

Pa	rt I Questions Regarding Compensation			
			Yes	Νo
1a	Check the approplate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	▼ Travel for companions			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
Ь	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply			
	✓ Compensation committee ✓ Written employment contract			
	✓ Independent compensation consultant ✓ Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A , line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		Νo
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a	Yes	
b	Any related organization?	5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a	Yes	
ь	Any related organization?	6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	Yes	
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was			
	subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		Νo
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
James M Shannon	(I) (II)	431,748 0	166,776 0	5,748 0	309,362 0	12,540 0	926,174 0	801,23	
Bruce H Mullen	(I) (II)	302,959 0	92,425 0	4,774 0	100,163 0	11,534 0	511,855 0	444,499	
Dennis J Berry	(I)	147,537 0	0	4,634 0	22,615 0	11,534 0	186,320 0	162,25	
Paul Crossman	(1) (11)	201,603 0	45,872 0	7,072 0	20,763 0	17,439 0	292,749 0	251,24	
Chris Dubay	(I) (II)	134,325 0	31,389 0	7,012 0	9,499 0	17,439 0	199,664 0	172,22	
Maureen Brodoff	(I) (II)	211,762 0	45,872 0	6,954 0	40,557 0	18,965 0	324,110 0	272,33	
Gary Keith	(I) (II)	187,084 0	42,306 0	5,512 0	28,478 0	17,439 0	280,819 0	240,68	
Robert Vondrasek	(I) (II)	187,160 0	42,233 0	5,020 0	39,219 0	12,540 0	286,172 0	249,230	
Catherine Scifres	(I) (II)	153,064 0	34,87 1 0	5,554 0	29,033 0	11,534 0	234,056 0	203,74	
Lorraine Carli	(I) (II)	143,327 0	31,390 0	795 0	26,207 0	830 0	202,549	(

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Return Reference	Explanation
	Part I, Line 1a	Travel for companions NFPA's policy is to be reimbursed for any travel by companions
	Part I, Line 4a	Mr James Shannon, President of National Fire Protection Association participated in the SERP retirement plan in 2009 Mr Shannon accrued \$267,753 in the plan Mr Bruce Mullen, Senior Vice President and CFO of National Fire protection Association participated in the SERP retirement plan in 2009 Mr Mullen accrued \$69,859 in the plan
	Part I, Line 5	15% of the Senior Management's bonus is based on actual revenues compared to budget each year
	Part I, Line 6	15% of the Senior Management's bonus is based on actual net earnings compared to budget each year
	Part I, Line 7	70% of the Senior Management's bonus is based on mission goals

Schedule J (Form 990) 2009

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493267002110

Schedule L

(Form 990 or 990-EZ)

(a) Name of interested person

James Shannon

Bruce Mullen

Department of the Treasury

Internal Revenue Service

Transactions with Interested Persons

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

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Name of the organization National Fire Protection Association					E	mployer id	ent if ica	tion numb	er
Daniel Europe Barrefit Tue		t F01/-\/2\	d t	(-)(4)		4-165309			
Part I Excess Benefit Tra Complete if the organizat								ıne 40b	
1 (a) Name of disq		,	(b) Desc				ʻ		orrected?
2 Enter the amount of tax impos section 4958				ons duri	ng the	year under	\$		
3 Enter the amount of tax, If any	, on line 2, abov	ve, reimbursed by th	ne organization .			•	\$ <u> </u>		
Part II Loans to and/or Complete if the organi			O, Part IV , line 26	, or Form	า 990-	EZ, Part V	, lıne 38	а	
(a) Name of interested person and purpose	(b) Loan to or from the organization?	(c)O riginal principal amount	(d)Balance due	(e) I defaul		(f) Approv by board committe	lor	(g) Writ	
	To From			Yes	No	Yes	No	Yes	No
otal		-> \$				I		I	
Part IIII Grants or Assistan Complete if the orga				', line 2	7.				
(a) Name of interested pers	on (t	Relationship betw and the oi	een interested per ganization	son	(c) A r	nount of gr	ant or ty	pe of ass	stance
Part IV Business Transac Complete if the orga				, line 2	8a, 28	3b, or 28c			
(-) Name of orbital and a second	(b)	Relationship veen interested	(c) A mount of	,	, <u></u>	minhia = -5-	un ne - : L		Sharing of nization's

transaction

0 None

0 None

person and the

organization

Mr Shannon is Pres of

NFPA & a director of the Fire Protection Foundation

Mr Mullen is the Sr

Treas of the Foundation

VP & CFO of NFPA &

revenues?

No

Νo

Νo

Yes

(d) Description of transaction

OMB No 1545-0047

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

2009

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

Open to Public Inspection

Name of the organization National Fire Protection Association **Employer identification number**

04-1653090

Return Reference	Explanation
	Once the returns are completed they are reviewed at least twice by the CFO and accounting staff of NFPA. The return is then sent to the auditing firm for a final review and comments. The 990 is then made available to the full board of directors and reviewed by the audit committee prior to filing.
	Each officer, director, trustee and key employee has an ongoing duty to disclose any conflicts of interest or possble conflicts of interest to the general counsel or president. In addition each key employee shall file an annual disclosure statement including a questionnaire which shall be provided by the company. The president shall take action as he or she considers appropriate regarding managing conflicts of interest and handling any possible violation or infringement of the conflict of interest policy.
	The process for determining compensation of top officers & key employees is as follows. The compensation committee of the board reviews, recommends and approves all forms of compensation for the President & Sr. Vice President. The compensation committee reports to the board all decisions made. Comparability data is gathered by an independent consultant every three years. This information is given to the compensation committee to guide it in its salary recommendations. Other officers and key employees salaries are reviewed by their superiors and authorized by the president.
	The National Fire Protection Association makes available on its wiebsite a copy of their bylaws. NFPA also publishes a financial summary in the journal for its members. The conflict of interest document is not published and is retained as an internal document by the company, the form 990 and financial statements are available via wiw wiguidestar com and the massachusetts attorney general's wiebsite.
	There have been no changes in the committee's responsibility for the oversight of the audit
	Form 990 Line 2 Schedule R Transactions with Related Organizations Line 2 (1) During the year The Fire Protection Research Foundation paid National Fire Protection Association \$ 1,025 00 per month for rental space. This amount was negotiated between the two organizations. Line 2 (2) During the year the organization made both unrestricted and restricted donations to the related party. Restricted contributions of \$150,000 were made to the Code Fund which NFPA is a sponsor. Line 2 (3) During the year. The Fire Protection Research Foundation paid National Fire Protection Association \$ 1,025 00 per month for rental space. This amount was negotiated between the two organizations. Line 2 (7) This represents the reimbursement of expenses from The Fire Protection Research Foundation during the year.
This pertains to schedule L	(1) Payments to interested parties do not exceed the the reporting thresholds (2) Two officers of NFPA serve as officers of the Fire Protection Research Foundation, a related entity Their compensation has been reported on 990 part VII section 1A
Line 8 - Pension Plan Contributions	The pension cost on line 8 of part IX is made up of the following and recognizes & records the correct liability on the balance sheet FAS #87 Expense \$2,861,728 457B Expense \$2,670 Total Pension Expense \$2,864,398
	This pertains to schedule L Line 8 - Pension Plan

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493267002110

OMB No 1545-0047

2009

Open to Public Inspection

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

20-0580136

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

Related Organizations and Unrelated Partnerships

Name of the organization
National Fire Protection Association

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

04-1653090

Employer identification number

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
two batterymarch Ilc 2 batterymarch park quincy, MA 02169 04-1653090	leased property	МА	143,710	19,069,047	national fire protection association
three batterymarch llc 3 batterymarch park quincy, MA 02169	leased property	MA	619,847	12,499,598	national fire protection association

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) (b) (c) (d) (e) (f)

Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling or foreign country) (if section 501(c)(3)) entity

The Fire Protection Research Foundation

One Batterymarch Park To promote research development MA 501(c)3 Line 9

Quincy, MA 02169 52-1256543

(j)

General or

managing

partner?

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered	"Yes"	on Form 990,	Part IV, lir	ne 34
	because it had one or more related organizations treated as a partnership during the tax year.)				
			h.)	7:3	

(a) Name, address, and EIN of related organization (b) Primary activity (c) Legal domicile (state or foreign country)

(d) Direct controlling entity (e)
Predominant income
(related, unrelated,
excluded from tax
under sections 512514)

(f) Share of total income **(g)** Share of end-of-year assets Disproprtionate allocations?

Code V—UBI
amount in box 20 of
Schedule K-1
(Form 1065)

Yes No

Yes No

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a)
Name, address, and EIN of related organization

(b) Primary activity (c) Legal domicile (state or foreign country) (d) Direct controlling entity (e)
Type of entity
(C corp, S corp,
or trust)

(f) Share of total income

(g) Share of end-of-year assets (h) Percentage ownership

(3)

(4)

(5)

(6)

Sche	dule R (Form 990) 2009		Рa	ge 3
Pa	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)			
	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a	Yes	
b	Gift, grant, or capital contribution to other organization(s)	1b	Yes	
c	Gıft, grant, or capital contribution from other organization(s)	1c		No
d	Loans or loan guarantees to or for other organization(s)	1d		No
e	Loans or loan guarantees by other organization(s)	1e		No
f	Sale of assets to other organization(s)	1f		No
g	Purchase of assets from other organization(s)	1g		No
h	Exchange of assets	1h		No
i	Lease of facilities, equipment, or other assets to other organization(s)	1i	Yes	
j	Lease of facilities, equipment, or other assets from other organization(s)	1j		No
k	Performance of services or membership or fundraising solicitations for other organization(s)	1k	Yes	
1	Performance of services or membership or fundraising solicitations by other organization(s)	11		No
m	Sharing of facilities, equipment, mailing lists, or other assets	1m	Yes	
n	Sharing of paid employees	1n	Yes	
0	Reimbursement paid to other organization for expenses	10		No
р	Reimbursement paid by other organization for expenses	1р	Yes	
q	O ther transfer of cash or property to other organization(s)	1q		No
r	O ther transfer of cash or property from other organization(s)	1r		No
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresh	olds		
	(a) Name of other organization (b) Transaction type(a-r)	Amount	(c) t involv	ed
(1) Se 2)	e Additional Data Table			

Schedule R (Form 990) 2009

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a)
Name, address, and EIN of entity

(b) Primary activity (c) Legal domicile (state or foreign country) (d)
Are all
partners
section
501(c)(3)

501(c)(3) organizations? Yes No (e) Share of end-of-year assets **(f)**Disproprtionate allocations?

No

Yes

(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)

(h) General or managing partner?

Yes No

Software ID: Software Version:

EIN: 04-1653090

Name: National Fire Protection Association

|--|

	(a) Name of other organization	(b) Transaction type(a-r)	(c) A mount Involved (\$)
(1)	The Fire Protection Research Foundation	A	12,300
(2)	The Fire Protection Research Foundation	В	197,323
(3)	The Fire Protection Research Foundation	I	12,300
(4)	The Fire Protection Research Foundation	К	0
(5)	The Fire Protection Research Foundation	М	0
(6)	The Fire Protection Research Foundation	N	0
(7)	The Fire Protection Research Foundation	Р	504,204

Additional Data

Software ID: Software Version:

EIN: 04-1653090

Name: National Fire Protection Association

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

4d. Other program services

(Code) (Expenses \$ 9,819,812 including grants of \$ 270,693) (Revenue \$ 2,925,896)

Meeting & Seminars - NFPA's conferences serve as educational and networking opportunities for the association members and others interested in benefiting from the latest information about fire safety Professional Development-NFPA offers a wide variety of professional development opportunities addressing the latest fire and safety requirements and best practices Contracts- NFPA entered into a number of contracts with the federal government. The two largest contracts are the US department of agriculture, forest service and the US department of homeland security/FEMA Public Education-The Public Education division provides the technical foundation for NFPA'S fire and life safety education messages and outreach strategies for the general public, fire departments and other educators International Operations-NFPA has established offices in Canada, China, Mexico and Europe The association undertakes the translation of key codes and standards and works in varied collaborative relationships with its counterparts around the world Professional Development \$4,752,389Certification \$358,765Public Education \$2,166,605International \$1,020,265Contracts \$1,255,790Miscellaneous \$265,998Total Other Program Services \$9,819,812

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

(A) Name and Title	(B) Average hours		(C) ition (che that apply		l .		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Officer Institutional Trustee	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
Paul M Fitzgerald Board of Dir-Chairman	1 00	Х	Х				0	0	0
Thomas W Jaeger Board of Dir-1st V Chair	1 00	Х	х				0	0	0
Philip C Stittleburg Board of Dir-2nd V Chair	1 00	Х	Х				0	0	0
H Wayne Boyd Board of Dir-Secretary	1 00	Х	x				0	0	0
Vincent J Bollon Board of Dir-Treasurer	1 00	Х	Х				0	0	0
George J Ockuly Board of Dir-Past Chair	1 00	X					0	0	0
Aprıl L Berkol Dırector	1 00	Х					0	0	0
Donald P Bliss Director	1 00	Х					0	0	0
Mıchael I Callanan Dırector	1 00	Х					0	0	0
James M Clark Dırector	1 00	Х					0	0	0
John C Dean Dırector	1 00	Х					0	0	0
Rebecca F Denlinger Director	1 00	Х					0	0	0
Philip J DiNenno Director	1 00	Х					0	0	0
Ernest J Grant Dırector	1 00	Х					0	0	0
Lieut Thomas F Norton Director	1 00	X					0	0	0
John J O'Sullivan Director	1 00	X					0	0	0
Randolph W Tucker Dırector	1 00	X					0	0	0
Keith E Williams Director	1 00	X					0	0	0
Thomas groos dırector	1 00	Х					0	0	0
peter holland dırector	1 00	Х					0	0	0
brian hurley director	1 00	X					0	0	0
william mccammon director	1 00	X					0	0	0
James M Shannon President/CEO	37 50	X	X				604,272	0	321,902
Bruce H Mullen Sr Vice President, CFO	37 50		X				400,158	0	111,697
Dennis J Berry Assistant Secretary	37 50		Х				152,171	0	34,149

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Vice President

compensated Employees,	and independ	ieni c	OIIL	acı	LOT	-				
(A) Name and Title	(B) Average hours		tion (that a			Ш		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
Paul Crossman Vice President	37 50				Х			254,547	0	38,202
Chris Dubay Vice President	37 50				X			172,726	0	26,938
Maureen Brodoff Vice President	37 50					X		264,588	0	59,522
Gary Keith Vice President	37 50					X		234,902	0	45,917
Robert Vondrasek Vice President	37 50					X		234,413	0	51,759
Catherine Scifres Vice President	37 50					X		193,489	0	40,567
Lorraine Carli Vice President	37 50					Х		175,512	0	27,037

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
O utside Services	7,918,304	6,717,786	1,200,518	
Postage, Freight & Mail	5,591,206	5,523,755	67,451	
Printing Expense	3,179,858	3,139,994	39,864	
Contracts	976,254	976,254		
Building & Warehouse	922,117	489,183	432,934	

Software ID: Software Version:

EIN: 04-1653090

Name: National Fire Protection Association

Form 990, Schedule I, Part III, Grants and Other Assistance to Individuals in the United States

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Harvard Fellowship Scholarship	6	22,400			
Scholarship	1	5,000			
Scholarship	1	5,000			
Scholarship	1	5,000			
Scholarship	1	5,000			
Scholarship	1	5,000			
Scholarship	1	5,000			
Scholarship	1	5,000			
Scholarship	1	5,000			