

### 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



### **Return of Organization Exempt From Income Tax**

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

Department of the Treasury

		nue Service		► The organization may have to use a copy of this return to satisfy state repo		
A F	or the	e 2009 ca	len	dar year, or tax year beginning 05/01, 2009, and ending	0	4/30, 20 10
Всн	eck if app			Name of organization NATIONAL ROAD SAFETY FOUNDATION, INC.	D Employer identi	fication number
	Addres			Doing Business As	13-61282	
	Name	change print	or	Number and street (or P O box if mail is not delivered to street address) Room/suite	E Telephone numb	per
	Initial	type return Se	- 1	18 EAST 50TH STREET	(212) 837-	4800
	Termir	Speci Instru		City or town, state or country, and ZIP + 4		,,
	Ameno			NEW YORK, NY 10022	G Gross receipts	3,307,323.
	Applic	ation F	Na	ne and address of principal officer	H(a) Is this a group re	eturn for Yes X No
	7 bendu	"			affiliates? H(b) Are all affiliates i	ncluded? Yes No
ī	Tax-exe	empt status	-	X   501(c) ( 3 ) ◀ (insert no )   4947(a)(1) or   527	If "No," attach a	list (see instructions)
J	Websit	te: N/A			H(c) Group exemption	number -
<u></u>	Form c	of organizatio	n	X Corporation   Trust   Association   Other ▶ L Year of formati	ion 1961 <b>M</b> Sta	
Pa		Summa	_			
				e the organization's mission or most significant activities		
	•	THE FO	UN	DATION IS DEDICATED TO REDUCING CRASHES, DEATH AND	DISABILIT	 Y
nce		ON OUR	N	ATION'S ROADS BY PROMOTING SAFE DRIVING HABITS. IT	PRODCUES	
Па				ARIES, EDUCATIONAL PROGRAMS AND PUBLIC SERVICE BRO		
Governance	2			If the organization discontinued its operations or disposed of more than 25%		
				ring members of the governing body (Part VI, line 1a)	•	7
SS SS	4	Number of	inr	lependent voting members of the governing body (Part VI, line 1b)	4	
Ę						<del>                                     </del>
Activities				of employees (Part V, line 2a)	· · · · · · · · <del></del>	<del></del>
٩	7 a	Total gross		related business revenue from Part VIII, column (C), line 12		+
	h	Not unrela	tod	business taxable income from Form 990-T, line 34		-
	<del></del> -	Net unicia	icu	business taxable income north of the ost of	Prior Year	Current Year
	8	Contributio	nne	and grants (Part VIII, line 1h)	2,901,840	<del></del>
Jue	9	Drogram e	orv	(m, 1) (m) 1 (m)	0	+
Revenue				ce revenue (Part VIII, line 2g) come (Part VIII, column (A), lines 3, 4, and 7d)	781,348	
R				e (Part VIII, column (A), lines 5, 4, and 70)	0	<del></del>
				- add lines 8 through 11 (must equal Part M) ( column (A), line 12)	3,683,188	·
					2,000	<del></del>
	14	Ranafite n	u ai	milar amounts paid (Part IX, cdiumn (A), lines 1-3)	0	<del></del>
	15	Salarios o	alu	to or for members (Part IX Collumn (A) June 4), 2011	215,901	.1
Expenses	15	Drofossion	ant.	r compensation, employee benefits (Part IX, column (A), line 5-10) undraising fees (Part IX, column (A), line 11e)	0	·+- ·- ·- ·- ·-
pen	Ioa	Total fund	101	ing expenses, Part IX, column (D) (be 25 N), U \$4, 954.		-
Ä	17	Other ever	1015	es (Part IX, column (A), lines 11ā-11ā, 11f-24f)	320,470	. 359,221
	10	Total over		s Add lines 13-17 (must equal Part IX, column (A), line 25)	538,371	
					3,144,817	
J. S	1,3	ive veriue I		expenses Subtract line 18 from line 12	Beginning of Year	End of Year
Net Assets or Fund Balances	20	Total seco	te /		28, 226, 428	
Asse Bala	21		•		55,566	· · ·
ig c	22			fund balances Subtract line 21 from line 20	28,170,862	
	rt II			Block	20/1/0/002	. 30,220,131
•	ш				1 4-4 4 14	
1		and belief,	aitie . it	s of perjury, I declare that I have examined this return, including accompanying schedules and true, correct, and comparete peclaration of preparer (other than officer) is based on all info	i statements, and to rmation of which p	the best of my knowledge reparer has any knowledge
ີ ເ	ign			/sull //IN	ا ا	16/6
	ere	Sign	aidi	e of officer	Date /	<del>                                     </del>
ζ ''	0.0	JE	/ I	IE H. KATZ TREASURER		•
,			-	print name and title		
		<del>                                     </del>	_	Date Check if	Prepare	er's identifying number
Paid	l	Preparer :   signature	۱	2         self- employed		Tructions)
Prej	arer's	Firm's nan			EIN	13-0485070
Use	Only	if self-emp	loyè	1).	Phone no	212-832-0400
		<del></del>		s return with the preparer shown above? (see instructions)	, 110110 110	Ves X No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.\* JSA 9E1010 3 000 4GR0QK 1608

Form 990 (2009)

Form 990 (2009)

4e Total program service expenses ▶

(Expenses \$

4d Other program services (Describe in Schedule O)

including grants of \$

412,043.

) (Revenue \$

Form 9	90 (2009) 13-6128274			Page <b>3</b>
Part	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		.,	
2	complete Schedule A	1	<u> </u>	<del> </del>
2 3	Did the organization required to complete Schedule B, Schedule of Contributors 7	2	_ A	<del>  -</del>
3	candidates for public office? If "Yes," complete Schedule C, Part I	_		v
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete	3		X
7	Schedule C, Part II		Х	1
5	Sections 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	4		<del> </del>
v	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	_		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have	5		
•	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			1
	complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	0		<u> </u>
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	Х	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i>	•		
•	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part	-		<del></del>
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			1
	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If" Yes," complete Schedule D, Part V	10		Х
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	Х	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI		a.	-
•	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	,	<b>.</b> ,	1
	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	,		, mar.
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	-	EST,	
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			100
•	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	-	7	
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	Х	L.,
12A	Was the organization included in consolidated, independent audited financial statement for the tax year?  Yes No			
40	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	1		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
15		14b		X
13	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 United States? If "Yes," complete Schedule F, Part II			U
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	15		X
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	4.0		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	16		<u> </u>
• •	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17		<u> </u>
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	10	<u> </u>	<del></del>
	If "Yes," complete Schedule G, Part III	19		x
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X

Form **990** (2009)

1 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 12 if "Ves," complete Schedule ( Parts I and II	Part	Checklist of Required Schedules (continued)			
in the United States on Part IX, column (A), line 12 if "Yes" complete Schedule I, Parts I and II .  2		•		Yes	No
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 If Yes, complete Schedule I, Parts I and III.  22 X  23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization answer at Xes	21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
United States on Part IX, column (A), line 2º // "Yes," complete Schedule I, Parts I and III.  22 Did the organization answer "Yes" to Part VII, Section A, line 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 2.  23 Did the organization awa 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 lines 24 bit trough 24d and complete Schedule If I'N's," of our question 25.  b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception".  c Did the organization maintain an escrow account other than a refunding escrow at any time during the year? to defease any tax-exempt bonds?  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.  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 organizations prior Firms 990 or 990-E2? If "Yes," complete Schedule L, Part I.  Did the organization provide a grant or other assistance to an 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.  Did the organization provide a grant or other assistance to an 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 IV.  Did the organization provide a grant or other assistance to an officer, director, trustee, key employee? If "Yes," complete Schedule L, Part IV.  A nenetry of which a current or former officer, director		in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
United States on Part IX, column (A), line 2º // "Yes," complete Schedule I, Parts I and III.  22 Did the organization answer "Yes" to Part VII, Section A, line 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 2.  23 Did the organization awa 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 lines 24 bit trough 24d and complete Schedule If I'N's," of our question 25.  b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception".  c Did the organization maintain an escrow account other than a refunding escrow at any time during the year? to defease any tax-exempt bonds?  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.  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 organizations prior Firms 990 or 990-E2? If "Yes," complete Schedule L, Part I.  Did the organization provide a grant or other assistance to an 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.  Did the organization provide a grant or other assistance to an 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 IV.  Did the organization provide a grant or other assistance to an officer, director, trustee, key employee? If "Yes," complete Schedule L, Part IV.  A nenetry of which a current or former officer, director	22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J.  23		United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J.  23	23	·			
employees? If "Yes," complete Schedule J  24a Dd 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 lines 24b through 24d and complete Schedule K If "No," go to question 25  b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  d Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  d Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  b Is the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  b Is the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  b Is the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  25b Extra for a state of the organization of the organization with a disqualfied person in a prior year, and that the transaction behalf of the organization outstanding as of the end of the organization is an excess benefit transaction and prior year, and that the transaction and an excess benefit transaction and the organization on outstanding as of the end of the organizat					
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\$100,000 as of the tast day of the year, that was issued after December 31, 2002? If "Yes," answer lines 244 hthrough 24d and complete Schedule K If "No," go to guestion 25  b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24 a				
24b through 24d and complete Schedule K. If "No," go to question 25 b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		·			
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b I/A c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d I/J A 24c S Section 501(c)(3) anginizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "yes," complete Schedule L, Part I 25a Section 501(c)(3) and start the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2? If "Yes," complete Schedule L, Part I 25b Vas 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 25b Vas about to or by a current or former 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 27c Video 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).  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions? If "Yes," complete Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions? If "Yes," complete Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions? If "Yes," complete Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions? If "Yes," complete Schedule R, Part II institutions of a this torical treasures, or other similar assets, or qualified con			24a		Х
to defease any tax-exempt bonds?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	b		24b	N	7/ <del>\</del>
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?.  25 a 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 .  b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person or 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 .  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 .  27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contribution, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part II I I I I I I I I I I I I I I I I I	С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
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with a disqualified person during the year? If "Yes," complete Schedule L, Part I	d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	N	A
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-E27 if "Yes" complete Schedule L. Part I.  25 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 Vas a loan to or by a current or former officer, director, trustee, key employee, substantial contributor, or 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 IV instructions for applicable filing thresholds, conditions, and exceptions)  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.  b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.  c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.  28 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.  29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I.  20 Did the organization iquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II.  30 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 1701-2 and 301 17701-3? If "Yes," complete Schedule R, Part II.  31 Was the organization own 100% of an entity disregarded as separate from the organization under Regulations and that is treated as a partnership for federal income tax pu	25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2' If "Yes," complete Schedule L, Part II.  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 III.  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.  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)  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.  b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.  c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.  29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.  30 Did the organization inquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II.  31 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 II.  31 A Was the organization on 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 V, Inte 2  32 Did th		with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
990-E27 if "Yes," complete Schedule L, Part I.  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 .  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 .  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)  A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV .  28a X  b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV .  28b X  c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV .  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.  29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.  29 Did the organization inquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .  30 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I .  31 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-39 If "Yes," complete Schedule R, Part V, Ime 2 .  32 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part V, Ime 2 .  33 Section 501(c)(3) organizations. Did the organization make any transfers to a	b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
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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	26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III			26		X
18   18   19   19   19   19   19   19	27				
Was the organization a party to a business transaction with one of the following parties (see Schedule L. Part IV instructions for applicable filling thresholds, conditions, and exceptions)  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.  b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.  c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.  28b X  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. Part IV.  29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. Part I.  30 Did the organization iliquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.  31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.  31 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.  32 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, III, III, III, III, III, III					
Part IV instructions for applicable filing thresholds, conditions, and exceptions)  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			27		X_
A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28		ļ		
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.  c 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 direct or indirect owner? If "Yes," complete Schedule L, Part IV.  28c X  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Conservation contributions? If "Yes," complete Schedule N, Part I Conservation contributions? If "Yes," complete Schedule N, Part I Conservation contributions? If "Yes," complete Schedule N, Part I Conservation contributions? If "Yes," complete Schedule N, Part I Conservation contributions? If "Yes," complete Schedule R, Part I Conservation contributions? If "Yes," complete Schedule R, Part I Conservation contributions? If "Yes," complete Schedule R, Part I Conservation controlled controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Inne 2 Conservation 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 V, Inne 2 Conservation 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 V, Inne 2 Conservation 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 V, Inne 2 Conservation Complete Schedul			00-	v	
Schedule L, Part IV.  c 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 direct or indirect owner? If "Yes," complete Schedule L, Part IV.  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I  32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  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  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  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  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  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, Ines 11 and 19? Note. All Form 990 filers are required to complete Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.			28a		
c 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 direct or indirect owner? If "Yes," complete Schedule L, Part IV	D		206		\ <sub>x</sub>
family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L. Part IV.  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.  31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.  31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.  32 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 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, IV, and V, line 1.  34 Was the organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.  35 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 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI, Inne 2.  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, Innes 11 and 19? Note. All Form 990 filers are required to complete Schedule O.	_	•	200		
Part IV  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  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  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, Ime 1  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, Ime 2  Tod 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, Innes 1 and 19? Note. All Form 990 filers are required to complete Schedule O  28	C				}
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Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	20				
conservation contributions? If "Yes," complete Schedule M.  30 X  31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.  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 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 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 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 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 Yas 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 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 Did the organization complete Schedule O complete Schedule O.		·			
Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		· · · · · · · · · · · · · · · · · · ·	30		Х
Part I	31				
Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II			31		Х
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	32		ı		
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		· · · · · · · · · · · · · · · · · · ·	32	<u> </u>	X
Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
III, IV, and V, line 1		sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
Schedule R, Part V, line 2			34		Х
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	35	· · · · · · · · · · · · · · · · · · ·			
organization? If "Yes," complete Schedule R, Part V, line 2			35		X
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	36				.,
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R Part VI		- · · · · · · · · · · · · · · · · · · ·	36		X
Part VI	37	· · · · · · · · · · · · · · · · · · ·			[
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					
19? Note. All Form 990 filers are required to complete Schedule O			37		X
	38			J	
		19 ( Note. All Form 990 filers are required to complete Schedule O			

rai	Statements Regarding Other IRS Fillings and Tax Compilance			·
			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			. '
	US Information Returns Enter -0- if not applicable	<b>'</b>		i
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		-	
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	-		'
	gaming (gambling) winnings to prize winners?	1 c	N	A
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	-		1
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 5			·
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	$\tilde{X}$	_
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see			
	instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this return?	3a		-X '
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	A 1	7 <b>n</b>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	- 05	10	17
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	<b>∸</b>	4.5		X
ь	account)?	4a		
-	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank			,
	and Financial Accounts			5.
52	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	F		x
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a		X
	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	5b		
·			K I	m
6.	Prohibited Tax Shelter Transaction?	5 c	171	17
0 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			v
L	organization solicit any contributions that were not tax deductible?	6a		X
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or		A I	/A
-	gifts were not tax deductible?	6 b	10	177
7	Organizations that may receive deductible contributions under section 170(c).			
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	- 6	/ X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7 b	N	1A
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7 c		X
	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7 e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	_7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
_	required?	7h		X
8	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		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9 b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			-
þ	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
<u>b</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b			

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7th for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, o	belo		Page (
		, nen		and
Secti	Schedule O. See instructions.			
	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
-	any other officer, director, trustee, or key employee?	2	Χ	ļ
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		Х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Х
6	Does the organization have members or stockholders?	6		Х
_	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
•	the year by the following			
а	The governing body?	8a	Χ	ļ
	Each committee with authority to act on behalf of the governing body?	8b	Х	
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	9a		Χ_
Sect	on B. Policies (This Section B requests information about policies not required by the Internal			
	nue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,		. 1	<b>/</b> A
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	N,	M
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			1
	form?	11	X	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990			<u> </u>
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	<u> </u>
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			ĺ
	rise to conflicts?	12b	X	<u> </u>
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			1
	describe in Schedule O how this is done	12c	X	<u> </u>
13	Does the organization have a written whistleblower policy?	13	Χ	<del> </del>
14	Does the organization have a written document retention and destruction policy?	14	X	<u> </u>
15	Did the process for determining compensation of the following persons include a review and approval by	'		1
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X .	↓
b	Other officers or key employees of the organization	15b	Х	<del> </del>
	If "Yes" to line 15a or 15b, 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			1
	with a taxable entity during the year?	<u>16</u> a		X
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	<u></u>	<u> </u>	10
	the organization's exempt status with respect to such arrangements?	16b	N	ДŲ
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶_NY/			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)	s only	)	

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Own website

Another's website

policy, and financial statements available to the public

X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest

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

JEROME H. KATZ 18 EAST 50TH STREET NEW YORK, NY 10022

### 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 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, and 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

(A) Name and Title	(B) Average							(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
KIMBERLY MANOCHERIAN										
VICE PRESIDENT	5.00	Х		Х				0.		(
JOHN MANOCHERIAN										
PRESIDENT	5.00	Х		Х				0.		(
JEROME KATZ	<u> </u>									
TREASURER	5.00	Х		Х				0.		(
CAROLINE M. MANOCHERIAN								<del></del>		
VICE PRESIDENT	5.00	Х		Х			Ì	0.		(
BEHROOZ SHOKATI			<del> </del>				<del>                                     </del>			· <del>······</del>
EXECUTIVE DIRECTOR	40.00	Х		ŀ				0.	1	(
ANTHONY PORTERA				<del>  -</del> -			<del>                                     </del>			
INDEPENDENT TRUSTEE	5.00	Х						0.		(
DAVID REICH		<del></del>								
INDEPENDENT TRUSTEE	5.00	Х						0.		, (
MICHELLE ANDERSON		<del></del>								··
DIRECTOR OF OPERATIONS	40.00			X	x			57,466.		(
	10.00			1	<u> </u>			37,400.		<u> </u>
						<u>-</u>				<del></del>
			<u>_</u>	<u> </u>	<u>L</u>					
	<u> </u> 			:						
<del></del>	ļ		<u> </u>	├—	₩	<u> </u>	├—	ļ <del></del>		
	1	1								

Form **990** (2009)

Part VII Section A. Officers, Directors, Tru	ıstees, Ke	y En	ıplo	ye	es,	and I	Hig	hest Compensat	ed Employees	(continue	d)
· (A)	(B) (C)							(D)	(E)		(F)
Name and title	Average hours per week	ndividual trustee	Institutional	Officer	Key employee	Highest compensated at employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC	am comp ) fro	imated ount of other ensation om the
		stee	trustee		e	pensated		(***-271033-181100)		and	nization related nizations
							ļ				
							ļ				
								_			
					-						
			-			ļ	-				
							<u> </u>				· · · · · · · · · · · · · · · · · · ·
			<u> </u>			-					
1b Total		L	<u> </u>			1	_	57,466		<del></del>	0
2 Total number of individuals (including but not		hose	liste	d a	bov	e) wh	o re	<del></del>	1 \$100,000 in		
reportable compensation from the organization	<u> </u>	(	)							-	Yes No
3 Did the organization list any former office employee on line 1a? If "Yes," complete Schedu	er, direct	or or	tru	ıste	e,	key e	emp	oloyee, or highes	t compensated		Yes No
4 For any individual listed on line 1a, is the										3	^
the organization and related organizations individual	greater th	nan \$	150	00,0	0?	Îf "Y	'es,'	" complete Sched	ule J for such	4	x
5 Did any person listed on line 1a receive services rendered to the organization? If "Yes,"	e or accr	ue c	omp	ens	satio	on fro	om	any unrelated of	rganization for	5	x
Section B. Independent Contractors	oompioto .	50/100	470	- 10		on pe	1301	<u> </u>	<del></del>	<u> </u>	
Complete this table for your five highest compensation from the organization	compensa	ted ir	dep	end	deni	con	trac	ctors that receive	d more than \$	100,000	of
(A) Name and business add	ress						T	(B) Description of se	Mices	(C) Compens	ation
NONE								Decempine of the		Compens	
							-	<del></del>			
				-			1				
2 Total number of independent contractors (in	ncludina h	ut no	t lin	nite	d tr	thos	L	isted above) who	received		
more than \$100,000 in compensation from th					- ''	0			. 555.764		-

-Par	t VIII	Statement of Revenue		13-6128274		,
	•		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a b c d	Federated campaigns				,
ontribul id othe	g	All other contributions, gifts, grants, and similar amounts not included above . 1f 691.0  Noncash contributions included in lines 1a-1f \$	30			
	h	Total. Add lines 1a-1f				
enuc	_	Business C	ode			
Program Service Revenue	2a b c					
Š	d					<del> </del>
Progra	f g	All other program service revenue	. > 0			
	3	Investment income (including dividends, interest, and other similar amounts). ATTACHMENT 3				999,686
	5	Income from investment of tax-exempt bond proceeds Royalties		,		
	6a b	Gross Rents	al			
	С	Rental income or (loss)		-		-
	d	Net rental income or (loss)				
	7 a	Gross amount from sales of assets other than inventory				
	b c	Less cost or other basis and sales expenses 1,638,232  Gain or (loss)				
	d	Net gain or (loss)	-21,625			-21,625
Other Revenue	8 a	Gross income from fundraising events (not including \$ of contributions reported on line 1c)  See Part IV, line 18				
the	Ь	Less direct expenses b		1		
0	9 a	Net income or (loss) from fundraising events				
	b	Less direct expenses b				
	10a	Net income or (loss) from gaming activities	0			
		Less cost of goods sold b  Net income or (loss) from sales of inventory	. ▶ 0			
		Miscellaneous Revenue Business C				
	11a				<del> </del>	<del> </del>
	b					
	d	All other revenue				<del> </del>
	е	Total. Add lines 11a-11d				
	12	Total Revenue. See instructions	1,669,091	<u> </u>		978,061

### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	5,839.	5,839.		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	0.			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16	0.			
4	Benefits paid to or for members	0.			
5	Compensation of current officers, directors,				
	trustees, and key employees	57,466.	57,466.		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages	97,769.	67,654.		30,115
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	0.			
9	Other employee benefits	0.			
10	Payroll taxes	14,082.	11,913.		2,169
11	Fees for services (non-employees)				
а	Management	0.			
	Legal	3,723.		3,723.	
c	Accounting	Ō.			
d	Lobbying	0.			
е	Professional fundraising services See Part IV, line 17	0.			
f	Investment management fees	0.			
g	Other	0.			
12	Advertising and promotion	78,860.	78,860.		
13	Office expenses	7,961.		7,961.	
14	Information technology	0.			
15	Royalties	0.			
16	Occupancy	0.			
17	Travel	0.			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0.			
19	Conferences, conventions, and meetings	0.			t .
20	Interest	0.			
21	Payments to affiliates	0.			
22	Depreciation, depletion, and amortization	226.		226.	
23	Insurance	21,251.	18,581.		2,670
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)				
а	CONSULTANT EXPENSES	4,756.		4,756.	
b	POSTAGE AND MESSENGER	7,149.	7,149.	15/1.1	<del></del>
C	VIDEO & BOOK PRODUCTION	164,581.	164,581.		
d	REAL ESTATE TAXES	47,018.		47,018.	
e	MISCELLANEOUS	23,696.		23,696.	<del></del>
-	All other expenses				
	Total functional expenses. Add lines 1 through 24f	534,377.	412,043.	87,380.	34,954
	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				
				1	

Pa	rt X	·Balance Sheet			
	•		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	6,618,039.	1	1,185,922.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	<u> </u>
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key	<del>, , , , , , , , , , , , , , , , , , , </del>		
	ŀ	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 Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
1SS	8	Inventories for sale or use		8	
_	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or 10a 3,703,059.			
		other basis Complete Part VI of Schedule D			
	b	Less accumulated depreciation	3,960,346.	10c	3,695,438.
	11	Investments - publicly traded securities	17,327,489.		25,019,927.
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	· · · · · · · · · · · · · · · · · · ·
	15	Other assets See Part IV, line 11	320,554.	15	357,819.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	28,226,428.	16	30,259,106.
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
S	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key			
abi		employees, highest compensated employees, and disqualified			
=		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D	55,566.		30,615.
	26	Total liabilities. Add lines 17 through 25	55,566.	26	30,615.
ses		Organizations that follow SFAS 117, check here ► X and complete lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets	28,170,862.	27	30,228,491.
Bal	28	Temporarily restricted net assets		28	
힏	29	Permanently restricted net assets	-	29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34.			
ts	30	Capital stock or trust principal, or current funds		30	
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
ţ	32	Retained earnings, endowment, accumulated income, or other funds		32	
Re	33	Total net assets or fund balances	28,170,862.	33	30,228,491.
	34	Total liabilities and net assets/fund balances	28,226,428.	34	30,259,106.

Form **990** (2009)

If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O	Yes	No
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
Schedule O		
	j.	1
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		
	,	X
b Were the organization's financial statements audited by an independent accountant?	, X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of		$\top$
the audit, review, or compilation of its financial statements and selection of an independent accountant?	.   X	
If the organization changed either its oversight process or selection process during the tax year, explain in	<del>'  </del>	+-
Schedule O		
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		
X Separate basis Consolidated basis Both consolidated and separate 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 Ast and CMR Circular A 1322		l x
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	!	+~
removed and a sudden and a sudden when a Calcad to Co. I to the sudden as the sudden a		
	<u>)  </u> m 990	<del></del>

#### **SCHEDULE A** (Form 990 or 990-EZ)

### **Public Charity Status and Public Support**

OMB No 1645-0047,

Department of the Treasury Internal Revenue Service

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

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

Inspection

Name of the organization		•				Employe	r identificat		er	
NATIONAL ROAD SAFETY FOU							13-612	28274		
	<del></del>			<u>.</u>	<u>-</u>		tions			
Part   Reason for Public Cha The organization is not a private four A church, convention of ch A school described in sect A hospital or a cooperative A medical research organ hospital's name, city, and s An organization operated section 170(b)(1)(A)(iv). (( A federal, state, or local go An organization that norm described in section 170(b) A community trust describe An organization that norm receipts from activities resupport from gross invest acquired by the organization An organization organized An organization organized purposes of one or more 509(a)(3). Check the box t a Type I By checking this box, I of	rity Status (All organication because it is (Fourches, or association of ion 170(b)(1)(A)(ii). (Attaches hospital service organication operated in contate for the benefit of a collocomplete Part II) overnment or government or government or government of ion section 170(b)(1)(ally receives a substanication in section 170(b)(1)(ally receives (1) more lated to its exempt function after June 30, 1975 and operated exclusived and operated exclusived and operated exclusived that describes the type of Type II	For lines 1 to of churches tach Schedization description will be tall part of Part II)  (A)(vi). (Cothan 331/3 actions - surelated bus See section bely to test for lively for the anizations of supporting to the supporting the supporti	hrough 11, idescribed ule E) cribed in sec with a hosp exercised in sec its support mplete Part % of its support bject to ce siness taxa n 509(a)(2) or public safe ie benefit described i g organiza e III - Func	check onlin section 170 potal described or operation 170 from a gall line of the control of the	y one box n 170(b)( (b)(1)(A)(cribed in perated b 70(b)(1)(A) governme m contrib eptions, a me (less ete Part II section 5 erform the 1 509(a)(* complete htegrated	(iii). section by a gove  A)(v). ental unit  autions, m and (2) n section  II)  09(a)(4). e functio  1) or section  lines 11e	or from the nembership to more the state of, or tron 509(at through 1 d Tyr	A)(iii). E unit des ne gener p fees, a nan 331/ from bu to carry )(2) See 11h pe III - O	cribe ral pu and gr 3% o usines out e sec	d ir
persons other than founds 509(a)(1) or section 509(a  f If the organization receive organization, check this bo g Since August 17, 2006, ha following persons?  (i) A person who direct	ation managers and oth )(2) ed a written determina ox	tion from to the tion from to the tion from to the tion from to the tion from the tion	e or more the IRS that the IRS	publicly s it it is a bution fro	Type I, T	ype II, o	ations des	scribed ii	n sec	ctio
h Provide the following infori	-		•		• • • • •			1		
(i) Name of supported organization (ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) is the o	organization	the organ	ou notify nization in of your port?	organızat (i) organı	s the ion in col zed in the S?	(vii) Am sup		of
	-	163	170	163		163				—
						:				
Total										

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

Par	. (Complete only if you check	ganizations D ked the box or	escribed in S n line 5, 7, or 8	ections 170(I 3 of Part I.)	b)(1)(A)(iv) ar	nd 170(b)(1)(A	\)(vi)
Sect	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	1,034,132	1,638,785	1,278,692	2,901,840	691,030	7,544,479
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 furnished by a governmental unit to the organization without charge	~					
4	Total. Add lines 1 through 3	1,034,132	1,638,785	1,278,692	2,901,840	691,030	7,544,479
5	The portion of total contributions by each						
	person (other than a governmental unit or				, i	,	
	publicly supported organization) included				,		
	on line 1 that exceeds 2% of the amount						
6	shown on line 11, column (f) Public support. Subtract line 5 from line 4						4,592,405
	tion B. Total Support		<u> </u>				2,952,074
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	1,034,132	1,638,785	1,278,692	2,901,840	691,030	7,544,479
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar						
	sources	151,881	563,081	1,026,923	978,591	999,686	3,720,162
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10						11,264,641
12	Gross receipts from related activities, etc. (s	see instructions).				12	
13	First five years. If the Form 990 is f	or the organizat	tion's first, secor	d, third, fourth,	or fifth tax yea	ar as a section	501(c)(3)
	organization, check this box and stop here			<u> </u>		<u> </u>	▶
	tion C. Computation of Public Sup		<del></del>				26 21
14	Public support percentage for 2009 (li						26.21 % 30.31 %
15	Public support percentage from 2008						
108	331/3% support test - 2009. If the o						
Ь	this box and stop here. The organizate 331/3% support test - 2008. If the control of the control						
U	check this box and <b>stop here</b> . The org.						. —
17a	10%-facts-and-circumstances test - 2						
	or more, and if the organization me						
	Part IV how the organization meets t						
	organization			_	•		
b	10%-facts-and-circumstances test - 2						
	15 is 10% or more, and if the orga		-		•		
	Explain in Part IV how the organization						
	supported organization						<b>▶</b> X
18	Private foundation. If the organization						
	instructions	<del></del>	<u></u>	<u></u>	<u>,</u>	<u></u> .	▶ 🔲

Part III	Support Schedule for Organizations Described in Section 509(a)(2)
	(Complete only if you checked the box on line 9 of Part I)

	tion A. Public Support			F	1	·		
Ca	llendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e	2009	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not include							
	any "unusual grants ")							
2	Gross receipts from admissions, merchandise	:					-	
	sold or services performed, or facilities							
	furnished in any activity that is related to the			ļ				
	organization's tax-exempt purpose							
3	Gross receipts from activities that are not an				<u> </u>			
	unrelated trade or business under section 513							
4	Tax revenues levied for the organization's				·			
7	benefit and either paid to or expended on							
				ļ	;			
5	ts behalf							
9								
	furnished by a governmental unit to the					ļ		
	organization without charge		-	<del> </del>		<u> </u>		
	Total. Add lines 1 through 5	• •				<u> </u>		
7 a	Amounts included on lines 1, 2, and 3					}		
Ь	received from disqualified persons Amounts included on lines 2 and 3					-		
D	received from other than disqualified					1		
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13							
	for the year					<u> </u>		
C	Add lines 7a and 7b							
8	Public support (Subtract line 7c from							
	line 6)							
Sec	tion B. Total Support							
Ca	alendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(е	2009	(f) Total
9	Amounts from line 6							
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar						:	
	sources							
b	Unrelated business taxable income (less							
	section 511 taxes) from businesses							
	acquired after June 30, 1975					j		
С	Add lines 10a and 10b							
	Net income from unrelated business							,-
	activities not included in line 10b, whether or not the business is regularly carried on							t
12	Other income Do not include gain or							
	loss from the sale of capital assets					1		
	(Explain in Part IV)							
13	Total support. (Add lines 9, 10c, 11,							
	and 12 )			·	<u> </u>		ontion FO1	
4	and 12)		n's first second	third fourth of	r fifth tax vear a	95 A SE		(c)(3)
14	First five years. If the Form 990 is for	the organization						
	First five years. If the Form 990 is for organization, check this box and stop here	the organizatio	<u></u>					
Sec	First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Su	the organization			· · · · · · · · · · · · · · · · · · ·	• • •		
Sec 15	First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Sul Public support percentage for 2009 (line 8)	the organization of the or	age ed by line 13, colu	mn (f))		15		
Sec 15 16	First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Sulpublic support percentage for 2009 (line 8 Public support percentage from 2008 Sch.)	the organization of the or	age ed by line 13, colu ne 15	mn (f))		15		
Sec 15 16 Sec	First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Sulpublic support percentage for 2009 (line 8 Public support percentage from 2008 Schtion D. Computation of Investme	pport Percent column (f) dividedule A, Part III, III nt Income Per	age ed by line 13, colu ne 15 rcentage	mn (f))		15		
Sec 15 16 Sec 17	First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Sulpublic support percentage for 2009 (line 8 Public support percentage from 2008 Schitton D. Computation of Investme Investment income percentage for 2009 (line 8).	pport Percent , column (f) dividedule A, Part III, li nt Income Per ne 10c, column	age ed by line 13, colu ne 15 rcentage (f) divided by line	mn (f))		15 16		
Sec 15 16 Sec 17	First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Superbluc support percentage for 2009 (line 8 Public support percentage from 2008 Schitton D. Computation of Investme Investment income percentage from 2008 (Investment income percentage from 2008)	pport Percent , column (f) dividedule A, Part III, lii nt Income Per ne 10c, column (Schedule A, Part	age ed by line 13, colu ne 15 rcentage (f) divided by line 1 III, line 17	mn (f))		15 16 17 18		▶
Sec 15 16 Sec 17	First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Sulpublic support percentage for 2009 (line 8 Public support percentage from 2008 Schitton D. Computation of Investme Investment income percentage for 2009 (Investment income percentage from 2008 33 1/3% support tests - 2009. If the confidence in the support tests - 2009.	pport Percent , column (f) dividedule A, Part III, lii nt Income Per ne 10c, column i Schedule A, Part rganization did i	age ed by line 13, colume 15 rcentage (f) divided by line III, line 17 not check the bo	mn (f))	ond line 15 is moi	15 16 17 18	331/3%,	and line
Sec 15 16 Sec 17 18	First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Sulpublic support percentage for 2009 (line 8 Public support percentage from 2008 Schitton D. Computation of Investme Investment income percentage for 2009 (Investment income percentage from 2008 33 1/3% support tests - 2009. If the control of the support is not more than 33 1/3%, check to	pport Percent column (f) dividedule A, Part III, lint Income Per ne 10c, column of Schedule A, Part rganization did in his box and sto	age ed by line 13, colume 15 rcentage (f) divided by line IIII, line 17 not check the boop here. The org	mn (f))	ond line 15 is mores as a publicly	15 16 17 18 re than suppo	331/3 %,	and line
Sec 15 16 Sec 17 18	First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Sulpublic support percentage for 2009 (line 8 Public support percentage from 2008 Schitton D. Computation of Investme Investment income percentage from 2008 investment income percentage from 2008 33 1/3% support tests - 2009. If the organization of the property is not more than 33 1/3%, check to 33 1/3% support tests - 2008. If the organization is formally investment income percentage from 2008.	pport Percent column (f) dividedule A, Part III, lint Income Per ne 10c, column of Schedule A, Part rganization did in his box and stepanization did no	age ed by line 13, colume 15 rcentage (f) divided by line IIII, line 17 not check the boop here. The org	mn (f))	ond line 15 is moles as a publicly	15 16 17 18 re than suppo	331/3 %, rted organ than 331/	and line lization ► [
Sec 15 16 Sec 17 18	First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Sulpublic support percentage for 2009 (line 8 Public support percentage from 2008 Schtion D. Computation of Investme Investment income percentage from 2008 (Investment income percentage from 2008 33 1/3% support tests - 2009. If the organization of the support tests - 2008. If the organization is not more than 33 1/3%, check the 18 is not more than 331/3%, check	pport Percent column (f) dividedule A, Part III, III nt Income Per ne 10c, column of Schedule A, Part rganization did ii his box and stepanization did no this box and s	age ed by line 13, colume 15 rcentage (f) divided by line till, line 17 not check the boop here. The ord t check a box on top here. The ord	mn (f))	nd line 15 is mores as a publicly 9a, and line 16 i	15 16 17 18 re than suppo s more suppo	331/3 %, rted organ than 331/	and line ization ► [3 %, and ization ►
15 16 Sec 17 18 19a	First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Sulpublic support percentage for 2009 (line 8 Public support percentage from 2008 Schitton D. Computation of Investme Investment income percentage from 2008 investment income percentage from 2008 33 1/3% support tests - 2009. If the organization of the property is not more than 33 1/3%, check to 33 1/3% support tests - 2008. If the organization is formally investment income percentage from 2008.	pport Percent column (f) dividedule A, Part III, III nt Income Per ne 10c, column of Schedule A, Part rganization did ii his box and stepanization did no this box and s	age ed by line 13, colume 15 rcentage (f) divided by line till, line 17 not check the boop here. The ord t check a box on top here. The ord	mn (f))	nd line 15 is mores as a publicly 9a, and line 16 i	15 16 17 18 re than suppo s more suppo	331/3 %, rted organ than 331/	and line ization ► [3 %, and ization ►

. Page **4** 

Part IV 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

SUPPLEMENTAL INFORMATION TO PART II, LINE 17B:

NATIONAL ROAD SAFETY FOUNDATION PRINTED, PRODUCED, AND DISTRIBUTED BOOKS, VIDEOS AND PUBLIC SERVICE ANNOUNCEMENTS PROMOTING AUTOMOBILE SAFETY AND REDUCTION OF TRAFFIC DEATHS TO VARIOUS SCHOOL DISTRICT ORGANIZATIONS. AND IT MAINTAINS A CONTINUOUS AND BONA FIDE PROGRAM FOR SOLICITATION OF FUNDS FROM THE GENERAL PUBLIC, COMMUNITY, GOVERNMENTAL UNITS OR OTHER PUBLIC CHARITIES.

#### **SCHEDULE C**

(Form 990 or 990-EZ)

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

▶ See separate instructions

OMB No 1545-0047 .

2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-B

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

•	Section	501(c)(4), (5), or (6) o	rganizations Complete Part III			
Na	ne of orga	anization			Employer identi	fication number
NAT	IONAL	ROAD SAFETY	FOUNDATION, INC.		13-61	.28274
Par	t I-A	Complete if the	organization is exempt unde	r section 501(c) o	r is a section 527 orgar	nization.
1	Provide	e a description of th	e organization's direct and indirec	t political campaign	activities in Part IV	
2	Politica	al expenditures		· · · · · · · · · · · · · · ·	▶ \$	
3	Volunte	eer hours				
		0 1 1 10 11				
			organization is exempt under	<del></del>		<del></del>
1			xcise tax incurred by the organization			
2			xcise tax incurred by organization			
3			d a section 4955 tax, did it file Fori			
4a b		correction made? " describe in Part IV		· · · · · · · · · · · · · · · · · · ·	• • • • • • • • • • • • • • • • • • • •	🔲 Yes 🔲 No
	t I-C		organization is exempt unde	r section 501(c)	except section 501(c)(3	
1			expended by the filing organization	<b>`</b> '		·/·
•		•	· · · · · · · · · · · · · · · · · · ·		•	
2	Enter t	he amount of the file	ing organization's funds contribute	d to other organizat	ions for section	· · · · · · · · · · · · · · · · · · ·
			ities	-	_	
3	Total e	exempt function exp	penditures Add lines 1 and 2 Ei	nter here and on Fo	orm 1120-POL,	
	line 17	b			▶ \$	
4	Did the	filing organization	file Form 1120-POL for this year?			Yes No
5	Enter t	he names, addresse	s and employer identification num	ber (EIN) of all secti	on 527 political organizat	tions to which payments
	were n	nade For each org	anization listed, enter the amount	paid from the filing	g organization's funds. Al	so enter the amount of
			eived that were promptly and dire			
	segreg	ateu runu or a ponti	cal action committee (PAC) If addi	Tonai space is need	ed, provide information in	Partiv
		(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
					filing organization's funds if none, enter -0-	contributions received and promptly and directly
						delivered to a separate
						political organization If none, enter -0-
		· · · · · · · · · · · · · · · · · · ·				
				_		
				4		
For F	Privacy A	at and Banagued, Radio	tion Act Nation and the Instruction of a Fo	- 200 200 57	Cabada	1- C (F 000 - 000 F7) 000

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ JSA 9E1264 2 000

Schedule C (Form 990 or 990-EZ) 2009

	under section 501(h)).	on is exempt under section 501(c)(3) and	Tilea Form 5/68 (elect	ion ·
		belongs to an affiliated group. checked box A and "limited control" provisi	ons apply	
		ying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a	Total lobbying expenditures to influence	public opinion (grass roots lobbying)	0.	
b		a legislative body (direct lobbying)	0.	
С		a and 1b)	0.	<del></del>
đ			534,377.	·
е		d lines 1c and 1d) [	534,377.	
f	Lobbying nontaxable amount Enter the	The state of the s		<del></del>
	columns		105,157.	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	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		
g	Grassroots nontaxable amount (enter 25	5% of line 1f)	26,289.	
h	Subtract line 1g from line 1a If zero or le	ess, enter -0-		
i	Subtract line 1f from line 1c If zero or le	ss, enter -0-		

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

If these is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

Lobbying Expenditures During 4-Year Averaging Period									
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total				
2 a Lobbying non-taxable amount		124,105.	105,756.	105,157.	335,018.				
b Lobbying ceiling amount (150% of line 2a, column (e))					502,527.				
c Total lobbying expenditures		0.	0.	0.	0.				
d Grassroots nontaxable amount		31,026.	26,439.	26,289.	83,754.				
e Grassroots ceiling amount (150% of line 2d, column (e))					125,631.				
f Grassroots lobbying expenditures		0.	0.	0.	0.				

Schedule C (Form 990 or 990-EZ) 2009

Yes

	t II-B Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).						
		(a	1)		(b)	l	
		Yes	No		Amo	unt	
1	During the year, did the filing organization attempt to influence foreign, national, state or local		_				
	legislation, including any attempt to influence public opinion on a legislative matter or						
а	referendum, through the use of Volunteers?						
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1)?						
C	Media advertisements?						
d	Mailings to members, legislators, or the public? Publications, or published or broadcast statements?	-					
е	Publications, or published or broadcast statements?						
f	Grants to other organizations for lobbying purposes?						
g	Direct contact with legislators, their staffs, government officials, or a legislative body?						
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?						
i	Other activities? If "Yes," describe in Part IV						
j	Total Add lines 1c through 1i						
2 a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?						
b c	If "Yes," enter the amount of any tax incurred under section 4912			<u> </u>			
d	If "Yes," enter the amount of any tax incurred by organization managers under section 4912.  If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?						
	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501	(a)(E)	01.	· octio			
	501(c)(6).	(0)(0)	, or s	section	13		
						Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				1		"
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	• • • •			2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			 	3		
Pa	t III-B Complete if the organization is exempt under section 501(c)(4), section 501						
	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A,	line	3 is a	answe	red		
	"Yes."						
1 2	Dues, assessments and similar amounts from members			1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of payments for which the section 537(f) tox was poid)	oolitic	aı				
-	expenses for which the section 527(f) tax was paid).						
a h	Current year	· · ·		2a 2b			
c	Carryover from last year			2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due	 95		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion						
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lo				t		
	and political expenditure next year?			4			
5	Taxable amount of lobbying and political expenditures (see instructions)	· · ·	· · ·	5			
Pa	rt IV Supplemental Information						
Con	plete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C,	line :	5. an	d Part	II-B tu	ne 1ı	
	, complete this part for any additional information		-,		,		

Schedule C (F	om 990 or 990-EZ) 2009	13-6128274	Page 4
Part IV	Supplemental Information (continued)		<del></del>
Pally	Supplemental information (continued)	<del></del>	<del></del>
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JSA

#### **SCHEDULE D** (Form 990)

**Supplemental Financial Statements** 

OMB No 1545-0047 .

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► 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

NAT	IONAL ROAD SAFETY FOUNDATION, INC.	13-6128274
Par	Organizations Maintaining Donor Advised Funds or Other Similar Funds or the organization answered "Yes" to Form 990, Part IV, line 6.	Accounts. Complete if
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	- 1
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in doi	nor advised
•	funds are the organization's property, subject to the organization's exclusive legal control?	1 1 1
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds	
•	used only for charitable purposes and not for the benefit of the donor or donor advisor, or for	
	purpose conferring impermissible private benefit?	
Pai	Conservation Easements. Complete if the organization answered "Yes" to Fo	rm 990. Part IV. line 7.
1	Purpose(s) of conservation easements held by the organization (check all that apply)	
	Preservation of land for public use (e.g., recreation or pleasure)  Preservation of	an historically important land area
		a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in	the form of a conservation
	easement on the last day of the tax year	
		Held at the End of the Year
а	Total number of conservation easements	2a 1
b	Total acreage restricted by conservation easements	<b>2b</b> 44.00
С	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06	2d 0
3	Number of conservation easements modified, transferred, released, extinguished, or termina	ted by the organization during
	the tax year ▶	
4	Number of states where property subject to conservation easement is located ▶	1
5	Does the organization have a written policy regarding the periodic monitoring, inspection, har	
	violations, and enforcement of the conservation easements it holds?	· · · · · · · · Yes X No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation ease 0.00	ements during the year
_	——————————————————————————————————————	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements of the conservation of the conservation easements of the conservation of the conservation easements of the conservation of the conservation easements of t	ts during the year
	<b></b>	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of sec	
_	170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	
9	In Part XIV, describe how the organization reports conservation easements in its revenue and balance sheet, and include, if applicable, the text of the footnote to the organization's financial	
	the organization's accounting for conservation easements	ai statements that describes
Pa	t III Organizations Maintaining Collections of Art, Historical Treasures, or Other	Similar Assets
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8	ommar 7,550tb.
1 2	If the organization elected, as permitted under SFAS 116, not to report in its revenue sta	atomost and balance about works of
	art. historical treasures, or other similar assets held for public exhibition, education, or rese	arch in furtherance of public service.
	provide, in Part XIV, the text of the footnote to its financial statements that describes these iter	ms
b	If the organization elected, as permitted under SFAS 116, to report in its revenue statem historical treasures, or other similar assets held for public exhibition, education, or resea	ent and balance sheet works of art,
	provide the following amounts relating to these items	non in furtherance of public service,
	(i) Revenues included in Form 990, Part VIII, line 1	<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar a	
	following amounts required to be reported under SFAS 116 relating to these items	<u> </u>
а	Revenues included in Form 990, Part VIII, line 1	<b>&gt;</b> \$
b	Assets included in Form 990, Part X	

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

Schedule D (Form 990) 2009

Par	Organizations Maintaini	ng Collect	tions o	of Art, His	storical	Treasures	s, or	Other Similar A	ssets (c	continued)	<del></del>
•	Llong the examination's convertion			*hoooo	مطم مام	ak anv af th	ao foll	owns that are a		d upp of do	
3	Using the organization's acquisition		i, and c	omer reco	ius, che	ck any or u	ie ioii	owing that are a s	signincan	it use or its	
	collection items (check all that appl	y)									
a	Public exhibition			d			cnang	je programs			
b	Scholarly research			е	<u></u> J	Other					
С	Preservation for future ge										
4	Provide a description of the organization	ation's coll	ections	and expl	ain how t	hey further	the c	organization's exe	mpt purp	pose in	
	Part XIV										
5	During the year, did the organization										
	assets to be sold to raise funds rath									Yes	No
Par	t IV Escrow and Custodial A IV, line 9, or reported an						n ans	wered "Yes" to F	Form 99	00, Part	
12	Is the organization an agent, trusted	a custodiai	n or oth	er interm	ediary fo	r contributi	one o	r other assets not	•		
ıa	included on Form 990, Part X?				-					Yes	No
h	If "Yes," explain the arrangement in								[	165 [	
D	ii res, explain the arrangement in	rail Aiv a	na com	ibiere me	IOIIOWING	, table		Λ-	mount		
•	Beginning balance						4 -	AI	Hount		
C							-			·	
u	Additions during the year						$\rightarrow$				
ı	Distributions during the year										
0-	Ending balance							<del></del>		1,7	
2a	•		IIII 990	, Part A, I	me z i r				· · · L	Yes _	No
$\overline{}$	If "Yes," explain the arrangement in			-4:		V!! 4- F-		00 D-+ IV I	40		
Par	t V Endowment Funds. Com										
4 -	Doguna of was belows	(a) Current	t Year	<b>(b)</b> Pri	or year	(c) Two ye	ears ba	ck (d) Three yea	rs back	(e) Four year	ars back
1a	Beginning of year balance										
D	Contributions										
С	Net investment earnings, gains,								ļ		
	and losses										
	Grants or scholarships										
е	Other expenditures for facilities .										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage	-	end ba	lance held	as						
а	Board designated or quasi-endown	nent ▶		%							
b	Permanent endowment ▶										
	·	%									
3 a	Are there endowment funds not in	the posses	ssion of	the orga	nization t	hat are hel	ld and	administered for	the	1	
	organization by									Ye	s No
	(i) unrelated organizations									3a(i)	
	(ii) related organizations									3a(ii)	
b	If "Yes" to 3a(II), are the related org	anızatıons	listed a	s required	d on Sche	edule R?.				3 b	
4	Describe in Part XIV the intended u										
Par	t VI Investments - Land, Buil	dings, and	d Equi	pment. S	See For	m 990, Pa	ırt X,	line 10.	_		
	Description of investment			or other bas estment)	ıs (t	) Cost or othe basis (other)	r	(c) Accumulated depreciation	(0	d) Book value	
1a	Land					3,695,4	38			3,695	,438.
b	Buildings	[									
c	Leasehold improvements	[									
d	Equipment	[				7,6	21.	7,621.			······································
е	Other	<u></u> . [									
Tota	I. Add lines 1a through 1e (Column	(d) must e	qual Fo	rm 990, F	Part X, co	lumn (B), lır	ne 10(	c) ) ▶		3,695	,438.
	• • • • • • • • • • • • • • • • • • • •										

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 c	lerivatives		
Closely-he	Id equity interests		
		-	<del></del>
			<del></del>
	nn (b) must equal Form 990, Part X, col (B) line 12)	<u> </u>	
Part VIII	Investments - Program Related. Se		
	(a) Description of investment type	(b) Book value	(c) Method of valuation
			Cost or end-of-year market value
		<del></del>	
Total (Colum	nn (b) must equal Form 990, Part X, col (B) line 13)	<b>&gt;</b>	······································
Part IX	Other Assets. See Form 990, Part	<del></del>	<del></del>
raitix	Other Assets. Oce 1 offi 590, 7 art	(a) Description	(b) Book value
		(a) Description	(b) Book value
		·····	
			<del></del>
	- <del></del>		
Total. (Colur	mn (b) must equal Form 990, Part X, col (B) line 15)		<b>▶</b>
Part X	Other Liabilities. See Form 990, Pa	rt X, line 25	
1.	(a) Description of liability	(b) Amount	
Federal in	come taxes		
ACCRUE	D EXPENSES &OTHER LIABIL	24,115.	
	AFFILIATE	6,500.	
		<del></del>	
Total. (Colu	mn (b) must equal Form 990, Part X, col (B) line 25)	<b>▶</b> 30,615.	
	<del></del>	<del></del>	

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Part 2	Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statem	ent	S	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		1,669,091.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		534,377.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3		1,134,714.
4	Net unrealized gains (losses) on investments	4	<u>                                     </u>	1,219,256.
5	Donated services and use of facilities	5		
6	Investment expenses	6	ļ	
7	Prior period adjustments	7		
8	Other (Describe in Part XIV )	8	ļ	-296,341.
9	Total adjustments (net) Add lines 4 through 8	9	ļ	922,915.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		<u>.                                    </u>	2,057,629.
	Reconciliation of Revenue per Audited Financial Statements With Revenue per Ret		•	2,888,347.
1 2	Total revenue, gains, and other support per audited financial statements	$\cdot$	1	2,000,547.
	•	6		
a b	Net unrealized gains on investments   Donated services and use of facilities   2a 1,219,25  2b	$\ddot{\dashv}$		
C	Recoveries of prior year grants 2c	$\dashv$		
d	Other (Describe in Part XIV)	$\dashv$		
e	Add lines 2a through 2d	$\dashv$	2e	1,219,256.
3	Subtract line 2e from line 1	•	3	1,669,091.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	`	_	· · · · · · · · · · · · · · · · · · ·
а	Investment expenses not included on Form 990, Part VIII, line 7b		1	
b	Other (Describe in Part XIV )			
С	Add lines 4a and 4b		4 c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	1,669,091.
-Part-	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Re		n	
1	Total expenses and losses per audited financial statements		1	830,718.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities 2a			
b	Prior year adjustments 2b		ļ	
C	Other losses 2c			
d	Other (Describe in Part XIV)  2d 296, 34			
е	Add lines 2a through 2d	.  -	2e	296,341.
3	Subtract line 2e from line 1	·  _	3	534,377.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	4		
b	Other (Describe in Part XIV )	_	_	
_ с	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	.  -	4 c	534,377.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	.	5	534,311.
Comp	Supplemental Information  lete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Papert V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Alert to provide any additional information			
SEE_	PAGE 5		<b></b> -	

Page 5

#### NOTE 1:

SUPPLEMENTAL INFORMATION TO PART II LINE 9:

THE ORGANIZATION HAS APPROXIMATELY 68 ACRES OF UNDEVELOPED LAND, LOCATED IN JACKSONVILLE, FLORIDA. THE PROPERTY WAS APPRAISED AT THE DONATION DATE FOR \$1,850,000. IN ORDER FOR IT TO BE DESIGNED AS A QUALIFIED WETLANDS MITIGATION BANK, THE ORGANIZATION MADE LAND IMPROVEMENTS TO THE PROPERTY.

57 ACES OF THE PROPERTY QUALIFIED FOR MITIGATION BANKING. AS A QUALIFIED WETLANDS MITIGATION BANK, THE ORGANIZATION IS PERMITTED TO GRANT CONSERVATION EASEMENTS ON ITS PROPERTY.

THE GRANTING OF THE CONSERVATION EASEMENTS BY THE FOUNDATION PROHIBITS
THE FOUNDATION FROM DEVELOPING THE PROPERTY IN THE FUTURE AND,
ACCORDINGLY, THE FOUNDATION REDUCES THE CARRYING VALUE OF THE LAND AND
LAND IMPROVEMENT FOR THE PARCELS ENCUMBERED BY THE CONSERVATION
EASEMENTS. THERE IS NO COST BASIS ALLOCATED TO THE 11 ACRES OF PROPERTY
WHICH DOES NOT QUALIFY FOR LAND MITIGATION. THE FOUNDATION HAS THE
RESPONSIBILITY TO MAINTAIN THE PROPERTY ENCUMBERED BY THE CONSERVATION
EASEMENT IN PERPETUITY. FOR THE YEARS ENDED APRIL 30, 2010 AND APRIL 30,
2009, NO CONSERVATION EASEMENTS WERE GRANTED. AS OF APRIL 30, 2010,
CONSERVATION EASEMENTS ON APPROXIMATELY 25 ACRES HAVE BEEN GRANTED. AS
FURTHER DESCRIBED IN NOTE 2, THE FOUNDATION INCURRED AN IMPAIRMENT LOSS
ON THE LAND AND LAND IMPROVEMENTS OF APPROXIMATELY \$297,000 AND \$770,000
FOR THE YEARS ENDED APRIL 30, 2010 AND APRIL 30, 2009, RESPECTIVELY. THE
FOUNDATION INTENDS TO DONATE THE PROPERTY UPON THE GRANTING OF ALL THE

#### Part XIV Supplemental Information (continued)

#### NOTE 2:

SUPPLEMENTAL INFORMATION TO PART XI LINE 8 AND PART XIII LINE 2D:

THE FOUNDATION REVIEWS ITS REAL ESTATE ASSETS FOR IMPAIRMENT WHENEVER

EVENTS OR CHANGES IN CIRCUMSTANCES INDICATE THAT THE CARRYING VALUE OF

ASSETS MAY BE IMPAIRED. IMPAIRED ASSETS ARE REPORTED AT THE LOWER OF COST

OR FAIR VALUE. AN IMPAIRMENT LOSS OF APPROXIMATELY \$297,000 AND \$770,000

WAS RECORDED AS OF APRIL 30, 2010 AND APRIL 30, 2009, RESPECTIVELY, IN

CONNECTION WITH THE FOUNDATION'S LAND AND LAND IMPROVEMENTS IN

JACKSONVILLE, FLORIDA. THE IMPAIRMENT LOSS REPRESENTS THE EXCESS OF THE

CARRYING VALUE OF THE LAND AND LAND IMPROVEMENTS OVER ITS FAIR VALUE,

WHICH WAS DETERMINED BASED ON MANAGEMENT ESTIMATES AND OTHER INFORMATION

SUPPLIED BY AN ENVIRONMENTAL AND ECOLOGICAL SERVICES FIRM WHICH

SPECIALIZES IN ENVIRONMENTAL CONSERVATION, CONSULTING AND NEGOTIATING

SALES OF SUCH PROPERTY.

#### NOTE 3:

#### SUPPLEMENTAL INFORMATION TO PART X:

IN SEPTEMBER 2009, THE FINANCIAL ACCOUNTING STANDARDS BOARD (FASB)

FINALIZED ITS GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES

RECOGNIZED IN A NONPUBLIC COMPANY'S FINANCIAL STATEMENTS AND PRESCRIBED A

RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE FOR THE FINANCIAL

STATEMENT RECOGNITION AND MEASUREMENT OF A TAX POSITION TAKEN OR EXPECTED

TO BE TAKEN IN A TAX RETURN. IN ADDITION, GUIDANCE WAS PROVIDED ON

CLASSIFICATION, INTEREST AND PENALTIES, ACCOUNTING IN INTERIM PERIODS,

AND DISCLOSURE. ADOPTION OF THIS GUIDANCE DID NOT HAVE A MATERIAL IMPACT

ON THE FOUNDATION'S FINANCIAL POSITION, CHANGES IN UNRESTRICTED NET

#### Part XIV Supplemental Information (continued)

ASSETS, OR CASH FLOWS.

THE FOUNDATION'S FEDERAL AND STATE INCOME TAX RETURNS AFTER 2005 REMAIN SUBJECT TO EXAMINATION BY THE TAXING AUTHORITIES.

#### SCHEDULE L (Form 990 or 990-EZ)

**Transactions With Interested Persons** 

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

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

Open To Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Inspection Employer identification number

Name of the organization							Employe	r iden	tificati	on nur	nber	
NATIONAL ROAD SAFETY FOUNDAY	rion,	INC.					13-	-612	8274	1		
Part I Excess Benefit Transacations Complete if the organization answ	(section vered "Y	n 501(c) 'es" on '	(3) and sect Form 990, P	ion 501(c) art IV, line	(4) organiza 25a or 25b	ations only or Form	y) 990-EZ	, Part	V, line	e 40b		
4 (a) Name of disqualified person					) Description						(c) Cor	rected?
1 (a) Name of disqualified persor			·	· · · · · · · · · · · · · · · · · · ·	Description	or transac	uon				Yes	No
			-									
					<del></del> .							
							-					
2 Enter the amount of tax imposed on under section 4958									<b>\$</b> _			
3 Enter the amount of tax, if any, on li	ne ∠, ab	ove, rei	moursea by t	ne organiz	ation			,	<b>&gt;</b> \$ _			
Part II Loans to and/or From Intercomplete if the organization and				Part IV, Iır	ne 26, or For	m 990-E	Z, Part V	/, line	38a			
(a) Name of interested person and purpose		to or from anization?	(c) Orig principal a		(d) Bala	nce due	(e) In (	default?	by bo	proved eard or nittee?	(g) W agree	/ritten ment?
	To	From					Yes	No	Yes	No	Yes	No
		1					1.55	1				'''
							-					
		ļ					<u> </u>		<u> </u>			
		<u> </u>			<u> </u>							<u> </u>
Total		<del></del>	<u> </u>	<u> ▶\$</u>							L	
Part III Grants or Assistance Bene Complete if the organization ar					a 27							
(a) Name of interested person			ip between int			T (c	) Amoun	t and t	vne of	Secret	2000	
(a) Name of interested person	(6)	CIALIONSII	organiza		3011 2110 1110	,,,	Alliouii	- and t		assisi		
	<del></del>			· · · · · · · · · · · · · · · · · · ·			-					
	<del> </del>				<del></del>	ļ				<u> </u>		
	<u> </u>							_				
					•	<del>                                     </del>					<del></del>	
Part IV Business Transactions Invo					ne 28a, 28b,	or 28c	<del></del>				_	
(a) Name of interested person			hip between rson and the zation		nount of saction	(d) De	escription	n of tra	ansacti	ion	organi	anng of zation's nues?
				]							Yes	No
DAVID REICH	TRUSTE	EE .			54,200	PROMOTIC	)N					x
						}					<u> </u>	1

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2009

## SCHEDULE O (Form 990)`

## Supplemental Information to Form 990 Complete to provide information for responses to specific questions on

Form 990 or to provide any additional information.

► Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

13-6128274

ATTACHMENT 1

FAMILY RELATIONSHIPS:

SUPPLEMENTAL INFORMATION TO PART VI LINE 2

NATIONAL ROAD SAFETY FOUNDATION, INC.

NAME OF OFFICER, DIRECTOR, ETC: CAROLINE M. MANOCHERIAN

RELATIONSHIP:

SISTER

NAME OF OFFICER, DIRECTOR, ETC: JOHN F. MANOCHERIAN

RELATIONSHIP:

BROTHER

NAME OF OFFICER, DIRECTOR, ETC: KIMBERLY D. MANOCHERIAN

RELATIONSHIP:

SISTER

CONFLICT OF INTEREST POLICY

PART VI SECTION B LINE 12C

ANNUAL STATEMENTS ARE SENT TO EACH DIRECTOR AND MEMBER, WHICH MUST BE SIGNED BY EACH PERSON THAT AFFIRMS THAT SUCH PERSON HAS RECEIVED A COPY OF THE CONFLICTS OF INTEREST POLICY, HAS READ AND UNDERSTANDS THE POLICY, HAS AGREED TO COMPLY WITH THE POLICY AND UNDERSTANDS THE FOUNDATION IS A CHARITABLE ORGANIZATION AND IN ORDER TO MAINTAIN ITS FEDERAL TAX EXEMPTION IT MUST ENGAGE PRIMARILY IN ACTIVITIES WHICH ACCOMPLISH ITS TAX-EXEMPT PURPOSES. IN ADDITION, PERIODIC REVIEWS ARE CONDUCTED TO ACHIEVE THE ABOVE POLICY.

AUDIT COMMITTEE

PART VI, LINE 11A

THE AUDIT COMMITTEE REVIEWS THE 990 WITH THE FOUNDATION'S CPA, AND A COPY

Page 2

Schedule O (Form 990) 2009

Name of the organization

NATIONAL ROAD SAFETY FOUNDATION, INC.

Employer identification number

13-6128274

ATTACHMENT 1 (CONT'D)

OF IT IS PROVIDED TO EACH TRUSTEE PRIOR TO FILING WITH THE APPORPIRATE GOVERNMENT AGENCIES.

AVAILABILITY OF FINANCIAL STATEMENTS

PART VI, LINE 19

THE AUDITED FINANCIAL STATEMENTS AND FORM 990 ARE AVAILABLE AT THE NATIONAL ROAD SAFETY FOUNDATION'S BUSINESS OFFICE AND ARE AVAILABLE UPON WRITTEN REQUEST. GOVERNANCE DOCUMENTS ARE ALSO AVAILABLE AT THE BUSINESS OFFICE UPON WRITTEN REQUEST.

ATTACHMENT 2

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

THE FOUNDATION IS DEDICATED TO REDUCING CRASHES, DEATH AND DISABILITY

ON OUR NATION'S ROADS BY PROMOTING SAFE DRIVING HABITS. IT PRODUCES DOCUMENTARIES, EDUCATIONAL PROGRAMS AND PUBLIC SERVICE BROADCASTS.

FORM 990, PART	VIII - INVESTMENT	INCOME		ATTACHMENT 3	
DESCRIPTION		(A) TOTAL REVENUE	(B) RELATED OR EXEMPT REVENUE	(C) UNRELATED BUSINESS REV.	(D) EXCLUDED REVENUE
INTEREST INCOME		980,087			980,067
DIVIDEND INCOME		19,599			19,599
	TOTALS	999,686			999,686

Name of the organization

NATIONAL ROAD SAFETY FOUNDATION, INC.

Employer identification number

13-6128274

ATTACHMENT 4

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

DESCRIPTION

BEGINNING BOOK VALUE ENDING BOOK VALUE COST OR FMV

SEE ATTACHED STATEMENT A

17,327,489.

25,019,927.

FMV

TOTALS

17,327,489.

25,019,927.

PAGE 36

A, INC.	
FOUNDATION	
SAFETY	roperty
ROAD S.	n of F
NATIONAL	Description of Property

Part	DEPARCIATION				3								
1,100,101,101,101,101,101,101,101,101,1	Asset description	Date placed in service	Unadjusted Cost or basis	Bus %	1 / 9 exp reduction in basis	Basis Reduction	Basis for depreciation	Accumulated depreciation	Accumulated Me- depreciation thod		ACRS CRS	ر	Current-year depreciation
	PA SYSTEM	01/01/1993					379	379	379 SL				
10   10   10   10   10   10   10   10	2 PC SYSTEM	02/01/1993		100 000			1,953	1,953.	$\neg$	5 000			
10,00,2200   2,035,   100 colo   1,045   2,035   31,   5 colo   2,000   2,00	FILING CABINET	02/01/1993		100 000			2,955	2,955	$\neg$				
	FILING CABINETS	07/01/1993		$\neg$			2,955	2,955		5 000			
	COMPUTER	01/26/1996					1,965.	1,965					
100   100	COPY MACHINE	10/30/2003		100.000			4,250	4,250		5.000			
12   12   12   13   13   14   14   15   15   15   15   15   15	COMPUTER	08/31/2004		100 000			3,371	3,145		5 000			226
15   15   15   15   15   15   15   15													
17-828   1													
10   10   10   10   10   10   10   10													
1,1,228   1,1,628   1,1,													
17.02   17.0													
1, 1, 2, 2, 3   1, 1, 2, 2   1, 2, 2, 2   1, 2, 2, 2   1, 2, 2, 2   1, 2, 2, 2   1, 2, 2, 2   1, 2, 2, 2   1, 2, 2, 2   1, 2, 2, 2   1, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2,													
17, 628													
17,628   17,622   17,622   17,622   17,628   17,622   17,622   17,628   17,622   17,628   1													
17,828   17,622   17,828   17,622   17,828   17,622   17,828   17,622   17,828   17,622   17,828   17,622   17,828   17,622   17,828   17,622   17,828   17,622   17,828   17,622   17,828   1													
17.626   1													
17,828													
17.629   1													
17,828													
17,828	Subtotals		17,828				17,828	17,602.	17,828				226
Selfs	Listed Property												
17,826													
Sects										-			
17,828										_			
17,828										_			
17,826				•									
17,828	Subtotals												
Placed in Service basis amortization amortization amortization code Life amortization amortization amortization amortization code Life amortization amortization amortization amortization amortization code Life amortization amortization amortization amortization amortization code Life amortization amorti	TOTALS		17,828				17,828.	17,602	17,828				226
Secription Service basis Accumulated Accum	AMORTIZATION			,									
	Asset description	Date placed in service	Cost or basis					Accumulated arnortization	Ending Accumulated amortization Code	ıţe		<u>.                                      </u>	Current-year amortization
										$\prod$		<del></del>	
1608 v 09-9 1				'									
1608 v 09-9 1										Τ		<u>'</u>	
1608 V 09-9 1	TOTALS									7			
1608 V 09-9 1 PAGE	*Assets Retired												
V 09-9 1 PAGE	JSA 9X9024 1 000												•
	4GROQK 1608				V 09-9 1							PAGE '	11

	END OF YEAR	BEGINNING OF YEAR	END OF YEAR	BEGINNIING OF YEAR
	Principal Amount	Principal Amount	Market Value	Market Value
Corporate bonds: Abbott Laboratories			-	,
Note, 3.75%, due 3/15/2011 American Express	\$ 774,000	\$ 774,000	\$ 795,324	\$ 804,503
Note, 4 875%, due 7/15/2013 American Gen. Fin.	\$ 500,000	\$ -	534,105	•
Corp. Note, 5.2%, due 12/15/2011 AstraZeneca PLC	\$ 500,000	\$ 500,000	481,470	235,105
Note, 5.4%, due 6/1/2014 AT&T Inc. Note,	\$ 750,000	\$ 750,000	833,978	807,698
5.3%, due 11/15/2010 Bank of America	\$ 125,000	\$ 125,000	128,141	129.784
Corp. Note, 4.375%, due 12/1/2010	\$ 500,000	\$ 500,000	509,990	485,760
BellSouth Corp. Note, 6.0%, due 10/15/2011	\$ 500,000	\$ 500,000	534,060	532,355
Berkshire Hathaway Inc. Note, 4 75%, due 5/15/2012 Bristol-Myers Squibb	\$ 370,000	\$ 370,000	395,737	388.696
Co. Note, 5.25%, due 8/15/2013 Caterpillar Inc. Note,	\$ 750,000	\$ 750,000	827,730	784,380
6 55%, due 5/1/2011 Cisco Systems Inc.	\$ 150,000	\$ 150,000	158,067	156,569
Note, 5.25%, due 2/22/2011 Coca-Cola Co. Note,	\$ 190,000	\$ 190,000	197,009	202,006
5.35%, due 11/5/2017 Colgate-Palmolive	\$ 230,000	\$ 230,000	256,199	242,549
Co Note, 5 98%, due 4/25/2012 Consolidated Edison	\$ 825,000	\$ 825,000	903,284	889,391
Co. NY Inc. Note, 7.5%, due 9/1/2010 Consolidated Edison	\$ 400,000	\$ 400,000	408,696	425,428
Co. NY Inc. Note, 5.625%, due 7/1/2012	\$ 550,000	\$ 550,000	598,829	578,034

	END YEAI Princip	₹	BEGINNIING OF YEAR Principal	END OF YEAR .	BEGINNING OF YEAR
	Amou		Amount	Market Value	Market Value
Consolidated Edison Co NY Inc. Note, 4 875%, due					
2/1/2013 Consolidated Edison Co. NY Inc. Note,	\$ 125,000	\$	125,000	134,566	129,896
3.85%, due 6/15/2013 General Dynamics Corp. Note, 5 25%,	\$ 200,000	\$	200,000	209,014	199,684
due 1/1/2014 GlaxoSmithKline Cap. Inc. Note,	\$ 295,000	\$	295,000	326,418	313,092
4 375%, due 4/15/2014 Goldman Sachs Group Inc. Note, 6.65%, due	\$ 1,294,000	\$	1,294,000	1,389,157	1,320.496
5/15/2009 Goldman Sachs Group Inc. Note,	\$ -	\$	260,000	•	260,426
7.35%, due 10/1/2009 Goldman Sachs Group Inc. Note, 5 15%, due	\$ -	\$	124,000	-	126,724
1/15/2014	\$ 55,000	\$	55,000	57,208	53.787
Hershey Co. Note, 5 3%, due 9/1/2011 Hewlett Packard Note, 2.95%, due	\$ 600,000	\$	600,000	633,774	633,024
8/15/2012 Household Finance Corp Note, 6.375%,	\$ 500,000	\$	-	517,265	-
due 11/27/2012 HSBC Bank USA Global Note, 3.875%, due	\$ 500,000	\$	500,000	549,100	468,590
9/15/2009 Int'l. Business Machines Note, 4.75%, due	\$ •	\$	200,000	-	198,164
11/29/2012 Int'l. Business Machines Note, 5.05%, due	\$ 300,000	\$	•	324,924	-
10/22/2012 Int'l. Business Machines Note, 5 70%, due	\$ 400,000	\$	400,000	434,608	428,248
9/14/2017	\$ 100,000	\$	100,000	112,627	105,989
(continued)					,

		END ( YEAF Princi	Į	OF YEAR	END OF YEAR	BEGII OF YE	NNING EAR
		Amou	•	•	Market Value	Marke	et Value
International Lease Finance Corp Note, 5.875%, due							
5/1/2013 Johnson & Johnson Note, 5.15%, due	\$	500,000	\$	500,000	472,407		300,283
8/15/2012 Johnson & Johnson Note, 3.80%, due	S	264,000	\$	264,000	288,399		286,992
5/15/2013 JPMorgan Chase & Co. Note, 4 875%,	\$ :	250,000	\$	250,000	265,868		258,398
due 3/15/2014 JPMorgan Chase & Co. Note, 5.125%,	\$ :	300,000	\$	300,000	317,838		284,853
due 9/15/2014 Microsoft Corp. Note, 2.95%, due		105,000	\$	105,000	112,219		97,242
6/01/2014 NStar Electric Co. Note, 4 875%, due		500,000	S	-	513,740		•
4/15/2014 Pepsico Inc. Note, 3.75%, due				275,000	294,668		285.181
3/01/2014 Pfizer Inc. Note, 4.45%, due 3/15/2012		•	\$	•	525,485		-
Pfizer Inc. Note,	ъ.	275,000	\$	•	291,211		-
4 5%, due 2/15/2014 Pharmacia Corp. Note, 6.5%, due	\$ (	616,000	\$	616,000	662,791		645,901
12/1/2018 Pitney Bowes Inc. Note, 3.875%, due	\$ :	500,000	\$	500,000	579,710	t	539,890
6/15/2013 Procter & Gamble Co. Note, 4.95%,	\$ .	500,000	\$	500,000	526,920		482,185
due 8/15/2014 SBC Communications	\$ 4	420,000	\$	420,000	461,551		450,450
Inc. Note, 5.875%, due 8/15/2012 Southern Cal Edison Note, 4.65%, due	\$1,2	250,000	\$	500,000	1,366,750		531,010
4/1/2015 United Technologies Corp., 7.125%, due	\$ 2	250,000	\$	250,000	268,788		249.045
11/15/2010	\$ :	500,000	\$	500,000	517,535		534,520
(continued)							

C/O PAN AM EQUITIES, INC. 18 EAST 50<sup>TH</sup> STREET NEW YORK, NY 10022 EIN: 13-6128274

		Е	IN: 13-0120274		
	END C	F	BEGINNIING OF YEAR	END OF YEAR	BEGINNING OF YEAR
	Princip Amoui		Principal Amount	Market Value	Market Value
United Parcel Service, 3.875%, due 4/1/2014 Wal-Mart Stores Inc.	\$ 750,000	\$	-	792,660	-
Note, 6 875%, due 8/10/2009 Wal-Mart Stores Inc.	\$ -	\$	233,000	-	236,490
Note, 4.0%, due 1/15/2010 Wal-Mart Stores Inc.	\$ -	\$	200,000	-	203,774
Note, 4 75%, due 8/15/2010 Wal-Mart Stores Inc	\$ 325,000	\$	325,000	329,069	337.204
Note, 4 55%, due 5/1/2013 Wal-Mart Stores Inc	\$ 351,000	\$	351,000	378,090	372.130
Note, 4.25%, due 4/15/2013 Walt Disney Note,	\$ 800,000	\$	-	855,912	-
4.50%, due 12/15/2013 Wells Fargo & Co.	\$ 750,000	\$	•	812,573	•
Note, 5.25%, due 10/23/2012 Wells Fargo & Co.	\$ 450,000	\$	-	484,686	-
Note, 5.0%, due 11/15/2014	\$ 124,000	\$	124,000	130,620	113,590
Total corporate bonds				23,500,770	<u> 17,109,516</u>
Common and preferred stocks: Grand Canyon					•
Education Inc. Common Stock JPM Chase Capital	•		7,913	-	129,373
XXVI Preferred Stock JPM Chase Capital	4,000		4,000	110,000	88,600
XXVIII Preferred Stock	13,200		-	347,951	
Total common and preferred stocks				457,951	217,973
-					

(continued)

	END OF YEAR Principal Amount	BEGINNIING OF YEAR Principal Amount	END OF YEAR Market Value	BEGINNING OF YEAR  Market Value
Mutual funds and other				
funds: EIF Rydex Canadian				
Dollar Trust	270	•	26,460	-
Fidelity Advisor			55,118	•
Float Rate Hi Inc.	5,700	•	33,118	
IPATH Dow Jones - AIG Commodity	1,300	_	52,806	-
IShare IBoxx	1,500			
Investop	1,240	-	133,064	-
IShare IBoxx High			53,640	
Yield	600	-	185,605	-
IShares Barclays TIP	1,750	-	105,005	
Loomis Sayles Global Bond Fund	3,196	-	50,944	-
PIMCO Foreign	5,170			
Bond	5,452	-	54,844	•
SPDR DB				
International				
Government				
Inflation-Protected Bond	1,850		102,454	•
SPDR Gold Trust	540	-	62,294	•
Templeton Global	2,10			
Bond Fund Class A	4,285	-	58,277	•
Vanguard Bond			200,500	_
Index Fund	2,500	-	200,300	-
Wisdom Tree				
Dreyfus Chinese Yuan Fund	1,000		25,200	
t uati ruilu	7,000			
Total mutual				T.
funds and			1.061.306	_
other funds			1,061,206	<del></del>
Total				
marketable			\$ 25,019,92 <u>7</u>	\$ 17,327,489
securities			\$ <u>25,019,927</u>	J 11,321,102

### Form **8868**

(Rev April 2009)

Department of the Treasury

# Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

nternal Revenue Si	ervice	rile a separate	application for each return.				
<ul><li>If you are fi</li></ul>	ling for an Automatic 3-1	Month Extension, complete	only Part I and check this	box			X
<ul> <li>If you are find a complet</li> </ul>	ling for an Additional (Ne te Part II unless you have	ot Automatic) 3-Month Ext already been granted an a	ension, complete only Par utomatic 3-month extensio	t II (on pag n on a prev	e 2 of this for viously filed F	m). orm 8868.	
Part I Auto	matic 3-Month Extens	sion of Time. Only subm	it original (no copies need	ded).			
		)-T and requesting an autor			ox and comp	lete	F
		• • • • • • • • • • • • • • • • • • • •		· · · · · · ·			•
All other corpo time to file inco	orations (including 1120 ome tax returns	)-C filers), partnerships, RE	EMICs, and trusts must us	se Form 70	004 to requ	est an exten	sion of
one of the ret electronically r returns, or a co	turns noted below (6 m f (1) you want the addi emposite or consolidated	or can electronically file Foinonths for a corporation rational (not automatic) 3-mid From 990-T Instead, you ic filing of this form, visit wi	equired to file Form 990- onth extension or (2) you must submit the fully com	T) However file Forms apleted and	er, you cani 990-BL, 606 I signed pag	not file Form 59, or 8870, e 2 (Part II) o	8868 group
Type or	Name of Exempt Organiza	ation			Employer id	entification nu	mber
print	NATIONAL ROA	D SAFETY FOUNDATIO	N, INC.		13-61	28274	
File by the	Number, street, and room	or suite no If a P O box, see in	nstructions.				
due date for	18 EAST 50TH	STREET					
liling your return See	City, town or post office,	state, and ZIP code For a foreig	gn address, see instructions.				
nstructions	NEW YORK, NY	10022					
Check type o	f return to be filed (file a	separate application for ea	ach return)				
X Form 990		Form 990-T (corporation)		For	m 4720		
Form 990	I-BL	Form 990-T (sec 401(a)	or 408(a) trust)	For	m 5227		
Form 990	-EZ	Form 990-T (trust other	• • •	For	m 6069		
Form 990	-PF	Form 1041-A		For	m 8870		
	<del></del>						
<ul> <li>If the organ</li> <li>If this is for</li> <li>for the whole of</li> </ul>		n office or place of business ne organization's four digit (		GEN)	nd attach a l	If this ist with the	► s
1 I reques		onth (6 months for a 0 , to file the exempt of	corporation required to rganization return for the c	file Fon organization	n 990-T) n named abo	ı	f time
2 If this tax	year is for less than 12	months, check reason	Initial return Final	l return	Change in	accounting	period
		90-BL, 990-PF, 990-T, 472	0, or 6069, enter the ten	tative tax,	less any		
	dable credits. See instru					3a \$	<del></del>
		0-PF or 990-T, enter any repayment allowed as a credi		nated tax p	ayments	2.	
		om line 3a Include your p		if required	denosit	3b \$	
		ed, by using EFTPS (Ele					
instructio			·-· - <b>,</b>	•	•	3c \$	
Caution. If vol	are going to make an e	electronic fund withdrawal w	ith this Form 8868, see Fo	rm 8453-F	O and Form		
for payment in	<del>-</del> -	· · · · · · · · · · · · · · · · · · ·	, , , ,	2.24			
		iction Act Notice, see Instru	ictions.		F	om 8868 (Re	v 4-2009)

Form 8868 (Rbv 4-2009)	Page 2
• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only	y Part II and check this box X
Note. Only complete Part II if you have already been granted an automatic 3-month ex	dension on a previously filed Form 8868
• If you are filing for an Automatic 3-Month Extension, complete only Part I (on page	
Part II Additional (Not Automatic) 3-Month Extension of Time. Only	
Name of Exempt Organization	Employer identification number
Type or   NATIONAL DOAD CAPETY FOUNDATION THE	13-6128274
Number street and room or state no. If a D.O. how soo instructions	For IRS use only
extended 18 EAST 50TH STREET	1
due date for filing the City, town or post office, state, and ZIP code. For a foreign address, see instructions	
return See   NEW YORK NY 10022	
Check type of return to be filed (File a separate application for each return):	<u> </u>
X Form 990 Form 990-PF	Form 1041-A Form 6069
1 0/11 350-17	Form 4720 Form 8870
	<del></del>
Form 990-EZ Form 990-T (trust other than above)	Form 5227
STOPI Do not complete Part II if you were not already granted an automatic 3-mo	milit extension on a previously filed Form 6866.
• The books are in the care of PAN AM EQUITIES, INC.	
Telephone No ► 212 837-4800 FAX No. ►	<del> </del>
<ul> <li>If the organization does not have an office or place of business in the United States,</li> </ul>	
If this is for a Group Return, enter the organization's four digit Group Exemption Number	
for the whole group, check this box > L If it is for part of the group, check this	s box ▶ and attach a
list with the names and EINs of all members the extension is for	
4 I request an additional 3-month extension of time until 03/15/2011	
5 For calendar year, or other tax year beginning 05/01/2009	, and ending04/30/2010
6 If this tax year is for less than 12 months, check reason Initial return	Final return Change in accounting period
7 State in detail why you need the extension ADDITIONAL TIME IS REQUI	
COMPILE INFORMATION, INCLUDING INFORMATION FROM THIS	RD PARTIES,
NECESSARY TO PREPARE AND FILE A COMPLETE AND ACCURAT	E TAX RETURN.
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter th	e tentative tax, less any
nonrefundable credits. See instructions.	Ba \$ NONZ
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundab	ple credits and estimated
tax payments made Include any prior year overpayment allowed as a credi	t and any amount paid
previously with Form 8868	Bb & NONE
c Balance Due. Subtract line 8b from line 8a Include your payment with this form	n, or, if required, deposit
with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment	
Signature and Verification	
Under penalties of perjury, I declare that I have examined this form, including accompanying schedules at its true, correct, and complete, and that I am authorized to prepare this form	
Signature Marinis MM Hueller Title	E C PA Date ► 12///5 Form 8868 (Rev 4-2009)
BERDON LLP	Form 8868 (Rev 4-2009)
360 MADISON AVE	,
NEW YORK, NY 10017	

#### SCHEDULE D (Form 1041)

**Capital Gains and Losses** 

► Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092 '

Department of the Treasury Internal Revenue Service Name of estate or trust

NATIONAL ROAD SAFETY FOUNDATION, INC.

Employer identification number

13-6128274

	: Form 5227 filers need to complete only F						
Par	Short-Term Capital Gains and L	osses - Assets	Held One Ye	ar or Less	(-) (		(0.0
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price	(e) Cost or other back (see page 4 of the instructions)		(f) Gain or (loss) for the entire year Subtract (e) from (d)
1 a							
			<del></del>		<del> </del>	_	
			<del></del> -				
							· · · · · · · · · · · · · · · · · · ·
		-			<del></del>	-	
b	Enter the short-term gain or (loss), if any	from Schedule D	-1, line 1b			1b	0.
2	Short-term capital gain or (loss) from Fo	ms 4684 6252	6781 and 882	4		2	
-	oner term capital gam of (1995) from the		01 0 1, and 002			-	
3	Net short-term gain or (loss) from partne	rships, S corpora	tions, and other	estates or trusts		3	
4	Short-term capital loss carryover Enter t			· ·	1		,
5	Carryover Worksheet	nes 1a through 4	in column (f)	Enter here and on h		4	)
3	column (3) on the back	-				5	0.
Pai							
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr )	(d) Sales рлсе	(e) Cost or other b (see page 4 of the instructions)		(f) Gain or (loss) for the entire year Subtract (e) from (d)
6a							
			<u> </u>				
					1		
		-					
			·	<del></del>			1
b	Enter the long-term gain or (loss), if any,	from Schedule D	-1, line 6b			6 b	-21,625.
7	Long-term capital gain or (loss) from For	ms 2430 4694	6252 6701 a	ad 0004		,	
′	Long-term capital gain of (loss) from For	1115 2439, 4004,	0232, 0761, a	10 0024	• • • • • • • - • -	7	!
8	Net long-term gain or (loss) from partner	ships, S corporat	ions, and other	estates or trusts		8	
					ſ		
9	Capital gain distributions					9	
10	Gain from Form 4797 Part I					10	1
11	Gain from Form 4797, Part I	he amount, if any	, from line 14	of the 2008 Capital Lo	·····	10	
	Carryover Worksheet					11	()
12	Net long-term gain or (loss). Combine lir	ies 6a through 11	l in column (f)	Enter here and on li	ne 14a,		
_	column (3) on the back			<u> </u>	· · · · · · · · · · · · · · · · · · ·	12	-21,625.

Part III	Summary of Parts I and II		1 ' '	neficiaries'	(2) Es		(3) Total
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Caution: Read the instructions before completing this	<del>'                                    </del>	(see	page 5)	or tru	JSTS	0.
	short-term gain or (loss) ong-term gain or (loss):	13				-	ļ
		142					-21,625.
h Horo	for yearcaptured section 1250 gain (see line 18 of the wrksht)	14a					-21,025.
	rate gain		<del></del>		<del></del>		
15 Total		15					-21,625.
	e 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Foi		T Part I	line 4a). If line	c 142 and 3	15 solumn	<u> </u>
o Part V, ar	nd <b>do not</b> complete Part IV If line 15, column (3), is a net loss, complete F	art IV a	and the Ca	pital Loss Car	ryover Worl	k <b>sheet,</b> as r	(2), are net gains, go iecessarv
Part IV	Capital Loss Limitation			·	•		<del>-                                    </del>
	r here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, F	Part I. li	ne 4c. ıf a	trust), the sn	naller of		
						16 (	3,000)
Note: If the	loss on line 15, column (3) or b \$3,000 e loss on line 15, column (3), is more than \$3,000, or if Form 1041, pag	e i, im	e 22 (or F	orm 990-T, III	ne 34), is a	loss, comp	lete the Capital Loss
	orksheet on page 7 of the instructions to figure your capital loss carryove						<del></del>
Part V	Tax Computation Using Maximum Capital Gains Rate						
-orm 104	1 filers. Complete this part only if both lines 14a and 15 in colu entry on Form 1041, line 2b(2), and Form 1041, line 22, is mor	ımn (2	2) are gai	ns, or an am	nount is er	itered in F	art I or Part II and
	Skip this part and complete the worksheet on page 8 of the instru						
	ine 14b, col (2) or line 14c, col (2) is more than zero, or	2110113	"				
Both Fo	orm 1041, line 2b(1), and Form 4952, line 4g are more than zero						
Form 990	-T trusts. Complete this part only if both lines 14a and 15 ar	e gair	s, or qua	alified divide	ends are ii	ncluded 11	n income in Part I
of Form 9	90-T, and Form 990-T, line 34, is more than zero. Skip this pa	rt and	complet	e the works	sheet on p	page 8 of	the instructions if
either line	14b, col (2) or line 14c, col (2) is more than zero						
	r taxable income from Form 1041, line 22 (or Form 990-T, line 3	34) .	17				
18 Ente	r the smaller of line 14a or 15 in column (2)					]	
but n	ot less than zero					}	
19 Ente	r the estate's or trust's qualified dividends						
from	Form 1041, line 2b(2) (or enter the qualified			Į			
divide	ends included in income in Part I of Form 990-T) 19						
20 Add	lines 18 and 19						
21 If the	estate or trust is filing Form 4952, enter the						
	unt from line 4g, otherwise, enter -0 ▶ 21			1			
	ract line 21 from line 20 If zero or less, enter -0		22			] [	
23 Subt	ract line 22 from line 17 If zero or less, enter -0		23_			]	
	r the <b>smaller</b> of the amount on line 17 or \$2,300		24			]	
25 Is the	e amount on line 23 equal to or more than the amount on line 24						
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box						
	No. Enter the amount from line 23		25		_		
<b>26</b> Subt	ract line 25 from line 24		26				ı
27 Are t	he amounts on lines 22 and 26 the same?						
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line	ne 22	27			.	
28 Ente	r the amount from line 26 (If line 26 is blank, enter -0-)		28			<u> </u>	
	ract line 28 from line 27					]	
	ply line 29 by 15% ( 15)					30	<del></del>
	re the tax on the amount on line 23 Use the 2009 Tax Rate						
(see	the Schedule Ginstructions in the instructions for Form 1041).					31	<del> </del>
	lines 30 and 31	• • •			<i>: -</i> · · ·	32	<del></del>
<b>33</b> Figur	re the tax on the amount on line 17. Use the 2009 Tax Rate	e Sch	eaule for	Estates an	a irusts	1 1	

Schedule D (Form 1041) 2009

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#### SCHEDULE D-1 (Form 1041)

Continuation Sheet for Schedule D (Form 1041)

OMB No 1545-0092 ·

Department of the Treasury Internal Revenue Service ► See instructions for Schedule D (Form 1041).

► Attach to Schedule D to list additional transactions for lines 1a and 6a.

2009

Employer identification number Name of estate or trust NATIONAL ROAD SAFETY FOUNDATION, INC. 13-6128274 Short-Term Capital Gains and Losses - Assets Held One Year or Less (d) Sales price (see page 4 of the instructions) (e) Cost or other basis (see page 4 of the instructions) (b) Date (c) Date sold (mo , day, yr ) (f) Gain or (loss) Subtract (e) from (d) (a) Description of property (Example 100 sh 7% preferred of "Z" Co) acquired (mo , day, yr ) 1a 475000 SHS FEDERAL HOME LOAN 09/14/2009 12/14/2009 475,000. 475,000.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

1b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 1b . . . . . . .

Schedule D-1 (Form 1041) 2009

0.

Name of estate or trust as shown on Form 1041. Do not enter name and employer identification number if shown on the other side

Employer identification number

(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired	(c) Date sold (mo , day, yr )	(d) Sales price (see page 4 of the	(e) Cost or other basis (see page 4 of the	(f) Gain or (loss) Subtract (e) from (d
7913 SHARES GRAND CANYON	(mo , day, yr )		instructions)	instructions)	
EDUCATION INC	VAR	VAR	124,607.	146,232.	-21,62
260000 SHS GOLDMAN SACHS	07/27/2006	05/15/2009	260,000.	260,000.	
233000 SHS WAL-MART STORE	08/11/2006	08/10/2009	233,000.	233,000.	
200000 SHS HSBC BANK USA GLOBAL	04/28/2006	09/15/2009	200,000.	200,000.	
124000 SHS GOLDMAN SACHS	07/20/2006	10/01/2009	124,000.	124,000.	
200000 SHS WAL-MART STORE	04/28/2006	01/15/2010	200,000.	200,000.	<del></del>
			<del></del>		
	1				
			<del></del>		ı
			<del></del>		
		, , , , , , , , , , , , , , , , , , , ,			
6b Total. Combine the amounts in colum				l	-21,62