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Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung
benefit trust or private foundation)

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

OMB No 1545-0047

2010**Open to Public
Inspection****A** For the 2010 calendar year, or tax year beginning **12/01/10**, and ending **11/30/11****B** Check if applicable

- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization **NATIONAL INSTITUTE FOR PUBLIC
POLICY INC**

Doing Business As

Number and street (or P O box if mail is not delivered to street address)

9302 LEE HIGHWAY

Room/suite

750

City or town, state or country, and ZIP + 4

FAIRFAX**VA 22031****D** Employer identification number**54-1192424****E** Telephone number**703-293-9181****G** Gross receipts \$ **10,030,581****F** Name and address of principal officer**H(a)** Is this a group return for affiliates? ☐ Yes ☒ No**H(b)** Are all affiliates included? ☐ Yes ☐ No

If "No," attach a list (see instructions)

I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no) ☐ 4947(a)(1) or ☐ 527**J** Website: ▶ **N/A****H(c)** Group exemption number ▶**K** Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation **1981****M** State of legal domicile **VA****Part I Summary****1** Briefly describe the organization's mission or most significant activities**See Schedule O****2** Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets**3** Number of voting members of the governing body (Part VI, line 1a)**3** **4****4** Number of independent voting members of the governing body (Part VI, line 1b)**4** **2****5** Total number of individuals employed in calendar year 2010 (Part V, line 2a)**5** **19****6** Total number of volunteers (estimate if necessary)**6****7a** Total unrelated business revenue from Part VIII, column (C), line 12**7a****b** Net unrelated business taxable income from Form 990-T, line 34**7b** **0****8** Contributions and grants (Part VIII, line 1h)

Prior Year

4,171,538

Current Year

3,977,213**9** Program service revenue (Part VIII, line 2g)**10** Investment income (Part VIII, column (A), lines 3, 4, and 7d)**-37,431****545,516****11** Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)**3,073****2,255****12** Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)**4,137,180****4,524,984****13** Grants and similar amounts paid (Part IX, column (A), lines 1-3)**14** Benefits paid to or for members (Part IX, column (A), line 4)**15** Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)**2,776,035****2,498,889****16a** Professional fundraising fees (Part IX, column (A), line 11e)**b** Total fundraising expenses (Part IX, column (D), line 25) ▶**41,679****17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)**931,007****811,839****18** Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)**3,707,042****3,310,728****19** Revenue less expenses Subtract line 18 from line 12**430,138****1,214,256****20** Total assets (Part X, line 16)

Beginning of Current Year

10,558,196

End of Year

11,893,910**21** Total liabilities (Part X, line 26)**2,746,574****2,236,727****22** Net assets or fund balances Subtract line 21 from line 20**7,811,622****9,657,183****Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than agent) based on all information of which preparer has any knowledge

**Sign
Here**

Signature of officer

KEITH B PAYNE PRESIDENT + CEO

Date

10/15/12

Type or print name and title

Paid

Print/Type preparer's name

META J MORTENSEN

Preparer's signature

META J MORTENSEN

Date

10/15/12Check ☐ if PTIN

self-employed

P01350618**Preparer
Use Only**Firm's name ▶ **MJ Mortensen Associates, LTD**Firm's EIN ▶ **54-1668428**Firm's address ▶ **8302 Professional Hill Drive, 1st Floor****Fairfax, VA 22031**Phone no **703-641-8302**

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

☐ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2010)

DAA

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Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III ☒

1 Briefly describe the organization's mission

See Schedule O2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ **578,679** including grants of \$) (Revenue \$ **784,285**)
NATIONAL INSTITUTE PERSONNEL PROVIDE GOVERNMENT OFFICIALS WITH SUPPORT IN THE FORM OF RESEARCH, BRIEFINGS AND REPORTS ON MATTERS RELATED TO NATIONAL DEFENSE.

4b (Code) (Expenses \$ **524,642** including grants of \$) (Revenue \$ **668,325**)
NATIONAL INSTITUTE PERSONNEL PROVIDE ORAL AND WRITTEN REPORTS AND BRIEFINGS ON MATTERS RELATED TO NATIONAL DEFENSE TO FEDERAL AGENCIES, U.S. GOVERNMENT OFFICIALS AND ACADEMIA.

4c (Code) (Expenses \$ **407,463** including grants of \$) (Revenue \$ **484,476**)
NATIONAL INSTITUTE PERSONNEL PROVIDE ORAL AND WRITTEN REPORTS AND BRIEFINGS ON MATTERS RELATED TO NATIONAL DEFENSE TO THE DEPARTMENT OF HOMELAND SECURITY.

4d Other program services (Describe in Schedule O)

(Expenses \$ **1,654,074** including grants of \$) (Revenue \$ **2,040,126**)4e Total program service expenses ► **3,164,858**

Part IV 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," complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		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		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		X
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)		

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23 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	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25		X
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
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		X
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		X
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	X	
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	X	
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	X	
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
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		X
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		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?		X
a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
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		X
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		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	X	

☐ Yes ☒ No

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response to any question in this Part V ☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		
1b	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?		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).		X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	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?		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
d	If "Yes," indicate the number of Forms 8282 filed during the year.		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
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?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter.		
a	Initiation fees and capital contributions included on Part VIII, line 12.		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter.		
a	Gross income from members or shareholders.		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.		
c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

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

Check if Schedule O contains a response to any question in this Part VI ☒

Section A. Governing Body and Management

- | | |
|----|---|
| 1a | 4 |
| 1b | 2 |
- 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?
- 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?
- 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?
- 5 Did the organization become aware during the year of a significant diversion of the organization's assets?
- 6 Does the organization have members or stockholders?
- 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?
- b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?
- 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following
- a The governing body?
- b Each committee with authority to act on behalf of the governing body?
- 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O

	Yes	No
2		X
3		X
4		X
5		X
6		X
7a		X
7b		X
8a	X	
8b	X	
9		X

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

- 10a Does the organization have local chapters, branches, or affiliates?
- b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?
- 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?
- b Describe in Schedule O the process, if any, used by the organization to review this Form 990
- 12a Does the organization have a written conflict of interest policy? If "No," go to line 13
- b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?
- c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done
- 13 Does the organization have a written whistleblower policy?
- 14 Does the organization have a written document retention and destruction policy?
- 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?
- a The organization's CEO, Executive Director, or top management official
- b Other officers or key employees of the organization
- 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 with a taxable entity during the year?
- b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?

	Yes	No
10a		X
10b		
11a		X
12a	X	
12b	X	
12c	X	
13	X	
14	X	
15a	X	
15b	X	
16a		X
16b		

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed **None**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply
- ☐ Own website ☐ Another's website ☒ Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization **NIPP**

**9302 LEE HIGHWAY STE 750
VA 22031**

FAIRFAX

703-293-9181

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response to any question in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) COLIN GRAY DIRECTOR	1.00	X						0	0	0
(2) META JANE MORTENSEN DIRECTOR	1.00	X						0	0	0
(3) CHARLES KUPPERMAN DIRECTOR	1.00	X						0	0	0
(4) KEITH PAYNE PRESIDENT/DIRECTOR	40.00			X				423,010	0	32,500
(5) AMY JOSEPH COO/SEC	40.00			X				235,146	0	32,500
(6) THOMAS SCHEBER VICE PRESIDENT	40.00			X				164,731	0	8,277
(7) ROBERT JOSEPH HC EMPLOYEE	40.00					X		268,117	0	7,350
(8) STEVEN LAMBAKIS HC EMPLOYEE	40.00					X		190,296	0	9,515
(9) KURT GUTHE HC EMPLOYEE	40.00					X		149,523	0	7,476
(10) MARK SCHNEIDER HC EMPLOYEE	40.00					X		143,443	0	7,172
(11) BERNARD VICTORY HC EMPLOYEE	40.00					X		140,831	0	7,042
(12)										
(13)										
(14)										
(15)										
(16)										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
(26)										
(27)										
(28)										
1b Sub-total								1,715,097		111,832
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								1,715,097		111,832

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **8**

- 3** Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4	X	
5		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **0**

Part VIII Statement of Revenue

			(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 Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e 2,760,527				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 1,216,686				
	g Noncash contributions included in lines 1a-1f \$					
	h Total. Add lines 1a-1f		3,977,213			
Program Service Revenue	Busn. Code					
	2a					
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		319,646	319,646		
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties		2,255	2,255		
	6a Gross Rents	(i) Real (ii) Personal				
	b Less rental exps					
	c Rental inc or (loss)					
	d Net rental income or (loss)					
	7a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other	5,731,467			
	b Less cost or other basis & sales exps		5,505,597			
	c Gain or (loss)		225,870			
	d Net gain or (loss)		225,870	225,870		
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18	a				
	b Less direct expenses	b				
	c Net income or (loss) from fundraising events					
	9a Gross income from gaming activities See Part IV, line 19	a				
	b Less direct expenses	b				
	c Net income or (loss) from gaming activities					
	10a Gross sales of inventory, less returns and allowances	a				
b Less cost of goods sold	b					
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Busn. Code				
11a						
b						
c						
d All other revenue						
e Total. Add lines 11a-11d						
12 Total revenue. See instructions		4,524,984	547,771	0	0	

Part IX Statement of Functional Expenses

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	823,687	778,279	31,638	13,770
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,423,723	1,419,051		4,672
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	135,699	135,699		
9 Other employee benefits	115,780	115,780		
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management				
b Legal	3,930		3,930	
c Accounting	54,636	39,788	14,848	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other	223,908	215,712	8,196	
12 Advertising and promotion				
13 Office expenses	19,810	19,774	21	15
14 Information technology				
15 Royalties				
16 Occupancy	72,329	72,329		
17 Travel	60,878	60,567		311
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	-21		-21	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	65,438	65,438		
23 Insurance	154,440	143,650	10,790	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a INVESTMENT EXPENSE	80,591	80,591		
b ENTERTAINMENT & MEALS	27,807	3,093	24,714	
c DUES	14,332	14,332		
d LICENSES	13,932	13,932		
e TELEPHONE	11,611	10,125	1,486	
f All other expenses	8,218	-23,282	8,589	22,911
25 Total functional expenses. Add lines 1 through 24f	3,310,728	3,164,858	104,191	41,679
26 Joint costs. Check here ☐ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest bearing	877,337	1	668,337
	2 Savings and temporary cash investments	8,719,991	2	10,421,214
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	781,337	4	427,266
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7 Notes and loans receivable, net	11,063	7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	6,152	9	4,127
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 765,086		
	b Less accumulated depreciation	10b 486,177	10c	278,909
	11 Investments—publicly traded securities		11	
	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	19,419	15	94,057
16 Total assets. Add lines 1 through 15 (must equal line 34)	10,558,196	16	11,893,910	
Liabilities	17 Accounts payable and accrued expenses	17,037	17	41,611
	18 Grants payable		18	
	19 Deferred revenue	2,104,156	19	1,847,467
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 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	625,381	25	347,649
	26 Total liabilities. Add lines 17 through 25	2,746,574	26	2,236,727
	Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☐ and complete lines 27 through 29, and lines 33 and 34.		
27 Unrestricted net assets			27	
28 Temporarily restricted net assets			28	
29 Permanently restricted net assets			29	
Organizations that do not follow SFAS 117, check here ☒ and complete lines 30 through 34.				
30 Capital stock or trust principal, or current funds		7,811,622	30	9,657,183
31 Paid-in or capital surplus, or land, building, or equipment fund			31	
32 Retained earnings, endowment, accumulated income, or other funds			32	
33 Total net assets or fund balances		7,811,622	33	9,657,183
34 Total liabilities and net assets/fund balances		10,558,196	34	11,893,910

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response to any question in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,524,984
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,310,728
3	Revenue less expenses Subtract line 2 from line 1	3	1,214,256
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7,811,622
5	Other changes in net assets or fund balances (explain in Schedule O)	5	631,305
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	9,657,183

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII ☒

- 1 Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
- b Were the organization's financial statements audited by an independent accountant?
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O
- 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 separate basis, consolidated basis, or both
☐ 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 Act and OMB Circular A-133?
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

Form **990** (2010)

SCHEDULE A
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Public Charity Status and Public Support**

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.

OMB No 1545-0047

2010Open to Public
InspectionName of the organization **NATIONAL INSTITUTE FOR PUBLIC
POLICY INC**Employer identification number
54-1192424**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 ☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 ☐ A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state.
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
- a ☐ Type I b ☐ Type II c ☐ Type III—Functionally integrated d ☐ Type III—Other
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f ☐ If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box.
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
- (ii) A family member of a person described in (i) above?
- (iii) A 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s).

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(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 organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

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

Schedule A (Form 990 or 990-EZ) 2010

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	4,090,680	4,311,335	4,094,051	4,171,538	3,977,212	20,644,816
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	4,090,680	4,311,335	4,094,051	4,171,538	3,977,212	20,644,816
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						2,389,780
6 Public support. Subtract line 5 from line 4						18,255,036

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	4,090,680	4,311,335	4,094,051	4,171,538	3,977,212	20,644,816
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	807,441	304,707	311,126	249,112	321,901	1,994,287
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						22,639,103
12 Gross receipts from related activities, etc. (see instructions)					12	321,901

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ☐**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	80.63 %
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	86.48 %
16a 33 1/3% support test—2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ☒		
b 33 1/3% support test—2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ☐		
17a 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ☐		
b 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ☐		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ☐		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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 organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► ☐						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ► ☐

b 33 1/3% support tests—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ► ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► ☐

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

**SCHEDULE D
(Form 990)**Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**▶ Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010Open to Public
Inspection

Name of the organization

**NATIONAL INSTITUTE FOR PUBLIC
POLICY INC**

Employer identification number

54-1192424**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(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)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No		
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No		

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e.g., recreation or education)	☐ Preservation of an historically important land area
☐ Protection of natural habitat	☐ Preservation of 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 Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c 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, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

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

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

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1	▶ \$
(ii) Assets included in Form 990, Part X	▶ \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1	▶ \$
b Assets included in Form 990, Part X	▶ \$

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a ☐ Public exhibition
 b ☐ Scholarly research
 c ☐ Preservation for future generations
 d ☐ Loan or exchange programs
 e ☐ Other

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table

- c Beginning balance
 d Additions during the year
 e Distributions during the year
 f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End-of-year balance					

2 Provide the estimated percentage of the year end balance held as

- a Board designated or quasi-endowment ▶ %
 b Permanent endowment ▶ %
 c Term endowment ▶ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
 (ii) related organizations

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		614,207	381,109	233,098
d Equipment		98,674	86,458	12,216
e Other		52,205	18,610	33,595
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				278,909

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
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		

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

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)	

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

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2) ACCRUED PENSION PAYABLE	135,599
(3) VACATION ACCRUAL	100,478
(4) ACCRUED SALARIES PAYABLE	75,702
(5) DEFERRED RENT PAYABLE	35,870
(6) CONTRACT OVERBILLING	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	347,649

2. **FIN 48 (ASC 740) Footnote** In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	4,524,984
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	3,310,728
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	1,214,256
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	631,305
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 through 8	9	631,305
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10	1,845,561

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	4,524,984
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	4,524,984
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	4,524,984

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	2,681,758
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	-631,305
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	2,335
e	Add lines 2a through 2d	2e	-628,970
3	Subtract line 2e from line 1	3	3,310,728
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	0
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	3,310,728

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Part XIII, Line 4B - Reconciliation of Changes - Other

INCOME AMOUNT OFFSET BY THIS AMOUNT

\$ 2,335

Part XIV Supplemental Information (continued)

SCHEDULE J
(Form 990)Department of the Treasury
Internal Revenue Service**Compensation Information**For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees▶ Complete if the organization answered "Yes" to Form 990,
Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010**Open To Public
Inspection**

Name of the organization

**NATIONAL INSTITUTE FOR PUBLIC
POLICY INC**

Employer identification number

54-1192424**Part I Questions Regarding Compensation****1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| ☐ First-class or charter travel | ☐ Housing allowance or residence for personal use |
| ☐ Travel for companions | ☐ Payments for business use of personal residence |
| ☐ Tax indemnification and gross-up payments | ☐ Health or social club dues or initiation fees |
| ☐ Discretionary spending account | ☐ Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?**3** Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- | | |
|---|---|
| ☒ Compensation committee | ☐ Written employment contract |
| ☐ Independent compensation consultant | ☒ Compensation survey or study |
| ☒ Form 990 of other organizations | ☒ Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment from the organization or a related organization?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5–9.**5** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?

If "Yes" to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?

If "Yes" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.**8** Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

X

X

X

X

X

X

X

X

X

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

	(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	KEITH PAYNE	(i) 307,610 (ii) 0	115,400	0	32,500	0	455,510	0
2	AMY JOSEPH	(i) 133,146 (ii) 0	102,000	0	32,500	0	267,646	0
3	THOMAS SCHEBER	(i) 150,031 (ii) 0	14,700	0	8,277	0	173,008	0
4	ROBERT JOSEPH	(i) 209,917 (ii) 0	58,200	0	7,350	0	275,467	0
5	STEVEN LAMBAKIS	(i) 177,296 (ii) 0	13,000	0	9,515	0	199,811	0
6	KURT GUTHE	(i) 139,123 (ii) 0	10,400	0	7,476	0	156,999	0
7	MARK SCHNEIDER	(i) 137,643 (ii) 0	5,800	0	7,172	0	150,615	0
8		(i) (ii)						
9		(i) (ii)						
10		(i) (ii)						
11		(i) (ii)						
12		(i) (ii)						
13		(i) (ii)						
14		(i) (ii)						
15		(i) (ii)						
16		(i) (ii)						

Schedule J (Form 990) 2010

Part III Supplemental Information

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

SCHEDULE L
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**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.

OMB No 1545-0047

2010Open To Public
Inspection

Name of the organization

**NATIONAL INSTITUTE FOR PUBLIC
POLICY INC**

Employer identification number

54-1192424**Part I Excess Benefit Transactions** (section 501(c)(3) and section 501(c)(4) organizations only)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958

▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

▶ \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
(1)										
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
Total				▶ \$						

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of org revenues?	
				Yes	No
(1) META JANE MORTENSEN/MJM ASSOC LTD	BD MEMBER	19,400	ACCTG SVCS/TAX PREP		X
(2) KATHRYN MENDONCA	DAUG OF BD MBR	25,593	ACCTG SVCS		X
(3) ELIZABETH SEEGER PAYNE	SPOUSE	3,605	W2 SERVICES		X
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Schedule L, Part V - Additional Information

LINE 1-META JANE MORTENSEN IS THE PRINCIPAL OWNER OF MJ MORTENSEN

ASSOCIATES LTD. (AN ACCOUNTING FIRM) ALL OF THE COMPENSATION RECEIVED WAS FOR ACCOUNTING AND TAX PREPARATION UNRELATED TO BOARD MATTERS.

SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2010Open to Public
InspectionName of the organization **NATIONAL INSTITUTE FOR PUBLIC
POLICY INC**Employer identification number
54-1192424**Form 990 - Organization's Mission or Most Significant Activities**

THE INSTITUTE PROVIDES ORAL AND WRITTEN REPORTS TO FEDERAL AGENCIES, NEWSPAPERS AND SCHOLARLY JOURNALS AND INSTITUTE PERSONNEL SERVE ON SENIOR ADVISORY BOARDS FOR FEDERAL OFFICES. AN INFORMATION SERIES HAS BEEN MADE AVAILABLE TO GOVERNMENT OFFICIALS, UNIVERSITIES AND ACADEMICS IN THE FIELD.

THE INSTITUTE ALSO MAKES SCHOLARLY ARTICLES ON PUBLIC POLICY ISSUES AVAILABLE TO THE PUBLIC WITHOUT CHARGE ON IT'S WEBSITE. OFFICERS AND SENIOR STAFF MEMBERS OF THE INSTITUTE VOLUNTEER PRESENTATIONS DISCUSSING ISSUES OF NATIONAL DEFENSE FOR CIVIC GROUPS, NEWSPAPERS, TELEVISION AND RADIO. THIRTY-SEVEN PROGRAMS ARE IN PROGRESS OR ARE COMPLETED FOR GOVERNMENTAL AND PRIVATE CLIENTS.

Form 990, Part III, Line 4d - All Other Achievements

SEE ORGANIZATION'S PRIMARY EXEMPT PURPOSE

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

MEMBERS OF THE BOARD OF DIRECTORS REVIEW THE TAX RETURN PRIOR TO ITS FILING AND THE FINANCIAL STATEMENTS ARE INDEPENDENTLY AUDITED. NO DIFFERENCES WERE NOTED.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

THE ORGANIZATION REGULARLY AND CONSISTENTLY MONITORS AND ENFORCES COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY THROUGH REGULARLY SCHEDULED BOARD MEETINGS AND INTERNAL REVIEW.

Name of the organization

NATIONAL INSTITUTE FOR PUBLIC

Employer identification number

54-1192424

Form 990, Part VI, Line 15a - Compensation Process for Top Official

THE SALARIES ARE SUGGESTED BY THE PRESIDENT OF THE ORGANIZATION. THESE AMOUNTS ARE EMAILED TO OTHER MEMBERS OF THE BOARD OF DIRECTORS FOR REVIEW AND APPROVAL. CONTEMPORANEOUS SUBSTANTIATION IS PROVIDED REGARDING OTHER SIMILAR ORGANIZATIONS. DOCUMENTATION ON TIME AND PROJECTS IS PROVIDED AND REVIEWED WHEN NECESSARY. THE SALARIES ARE APPROVED BY NON-SALARIED MEMBERS OF THE BOARD BEFORE FINAL APPROVAL BY THE ENTIRE BOARD.

Form 990, Part VI, Line 15b - Compensation Process for Officers

SEE EXPLANATION TO QUESTION #15A.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

Form 990, Part XII, Line 2c - Change in Financial Review Process

HIRED NEW AUDITOR WHO MADE SOME ADJUSTMENTS TO PERFECT BOOKS AND RECORDS TO GENERALLY ACCEPTED ACCOUNTING PRINCIPLES.

NATIONAL INSTITUTE FOR PUBLIC POLICY INC
INVESTMENT SALES
FY 11/30/11

SHARES	DESCRIPTION	DATE PURCHASED	COST	SHARES	REINVESTED AMOUNT	DATE SOLD	SALES PRICE	GAIN (LOSS) ON SALE	COST
0 0000 FT 2555 INCH ALLOCATION		REINVS-2011	0 00	12 87		PRIN	12 87	0 00	0 00
0 0000 FT 2715 INCH ALLOCATION		REINVS-2011	0 00	13 23		PRIN	13 23	0 00	0 00
5 4085 VAN KAMPEN UNIT 996 SELECT 10 INDUST		REINVS-2011	0 00	5 4085		09/07/11	66 60	(2 84)	0 00
16 5578 VAN KAMPEN 976 SELECT 10 INDUSTRIAL		REINVS-2011	0 00	16 5578		07/07/11	191 46	2 42	0 00
19 7180 VAN KAMPEN UNIT 934 SELECT 10		02/25/10	160 61			02/03/11	185 33	24 72	0 00
19 3710 COLUMBIA VALUE & RESTRUCTURING		REINVS-2010	823 37			10/5/2011	778 13	(45 24)	0 00
20 8660 PENNSYLVANIA MUTUAL FD		REINVS-2011	0 00	20 8660		02/03/11	250 60	35 34	0 00
24 7539 VAN KAMPEN UNIT 934 SELECT 10		REINVS-2011	0 00	24 7539		02/03/11	700 75	2 40	0 00
38 8170 COLUMBIA VALUE & RESTRUCTURING		REINVS-2011	0 00	38 8170		10/5/2011	1 480 75	(173 85)	0 00
47 9993 VAN KAMPEN UNIT 996 SELECT 10 INDUST		05/06/11	2 018 87			10/5/2011	1 559 28	(475 59)	0 00
48 1970 PENNSYLVANIA MUTUAL FD		REINVS-2010	535 94			07/22/11	616 28	80 34	0 00
52 7900 OPPENHEIMER GOLD AND SPEC MINERALS		03/04/10	471 85			02/04/2011	578 85	107 00	0 00
53 2448 FT 2555 INCH ALLOCATION		03/04/10	1 937 97			02/04/2011	2 486 30	548 33	0 00
61 1866 VAN KAMPEN UNIT 996 SELECT 10 INDUST		REINVS-2011	515 09			10/18/11	465 00	(49 09)	0 00
78 2330 DREYFUS APPRECIATION FD		REINVS-2011	0 00	61 1866		07/22/11	785 60	46 11	0 00
81 4530 INVESCO VAN KAMPEN EQUITY AND INCOME		08/04/10	2 684 17	739 49		05/07/2011	3 210 68	526 51	0 00
82 0840 DELAWARE CORPORATE BOND		REINVS-2010	640 22			12/10/10	682 58	42 36	0 00
82 1014 VAN KAMPEN 964 GLOBAL 45		REINVS-2011	0 00	82 0840		2/4/2011	478 55	5 17	0 00
83 2060 PIMCO EMERGING LOCAL BOND FD		REINVS-2011	874 79	82 1014		06/03/11	930 53	69 73	0 00
86 1508 FT 2323 INCOME ALLOCATIN		REINVS-2010	0 00	86 1508		10/5/2011	837 88	(36 91)	0 00
88 6260 EAGLE SMALL CAP GROWTH FUND		02/04/11	3 506 93	822 52		07/09/11	828 28	5 76	0 00
98 2660 HARBOR INTERNATIONAL		12/14/10	5 953 94			05/06/2011	3 772 81	265 88	0 00
106 0820 INVESCO VAN KAMPEN EQUITY AND INCOME		REINVS-2011	0 00	106 0820		10/5/2011	4 939 83	(1 014 11)	0 00
108 0700 AMERICAN CENTURY INTL ADV BD		REINVS-2011	1 147 53	108 0700		12/10/10	888 97	0 00	0 00
111 5949 VAN KAMPEN 1005 S & P		REINVS-2010	0 00	1 227 84		2/4/2011	1 264 43	36 59	0 00
116 9518 VAN KAMPEN 976 SELECT 10 INDUSTRIAL		REINVS-2011	0 00	1 147 53		10/25/11	1 226 89	79 36	0 00
117 1850 OPPENHEIMER GOLD AND SPEC MINERALS		REINVS-2011	0 00	1 271 76		04/26/11	1 346 97	75 21	0 00
121 2970 PIONEER STRATEGIC INCOME FD		05/06/11	1 353 67	1 17 1850		05/06/2011	5 290 90	(293 25)	0 00
121 7990 AMERICAN CENTURY INTL ADV BD		REINVS-2010	1 412 63			2/4/2011	1 425 06	12 43	0 00
137 6128 ADVISORS DISCIPLINED FT 419 INTL HIGH		REINVS-2010	5 077 11			12/17/2010	1 308 40	30 89	0 00
147 9780 DREYFUS APPRECIATION FD		08/04/10	1 677 53			10/5/2011	5 491 46	414 35	0 00
167 9609 VAN KAMPEN 976 SELECT 10 INDUSTRIAL		REINVS-2010	1 854 16			04/26/11	1 934 46	256 93	0 00
179 6880 ALLIANCE HFT DIVIDEND		02/04/11	1 872 35	7 507 3150		10/5/2011	1 780 16	(64 00)	0 00
179 9924 ADVISORS DISCIPLINED 687 BALANCED		REINVS-2011	0 00	1 79 9924		02/04/11	1 606 25	235 16	0 00
191 3450 DREYFUS APPRECIATION FD		REINVS-2011	7 297 80			02/04/11	1 217 51	(127 47)	0 00
236 0816 FT 2323 INCOME ALLOCATIN		REINVS-2011	0 00	236 0816		11/28/2011	7 416 53	118 63	0 00
268 4017 VAN KAMPEN17 849 DIVD		REINVS-2010	2 777 59			04/28/11	2 274 10	55 19	0 00
325 9210 BLACKROCK GLOBAL ALLOC FD INC A		REINVS-2010	5 773 60	286 7070		7/22/2011	3 240 25	462 66	0 00
329 7775 VAN KAMPEN UNIT 934 SELECT 10		REINVS-2010	3 298 76			10/5/2011	2 087 14	(310 85)	0 00
345 1196 VAN KAMPEN17 849 DIVD		REINVS-2011	0 00			12/10/2010	6 257 68	484 08	0 00
359 3470 EAGLE SMALL CAP GROWTH FUND		02/04/11	14 607 54	3 985 37		02/03/11	3 655 78	357 02	0 00
370 6239 FT 2323 INCOME ALLOCATIN		REINVS-2010	3 447 78			07/22/11	4 166 42	181 05	0 00
372 8010 OPPENHEIMER GOLD AND SPEC MINERALS		12/14/10	20 444 41			10/5/2011	12 853 28	(1 754 26)	0 00
387 1365 VAN KAMPEN 940 UNUTILIZED		REINVS-2010	3 672 70			04/28/11	16 831 97	(3 612 44)	0 00
407 2267 FT 2519 INCH ALLOCATION		REINVS-2010	4 031 60			12/01/10	3 809 77	137 07	0 00
460 1019 VAN KAMPEN 1037 S & P		REINVS-2011	0 00	460 1019		09/28/11	3 644 84	(386 76)	0 00
465 7169 VAN KAMPEN 1005 S & P		REINVS-2011	0 00	465 7169		11/23/11	4 612 06	16 10	0 00
485 8780 EAGLE SMALL CAP GROWTH FUND		REINVS-2011	19 204 09	4 595 96		10/25/11	5 120 14	125 56	0 00
564 2220 PIONEER STRATEGIC INCOME FD CL Y		02/04/11	30 018 89	4 984 58		11/28/2011	17 783 13	(1 420 96)	0 00
609 0260 COLUMBIA VALUE & RESTRUCTURING		06/15/11	3 726 13	564 2220		10/5/2011	5 935 62	(743 69)	0 00
625 4440 DELAWARE CORPORATE BOND		REINVS-2010	23 143 82			10/5/2011	24 464 57	(5 554 32)	0 00
752 1000 HARTFORD CAPITAL APPRECIATION FD		03/04/10	9 005 65			2/4/2011	3 646 34	(79 79)	0 00
822 4340 PIMCO EMERGING LOCAL BOND FD		06/15/11	43 517 78			2/4/2011	27 068 08	3 924 26	0 00
845 9910 COLUMBIA VALUE & RESTRUCTURING		02/04/11	0 00			10/5/2011	8 281 91	(723 74)	0 00
869 6032 FT 2555 INCH ALLOCATION		REINVS-2011	0 00	869 6032		10/5/2011	33 983 46	(9 534 32)	0 00
948 8669 VAN KAMPEN 1042 SELECT 10		REINVS-2011	20 444 42	8 288 96		10/18/11	7 610 85	(678 11)	0 00
953 1200 VTY GLOBAL NATURAL RESOURCES FD		12/14/10	47 703 67	9 781 00		10/14/11	9 866 52	25 52	0 00
977 9350 COLUMBIA VALUE & RESTRUCTURING		03/04/10	56 541 53			2/4/2011	22 093 32	1 648 90	0 00
1 061 5550 HARBOR INTERNATIONAL		03/04/10	10 547 69			10/5/2011	39 283 65	(8 420 02)	0 00
1 063 5428 VAN KAMPEN 1042 SELECT 10		11/18/11	13 280 66			2/4/2011	66 124 26	9 582 73	0 00
1 186 8330 COHEN & STEERS INTL RUTY FD		02/04/11	50 000 01			10/14/11	10 980 12	432 43	0 00
1 267 3770 VTY GLOBAL NATURAL RESOURCES FD		02/26/10	23 535 19			10/05/11	10 325 45	(2 955 21)	0 00
1 592 1880 HARTFORD CAPITAL APPRECIATION FD		03/04/10	48 975 70			12/10/2010	61 594 70	11 594 69	0 00
1 638 0120 VAN KAMPEN UNIT 996 SELECT 10 INDUST		03/04/10	19 663 05			2/4/2011	29 377 80	5 842 61	0 00
1 694 7560 PIMCO EMERGING LOCAL BOND FD		07/30/10	20 444 42			2/4/2011	57 302 85	8 327 15	0 00
1 900 9880 VAN KAMPEN UNIT 996 SELECT 10 INDUST		12/14/10	18 231 46			07/22/11	23 598 99	3 935 94	0 00
1 927 2160 CREDIT SUISSE COMMODITY		07/30/10	0 00			10/5/2011	19 080 19	(1 364 23)	0 00
1 971 0000 FT 2519 INCH ALLOCATION		02/04/11	19 998 83			03/25/11	23 329 22	2 992 45	0 00
1 990 6345 FT 2519 INCH ALLOCATION		09/28/10	24 993 39	1 990 6345		10/5/2011	15 629 72	(2 601 74)	0 00
2 364 0000 VAN KAMPEN 1017 SELECT		09/30/10	24 994 09			09/28/11	17 650 19	(2 349 64)	0 00
2 433 0000 VAN KAMPEN 1042 SELECT 10		10/05/10	27 016 98			09/16/11	25 246 10	252 71	0 00
2 440 5580 PIONEER STRATEGIC INCOME FD CL Y		12/31/10	24 990 56			09/16/11	25 374 25	380 16	0 00
2 446 0000 FT 2519 INCH ALLOCATION		06/15/11	25 969 04			10/14/11	25 674 67	127 98	0 00
2 494 6240 MFS RESEARCH BOND FUND		10/05/10	86 137 32			10/5/2011	25 674 67	(1 342 31)	0 00
2 510 5600 DREYFUS APPRECIATION FD		02/04/11	88 592 49			09/28/11	21 892 68	(3 101 28)	0 00
2 595 4570 HARTFORD CAPITAL APPRECIATION FD		12/14/10	30 276 25			10/5/2011	26 343 23	374 19	0 00
2 905 5900 ALLIANCE HFT DIVIDEND		08/04/10	34 074 03			2/4/2011	98 363 74	12 226 42	0 00
2 962 9550 PENNSYLVANIA MUTUAL FD		12/14/10				05/06/11	92 320 40	3 727 91	0 00
						05/06/11	35 506 31	5 230 06	0 00
						2/4/2011	35 585 14	1 511 11	(0 00)

NATIONAL INSTITUTE FOR PUBLIC POLICY INC
INVESTMENT SALES
FY 11/30/11

SHARES	DESCRIPTION	DATE PURCHASED	COST	SHARES	REINVESTED AMOUNT	DATE SOLD	SALES PRICE	GAIN (LOSS)	COST
2,997 6020	INVEICO VAN KAMEN EQUITY AND INCOME	10/08/10	25,000 00			12/10/10	25,119 91	119 91	0 00
3,333 9440	PIONEER STRATEGIC INCOME FD	02/04/11	36,773 40			10/12/2011	35,073 09	(1,700 31)	0 00
3,387 0000	VAN KAMEN 1017 SELECT	09/20/10	34,992 16			09/16/11	36,277 92	1,285 76	0 00
3,512 3020	AMERICAN CENTURY INTL ADJ RD	03/04/10	40,531 97			2/4/2011	41,094 32	562 35	0 00
3,982 9880	PENNSYLVANIA MUTUAL FD	03/04/10	38,689 75			2/4/2011	47,451 36	8,761 61	0 00
4,035 8420	AMERICAN CENTURY INTL ADJ RD	12/14/10	47,703 65			2/4/2011	47,188 05	(515 60)	0 00
4,372 4700	PIONEER STRATEGIC INCOME FD CL Y	12/14/10	47,703 65			10/12/2011	45,988 38	(1,705 27)	0 00
4,486 0000	FT 2555 INCM ALLOCATION	10/20/10	44,984 13			10/18/11	39,261 91	(5,732 22)	0 00
4,675 6810	DELAWARE CORPORATE BOND	12/14/10	27,259 22			2/4/2011	27,252 52	(6 70)	0 00
4,680 0000	DISCIPLINED TRI 479 INTL HIGH	12/14/10	49,873 53			12/11/2010	45,828 90	(4,044 63)	0 00
4,784 0000	VAN KAMEN 1037 S & P	12/26/10	49,998 86			11/23/11	47,974 86	(2,024 00)	0 00
4,799 5428	VAN KAMEN 976 SELECT 10 INDUSTRIAL	06/22/11	46,522 93			04/26/11	55,278 69	8,755 76	0 00
4,905 0000	VAN KAMEN 1042 SELECT 10	12/28/10	49,996 17			10/14/11	50,639 71	643 54	0 00
4,968 0000	VAN KAMEN 1042 SELECT 10	12/10/10	49,990 00			10/14/11	51,290 13	1,300 13	0 00
4,984 1700	MILITARY LARGE CAP GROWTH FUND	02/04/11	37,480 96			11/28/2011	35,238 08	(2,242 88)	0 00
5,000 4571	VAN KAMEN 976 SELECT 10 INDUSTRIAL	06/22/10	49,470 43			03/25/11	55,048 03	6,577 60	0 00
5,098 0000	VAN KAMEN 940 UNICLOSSED	03/22/10	47,497 32			02/03/11	56,514 39	9,017 07	0 00
6,627 0000	VAN KAMEN 2555 INCM ALLOCATION	10/18/10	74,992 64			12/01/10	65,540 92	(9,451 72)	0 00
7,465 0000	INVEICO VAN KAMEN EQUITY AND INCOME	07/30/10	63,000 00			12/10/10	65,017 25	2,017 25	0 00
8,500 0000	VAN KAMEN 1017 SELECT	09/08/10	84,789 20			07/25/11	99,396 45	14,607 25	0 00
9,098 0000	ADVISORS DISCIPLINED 687 BALANCED	04/28/11	89,983 78			09/16/11	81,190 61	(8,803 17)	0 00
9,628 0000	VAN KAMEN 1017 SELECT	09/28/10	99,999 30			08/17/2011	102,821 27	2,821 97	0 00
10,101 0000	ADVISORS DISCIPLINED 687 BALANCED	04/26/11	99,999 90			08/17/2011	90,141 40	(9,858 50)	0 00
10,429 4480	INVEICO VAN KAMEN EQUITY AND INCOME	07/28/10	85,000 00			12/10/10	87,398 76	2,398 76	0 00
11,056 0000	VAN KAMEN 1042 SELECT 10	11/04/10	109,992 83			07/28/11	119,026 66	9,033 83	0 00
11,175 0000	VAN KAMEN 1042 SELECT 10	11/18/10	119,450 90			07/28/11	129,668 18	10,217 28	0 00
13,017 0000	FT 2113 GLOBAL RD INCOME	01/19/11	493 11			PRIN	493 11	0 00	0 00
16,186 0000	FT2799 INCOME ALLOCAT	03/25/11	28 18			PRIN	28 18	0 00	0 00
	FT 2462 MEGA-YATE PORT	01/06/11	7 50			PRIN	7 50	0 00	0 00
			2,612,742.12		39,577.05		2,746,238.47	53,919.30	0.00
09/08/10	VAN KAMEN 1005 S & P					03/25/11	3 28	3 28	0 00
10/29/10	FT 2594 CAP STRENGTH PORT SER 9					03/25/11	562 95	562 95	0 00
11/17/09	2 7380 LALAND EMERGING MKTS EQUITY PTFL		55 20			5/6/2011	59 55	4 35	0 00
03/04/10	4 8440 BARROD INTERNATIONAL		255 04			5/6/2011	312 44	57 40	0 00
03/04/10	11 0950 BARROD INTERNATIONAL		584 15			10/5/2011	557 75	(26 40)	0 00
03/04/10	15 1820 BARROD INTERNATIONAL		799 33			5/6/2011	979 24	179 91	0 00
10/02/09	23 1020 LALAND EMERGING MKTS EQUITY PTFL		397 70			5/6/2011	502 47	104 77	0 00
REINW-2010	23 1210 PIONEER STRATEGIC INCOME FD CL Y		254 36			10/5/2011	243 23	(11 03)	0 00
03/04/10	24 4560 BARROD INTERNATIONAL		1,287 61			5/6/2011	1,577 41	289 80	0 00
REINW-2009	28 0300 DELAWARE CORPORATE BOND		160 89			2/4/2011	163 41	2 52	0 00
08/04/10	28 0470 DREITUS AFFICIATION FD		996 62			11/28/2011	1,125 86	129 24	0 00
11/23/09	49 5640 DELAWARE CORPORATE BOND		287 49			2/4/2011	288 96	1 47	0 00
02/25/10	63 5627 VAN KAMEN171 SAP DIVO		639 25			07/22/11	767 35	128 10	0 00
03/04/10	105 4180 COLUMBIA VALUE & RESTRUCTURING		4,553 00			10/5/2011	4,234 64	(318 36)	0 00
03/04/10	163 1170 PECO EMERGING LOCAL BOND FD		1,654 01			5/6/2011	1,792 66	138 65	0 00
203 4627	VAN KAMEN 964 GLOBAL 45		1,952 05			06/03/11	2,306 03	353 98	0 00
REINW-2010	229 0000 DREITUS AFFICIATION FD		8,293 61			11/28/2011	8,876 04	582 43	0 00
10/20/10	337 3370 AMERICAN CENTURY INTL ADJ RD		3,874 36			2/4/2011	3,942 94	(31 42)	0 00
05/01/09	363 3370 AMERICAN CENTURY INTL ADJ RD		10,999 99			12/10/2010	18,476 70	7,476 71	0 00
12/29/09	420 2500 THE ENDOWMENT TRI FUND		19,928 98			11/08/11	23,282 20	3,353 22	0 00
07/20/09	439 3370 ECK GLOBAL HAND ASSETS		14,999 98			12/10/2010	22,345 10	7,345 11	0 00
04/23/09	518 3740 VAN ECK GLOBAL HAND ASSETS		15,129 44			12/10/2010	26,395 24	11,255 80	0 00
03/04/10	586 2410 OPPENHEIMER GOLD AND SPEC MINERALS		21,444 70			5/6/2011	26,378 48	4,933 78	0 00
06/12/09	760 3370 ECK GLOBAL HAND ASSETS		27,999 98			12/10/2010	38,684 00	10,684 02	0 00
10/02/09	865 3370 AMERICAN CENTURY INTL ADJ RD		9,923 85			2/4/2011	10,120 60	186 65	0 00
03/04/10	974 0930 BARROD INTERNATIONAL		46,556 76			10/5/2011	43,940 65	(2,616 11)	0 00
07/20/09	974 0930 BARROD INTERNATIONAL		14,999 99			12/10/2010	17,721 60	2,721 61	0 00
03/04/10	972 3210 BARROD CAPITAL AFFICIATION FD		29,908 60			5/6/2011	34,524 99	4,616 39	0 00
10/05/11	1,013 4770 BLACKROCK EGY DIVIDEND FUND		16,783 18			11/28/11	17,431 80	648 62	0 00
03/04/10	1,160 5260 COLUMBIA VALUE & RESTRUCTURING		50,123 12			10/5/2011	46,578 16	(3,544 96)	0 00
REINW-2009	1,349 8570 BLACKROCK GLOBAL ALLOC FD INC A		19,666 50			12/10/2010	25,917 25	6,250 75	0 00
10/02/09	1,463 8980 LALAND EMERGING MKTS EQUITY PTFL		25,200 99			2/4/2011	30,419 80	5,218 81	0 00
11/17/09	1,540 0000 DELAWARE CORPORATE BOND		8,942 32			2/4/2011	8,978 20	35 88	0 00
06/12/09	1,716 3370 ECK GLOBAL ALLOC FD INC A		28,000 00			12/10/2010	32,947 20	4,947 20	0 00
09/28/10	1,950 0000 VAN KAMEN 1005 S & P		19,990 62			10/25/11	21,438 49	1,447 87	0 00
11/19/09	2,038 7510 VAN KAMEN171 SAP DIVO		21,305 11			7/22/2011	27,289 23	5,984 12	0 00
03/04/10	2,130 7540 PECO EMERGING LOCAL BOND FD		21,605 84			10/5/2011	21,567 47	(38 37)	0 00
10/05/10	2,397 0000 VAN KAMEN 1005 S & P		24,989 68			10/25/11	26,352 86	1,363 18	0 00
09/30/10	2,406 0000 VAN KAMEN 1005 S & P		24,984 25			10/25/11	26,451 80	1,457 55	0 00
09/20/10	2,484 0000 FT 2519 INCM ALLOCATION		24,996 20			09/28/11	21,384 29	(3,611 91)	0 00
08/04/10	2,527 0000 VAN KAMEN 1017 SELECT		25,207 33			09/16/11	26,986 84	1,779 51	0 00
09/25/08	3,358 3370 THE ENDOWMENT TRI FUND		198,471 30			11/8/2011	186,146 70	(12,324 60)	0 00
09/20/10	3,417 0000 VAN KAMEN 1005 S & P		34,994 86			10/25/11	37,566 84	2,571 98	0 00
10/02/09	3,514 0000 DELAWARE CORPORATE BOND		20,136 81			2/4/2011	20,486 62	349 71	0 00
10/16/09	4,158 6190 GOLDMAN SACHS BRIC FD		60,000 00			12/10/10	66,205 21	6,205 21	0 00
08/04/10	4,422 0370 ALLIANCE HP7 DIVIDEND		33,829 70			11/28/11	34,868 62	1,038 92	0 00
12/29/08	4,622 3370 THE ENDOWMENT TRI FUND		219,313 64			11/08/11	256,215 02	36,901 38	0 00
01/11/10	4,802 0000 VAN KAMEN171 SAP DIVO		49,995 10			7/22/2011	57,963 64	7,968 54	0 00
09/08/10	5,021 0000 VAN KAMEN 1005 S & P		49,995 10			10/25/11	55,838 65	5,843 55	0 00
11/04/10	5,038 0000 VAN KAMEN 1037 S & P		49,991 57			11/23/11	51,437 34	1,445 77	0 00
01/20/10	5,200 0000 PIONEER STRATEGIC INCOME FD CL Y		57,520 25			10/5/2011	55,166 21	(2,354 04)	0 00

NATIONAL INSTITUTE FOR PUBLIC POLICY INC
INVESTMENT SALES
FY 11/10/11

SHARES	DESCRIPTION	DATE PURCHASED	COST	SHARES	REINVESTED AMOUNT	DATE SOLD	SALES PRICE	GAIN (LOSS) ON SALE	COST
6,002 VAN KAMPEN UNIT 934 SELECT 10		02/01/10	58,991 86			02/03/11	66,907 92	7,916 06	0 00
6,597 GOLDMAN SACHS ERIC PD		11/19/09	100,000 00			12/10/10	104,865 04	4,865 04	0 00
7,018 0000 FT 2519 INCM ALLOCATION		09/08/10	69,988 94			09/28/11	63,406 11	(6,592 83)	0 00
7,035 0000 FT 2519 INCM ALLOCATION		10/18/10	74,988 02			10/25/11	77,343 49	2,355 47	0 00
7,427 BLACKROCK GLOBAL ALLOC TO INC A		04/17/09	110,000 00			12/10/2010	142,663 69	32,663 69	0 00
7,500 9142 VAN KAMPEN17 54P DIVD		11/19/09	78,385 14			3/25/2011	86,375 28	7,990 14	0 00
8,017 0000 FT 2323 INCOME ALLOCATN		04/14/10	79,991 22			04/28/11	77,285 19	(2,706 03)	0 00
10,033 0000 VAN KAMPEN 944 GLOBAL 45		04/14/10	99,999 91			06/03/11	113,814 80	13,814 89	0 00
12,182 0000 VAN KAMPEN 1037 S & P		11/15/10	121,999 08			11/23/11	122,112 37	113 29	0 00
15,000 GOLDMAN SACHS GROUP INC		02/12/09	13,743 49			4/27/2011	16,284 43	2,540 94	0 00
16,444 0000 FT 2519 INCM ALLOCATION		09/20/10	164,999 10			09/28/11	147,179 63	(17,819 47)	0 00
20,000 GEN ELEC CAP CUP		07/20/09	20,153 21			4/27/2011	21,918 78	1,765 57	0 00
45,000 CD AMER EXPRESS CERT BK NOV 21 2011		11/19/08	45,000 00			1/18/2011	46,372 63	1,372 63	0 00
45,000 CD GOLDMAN SACHS BK OCT 11 2011		10/08/08	45,000 00			1/18/2011	46,571 68	1,571 68	0 00
55,000 CD STATE BANK OF INDIA		09/26/08	55,000 00			01/18/11	56,748 46	1,748 46	0 00
95,000 CD AMER EXPRESS CERT BK NOV 21 2011		11/19/08	95,000 00			1/18/2011	97,897 77	2,897 77	0 00
125,000 CENTRAL ELEC CAP DEC 01 2010		10/23/07	129,403 06			12/01/10	125,000 00	(4,403 06)	0 00
125,000 WELLPOINT INC JAN 15 2011		03/20/09	126,509 72			01/18/11	125,000 00	(1,509 72)	0 00
FT 1949 INCOME ALLOCATN		08/07/08				3/25/2011	671 20	671 20	0 00
FT 1715 INCOME ALLOCATN									0 00
MERRILL LYNCH FT PIA ACCOUNT			2,813,277 55				2,985,229 34	171,951 79	0 00

Other Notes and Loans Receivable

Forms

990 / 990-PF

2010

For calendar year 2010, or tax year beginning 12/01/10 , and ending 11/30/11

Name

NATIONAL INSTITUTE FOR PUBLIC
POLICY INC

Employer Identification Number

54-1192424

Form 990, Part X, Line 7 - Additional Information

Name of borrower	Relationship to disqualified person
(1) DUE FROM TRANSAMERICA	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Original amount borrowed	Date of loan	Maturity date	Repayment terms	Interest rate
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

Security provided by borrower	Purpose of loan
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Consideration furnished by lender	Balance due at beginning of year	Balance due at end of year	Fair market value (990-PF only)
(1)	11,063		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Totals	11,063		

Form

4562Department of the Treasury
Internal Revenue Service

(99)

Depreciation and Amortization
(Including Information on Listed Property)

OMB No 1545-0172

2010Attachment
Sequence No **67**

▶ See separate instructions.

▶ Attach to your tax return.

Name(s) shown on return

**NATIONAL INSTITUTE FOR PUBLIC
POLICY INC**

Identifying number

54-1192424

Business or activity to which this form relates

ALL BUSINESS ACTIVITIES**Part I Election To Expense Certain Property Under Section 179****Note:** If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	500,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000
4	Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost

7	Listed property Enter the amount from line 29	7	
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2009 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2011 Add lines 9 and 10, less line 12 ▶	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2010	17	62,195
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ ☐		

Section B—Assets Placed in Service During 2010 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property		5,810	5.0		200DB	393
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
			27.5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property Enter amount from line 28	21	2,850
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	65,438
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2010)

DAA

Part V Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.**Section A—Depreciation and Other Information** (Caution: See the instructions for limits for passenger automobiles.)**24a** Do you have evidence to support the business/investment use claimed? ☒ **Yes** ☐ **No** **24b** If "Yes," is the evidence written? ☒ **Yes** ☐ **No**

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
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25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) **25****26** Property used more than 50% in a qualified business use

		%						
		%						

27 Property used 50% or less in a qualified business use

2008 SATURN OUTLK AWD								
01/24/09	100.00%	52,205	41,245	5.0	S/L-	2,850		
	%				S/L-			

28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 **28** **2,850****29** Add amounts in column (i), line 26. Enter here and on line 7, page 1 **29****Section B—Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1	(b) Vehicle 2	(c) Vehicle 3	(d) Vehicle 4	(e) Vehicle 5	(f) Vehicle 6
30 Total business/investment miles driven during the year (do not include commuting miles)						
31 Total commuting miles driven during the year	4,840					
32 Total other personal (noncommuting) miles driven	9,546					
33 Total miles driven during the year. Add lines 30 through 32.	14,386					
34 Was the vehicle available for personal use during off-duty hours?	Yes ☒ No ☐	Yes ☐ No ☐	Yes ☐ No ☐	Yes ☐ No ☐	Yes ☐ No ☐	Yes ☐ No ☐
35 Was the vehicle used primarily by a more than 5% owner or related person?	☒					
36 Is another vehicle available for personal use?	☒					

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes ☐ No ☐
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners.	☐ ☐
39 Do you treat all use of vehicles by employees as personal use?	☐ ☐
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?	☐ ☐
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.)	☐ ☐

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
-----------------------------	------------------------------------	---------------------------	---------------------	--	-----------------------------------

42 Amortization of costs that begins during your 2010 tax year (see instructions)

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43 Amortization of costs that began before your 2010 tax year **43****44** Total. Add amounts in column (f). See the instructions for where to report **44**

54-1192424

Tax Current Year Additions

Page 1

FYE: 11/30/2011

<u>Asset</u>	<u>Property Description</u>	<u>Date In Service</u>	<u>Tax Cost</u>
<u>Group: COMPUTER EQUIPMENT</u>			
87	HQ LAPTOP	6/10/11	682.49
88	SERVER	11/21/11	<u>5,127.88</u>
	COMPUTER EQUIPMENT		<u><u>5,810.37</u></u>
	Grand Total		<u><u>5,810.37</u></u>

54-1192424

Tax Asset Detail 12/01/10 - 11/30/11

FYE: 11/30/2011

Asset	d	Property Description	Date In Service	Tax Cost	Sec 179 Exp Current = c	Tax Bonus Amt	Tax Prior Depreciation	Tax Current Depreciation	Tax End Depr	Tax Net Book Value	Tax Method	Tax Period
Group: COMPUTER EQUIPMENT												
48	d	DELL OPTIPLEX COMPUTER-AJ	11/14/03	1,949.98	0.00	974.99	1,949.98	0.00	1,949.98	0.00	200DB	5.0
49	d	256MB MODULE FOR SERVER-	3/17/04	576.63	0.00	288.32	576.63	0.00	576.63	0.00	200DB	5.0
50	d	DELL COMPUTER-ABAN	7/23/04	1,917.59	0.00	958.80	1,917.59	0.00	1,917.59	0.00	200DB	5.0
51	d	COMPUTER SERVER-ABAN	4/14/05	4,726.03	0.00	0.00	4,726.03	0.00	4,726.03	0.00	200DB	5.0
53	d	DELL LATITUDE LAPTOP-ABAI	4/14/05	2,074.96	0.00	0.00	2,074.96	0.00	2,074.96	0.00	200DB	5.0
54	d	DELL OPTIPLEX 170L-ABAN	12/27/04	1,079.39	0.00	539.70	1,079.39	0.00	1,079.39	0.00	200DB	5.0
55	d	DELL OPTIPLEX 280-ABAN	4/14/05	1,473.15	0.00	0.00	1,473.15	0.00	1,473.15	0.00	200DB	5.0
56	d	DELL OPTIPLEX GS 280-ABAN	12/27/04	2,053.99	0.00	1,026.99	2,053.99	0.00	2,053.99	0.00	200DB	5.0
57	d	DELL OPTIPLEX GX 280-ABAN	4/14/05	1,473.15	0.00	0.00	1,473.15	0.00	1,473.15	0.00	200DB	5.0
58	d	DELL OPTIPLEX GX 280	4/14/05	1,473.15	0.00	0.00	1,473.15	0.00	1,473.15	0.00	200DB	5.0
59	d	DELL OPTIPLEX GX 280	4/14/05	1,473.15	0.00	0.00	1,473.15	0.00	1,473.15	0.00	200DB	5.0
60	d	DELL OPTIPLEX GX 280	2/16/05	1,632.76	0.00	0.00	1,632.76	0.00	1,632.76	0.00	200DB	5.0
61	d	HP PROCURVE SWITCH	5/17/05	251.24	0.00	0.00	251.24	0.00	251.24	0.00	200DB	5.0
62	d	WATCHGUARD FIREBOX	5/17/05	631.72	0.00	0.00	631.72	0.00	631.72	0.00	200DB	5.0
63	d	WIRELESS LAPTOP-ABAN	1/16/06	1,610.70	0.00	0.00	1,610.70	92.78	1,610.70	0.00	200DB	5.0
65	d	OPTIPLEX 740 DESKTOP	3/19/07	1,556.11	0.00	0.00	1,556.11	179.27	1,466.48	89.63	200DB	5.0
68	d	HP LASER PRINTER	5/17/07	755.21	0.00	0.00	755.21	87.00	711.71	43.50	200DB	5.0
73	d	KINSTON SERVER	8/13/07	791.42	0.00	0.00	791.42	91.17	745.83	45.59	200DB	5.0
76	d	SMART UPS BACKUP	12/21/07	438.73	0.00	0.00	438.73	48.31	384.38	54.35	200DB	5.0
77	d	HP CP3503N COLOR PRINTER	2/11/08	1,018.41	0.00	509.21	899.26	56.07	955.33	63.08	200DB	5.0
79	d	DELL INSPIRON 530S	5/27/08	711.91	0.00	355.96	615.80	40.47	656.27	55.64	200DB	5.0
82	d	OPTIPLEX DESKTOP	3/27/09	1,117.02	0.00	558.51	848.93	107.24	956.17	160.85	200DB	5.0
83	d	DELL INSPIRON	5/14/09	1,141.35	0.00	570.67	867.43	109.57	977.00	164.35	200DB	5.0
84	d	DELL INSPIRON	4/28/09	1,107.76	0.00	553.88	841.90	106.34	948.24	159.52	200DB	5.0
85	d	DELL DESKTOP	3/30/10	862.00	0.00	431.00	517.20	137.92	655.12	206.88	200DB	5.0
86	d	DELL OPTIPLEX COMPUTER	5/07/10	1,358.86	0.00	679.43	815.32	217.42	1,032.74	326.12	200DB	5.0
87	d	HQ LAPTOP	6/10/11	682.49	0.00c	136.50	0.00	136.50	136.50	545.99	200DB	5.0
88	d	SERVER	11/21/11	5,127.88	0.00c	256.39	0.00	256.39	256.39	4,871.49	200DB	5.0
				COMPUTER EQUIPMENT	0.00c	7,840.35	32,613.30	1,666.45	34,279.75	6,786.99		
				*Less: Dispositions and Transfers	0.00	0.00	18,842.79	0.00	18,935.57	0.00		
				Net COMPUTER EQUIPMENT	0.00c	7,840.35	13,770.51	1,666.45	15,344.18	6,786.99		
Group: COMPUTER SOFTWARE												
1	d	COMPUTER SOFTWARE-ABAN	4/27/04	519.19	0.00	0.00	519.19	0.00	519.19	0.00	S/L	3.0
72	d	COMPUTER SOFTWARE	8/13/07	984.85	0.00	0.00	984.85	0.00	984.85	0.00	Amort	3.0
				COMPUTER SOFTWARE	0.00c	0.00	1,504.04	0.00	1,504.04	0.00		
				*Less: Dispositions and Transfers	0.00	0.00	519.19	0.00	519.19	0.00		
				Net COMPUTER SOFTWARE	0.00c	0.00	984.85	0.00	984.85	0.00		
Group: FURNITURE AND FIXTURES												
2	d	2 4-DRAWER FILE CABINETS	12/31/89	332.31	0.00	0.00	332.31	0.00	332.31	0.00	200DB	7.0
3	d	SAFE	8/01/99	755.04	0.00	0.00	755.04	0.00	755.04	0.00	200DB	7.0
5	d	FREEDOM CHAIR	7/18/03	1,049.00	0.00	524.50	1,049.00	0.00	1,049.00	0.00	200DB	7.0
7	d	12 CONFERENCE CHAIRS	7/25/05	8,308.24	0.00	0.00	7,196.00	741.49	7,937.49	370.75	200DB	7.0

Asset	d	Property Description	Date In Service	Tax Cost	Sec 179 Exp Current = c	Tax Bonus Amt	Tax Prior Depreciation	Tax Current Depreciation	Tax End Depr	Tax Net Book Value	Tax Method	Tax Period
Group: FURNITURE AND FIXTURES (continued)												
8		2 ARTICULATION KEYBOARD	7/25/05	342.29	0.00	0.00	296.47	30.55	327.02	15.27	200DB	7.0
9		2 GUEST CHAIRS	7/25/05	1,862.24	0.00	0.00	1,612.93	166.21	1,779.14	83.10	200DB	7.0
10		2 SIDE CHAIRS	8/12/05	335.98	0.00	0.00	291.00	29.99	320.99	14.99	200DB	7.0
11		5 RYME GUEST CHAIRS	7/25/05	1,647.92	0.00	0.00	1,427.31	147.07	1,574.38	73.54	200DB	7.0
12		BOAT SHAPE CONFERENCE TA	7/25/05	6,807.65	0.00	0.00	5,896.29	607.57	6,503.86	303.79	200DB	7.0
13		BOW SHAPE DOUBLE PEDISTA	7/25/05	3,362.54	0.00	0.00	2,912.38	300.11	3,212.49	150.05	200DB	7.0
14		END TABLE	7/25/05	892.84	0.00	0.00	773.31	79.69	853.00	39.84	200DB	7.0
15		KNEE HOLE CREDENZA	8/12/05	682.49	0.00	0.00	591.12	60.91	652.03	30.46	200DB	7.0
16		KNEESPACE CREDENZA W/FOI	7/25/05	2,392.83	0.00	0.00	2,072.50	213.55	2,286.05	106.78	200DB	7.0
17		RECEPTION STATION	7/25/05	5,593.06	0.00	0.00	4,844.30	499.17	5,343.47	249.59	200DB	7.0
18		RIGHT RETURN STATION	8/12/05	892.49	0.00	0.00	773.01	79.65	852.66	39.83	200DB	7.0
19		RIGHT DESK RETURN	9/14/05	414.96	0.00	0.00	359.41	37.03	396.44	18.52	200DB	7.0
20		ROUND CONFERENCE TABLE	7/25/05	1,814.31	0.00	0.00	1,571.42	161.93	1,733.35	80.96	200DB	7.0
21		STORAGE CREDENZA W/LATEI	7/25/05	3,866.44	0.00	0.00	3,348.83	345.07	3,693.90	172.54	200DB	7.0
22		TELEPHONE SYSTEM	5/13/05	9,447.50	0.00	0.00	8,182.74	843.17	9,025.91	421.59	200DB	7.0
23		TOM CONFERENCE MID BACK	7/25/05	1,076.63	0.00	0.00	932.50	96.09	1,028.59	48.04	200DB	7.0
24		USED HON OFFICE FURNITURE	11/02/05	2,000.00	0.00	0.00	1,732.26	178.49	1,910.75	89.25	200DB	7.0
25		WIRELESS PROJECTOR	12/12/05	2,491.59	0.00	0.00	1,935.67	222.37	2,158.04	333.55	200DB	7.0
26		OFS LATERAL FILE CABINET	12/16/05	1,658.01	0.00	0.00	1,288.07	147.98	1,436.05	221.96	200DB	7.0
27		6 CONFERENCE ROOM CHAIRS	1/01/06	1,250.93	0.00	0.00	971.82	111.64	1,083.46	167.47	200DB	7.0
28		HITACHI PROJECTOR	1/16/06	1,357.51	0.00	0.00	1,054.62	121.16	1,175.78	181.73	200DB	7.0
29		FAX MACHINE	5/15/06	1,018.50	0.00	0.00	806.40	84.84	891.24	127.26	200DB	7.0
66		EXECUTIVE FILE CABINET	4/01/07	893.57	0.00	0.00	614.44	79.75	694.19	199.38	200DB	7.0
67		48" ROUND TABLE & 4 CHAIRS	5/17/07	1,239.45	0.00	0.00	852.28	110.62	962.90	276.55	200DB	7.0
70		CLASSIFIED SHREDDER	6/29/07	2,071.60	0.00	0.00	1,424.49	184.89	1,609.38	462.22	200DB	7.0
71		PAYNE LATERAL FILE	6/29/07	893.57	0.00	0.00	614.44	79.75	694.19	199.38	200DB	7.0
74		MINOLTA COPIER	7/25/07	6,734.70	0.00	0.00	5,570.94	775.84	6,346.78	387.92	200DB	5.0
75		CUSTOM BOOKCASE	10/19/07	788.00	0.00	0.00	541.85	70.33	612.18	175.82	200DB	7.0
78		FIREBOX	4/15/08	459.34	0.00	229.67	363.08	27.50	390.58	68.76	200DB	7.0
80		PAYNE FILE CABINET	10/01/08	1,809.26	0.00	904.63	1,364.20	127.16	1,491.36	317.90	200DB	7.0
				76,542.79	0.00c	1,658.80	64,352.43	6,761.57	71,114.00	5,428.79		

Group: LEASEHOLD IMPROVEMENTS												
30		LEASEHOLD-ALARM SYSTEM	7/25/05	2,116.00	0.00	0.00	1,832.73	188.85	2,021.58	94.42	200DB	7.0
31		LEASEHOLD-ARCH & ENG FEE:	7/25/05	61,132.04	0.00	0.00	52,948.12	5,455.95	58,404.07	2,727.97	200DB	7.0
32		LEASEHOLD-CABLING	7/25/05	9,905.00	0.00	0.00	8,578.99	884.01	9,463.00	442.00	200DB	7.0
33		LEASEHOLD-PERMIT	7/25/05	4,658.00	0.00	0.00	4,034.42	415.72	4,450.14	207.86	200DB	7.0
34		LEASEHOLD-PROF FEES	7/25/05	94,200.00	0.00	0.00	81,589.18	8,407.21	89,996.39	4,203.61	200DB	7.0
35		LEASEHOLD-SIGNS	8/04/05	683.34	0.00	0.00	591.86	60.99	652.85	30.49	200DB	7.0
36		LEASEHOLD-SPRINKLERS	7/25/05	10,325.00	0.00	0.00	1,422.98	264.74	1,687.72	8,637.28	S/L	39.0
37		LEASEHOLD IMPROVEMENTS	7/24/05	414,667.00	0.00	0.00	359,154.37	37,008.42	396,162.79	18,504.21	200DB	7.0
38		LEASEHOLD IMPROVEMENTS	12/28/05	804.78	0.00	0.00	625.22	71.82	697.04	107.74	200DB	7.0
39		LEASEHOLD IMPROVEMENTS	3/24/06	9,698.00	0.00	0.00	7,534.17	865.53	8,399.70	1,298.30	200DB	7.0
40		SIGNS	4/10/06	1,545.26	0.00	0.00	1,200.48	137.91	1,338.39	206.87	200DB	7.0
69		LEASEHOLD IMPROVEMENT	5/17/07	4,473.00	0.00	0.00	3,075.77	399.21	3,474.98	998.02	200DB	7.0

FYE: 11/30/2011

Asset Id	Property Description	Date In Service	Tax Cost	Sec 179 Exp Current = C	Tax Bonus Amt	Tax Prior Depreciation	Tax Current Depreciation	Tax End Depr	Tax Net Book Value	Tax Method	Tax Period
Group: LEASEHOLD IMPROVEMENTS (continued)											
	LEASEHOLD IMPROVEMENTS		614,207.42	0.00c	0.00	522,588.29	54,160.36	576,748.65	37,458.77		
Group: TRANSPORTATION EQUIPMENT											
81	2008 SATURN OUTLK AWD	1/24/09	52,204.85	0.00	10,960.00	15,760.00	2,850.00	18,610.00	33,594.85	200DB	5 0
	TRANSPORTATION EQUIPMENT		52,204.85	0.00c	10,960.00	15,760.00	2,850.00	18,610.00	33,594.85		
	Grand Total		785,525.84	0.00c	20,459.15	636,818.06	65,438.38	702,256.44	83,269.40		
	Less: Dispositions and Transfers		19,454.76	0.00	0.00	19,361.98	0.00	19,454.76	0.00		
	Net Grand Total		766,071.08	0.00c	20,459.15	617,456.08	65,438.38	682,801.68	83,269.40		

54-1192424

Federal Statements

FYE: 11/30/2011

Tax-Exempt Dividends from Securities

<u>Description</u>		<u>Amount</u>	<u>Unrelated Business Code</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>InState Muni (\$ or %)</u>
TAX EXEMPT DIVIDEND INCOME		\$					
		1,426					
Total		\$					
		1,426					

Federal Statements

10/15/2012 11:02 AM

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

Description	Total Expenses	Program Service	Management & General	Fund Raising
OUTSIDE SERVICES	\$ 15,269	\$ 7,073	\$ 8,196	\$
CONSULTANTS	208,639	208,639		
Total	\$ 223,908	\$ 215,712	\$ 8,196	\$ 0

Form 990, Part IX, Line 24f - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
NON DEDUCTIBLE GIFTS	\$ 4,668	\$ 4,668		
REPAIRS & MAINT	4,613	4,613		
OTHER TAXES	2,453	2,453		
INADMISSABLE SALARIES-ROY	1,336	1,336		
EQUIPMENT RENTAL	919	919		
INADMISSABLE SALARIES-INV	419	419		
LIBRARY EXPENSE	38	38		
FRINGE BENEFITS APPLIED		-13,596	8,589	5,007
OVERHEAD APPLIED TO B&P		-17,904		17,904
AUTO	-6,228	-6,228		
Total	\$ 8,218	\$ -23,282	\$ 8,589	\$ 22,911

Form
(Rev. January 2012)**8868****Application for Extension of Time To File an
Exempt Organization Return**

OMB No 1545-1709

Department of the Treasury
Internal Revenue Service► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☐
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension-check this box and complete

Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions NATIONAL INSTITUTE FOR PUBLIC POLICY INC	Employer identification number (EIN) or ☒ 54-1192424
	Number, street, and room or suite no. If a P O box, see instructions 9302 LEE HIGHWAY 750	Social security number (SSN) ☐
	City, town or post office, state, and ZIP code. For a foreign address, see instructions FAIRFAX VA 22031	

Enter the Return code for the return that this application is for (file a separate application for each return)

01

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ► **KEITH PAYNE**

9302 LEE HIGHWAY STE 750 FAIRFAX VA 22031Telephone No ► **703-293-9181**

FAX No ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **07/15/12**, to file the exempt organization return for the organization named above. The extension is for the organization's return for
- ☐ calendar year _____ or

► ☒ tax year beginning **12/01/10**, and ending **11/30/11**

- 2 If the tax year entered in line 1 is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form **8868** (Rev. 1-2012)

DAA

Form 8868 (Rev 1-2012)

Page **2**

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☐

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1)

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print File by the due date for filing your return See instructions	Enter filer's identifying number, see instructions	
	Name of exempt organization or other filer, see instructions NATIONAL INSTITUTE FOR PUBLIC POLICY INC	Employer identification number (EIN) or ☒ 54-1192424
	Number, street, and room or suite no. If a P O box, see instructions 9302 LEE HIGHWAY 750	Social security number (SSN) ☐
City, town or post office, state, and ZIP code For a foreign address, see instructions FAIRFAX VA 22031		

Enter the Return code for the return that this application is for (file a separate application for each return)

01

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of ► **KEITH PAYNE**

Telephone No ► **703-293-9181**

FAX No ► **703-293-9198**



FILE COPY

- If the organization does not have an office or place of business in the United States, check this box ☐

- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is

for the whole group, check this box ☐

If it is for part of the group, check this 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 **10/15/12**

5 For calendar year _____, or other tax year beginning **12/01/10**, and ending **11/30/11**

6 If the tax year entered in line 5 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 REQUESTED TO GATHER INFORMATION TO PREPARE A COMPLETE AND ACCURATE RETURN

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions	8a	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b	\$
c Balance due. Subtract line 8b from line 8a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	8c	\$

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature ► *Meta Jane Mortensen*

Title ► *Director*

Date ► **07/09/12**

Form **8868** (Rev 1-2012)