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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

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 01-01-2011 and ending 12-31-2011

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

C Name of organization
KEEP AMERICA BEAUTIFUL INC

Doing Business As

Number and street (or P O box if mail is not delivered to street address) Room/suite
1010 WASHINGTON BLVD

City or town, state or country, and ZIP + 4
STAMFORD, CT 06901

D Employer identification number
13-1761633

E Telephone number
(203) 659-3000

G Gross receipts $ 20,181,700

F Name and address of principal officer
MATTHEW MCKENNA
1010 WASHINGTON BLVD
STAMFORD, CT 06901

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)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW KAB ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ | L Year of formation 1953 | M State of legal domicile CT

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
KAB'S MISSION IS TO ENGAGE INDIVIDUALS IN TAKING GREATER RESPONSIBILITY FOR IMPROVING THEIR COMMUNITY ENVIRONMENTS

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	25
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	24
5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	46
6	Total number of volunteers (estimate if necessary)	6	
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	-101,360
b	Net unrelated business taxable income from Form 990-T, line 34	7b	

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	8,712,321	7,804,036
	9	Program service revenue (Part VIII, line 2g)	534,545	546,401
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	109,396	122,217
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-172,224	-60,031
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	9,184,038	8,412,623
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	757,965	1,535,190
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	2,294,762	3,336,265
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶563,051		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	6,066,453	4,096,100
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	9,119,180	8,967,555
	19	Revenue less expenses Subtract line 18 from line 12	64,858	-554,932

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	9,903,266	8,937,371
	21	Total liabilities (Part X, line 26)	1,746,325	1,216,382
	22	Net assets or fund balances Subtract line 21 from line 20	8,156,941	7,720,989

Part II Signature Block

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

Sign Here

****** 2012-07-16
Signature of officer Date

matthew mckenna president
Type or print name and title

Paid Preparer's Use Only

Preparer's signature | Date | Check if self-employed ▶ ☐ | Preparer's taxpayer identification number (see instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ MAIER MARKEY & JUSTIC LLP
222 BLOOMINGDALE ROAD STE 400
WHITE PLAINS, NY 10605

EIN ▶

Phone no ▶ (914) 644-9200

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

Part III **Statement of Program Service Accomplishments**

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

1 Briefly describe the organization's mission

KEEP AMERICA BEAUTIFUL, INC (THE "ORGANIZATION" OR "KAB") IS A NONPROFIT ORGANIZATION WHOSE NETWORK OF LOCAL, STATEWIDE, AND INTERNATIONAL AFFILIATE PROGRAMS EDUCATE INDIVIDUALS ABOUT LITTER PREVENTION AND WAYS TO REDUCE, REUSE, RECYCLE, AND PROPERLY MANAGE WASTE MATERIALS KAB'S MISSION IS TO ENGAGE INDIVIDUALS IN TAKING GREATER RESPONSIBILTY FOR IMPROVING THEIR COMMUNITY ENVIRONMENTS THROUGH PARTNERSHIPS AND STRATEGIC ALLIANCES WITH CITIZENS, BUSINESSES, AND GOVERNMENT, KAB PROGRAMS INVOLVE MILLIONS OF VOLUNTEERS ANNUALLY TO CLEAN UP, BEAUTIFY, AND IMPROVE THEIR NEIGHBORHOODS, THEREBY CREATING HEALTHIER, SAFER, AND MORE LIVABLE COMMUNITY ENVIRONMENTS

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☑ **Yes** ☐ **No**

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 organization's program service accomplishments for each of its three largest program services, as measured 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 $ 823,750 including grants of $ 260,773) (Revenue $ 670,000)

CIGARETTE LITTER PREVENTION PROGRAM (CLPP) In 2002, Keep America Beautiful (KAB) began to research and field-test solutions to an emerging litter problem for communities across the country, cigarette butt litter The result is a program which is a cornerstone of the KAB "Portfolio of Programs", the Cigarette Litter Prevention Program From 2003 to present, KAB has promoted the program and supported its implementation to community leaders around the country with technical assistance and seed grants Through 2011 there have been over 1000 implementations in 49 states and Washington DC The Cigarette Litter Prevention Program (CLPP) is the nation's largest program aimed at reducing cigarette litter In 2011, CLPP reported an average 54% reduction of cigarette litter in communities implementing the program The recipients of the grants were local community-based nonprofit organizations such as KAB affiliate organizations and members of its national partner organizations - The International Downtown Association, the International City County Management Association, and the Boat US Foundation Since its original launch, the program has expanded from downtown areas to parks, beaches, recreation areas, highway rest stops and visitor centers, and special events such as state fairs

4b (Code) (Expenses $ 1,227,574 including grants of $ 374,149) (Revenue $ 2,885,878)

The Great American Cleanup Nearly 4 million volunteers participated in Keep America Beautiful's 2011 Great American Cleanup, the nation's largest grassroots community improvement program The Great American Cleanup, Keep America Beautiful's signature cause-marketing program focuses on providing experiential, hands-on education to volunteers and participants as they engage in local community improvement activities In 2011 The Great American Cleanup motivated volunteers to become stewards of the environment and work together throughout the year to make neighborhoods cleaner, safer and more beautiful Those volunteers donated more than 5 2 million hours at 30,600 events in 16,500 communities throughout all 50 states Those volunteer hours are valued at over $111 million in services returned to their communities according to 2011 Independent Sector statistics Keep America Beautiful and its National Sponsors act as national and local "change agents" as they effect and sustain improvements to a local community's environments The 2011 Great American Cleanup results demonstrate the role of volunteers in reinforcing civic pride " 177 million pounds of litter and debris were removed from public lands and rights-of-way, " 2,800 playgrounds and community recreation areas were improved, restored or constructed " 6,400 illegal dump sites were remediated The Great American Cleanup encourages and emphasizes the role of recycling in recovering valuable resources, reducing energy consumption, and fostering community sustainability " More than 290 million plastic (PET) bottles were collected for recycling, " 7 9 million pounds of electronics collected for recycling " 12 1 million pounds of glass were collected for recycling, as well as more than 800,000 scrap tires Recognizing that green spaces and gardens contribute to better economies, healthier citizens and greater civic pride, volunteers grabbed tools and got to work " 5,600 beautification and greening projects were undertaken, with 728 edible community gardens planted or replanted " 1 5 million flowers and bulbs, and 166,000 trees were planted to create lasting beauty " 10,100 graffiti sites were remediated In 2011, the companies and brands supporting the campaign included some of America's leading companies LG Electronics U S A , Inc , Lowe's Companies, Inc through the Lowe's Charitable and Educational Foundation, The Dow Chemical Company, The Glad Products Company, Nestl Pure Life Purified Water, PepsiCo's Pepsi-Cola and Gatorade companies, The Scotts Miracle-Gro Company, Solo Cup Company, Troy-Bilt Lawn and Garden Equipment, Waste Management, Inc , and Wm Wrigley Jr Co Promotional Partners include Crescent Art and Framing Products, Miss America Organization, Valvoline, a division of Ashland, Inc , Owens-Illinois, Inc , Rubber Manufacturers Association, Waste Management Recycle America and Colgate-Palmolive Company

4c (Code) (Expenses $ 538,308 including grants of $ 79,500) (Revenue $ 713,150)

America Recycles Day America Recycles Day (ARD) takes place each November 15 More than a celebration, ARD is the only nationally recognized day dedicated to the promotion of recycling programs in the United States Millions of Americans have pledged to increase their recycling habits at home and at work over the 14-year history of ARD, a nationally-recognized initiative dedicated to encouraging people to recycle more at home, at work, and on the go The recycling events that take each November and are designed to educate, motivate and inspire individuals to recycle more while encouraging their friends and families to do the same America Recycles Day is supported by many national and local nonprofits as well as sponsoring businesses and corporations Last year, America Recycles Day engaged more than 1,800 event organizers and nearly 13,800 groups, who registered more than 2,000 events and involved 2 million ARD participants, a 20% increase in reach and participation from the previous year The event was recognized by the EPA and presented with a proclamation by President Barack Obama America's leading companies and organizations support recycling through sponsorships and partnerships with America Recycles Day 2011 including, Alcoa, Inc , American Chemistry Council, Anheuser-Busch, Earth911 com, Disney's Friends for Change, The Glad Products Company, Johnson & Johnson, LG Electronics U S A , Nestl Waters North America, Owens-Illinois, Inc , PepsiCo, and Waste Management

(Code) (Expenses $ 4,357,284 including grants of $ 820,768) (Revenue $)

OTHER PROGRAMS

4d Other program services (Describe in Schedule O)

(Expenses $ 4,357,284 including grants of $ 820,768) (Revenue $)

4e **Total program service expenses** ▶$ 6,946,916

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*	1	Yes	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		No
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*	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	Yes	
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, line10? *If "Yes," complete Schedule D, Part VI.*	11a	Yes	
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.*	11b		No
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.*	11c		No
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.*	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X.*	11e	Yes	
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.*	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12a	Yes	
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*	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Part I*	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the U S ? *If "Yes," complete Schedule F, Part II and IV*	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the U S ? *If "Yes," complete Schedule F, Part III and IV*	16		No
17	Did the organization report a total of more than $15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	Yes	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? **Note.** All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

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*	21	Yes	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25*	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
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 owner? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	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*	35b		No
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check 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	1a	64			
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes	
2a	Enter the number of employees reported on Form W-3, *Transmittal of Wage and Tax Statements* filed for the calendar year ending with or within the year covered by this return	2a	46			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)					
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a		No
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)?			4a		No
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? . .			5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
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?			6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
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?			7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .			7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12 . . .	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
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.** All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state			13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the aggregate amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* . .			14b		

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

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 25			
b	Enter the number of voting members included in line 1a, above, who are independent	1b 24			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		No
6	Did the organization have members or stockholders?		6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		8a	Yes	
b	Each committee with authority to act on behalf of the governing body?		8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		No

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		No
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	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?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶ CT , NY

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply

☐ Own website ☑ Another's website ☑ Upon request

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table

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

MRMATTHEW MCKENNA
1010 WASHINGTON BLVD
STAMFORD,CT 06901
(203) 659-3000

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

Check 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, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
See Additional Data Table										

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: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
See Additional Data Table										

		(D)	(E)	(F)
1b	Sub-Total . . . . ▶			
c	Total from continuation sheets to Part VII, Section A . . . . ▶			
d	Total (add lines 1b and 1c) . . . . ▶	1,309,913	0	229,632

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

			Yes	No
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*	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	5		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
HILL KNOWLTON 607 14TH STREET SUITE 300 WASHINGTON, DC 20005	PUBLIC RELATIONS	324,396
RESOURCEFUL BAG TAG 6420 WEST 127TH ST PALOS HEIGHTS, IL 60463		120,957

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

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	272,200				
	d Related organizations . . . 1d					
	e Government grants (contributions) 1e					
	f All other contributions, gifts, grants, and similar amounts not included above 1f	7,531,836				
	g Noncash contributions included in lines 1a-1f $ 135,556					
	h **Total.** Add lines 1a-1f . . . . ▶		7,804,036			
Program Service Revenue		Business Code				
	2a CERTIFICATION FEES		28,725	28,725		
	b PROGRAM SERVICE FEES		105,000	105,000		
	c PROGRAM ADMINISTRATIVE FEES		71,000	71,000		
	d STATE RECYCLING FEES		14,475	14,475		
	e PUBLICATION SALES		15,450	15,450		
	f All other program service revenue		311,751	311,751		
	g **Total.** Add lines 2a–2f . . . . ▶		546,401			

		(i) Real / (i) Securities	(ii) Personal / (ii) Other	(A)	(B)	(C)	(D)
Other Revenue	3 Investment income (including dividends, interest and other similar amounts) . . . . . ▶			264,568			264,568
	4 Income from investment of tax-exempt bond proceeds . . ▶			0			
	5 Royalties . . . . ▶			25,467			25,467
		(i) Real	(ii) Personal				
	6a Gross rents						
	b Less rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss) . . . . ▶						
		(i) Securities	(ii) Other				
	7a Gross amount from sales of assets other than inventory		11,505,066				
	b Less cost or other basis and sales expenses		11,647,417				
	c Gain or (loss)		-142,351				
	d Net gain or (loss) . . . . ▶			-142,351			-142,351
	8a Gross income from fundraising events (not including $ 272,200 of contributions reported on line 1c) See Part IV, line 18 . . . a		20,300				
	b Less direct expenses . . . b		121,660				
	c Net income or (loss) from fundraising events . . ▶			-101,360		-101,360	
	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 . . . ▶			0			
	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 . . ▶			0			
	Miscellaneous Revenue		Business Code				
	11a OTHER INCOME		900099	15,862	15,862		
	b						
	c						
	d All other revenue						
	e **Total.** Add lines 11a–11d . . . . . . ▶			15,862			
	12 **Total revenue.** See Instructions . . . ▶			8,412,623	562,263	-101,360	147,684

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(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 United States See Part IV, line 21	1,535,190	1,535,190		
2 Grants and other assistance to individuals in the United States See Part IV, line 22	0			
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	1,539,545	886,930	439,139	213,476
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	1,300,358	740,025	387,755	172,578
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	43,163	29,470	9,048	4,645
9 Other employee benefits	269,926	146,192	98,400	25,334
10 Payroll taxes	183,273	78,840	89,291	15,142
11 Fees for services (non-employees)				
a Management	0			
b Legal	64,551	29,681	31,292	3,578
c Accounting	115,925	10,332	103,684	1,909
d Lobbying	0			
e Professional fundraising *See Part IV, line 17* . .	0			
f Investment management fees	0			
g Other	6,601	828	5,620	153
12 Advertising and promotion	0			
13 Office expenses	182,707	140,692	27,054	14,961
14 Information technology	250,206	208,266	28,617	13,323
15 Royalties . .	0			
16 Occupancy	339,873	237,013	57,361	45,499
17 Travel	357,734	276,864	63,566	17,304
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	246,924	209,732	36,952	240
20 Interest	0			
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	43,346	30,696	7,087	5,563
23 Insurance	0			
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 RECYCLING BINS	708,908	708,908	0	0
b CONSULTANTS	550,218	534,207	7,755	8,256
c MISCELLANEOUS PROGRAM EXPENSES	237,326	236,061	875	390
d POCKET ASHTRAYS	212,656	212,656	0	0
e				
f All other expenses	779,125	694,333	64,092	20,700
25 **Total functional expenses.** Add lines 1 through 24f	8,967,555	6,946,916	1,457,588	563,051
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	646,824	1	1,372,053
	2	Savings and temporary cash investments	818,174	2	2,025,090
	3	Pledges and grants receivable, net	604,097	3	570,803
	4	Accounts receivable, net	0	4	0
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	0	5	0
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L	0	6	0
	7	Notes and loans receivable, net	0	7	0
	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	168,754	9	136,858
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D* — 10a: 298,953			
	b	Less accumulated depreciation — 10b: 186,265	99,853	10c	112,688
	11	Investments—publicly traded securities	7,565,564	11	4,719,879
	12	Investments—other securities See Part IV, line 11	0	12	0
	13	Investments—program-related See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	0	15	0
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	9,903,266	16	8,937,371
Liabilities	17	Accounts payable and accrued expenses	961,325	17	681,382
	18	Grants payable	0	18	0
	19	Deferred revenue	750,000	19	500,000
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability *Complete Part IV of Schedule D*	0	21	0
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons *Complete Part II of Schedule L*	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	35,000	25	35,000
	26	**Total liabilities.** Add lines 17 through 25	1,746,325	26	1,216,382
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	3,420,637	27	3,325,724
	28	Temporarily restricted net assets	4,736,304	28	4,395,265
	29	Permanently restricted net assets	0	29	0
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	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	8,156,941	33	7,720,989
	34	Total liabilities and net assets/fund balances	9,903,266	34	8,937,371

Part XI Reconcilliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12) . . .	1	8,412,623
2	Total expenses (must equal Part IX, column (A), line 25)	2	8,967,555
3	Revenue less expenses Subtract line 2 from line 1	3	-554,932
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . .	4	8,156,941
5	Other changes in net assets or fund balances (explain in Schedule O)	5	118,980
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	7,720,989

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ____________ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? . .	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . .	3b		

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SCHEDULE A
(Form 990 or 990EZ)

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

2011

Open to Public Inspection

Name of the organization
KEEP AMERICA BEAUTIFUL INC

Employer identification number
13-1761633

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 **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?

		Yes	No
(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 the supported organization?	**11g(i)**		No
(ii) a family member of a person described in (i) above?	**11g(ii)**		No
(iii) a 35% controlled entity of a person described in (i) or (ii) above?	**11g(iii)**		No

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

(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**	
Total									

Part II **Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I 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)** 2007	**(b)** 2008	**(c)** 2009	**(d)** 2010	**(e)** 2011	**(f)** Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	6,749,819	6,663,115	8,414,628	9,246,866	8,350,437	39,424,865
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	6,749,819	6,663,115	8,414,628	9,246,866	8,350,437	39,424,865
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)						15,429,404
6 **Public Support.** Subtract line 5 from line 4						23,995,461

Section B. Total Support

Calendar year (or fiscal year beginning in)	**(a)** 2007	**(b)** 2008	**(c)** 2009	**(d)** 2010	**(e)** 2011	**(f)** Total
7 Amounts from line 4	6,749,819	6,663,115	8,414,628	9,246,866	8,350,437	39,424,865
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	336,593	135,199	165,070	198,559	290,035	1,125,456
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets	30,000	51,450	103,970	37,119	36,162	258,701
11 **Total support** (Add lines 7 through 10)						40,809,022

12 Gross receipts from related activities, etc (See instructions)	**12**	

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

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))	**14**	58 799 %
15 Public Support Percentage for 2010 Schedule A, Part II, line 14	**15**	55 655 %

16a **33 1/3% support test—2011.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☑

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

17a **10%-facts-and-circumstances test—2011.** If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ► ☐

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

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 IRC 509(a)(2)**
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	**(a)** 2007	**(b)** 2008	**(c)** 2009	**(d)** 2010	**(e)** 2011	**(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)** 2007	**(b)** 2008	**(c)** 2009	**(d)** 2010	**(e)** 2011	**(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 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	**15**	
16 Public support percentage from 2010 Schedule A, Part III, line 15	**16**	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2011** (line 10c column (f) divided by line 13 column (f))	**17**	
18 Investment income percentage from **2010** Schedule A, Part III, line 17	**18**	

19a **33 1/3% support tests—2011.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support tests—2010.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

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

Facts And Circumstances Test

Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493198009052

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, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
KEEP AMERICA BEAUTIFUL INC

Employer identification number
13-1761633

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 may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit ☐ Yes ☐ No

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

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

☐ Preservation of land for public use (e g , recreation or pleasure)
☐ Preservation of an historically importantly land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

			Held at the End of the 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	2d	

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

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	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 the 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	2,220,461	2,066,584	1,679,766	2,071,767	
b Contributions					
c Investment earnings or losses	-7,856	172,475	400,274	-377,325	
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses	19,813	18,598	13,456	14,676	
g End of year balance	2,192,792	2,220,461	2,066,584	1,679,766	

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

a Board designated or quasi-endowment ▶ 100 000 %

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

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	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 property	(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				
d Equipment		298,953	186,265	112,688
e Other				
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				112,688

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

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

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) should equal Form 990, Part X, col (B) line 13)* ▶		

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

(a) Description	(b) Book value
Total. *(Column (b) should 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
Federal Income Taxes	0
DEFERRED COMPENSATION	35,000
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	35,000

2. Fin 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC740)

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	8,412,623
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	8,967,555
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-554,932
4	Net unrealized gains (losses) on investments	4	-131,020
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	250,000
9	Total adjustments (net) Add lines 4 - 8	9	118,980
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-435,952

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	8,469,458
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	-131,020		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d	187,855		
e	Add lines **2a** through **2d**			2e	56,835
3	Subtract line **2e** from line **1**			3	8,412,623
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 should equal Form 990, Part I, line 12)			5	8,412,623

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

1	Total expenses and losses per audited financial statements			1	8,905,410
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			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d	-62,145		
e	Add lines **2a** through **2d**			2e	-62,145
3	Subtract line **2e** from line **1**			3	8,967,555
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			
c	Add lines **4a** and **4b**			4c	
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	8,967,555

Part XIV Supplemental Information

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

Identifier	Return Reference	Explanation
FIN 48 FOOTNOTE	SCHEDULE D, PART 2	THE ORGANIZATION FOLLOWS THE FASB'S GUIDANCE ON UNCERTAIN TAX POSITIONS THAT MAY REQUIRE FINANCIAL STATEMENT RECOGNITION THE ORGANIZATION ANALYZED ITS TAX FILING POSITIONS IN ALL JURISDICTIONS IT IS REQUIRED TO FILE TAX RETURNS, AS WELL AS OPEN TAX YEARS IN THESE JURISDICTIONS BASED ON THIS REVIEW, NO RESERVES FOR UNCERTAIN TAX POSITIONS WERE REQUIRED TO HAVE BEEN RECORDED IN ACCORDANCE WITH GAAP IN EITHER 2011 OR 2010 IN ADDITION, THE ORGANIZATION DETERMINED THAT IT DID NOT NEED TO RECORD ANY TAX-RELATED INTEREST OR PENALTIES IN EITHER YEAR THE ORGANIZATION WILL CONTINUE TO REVIEW THE RELEVANT AUTHORITATIVE GUIDANCE AS SUCH RELATES TO ITS FINANCIAL STATEMENTS AND CONCLUSIONS REACHED REGARDING UNCERTAIN TAX POSITIONS, WHICH MAY BE SUBJECT TO REVIEW AND ADJUSTMENT AT A LATER DATE BASED ON ONGOING ANALYSES OF TAX LAWS, REGULATIONS, AND INTERPRETAIONS THEREOF TO THE EXTENT THAT THE ASSESSMENT OF THE CONCLUSIONS REACHED REGARDING UNCERTAIN TAX POSITION CHANGES, SUCH CHANGE IN ESTIMATE WILL BE RECORDED IN THE PERIOD IN WHICH SUCH DETERMINATION IS MADE
ENDOWMENT FUND USES	SCHEDULE D, PART V, LINE #4	THE PURPOSE OF THE FUND IS TO HELP ENSURE THE LONG-TERM CONTINUITY OF KAB AND ITS FUTURE ABILITY TO CARRY OUT ITS CHARITABLE MISSION THE FUND IS ADMINISTERED BY THE EXECUTIVE COMMITTEE OF THE BOARD IN ACCORDANCE WITH POLICIES ADOPTED BY THE BOARD AS THE FUND IS BOARD DESIGNATED, THE AMOUNTS ARE INCLUDED IN UNRESTRICTED NET ASSETS ALL INTEREST AND DIVIDEND EARNINGS ARE REINVESTED INTO THE FUND AS THEY ARE EARNED
OTHER ADJUSTMENTS	FORM 990, SCH D, PART XI, LINE 8 & PART XII, LINE 2D & part xiii, line 2d	$250,000 relates to reversal of deferred revenue that was included in revenue on Form 990 in 2009 but not included in revenue on the audited financial statements until 2011 $62,145 relates to amounts that were allocated to the benefit dinner on the audited financial statements that are not direct expenses of the dinner this amount has been moved to the fundraising expense column in part ix of the 990

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SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
KEEP AMERICA BEAUTIFUL INC

Employer identification number
13-1761633

Part I **Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1 Indicate whether the organization raised funds through any of the following activities Check all that apply

a ☐ Mail solicitations
b ☐ Internet and e-mail solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization Form 990-EZ filers are not required to complete this table

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	No	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
Total . . . . ▶						

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than $5,000.

		(a) Event #1 VISION DINNER (event type)	(b) Event #2 (event type)	(c) Other Events 0 (total number)	(d) Total Events (Add col (a) through col (c))
Revenue	1 Gross receipts	292,500			292,500
	2 Less Charitable contributions	272,200			272,200
	3 Gross income (line 1 minus line 2)	20,300			20,300
Direct Expenses	4 Cash prizes				
	5 Non-cash prizes				
	6 Rent/facility costs	6,000			6,000
	7 Food and beverages	30,786			30,786
	8 Entertainment				
	9 Other direct expenses	84,874			84,874
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				(121,660)
	11 Net income summary Combine lines 3 and 10 in column (d). ▶				-101,360

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ____ ☐ No	☐ Yes ____ ☐ No	☐ Yes ____ ☐ No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				( )
	8 Net gaming income summary Combine lines 1 and 7 in column (d) ▶				

9 Enter the state(s) in which the organization operates gaming activities ____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," Explain ____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," Explain ____

11 Does the organization operate gaming activities with nonmembers? . . . . ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . ☐ Yes ☐ No

13 Indicate the percentage of gaming activity operated in

a The organization's facility	13a	
b An outside facility	13b	

14 Provide the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ ____________ and the amount of gaming revenue retained by the third party ▶ $ ____________

c If "Yes," enter name and address

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ $

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . ☐ Yes ☐ No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV Complete this part to provide additional information for responses to quuestion on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
KEEP AMERICA BEAUTIFUL INC

Employer identification number
13-1761633

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☑ Yes ☐ No

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

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

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

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

3 Enter total number of other organizations listed in the line 1 table ▶

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

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

Identifier	Return Reference	Explanation
USE OF GRANT FUNDS	SCHEDULE I, PART I LINE 2	KAB PRIMARILY MAKES GRANTS TO ITS AFFILIATE ORGANIZATIONS (BUT NOT EXCLUSIVELY) IN ORDER FOR AN AFFILIATE TO BE ELIGIBLE TO RECEIVE A GRANT, THEY MUST BE DEEMED "IN GOOD STANDING" OR IN COMPLIANCE WITH SPECIFIC KAB REGULATIONS IN MOST INSTANCES, ONCE A GRANT IS DISTRIBUTED, THE RECIPIENT ORGANIZATION NEEDS TO COMPLETE A REPORT TO INDICATE THAT THE PROCEEDS OF THE GRANT WERE SPENT AS INTENDED AND MEASURE CERTAIN OUTCOMES OR METRICS IF THE GRANT RECIPIENT CANNOT FULFILL THE GRANT AS INTENDED, THEY WILL RETURN THE PROCEEDS BACK TO KAB

Additional Data Return to Form

Software ID:
Software Version:
EIN: 13-1761633
Name: KEEP AMERICA BEAUTIFUL INC

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MALIBU FOUNDATION FOR ENVIRONMENTAL EDUCATION1471 S BEDFORD STREET LOS ANGELES,CA 90035	95-4505792	503(C)(3)	50,000		CASH		MISS ME PASS THROUGH GRANT
KOREATOWN YOUTH & COMMUNITY CENTER3727 W 6TH ST STE 300 LOS ANGELES,CA 90020	95-3779389	503(C)(3)	25,000		CASH		MISS ME JEANS PASS THROUGH
KEEP NEBRASKA BEAUTIFUL3201 PIONEERS BLVD LINCOLN,NE 68502	47-0491821	503(C)(3)	17,000		CASH		GAC AFFILIATE SUPPORT GRANT
KEEP VIRGINIA BEAUTIFUL5101 MONUMENT AVENUE RICHMOND,VA 23230	54-0831204	503(C)(3)	21,400		CASH		VARIOUS
KAB-TOPEKASHAWNEE COUNTYPO BOX 750775 TOPEKA,KS 66675	48-0887925	503(C)(3)	14,000		CASH		UPS GRANT
KEEP ALLEN BEAUTIFUL305 CENTURY PARKWAY ALLEN,TX 75013	75-2824633	503(C)(3)	10,000		CASH		WM THINK GREEN GRANTS
KEEP ARIZONA BEAUTIFULPO BOX 25126 PHOENIZ,AZ 85002	86-0047273	503(C)(3)	22,500		CASH		various
KEEP ATLANTA BEAUTIFUL855 PEACHTREE ST ATLANTA,GA 30308	20-3481103	503(C)(3)	12,000		CASH		WM THINK GREEN GRANTS
KEEP BEATRICE BEAUTIFUL205 N FOURTH STREET BEATRICE,NE 68310	47-0655447	503(C)(3)	11,500		CASH		UPS GRANT
KEEP BRUNSWICK GOLDEN ISLES BEAUTIFULPO BOX 1493 ATTN MARSHA SMITH BRUNSWICK,GA 31521	58-2393363	503(C)(3)	10,000		CASH		WM THINK GREEN GRANTS
Keep CHARLESTON Beautiful823 MEETING STREET CHARLESTON,SC 29403	57-6000226	503(C)(3)	12,000		CASH		WM THINK GREEN GRANTS
KEEP COBB BEAUTIFUL1940 COUNTY SERVICES PKWY MARIETTA,GA 30008	58-1659192	503(C)(3)	10,000		CASH		WM THINK GREEN GRANTS
KEEP COVINGTON BEAUTIFUL427 N THEARD 114 COVINGTON,LA 70433	61-0733046	503(C)(3)	10,000		CASH		UPS GRANT
KEEP DORCHESTER BEAUTIFUL2120 EAST MAIN STREET DORCHESTER,SC 29437	57-6000344	503(C)(3)	15,000		CASH		various
Keep HAWAII Beautiful PO BOX 1890 PAHOA,HI 96778	99-0312378	503(C)(3)	10,000		CASH		WM THINK GREEN GRANTS
KEEP LINCOLN & LANCASTER COUNTY BEAUTIFUL3140 N STREET LINOCLN,NE 68510	47-6006256	503(C)(3)	10,000		CASH		UPS GRANT
Keep MANDEVILLE Beautiful1100 MANDEVILLE H MANDEVILLE,LA 70471	72-6000876	503(C)(3)	10,000		CASH		WM THINK GREEN GRANTS
KEEP MARTIN BEAUTIFUL1211 SW SUNSET TRAIL PALM CITY,FL 34990	59-3342120	503(C)(3)	10,000		CASH		UPS GRANT
Keep MILES CITY Beautiful710 S EARLING AVE MILES CITY,MT 59301	90-0622503	503(C)(3)	12,000		CASH		UPS GRANT
KEEP MISSISSIPPI BEAUTIFUL208 KEY DRIVE SUITE B MADISON,MS 39110	64-0764171	503(C)(3)	12,000		CASH		CLPP PROGRAM GRANTS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KEEP NORTH CAROLINA BEAUTIFUL3909 STRATFORD COURT RALEIGH,NC 27609	57-0822023	503(C)(3)	12,000		CASH		UPS GRANT
KEEP OAKLAND BEAUTIFUL750 50TH AVENUE OAKLAND,CA 94601	94-2750152	503(C)(3)	12,500		CASH		UPS GRANT
KEEP PALM BEACH LAKES BLVD1920 PALM BEACH LAKES BLVD SUITE 210 WEST PALM BEACH, FL 33409	65-0117981	503(C)(3)	11,500		CASH		WM THINK GREEN GRANTS
KEEP PENNSYLVANIA BEAUTIFUL105 WEST FOURTH ST GREENSBURG,PA 15601	25-1645291	503(C)(3)	23,500		CASH		various
KEEP SLIDELL BEAUTIFULPO BOX 828 SLIDELL,LA 70459	72-6001341	503(C)(3)	10,000		CASH		UPS GRANT
KEEP TAMPA BEAUTIFUL401 E JACKSON AVE SUITE 1825 TAMPA,FL 33602	59-3156012	503(C)(3)	10,000		CASH		WM THINK GREEN GRANTS
KEEP YANKTON BEAUTIFUL324 WALNUT ST YANKTON,SD 57078	46-0461576	503(C)(3)	10,000		CASH		UPS GRANT
MONTGOMERY COUNTY SOLID WASTE2550 SANDRIDGE DR DAYTON,OH 45439	31-6000172	503(C)(3)	10,000		CASH		WM THINK GREEN GRANTS
OKLAHOMA CITY BEAUTIFUL3535 N CLASSEN OKLAHOMA CITY,OK 73118	73-0785200	503(C)(3)	10,000		CASH		UPS GRANT
SANTA ROSA CLEAN COMMUNITY SYSTEM PO BOX 453 MILTON,FL 32572	59-3282135	503(C)(3)	10,000		CASH		UPS GRANT
KEEP GREENVILLE BEAUTIFUL1500 BEATTY ST PUBLIC WORKS DEPT GREENVILLE,NC 27834	75-3251895	503(C)(3)	9,500		CASH		VARIOUS
Keep LOUISIANA Beautiful17170 PERKINS RD BATON ROUGE,LA 70810	72-1499919	503(C)(3)	8,500		CASH		ARD GRANT
KEEP BLACKSTONE BEAUTIFUL175 MAIN ST PAWTUCKET,RI 02860	05-0424318	503(C)(3)	10,000		CASH		WM THINK GREEN GRANT
KEEP LOS ANGELES BEAUTIFUL200 N Spring St Los Angeles,CA 90012	95-6000735	503(C)(3)	39,000		CASH		VARIOUS
KEEP HOUSTON BEAUTIFUL3000 Richmond Ave HOUSTON,TX 77098	74-1946081	503(C)(3)	15,000		CASH		various
CITY OF DETROIT-DPW513 COLEMAN CEN DETROIT,MI 48226	38-6004606	501(C)(3)	10,000		CASH		VARIOUS
INTERNATIONAL DOWNTOWN ASSOCIATION1025 THOMAS JEFF ST WASHINGTON,DC 20007	38-1187974	501(C)(3)	11,940		CASH		VARIOUS
KEEP CHICAGO BEAUTIFUL25 E WASHINGTON CHICAGO,IL 60602	36-3529780	501(C)(3)	10,000		CASH		VARIOUS
KEEP LEXINGTON-FAYETTE COUNTY BEAUTIFU200 E MAIN ST LEXINGTON,KY 40507	61-0858140	501(C)(3)	10,000		CASH		VARIOUS
BOATUS FOUNDATION147 OLD SOLOMONS ISL ANNAPOLIS,MD 21401	54-1156448	501(C)(3)	10,000		CASH		VARIOUS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
HOT SPRINGSGARLAND COUNTY500 MID AMERICA BLVD HOT SPRINGS,AR 71913	71-0709078	501(C)(3)	11,700		CASH		VARIOUS
INDIANA RECYCLING COALITION1500 N DELAWARE ST INDIANAPOLIS,IN 46202	35-1806971	501(C)(3)	7,000		CASH		VARIOUS
KEEP CALIFORNIA BEAUTIFUL1822 21ST ST SACRAMENTO,CA 95811	68-0224415	501(C)(3)	7,000		CASH		VARIOUS
KEEP COPIAH COUNTY BEAUTIFUL 3125 PERRETT ROAD HAZLEHURST,MS 39083	61-4508833	501(C)(3)	7,000		CASH		VARIOUS
KEEP OHIO BEAUTIFULPO BOX 13135 FAIRLAWN,OH 44334	31-1775229	501(C)(3)	7,000		CASH		VARIOUS
KEEP PIKE COUNTY BEAUTIFULPO BOX 2161 MCCOMB,MS 39649	02-0667694	501(C)(3)	6,500		CASH		VARIOUS
KEEP TEXAS BEAUTIFUL8850 BUSINESS PARK DR AUSTIN,TX 78759	74-7055759	501(C)(3)	7,000		CASH		VARIOUS
MERION VILLAGE ASSOCIATION1330 S FOURTH ST COLUMBUS,OH 43206	31-1198305	501(C)(3)	8,000		CASH		VARIOUS
CURVSIDE VALUE PARTNERSHIP1525 WILSON BLVD ARLINGTON,VA 22209	37-1622018	501(C)(3)	164,826		CASH		CVP FUNDS

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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, question 23.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047
2011
Open to Public Inspection

Name of the organization
KEEP AMERICA BEAUTIFUL INC

Employer identification number
13-1761633

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate 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 idemnification 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 in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
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?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		No
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	4c		No
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	5a		No
b	Any related organization? If "Yes," to line 5a or 5b, describe in Part III	5b		No
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?	6a		No
b	Any related organization? If "Yes," to line 6a or 6b, describe in Part III	6b		No
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	Yes	
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

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

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

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(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) MATTHEW M MCKENNA	(i)	250,625	60,000		35,000	10,846	356,471	
	(ii)	0			0	0	0	
(2) GAIL CUNNINGHAM	(i)	146,194	14,300		7,259	26,422	194,175	
	(ii)	0			0	0	0	
(3) SUSANNE WOODS	(i)	123,946	6,000		6,497	27,370	163,813	
	(ii)	0			0	0	0	
(4) EDMUND SKERNOLIS	(i)	124,817	18,385		6,241	18,300	167,743	
	(ii)	0			0	0	0	
(5) REBECCA LYONS	(i)	135,958	26,700		8,133	20,536	191,327	
	(ii)	0			0	0	0	
(6) SUSAN FOSTER	(i)	155,833	10,000		0	25,859	191,692	
	(ii)	0			0	0	0	

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

Identifier	Return Reference	Explanation
BONUSES	SCHEDULE J, LINE 7	BONUSES ARE BASED ON PERFORMANCE THE PRESIDENT RECOMMENDS THE BONUS AMOUNT FOR OFFICERS (HIS DIRECT REPORTS) AND THE COMPENSATION COMMITTEE CAN EITHER APPROVE OR REVISE THE RECOMMENDED AMOUNTS

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
KEEP AMERICA BEAUTIFUL INC

Employer identification number
13-1761633

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (MTD Products Inc-Tools, gardening equipment)	X	1	96,000	FMV
26 Other ▶ (MICROSOFT-SOFTWARE)	X	1	23,958	FMV
27 Other ▶ (PEPSICO-PROGRAM POSTERS)	X	1	9,598	FMV
28 Other ▶ (Q-STAR TECHNOLOGY -CAMERA)	X	1	6,000	FMV

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . 29

			Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a		No
b	If "Yes," describe the arrangement in Part II			
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	Yes	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?	32a		No
b	If "Yes," describe in Part II			
33	If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II			

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation

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 to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
KEEP AMERICA BEAUTIFUL INC

Employer identification number
13-1761633

Identifier	Return Reference	Explanation
APPROVAL PROCESS	FORM 990, PART VI, LINE 15	THE PROCESS FOR DETERMINING COMPENSATION INCLUDES A RECOMMENDATION THAT IS PROPOSED BY THE PRESIDENT AND THE CHIEF OPERATING OFFICER THOSE RECOMMENDATIONS ARE REVIEWED BY THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS AND EITHER APPROVED OR REVISED THE COMPENSATION COMMITTEE REVIEWS COMPARABLE DATA ON OTHER NON-PROFIT ORGANIZATIONS IN THE TRI-STATE AREA THIS PROCESS WAS LAST UNDERTAKEN IN FEBRUARY 2011 AT THAT TIME, THE COMPENSATION COMMITTEE APPROVED THE RECOMMENDED SALARY INCREASES THAT THE PRESIDENT PROPOSED FOR KEY OFFICERS AND EMPLOYEES

Identifier	Return Reference	Explanation
DISCLOSURE	FORM 990, PART VI, LINE 19	AUDITED FINANCIAL STATEMENTS ARE PROVIDED TO THE PUBLIC AS REQUESTED AND ARE ALSO AVAILABLE VIA SPECIFIC NON-PROFIT DATABASES GOVERNING DOCUMENTS AND THE CONFLICT OF INTEREST POLICY WOULD BE AVAILABLE AS REQUESTED

Identifier	Return Reference	Explanation
REVIEW OF 990	FORM 990, PART VI, LINE 11A	THE FORM 990 IS REVIEWED BY KAB'S CHIEF OPERATING OFFICER AND PRESIDENT PRIOR TO ITS fILING BEFORE THE PRESIDENT OF KAB SIGNS THE RETURN PRIOR TO FILING, THE FORM 990 IS SHARED WITH THE FULL BOARD OF DIRECTORS

Identifier	Return Reference	Explanation
POLICIES & PROCEDURES-AFFILIATES	FORM 990, PART VI, LINE 10B	THE LOCAL AFFILIATES ARE SEPARATE NONPROfIT ENTITIES AND/OR AGENCIES OF LOCAL GOVERNMENTS THAT ARE NOT CONTROLLED BY KAB AND, THEREFORE, KAB DOES NOT HAVE WRITTEN POLICIES AND PROCEDURES IN PLACE TO GOVERN THE ACTIVITIES OF THESE AfFILIATES

Identifier	Return Reference	Explanation
DONEE ACKNOWLEDGEMENT	SCHEDULE M, PART I, LINE 29	KEEP AMERICA BEAUTIFUL DOES NOT ROUTINELY RECEIVE FORMS 8283 FROM ITS DONORS OF IN-KIND CONTRIBUTIONS KAB DOES SEND A LETTER OUT TO EACH DONOR REQUESTING THE DONOR TO INFORM KAB Of THE VALUE OF THE DONATION PROVIDED KAB RECEIVES RESPONSES BACK ON A PERIODIC BASIS HOWEVER, NOT ALL DONORS COMPLY WITH THE REQUEST

Identifier	Return Reference	Explanation
OTHER CHANGES IN NET ASSET	FORM 990, PART XI, LINE 5	UNREALIZED LOSSES ON INVESTMENTS WAS $131,020 FOR THE YEAR ENDED DECEMBER 31, 2011 $250,000 relates to reversal of deferred revenue that was included in revenue on Form 990 in 2009 but not included in revenue on the audited financial statements until 2011 THE NET AMOUNT IS $118,980

Identifier	Return Reference	Explanation
COMPLIANCE WITH CONFLICT OF INTEREST POLICY	FORM 990, PART VI, LINE 12C	If any conflict were to arise, those conflicts would be reviewed with the internal Management Committee and the Board of Directors

Identifier	Return Reference	Explanation
2011 NEW PROGRAM SERVICES	FORM 990, PART III, LINE 2	2011 New Program Services Recyclebow l In October 2011, KAB launched "Recyclebow l" an annual country-w ide k-12 school recyclıng competıtıon w hich ran for four w eeks Through Recycle-Bow l, KAB galvanızes recyclıng ın elementary, mıddle and hıgh schools across Amerıca The mıssıon of the program ıs to ınvıgorate student partıcıpatıon through a natıonal K-12 recyclıng competıtıon The objectıves are to " Establısh new recyclıng programs w ıthın schools " Increase recyclıng rates ın schools that currently recycle " Provıde teacher/student educatıonal opportunıtıes about recyclıng and w aste reductıon Thıs year, more than 1,200 schools comprısıng of over 500,000 students from 47 states partıcıpated ın the ınaugural competıtıon and 2 mıllıon pounds of recyclables w ere recovered Partıcıpants reported the competıtıon gave them a mechanısm to start or ımprove theır school's recyclıng operatıons Importantly, they ındıcated that ıt also provıded them w ıth ınvaluable teachıng moments about sustaınabılıty, math, scıence and socıal studıes " From Oct 17 through Nov 12, 2011, partıcıpatıng schools recycled as much as possıble The total amount of recyclables recovered durıng the 2011 competıtıon added up to 2,088,000 pounds, w hich ın turn prevented the release of nearly 990 metrıc tons of carbon dıoxıde equıvalent (MTCO2E) In real-w orld terms, thıs reductıon ın greenhouse gases ıs equıvalent to the annual emıssıons from 154 passenger cars or 191,998 gallons of gas The competıtıon offered a $1,000 prıze to the school ın each state that collected the most recyclable materıal per capıta A natıonal champıon w as then chosen from among the statew ıde w ınners to receıve an addıtıonal grand prıze of $2,500, earnıng a total of $3,500 ın prıze money Recycle-Bow l achıevements are lısted below " 1,226 schools regıstered - 1% of all U S publıc and prıvate schools " Approxımately 544,900 students partıcıpated ın the competıtıon " On average, 5 32 pounds of materıal w as collected per person durıng the four w eeks of the competıtıon " 67% of schools saw "sıgnıfıcant" or "some" ıncrease ın the amount of materıal recycled " 2% of schools started a recyclıng program because of Recycle-Bow l Lıtterıng ıs Wrong Too After conductıng a successful pılot program ın Cıncınnatı ın partnershıp w ıth the local KAB, ın 2011 Keep Amerıca Beautıful launched a new lıtter preventıon campaıgn called "Lıtterıng ıs Wrong Too" The campaıgn takes a unıque and lıght-hearted approach ın order to get attentıon and be remembered and employs both tradıtıonal and non-tradıtıonal socıal marketıng approaches and executıon It lınks lıtterıng w ıth w rongdoıng, w hıle also defınıng the personalıty of the lıtterer as socıally unacceptable Whıle true behavıor change does not happen overnıght, the test perıod dıd reveal ınıtıal success More than 1,200 w rongs w ere submıtted to a dedıcated w eb sıte, lıtterıngısw rong2 org and research ındıcated a dırect ıncrease ın aw areness for the campaıgn and more ımportantly the problem and ımportance of lıtter Thıs ongoıng campaıgn w as launched ın 2011 to Keep Amerıca Beautıful Affılıates ın Mılw aukee, Houston and Smyrna Other cıtıes also ımplemented Lıtterıng ıs Wrong Too The message ıs ıntended to reach all resıdents of a specıfıc market but ıs prımarıly geared at those 18-34 years old, ıdentıfıed as the w orst offenders of lıtter accordıng to lıtter behavıor studıes The ultımate goal of the campaıgn ıs to change perceptıons of those w ho lıtter and the act of lıtterıng, to ınduce a long-term change ın behavıor and lead to a cleaner, more beautıful cıty By comparıng lıtterıng to other w rong (and rıdıculous) behavıors, the campaıgn communıcates just how w rong ıt ıs to lıtter

Identifier	Return Reference	Explanation
OTHER PROGRAM SERVICES	OTHER PROGRAM SERVICES	SOME OF THE OTHER MAJOR PROGRAM SERVICES INCLUDE Public Space Recycling Keep America Beautiful's (KAB) Public Space Recycling Initiative brings greater awareness to opportunities for public space recycling and develops greater community capacity to implement recycling "away from home" In 2011, KAB distributed tens of thousands of recycling bins valued at more than $700,000 to schools/campuses, public parks, recreation areas, special events, beaches, street corners, and other public venues These bin grants programs provide recycling bins directly to recipients and leverages the purchasing power and recycling expertise of KAB Since its inception in the fall of 2007, KAB has donated recycling bins in 380 communities in 48 states and the District of Columbia KAB teamed with several sponsors in 2011 including Alcoa, Inc , Anheuser Busch, The Coca Cola Foundation, and PepsiCo to donate public space recycling bins to communities across the country

Identifier	Return Reference	Explanation
PRESENTATION CHANGE-STATEMENT OF FUNCTIONAL EXPENSES		In 2010, all expenses allocated to the various programs were included as one "Special Project" expense on line 24 of Part IX, Statement of Functional Expenses This amount included a combination of various expenses that were related to the various programs In 2011, this "Special Project" expense account has been broken down by the specific expense and has been included on the respective lines on the statement of functional expenses

Additional Data

Software ID:	
Software Version:	
EIN:	13-1761633
Name:	KEEP AMERICA BEAUTIFUL INC

Form 990, Special Condition Description:

Special Condition Description

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

4d. Other program services

(Code) (Expenses $ 4,357,284 including grants of $ 820,768) (Revenue $)

OTHER PROGRAMS

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

(A) Name and Title	(B) Average hours per week	(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			
MATTHEW M MCKENNA PRESIDENT & CEO	40 0	X		X				310,625	0	45,846
THOMAS C BRASCO TREASURER/DIRECTOR	1 0	X		X				0	0	0
JOHN W BURGESS DIRECTOR	1 0	X						0	0	0
BARRY H CALDWELL DIRECTOR	1 0	X						0	0	0
TERRI CARDWELL DIRECTOR	1 0	X						0	0	0
KATHY CASSO DIRECTOR	1 0	X						0	0	0
L RICHARD CRAWFORD DIRECTOR	1 0	X						0	0	0
CAROLYN CRAYTON DIRECTOR	1 0	X						0	0	0
PASCAL A FERNANDEZ DIRECTOR	1 0	X						0	0	0
TIMOTHY J GARDNER CHAIRMAN	1 0	X		X				0	0	0
GREGORY CRAWFORD DIRECTOR	1 0	X						0	0	0
KIM JEFFERY DIRECTOR	1 0	X						0	0	0
DREW BECHER DIRECTOR	1 0	X						0	0	0
JIM KING DIRECTOR	1 0	X						0	0	0
BILL MORRISSEY DIRECTOR	1 0	X						0	0	0
ANDY PHAROAH DIRECTOR	1 0	X						0	0	0
JANE POLSON DIRECTOR	1 0	X						0	0	0
JOHN E ROSENOW DIRECTOR	1 0	X						0	0	0
HARVEY SASS DIRECTOR	1 0	X						0	0	0
JILL SCANDRIDGE DIRECTOR	1 0	X						0	0	0
THOMAS H TAMONEY JR DIRECTOR/SECRETARY	1 0	X		X				0	0	0
HOWARD UNGERLEIDER DIRECTOR	1 0	X						0	0	0
CAREY HAMILTON DIRECTOR	1 0	X						0	0	0
ANNE JOHNSON DIRECTOR	1 0	X						0	0	0
TOM WALDECK DIRECTOR	1 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
GAIL CUNNINGHAM SR VP	40 0			X				160,494	0	33,681
SUSANNE WOODS SR VP, ENVIRONMENTAL PROGRAMIN	40 0			X				129,946	0	33,867
ROBERT WALLACE VP, COMMUNICATIONS	40 0			X				114,138	0	25,456
EDMUND SKERNOLIS OFFICER	40 0			X				143,202	0	24,541
REBECCA LYONS CHIEF OPERATING OFFICER	40 0			X				162,658	0	28,669
SUSAN FOSTER SENIOR VICE PRESIDENT	40 0			X				165,833	0	25,859
BRENDA PULLEY VICE PRESIDENT	40 0			X				123,017	0	11,713