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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 **and ending**

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

C Name of organization
THE GLAUCOMA FOUNDATION, INC.

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address) 80 MAIDEN LANE — Room/suite 700

City or town, state or country, and ZIP + 4
NEW YORK, NY 10038

F Name and address of principal officer: SCOTT CHRISTENSEN
SAME AS C ABOVE

D Employer identification number
13-3174839

E Telephone number
(212)285-0080

G Gross receipts $ 2,076,890.

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: ▶ GLAUCOMAFOUNDATION.ORG

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1984 **M** State of legal domicile: NY

Part I Summary

1	Briefly describe the organization's mission or most significant activities: SEE ATTACHED STATEMENT		
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	29
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	29
5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	6
6	Total number of volunteers (estimate if necessary)	6	0
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	1,916,542.	1,576,182.
9	Program service revenue (Part VIII, line 2g)	0.	0.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	119,456.	83,109.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<430,698.>	<83,243.>
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,605,300.	1,576,048.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	366,295.	190,712.
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)	518,571.	513,683.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 142,873.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	751,461.	599,020.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,636,327.	1,303,415.
19	Revenue less expenses. Subtract line 18 from line 12	<31,027.>	272,633.

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	3,444,941.	3,715,160.
21	Total liabilities (Part X, line 26)	293,430.	214,019.
22	Net assets or fund balances. Subtract line 21 from line 20	3,151,511.	3,501,141.

RECEIVED
APR 30 2012
OGDEN, UTAH

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

▶ Signature of officer — Date: 4/30/12

▶ SCOTT CHRISTENSEN, PRESIDENT & CEO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
ROBERT J. ROSENBERG CPA	Robert J. Rosenberg CPA	4/24/12		P01378729

Firm's name ▶ ROSENBERG ZACH & COMPANY LLP — Firm's EIN ▶ 11-3663451

Firm's address ▶ 881 ALLWOOD ROAD SUITE 202
CLIFTON, NJ 07012 — Phone no. (973) 773-1129

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 [X]

1 Briefly describe the organization's mission:

THE GLAUCOMA FOUNDATION IS A NATIONAL NOT-FOR-PROFIT ORGANIZATION DEDICATED TO ERADICATING GLAUCOMA, THE LEADING CAUSE OF PREVENTABLE BLINDNESS. THE STRATEGY TO ACHIEVE THIS GOAL IS TWO-FOLD: RAISE PUBLIC

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 [X] 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 [X] 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 $ 592,462. including grants of $ _____) (Revenue $ _____)

PUBLIC EDUCATION - SEE FOOTNOTE #1 OF NOTES TO YEAR ENDED 2011 FINANCIAL STATEMENTS

4b (Code _____) (Expenses $ 514,855. including grants of $ 190,712.) (Revenue $ _____)

RESEARCH PROGRAM - SEE STATEMENTS 8&9 AND FOOTNOTE #1 OF NOTES TO YEAR ENDED 2011 FINANCIAL STATEMENTS

4c (Code _____) (Expenses $ _____ including grants of $ _____) (Revenue $ _____)

4d Other program services (Describe in Schedule O)

(Expenses $ _____ including grants of $ _____) (Revenue $ _____)

4e **Total program service expenses** ▶ 1,107,317.

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	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors*?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
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	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		X
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional*	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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, Parts I and IV*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? *If "Yes," complete Schedule F, Parts II and IV*	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? *If "Yes," complete Schedule F, Parts III and IV*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17	X	
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	X	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	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 any government or organization in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	X	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25*	24a		X
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		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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		X
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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

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	2		
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			
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	6		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X	
	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			X
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, securities account, or other financial account)?	4a			X
b	If "Yes," enter the name of the foreign country. ▶ _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			X
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			X
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		X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			X
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			X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			X
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?	13a			
	Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			X
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 line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.*

Check if Schedule O contains a response to any question in this Part VI [X]

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 *If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.*	1a	29		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	29		
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			X
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			X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6	Did the organization have members or stockholders?	6			X
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			X
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			X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		X	
b	Each committee with authority to act on behalf of the governing body?	8b		X	
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			X

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	X	
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	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
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		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
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	X	
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	15b	X	
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		X
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 ▶NY, CA, IL, IN, MD, VA, MA, NJ, PA, WI, WY, MI

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

[X] Own website [ ] Another's website [X] 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 during the tax year

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

THE GLAUCOMA FOUNDATION INC. - 212-285-0080
80 MAIDEN LANE SUITE 700, NEW YORK, NY 10038

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (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			
(1) SCOTT CHRISTENSEN PRES & CEO,	40.00			X				230,000.	0.	18,446.
(2) NILDA L. RICHARDS CONTROLLER & ASST TREASURE	40.00			X				86,445.	0.	13,137.

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 (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			
1b Sub-total ▶								316,445.	0.	31,583.
c Total from continuation sheets to Part VII, Section A ▶								0.	0.	0.
d Total (add lines 1b and 1c) ▶								316,445.	0.	31,583.

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 ▶ 1

		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		X
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	X	
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		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization 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
NONE		

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 ▶ 0

Part VIII Statement of Revenue

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns 1a				
	b Membership dues 1b				
	c Fundraising events 1c 284,036.				
	d Related organizations 1d				
	e Government grants (contributions) 1e				
	f All other contributions, gifts, grants, and similar amounts not included above 1f 1292146.				
	g Noncash contributions included in lines 1a-1f $ 73,938.				
	h Total. Add lines 1a-1f ▶	1576182.			
Program Service Revenue		Business Code			
	2a				
	b				
	c				
	d				
	e				
	f All other program service revenue				
	g Total. Add lines 2a-2f ▶				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶	47,892.			47,892.
	4 Income from investment of tax-exempt bond proceeds ▶				
	5 Royalties ▶				
		(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	353241.			
	b Less. cost or other basis and sales expenses	318024.			
	c Gain or (loss)	35,217.			
	d Net gain or (loss) ▶	35,217.			35,217.
	8a Gross income from fundraising events (not including $ 284,036. of contributions reported on line 1c). See Part IV, line 18 a	99,575.			
	b Less: direct expenses b	182818.			
	c Net income or (loss) from fundraising events ▶	<83,243.>			<83,243.>
	9a Gross income from gaming activities. See Part IV, line 19 a				
	b Less. direct expenses b				
	c Net income or (loss) from gaming activities ▶				
	10a Gross sales of inventory, less returns and allowances a				
	b Less: cost of goods sold b				
	c Net income or (loss) from sales of inventory ▶				
	Miscellaneous Revenue	Business Code			
	11a				
	b				
	c				
	d All other revenue				
	e Total. Add lines 11a-11d ▶				
	12 Total revenue See instructions. ▶	1576048.	0.	0.	<134.>

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	122,212.	122,212.		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	68,500.	68,500.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	360,573.	318,918.	28,846.	12,809.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	120,172.	104,549.	9,614.	6,009.
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	32,938.	28,522.	2,635.	1,781.
10	Payroll taxes				
11	Fees for services (non-employees):				
a	Management				
b	Legal				
c	Accounting	22,009.	19,148.	1,761.	1,100.
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	81,834.	71,196.	6,547.	4,091.
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,451.	1,262.	116.	73.
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a	DIRECT MAIL	144,300.	72,150.		72,150.
b	OPTIC NERVE THINK TANK	104,780.	104,780.		
c	FUNDRAISING CONSULTANTS	80,372.	40,186.		40,186.
d	PUBLICATIONS	53,681.	53,681.		
e	All other expenses	110,593.	102,213.	3,706.	4,674.
25	**Total functional expenses** Add lines 1 through 24e	1,303,415.	1,107,317.	53,225.	142,873.
26	**Joint costs** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

			(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing	251,983.	1	310,763.
	2	Savings and temporary cash investments	409,489.	2	419,108.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	82,780.	4	82,863.
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	19,857.	9	14,793.
	10a	Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D — 10a: 73,052.			
	b	Less accumulated depreciation — 10b: 70,812.	2,627.	10c	2,240.
	11	Investments - publicly traded securities	2,650,409.	11	2,857,597.
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	27,796.	15	27,796.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	3,444,941.	16	3,715,160.
Liabilities	17	Accounts payable and accrued expenses	225,471.	17	149,227.
	18	Grants payable	64,994.	18	62,667.
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	2,965.	25	2,125.
	26	**Total liabilities.** Add lines 17 through 25	293,430.	26	214,019.
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	382,144.	27	488,999.
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets	2,769,367.	29	3,012,142.
		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	3,151,511.	33	3,501,141.
	34	Total liabilities and net assets/fund balances	3,444,941.	34	3,715,160.

Form **990** (2011)

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI [X]

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,576,048.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,303,415.
3	Revenue less expenses Subtract line 2 from line 1	3	272,633.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,151,511.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	76,997.
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	3,501,141.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII [X]

			Yes	No
1	Accounting method used to prepare the Form 990. [ ] Cash [X] 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		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	2c	X	
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. [X] Separate basis [ ] Consolidated basis [ ] Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		X
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		

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization	Employer identification number
THE GLAUCOMA FOUNDATION, INC.	13-3174839

Part I Reason for Public Charity Status (All organizations must complete this part) See instructions

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

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II)

9 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Other

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

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

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

		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 supported organization?	11g(i)	
(ii)	A family member of a person described in (i) above?	11g(ii)	
(iii)	A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	

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? Yes	(iv) No	(v) Did you notify the organization in col. (i) of your support? Yes	(v) No	(vi) Is the organization in col. (i) organized in the U.S.? Yes	(vi) No	(vii) Amount of support
Total									

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 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.")	2,050,653.	1,713,183.	1,636,751.	1,916,542.	1,576,182.	8,893,311.
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	2,050,653.	1,713,183.	1,636,751.	1,916,542.	1,576,182.	8,893,311.
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)						1,677,917.
6 **Public support.** Subtract line 5 from line 4						7,215,394.

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	2,050,653.	1,713,183.	1,636,751.	1,916,542.	1,576,182.	8,893,311.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	53,219.	59,979.	34,756.	41,811.	47,892.	237,657.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 **Total support.** Add lines 7 through 10						9,130,968.

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 section 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	79.02 %
15 Public support percentage from 2010 Schedule A, Part II, line 14	15	76.35 %

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 a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10% -facts-and-circumstances test - 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 Section 509(a)(2)

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 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 section 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 ▶ ☐

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 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
THE GLAUCOMA FOUNDATION, INC.

Employer identification number
13-3174839

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
- ☐ Preservation of land for public use (e g , recreation or education)
- ☐ Protection of natural habitat
- ☐ Preservation of open space
- ☐ Preservation of an historically important land area
- ☐ Preservation of a certified historic structure

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

		Held at the End of the Tax Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

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

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

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

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

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

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

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

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

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

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

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

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

(ii) Assets included in Form 990, Part X ▶ $ _____

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

a Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

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

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

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

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

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

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

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

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

		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	2,769,367.	2,249,240.	1,720,576.	2,952,410.	
b Contributions	242,775.	505,355.	401,109.	600,078.	
c Net investment earnings, gains, and losses	209,103.	420,610.	510,381.	<1,416,954.>	
d Grants or scholarships	160,013.	366,295.	354,093.	367,153.	
e Other expenditures for facilities and programs					
f Administrative expenses	49,090.	39,543.	28,733.	47,805.	
g End of year balance	3,012,142.	2,769,367.	2,249,240.	1,720,576.	

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ▶ _____ %
b Permanent endowment ▶ 100.00 %
c Temporarily restricted endowment ▶ _____ %

The percentages in lines 2a, 2b, and 2c should equal 100%

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)		X
(ii) related organizations — 3a(ii)		X
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				
e Other		73,052.	70,812.	2,240.
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				2,240.

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶		

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

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

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

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

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

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	CHARITABLE GIFT ANNUITY	2,125.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
(11)		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶		2,125.

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

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,576,048.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,303,415.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	272,633.
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	<49,090.>
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	126,087.
9	Total adjustments (net). Add lines 4 through 8	9	76,997.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	349,630.

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	1,835,863.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains on investments	2a	157,496.		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d	<31,409.>		
e	Add lines 2a through 2d			2e	126,087.
3	Subtract line 2e from line 1			3	1,709,776.
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	49,090.		
b	Other (Describe in Part XIV)	4b	<182,818.>		
c	Add lines 4a and 4b			4c	<133,728.>
5	Total revenue. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 12.)*			5	1,576,048.

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

1	Total expenses and losses per audited financial statements			1	1,303,415.
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			
e	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	1,303,415.
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	0.
5	Total expenses. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 18.)*			5	1,303,415.

Part XIV Supplemental Information

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

PART X, LINE 2: FIN 48 LIABILITY - PER AUDITED F/S NOTE 2F IS ZERO

PART XI, LINE 8 - OTHER ADJUSTMENTS:

UNREALIZED GAIN ON INVESTMENTS	157,496.
GAAP ADJUSTMENT CAPITAL GAINS	-31,409.
TOTAL TO SCHEDULE D, PART XI, LINE 8	126,087.

Part XIV Supplemental Information *(continued)*

PART XII, LINE 2D: GAAP ADJUSTMENT TO REALIZED GAIN $(31,409)

PART XII, LINE 4B: FUNDRAISING EXPENSES $(182,818)

PART V, LINE 4: THE ORGANIZATIONS ENDOWMENT FUNDS ARE INTENDED TO BE USED FOR MEDICAL RESEARCH GRANTS

SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization

THE GLAUCOMA FOUNDATION, INC.

Employer identification number

13-3174839

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☒ No

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
3 a Sub-total	0	0			0.
b Total from continuation sheets to Part I	0	0			0.
c **Totals** (add lines 3a and 3b)	0	0			0.

LHA **For Paperwork Reduction Act Notice, see the Instructions for Form 990.** **Schedule F (Form 990) 2011**

132071
01-23-12

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than $5,000 Check this box if no one recipient received more than $5,000 ▶ ☐

Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		GERMANY	MEDICAL RESEARCH	10,000.	CHECK	0.		
		NORTH AMERICA - CANADA AND MEXICO, BUT	MEDICAL RESAERCH	12,500.	CHECK	0.		
		HONG KONG	MEDICAL RESEARCH	10,000.	CHECK	0.		
		ITALY	MEDICAL RESEARCH	36,000.	CHECK	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ 4

3 Enter total number of other organizations or entities ▶

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed

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

Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*	☐ Yes	☒ No
2	Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)*	☐ Yes	☒ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)*	☐ Yes	☒ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)*	☐ Yes	☒ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U S Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)*	☐ Yes	☒ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)*	☐ Yes	☒ No

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

THE GLAUCOMA FOUNDATION, INC.

Employer identification number

13-3174839

Part I **Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17 Form 990-EZ filers are not required to complete this part.

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

a [X] Mail solicitations
b [ ] Internet and email solicitations
c [ ] Phone solicitations
d [ ] In-person solicitations
e [ ] Solicitation of non-government grants
f [ ] Solicitation of government grants
g [X] Special fundraising events

2 a 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? [X] 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.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	(iii) 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
SANKY COMMUNICATIONS, INC. - 589 EIGHT AVENUE, NEW YORK,	DIRECT MAIL PROGRAM CONSULTANT		X	383,611.	80,372.	303,239.
Total				383,611.	80,372.	303,239.

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

AL,AK,AZ,AR,CA,CO,CT,DE,FL,GA,HI,ID,IL,IN,IA,KS,KY,LA,ME,MD,MA,MI,MN,MS,MO
MT,NE,NV,NH,NJ,NM,NY,NC,ND,OH,OK,OR,PA,RI,SC,SD,TN,TX,UT,VT,VA,WA,WV,WI,WY

SEE PART IV FOR CONTINUATIONS

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b List events with gross receipts greater than $5,000.

		(a) Event #1 BLACK & WHITE BALL (event type)	(b) Event #2 (event type)	(c) Other events NONE (total number)	(d) Total events (add col (a) through col. (c))
Revenue	1 Gross receipts	383,611.			383,611.
	2 Less: Charitable contributions	284,036.			284,036.
	3 Gross income (line 1 minus line 2)	99,575.			99,575.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes	41,175.			41,175.
	6 Rent/facility costs	20,239.			20,239.
	7 Food and beverages	58,400.			58,400.
	8 Entertainment				
	9 Other direct expenses	63,004.			63,004.
	10 Direct expense summary Add lines 4 through 9 in column (d)			▶	(182,818.)
	11 Net income summary. Combine line 3, column (d), and line 10			▶	<83,243.>

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 Noncash 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 line 1, column d, and line 7			▶	

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 Enter 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 of the third party.

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 to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: SANKY COMMUNICATIONS, INC.

(I) ADDRESS OF FUNDRAISER: 589 EIGHT AVENUE, NEW YORK, NY 10018

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
THE GLAUCOMA FOUNDATION, INC.

Employer identification number
13-3174839

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? [X] 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 Part II can be duplicated if additional space is needed ▶ [ ]

1 (a) Name and address of organization or government	(b) EIN	(c) IRC 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
KATALIN CSISZAR PHD UNIVERSITY OF HAWAII - 2530 DOLE ST - HONOLULU, HI 96822			9,994.	0.			
DEEPAK SHULA PHD UNIVERSITY OF CHICAGO - MAIN ST - CHICAGO, IL 60612			12,500.	0.			
YUTAO LIU PHD DUKE UNIVERSITY 2200 MAIN ST DURHAM, NC 27708			10,000.	0.			
BRUCE KASANDER PHD SCHEPENS EYE RESEARCH INST HARVAED MED SCHOOL - 20 STANIFORD ST - BOSTON, MA 02114			10,000.	0.			
ANUJ CHAUHAN UNIVERSITY OF FLORIDA P.O. BOX 116005 GAINESVILLE, FL 32611			30,000.	0.			
DEBORAH C OTTENSON PHD UNIVERSITY F HOUSTON - 505 J DAVIS ARMISTED BLDG - HOUSTON, TX 77204			10,000.	0.			

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 8.

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

LHA **For Paperwork Reduction Act Notice, see the Instructions for Form 990.**

Schedule I (Form 990) (2011)

132101 01-27-12

Part II **Continuation of Grants and Other Assistance to Governments and Organizations in the United States** (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC 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
S. KOUTSOPOULOS MD SOLUTION LABS 24 THORNDIKE ST CAMBRIDGE, MA 02141			10,000.	0.			
JORGE GHISO PHD NYU SCHOOL OF MEDICINE - 550 FIRST AVENUE - NEW YORK, NY 10016			30,000.	0.			
REIMBURSED GRANTS DUKE UNIVERSITY			<282.>	0.			

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
Part III can be duplicated 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

PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS:

RECIPIENTS MUST SUBMIT ANNUAL REPORTS SHOWING PROGRESS AND EXPENDITURES.

SCHEDULE J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization

THE GLAUCOMA FOUNDATION, INC.

Employer identification number

13-3174839

Part I Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
	☐ First-class or charter travel ☐ Housing allowance or residence for personal use		
	☐ Travel for companions ☐ Payments for business use of personal residence		
	☐ Tax indemnification and gross-up payments ☒ Health or social club dues or initiation fees		
	☐ Discretionary spending account ☐ Personal services (e.g , maid, chauffeur, chef)		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b		X
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		X
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director. Explain in Part III.		
	☐ 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		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b		X
c	Participate in, or receive payment from, an equity-based compensation arrangement? 4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.		
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of.		
a	The organization? 5a		X
b	Any related organization? 5b		X
	If "Yes" to line 5a or 5b, describe in Part III.		
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of·		
a	The organization? 6a		X
b	Any related organization? 6b		X
	If "Yes" to line 6a or 6b, describe in Part III.		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III 8		X
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 duplicate copies if additional space is needed

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

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts 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 as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 SCOTT CHRISTENSEN	(i)	230,000.	0.	0.	6,900.	11,546.	248,446.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2	(i)							
	(ii)							
3	(i)							
	(ii)							
4	(i)							
	(ii)							
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

PART I, LINE 1B: BASIC GYM MEMBERSHIP PROVIDED FOR ALL EMPLOYEES IF THEY CHOOSE TO PARTICIPATE.

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶ Complete if the organizations 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: THE GLAUCOMA FOUNDATION, INC.

Employer identification number: 13-3174839

Part I Types of Property

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash 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	X	3	73,938.	SALES PROCEEDS
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 ▶ ( )				
26	Other ▶ ( )				
27	Other ▶ ( )				
28	Other ▶ ( )				

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?		X
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?		X
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b	If "Yes," describe in Part II		
33	If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II		

SCHEDULE O
(Form 990 or 990-EZ)
Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047
2011
Open to Public Inspection

Name of the organization: THE GLAUCOMA FOUNDATION, INC.

Employer identification number: 13-3174839

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

AWARENESS CONCERNING THE NECESSITY OF ROUTINE EYE EXAMS, AND FUND CRITICAL RESEARCH TO FIND CURES FOR GLAUCOMA.

FORM 990, PART VI, SECTION B, LINE 11: THE CHIEF EXECUTIVE OFFICER AND THE ASSISTANT TREASURER REVIEW THE FORM 990 BEFORE IT IS FILED.

FORM 990, PART VI, SECTION B, LINE 15: BOARD DETERMINATION

FORM 990, PART VI, SECTION C, LINE 19: FINANCIAL STATEMENTS AND GOVERNING DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC THROUGH THE ORGANIZATION'S WEBSITE AND UPON DIRECT REQUEST.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

INVESTMENT EXPENSES:	-49,090.
UNREALIZED GAIN ON INVESTMENTS	157,496.
GAAP ADJUSTMENT CAPITAL GAINS	-31,409.
TOTAL TO FORM 990, PART XI, LINE 5	76,997.

FORM 990, PAGE 12, QUESTION #2C

TWO BOARD MEMBERS ARE CERTIFIED PUBLIC ACCOUNTANTS AND ARE RESPONSIBLE FOR SELECTING THE INDEPENDENT ACCOUNTANT. THE PROCEDURE HAS NOT CHANGED FROM PRIOR YEARS.

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
43	SOFTWARE	05 29 98	200DB	5.00	17	31,947.			31,947.	31,947.		0.
44	COMPUTER	07 07 04	200DB	5.00	17	16,556.			16,556.	16,556.		0.
45	DESKS	11 09 04	200DB	5.00	17	2,220.			2,220.	2,220.		0.
46	MONITORS	11 12 04	200DB	5.00	17	498.			498.	498.		0.
47	COMPUTER EQUIPMENT	12 30 04	200DB	5.00	17	1,417.			1,417.	1,417.		0.
48	PRINTER	03 16 05	200DB	5.00	17	1,188.			1,188.	1,188.		0.
49	EQUIPMENT	08 23 05	200DB	5.00	17	596.			596.	596.		0.
50	PRINTER	12 30 05	200DB	5.00	17	400.			400.	400.		0.
51	SOFTWARE	08 23 05	200DB	5.00	17	601.			601.	601.		0.
52	SOFTWARE	02 22 00	200DB	5.00	17	775.			775.	775.		0.
53	SOFTWARE	07 01 06	200DB	5.00	17	1,091.			1,091.	1,028.		63.
54	COMPUTER EQUIPMENT	07 01 06	200DB	5.00	17	3,495.			3,495.	3,294.		201.
55	COMPUTER HARDWARE	07 01 07	200DB	5.00	17	1,965.			1,965.	1,625.		226.
56	SOFTWARE	07 01 07	200DB	5.00	17	2,165.			2,165.	1,791.		249.
57	COMPUTER EQUIPMENT	07 01 08	200DB	5.00	17	1,892.		946.	946.	657.		116.
58	COMPUTER EQUIPMENT SERVICE UPGRADE	10 17 08	200DB	5.00	17	3,487.		1,744.	1,743.	1,146.		238.
59	COMPUTER	04 27 09	200DB	5.00	17	1,695.			1,695.	932.		305.
60	COMPUTER	10 11 11	200DB	5.00	19B	1,064.			1,064.			53.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

FORM 990 PAGE 10 990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	* TOTAL 990 PAGE 10 DEPR					73,052.		2,690.	70,362.	66,671.	0.	1,451.

128102
05-01-11

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property) 990

▶ See separate instructions. ▶ Attach to your tax return.

OMB No 1545-0172

2011

Attachment Sequence No **179**

Name(s) shown on return	Business or activity to which this form relates	Identifying number
THE GLAUCOMA FOUNDATION, INC.	FORM 990 PAGE 10	13-3174839

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

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

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

7	Listed property. Enter the amount from line 29	7		
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7		8	
9	Tentative deduction Enter the **smaller** of line 5 or line 8		9	
10	Carryover of disallowed deduction from line 13 of your 2010 Form 4562		10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5		11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11		12	
13	Carryover of disallowed deduction to 2012. Add lines 9 and 10, less line 12 ▶	13		

Note: *Do not use Part II or Part III below for listed property. Instead, use Part V.*

Part II **Special Depreciation Allowance and Other Depreciation (Do not include listed property)**

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

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

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2011	17	1,398.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ ☐		

Section B - Assets Placed in Service During 2011 Tax Year Using the General Depreciation System

	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property						
b	5-year property		1,064.	5 YRS.	MQ	200DB	53.
c	7-year property						
d	10-year property						
e	15-year property						
f	20-year property						
g	25-year property			25 yrs		S/L	
h	Residential rental property	/		27.5 yrs	MM	S/L	
		/		27.5 yrs	MM	S/L	
i	Nonresidential real property	/		39 yrs	MM	S/L	
		/			MM	S/L	

Section C - Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System

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

Part IV **Summary** (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	**Total.** Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr	22	1,451.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V **Listed Property** (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement)

Note: *For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete* **only** *24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.*

Section A - Depreciation and Other Information (Caution: *See the instructions for limits for passenger automobiles.*)

24a Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No | 24b If "Yes," is the evidence written? ☐ Yes ☐ No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use						25		
26 Property used more than 50% in a qualified business use								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use:								
		%				S/L -		
		%				S/L -		
		%				S/L -		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1						28		
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1							29	

Section B - Information on Use of Vehicles

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

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

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

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

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

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

Part VI **Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2011 tax year:					
43 Amortization of costs that began before your 2011 tax year				43	
44 **Total.** Add amounts in column (f). See the instructions for where to report				44	

- CURRENT YEAR FEDERAL - THE GLAUCOMA FOUNDATION, INC.

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
43	SOFTWARE	05 29 98	200DB	5.00	17	31,947.			31,947.	31,947.		0.
44	COMPUTER	07 07 04	200DB	5.00	17	16,556.			16,556.	16,556.		0.
45	DESKS	11 09 04	200DB	5.00	17	2,220.			2,220.	2,220.		0.
46	MONITORS	11 12 04	200DB	5.00	17	498.			498.	498.		0.
47	COMPUTER EQUIPMENT	12 30 04	200DB	5.00	17	1,417.			1,417.	1,417.		0.
48	PRINTER	03 16 05	200DB	5.00	17	1,188.			1,188.	1,188.		0.
49	EQUIPMENT	08 23 05	200DB	5.00	17	596.			596.	596.		0.
50	PRINTER	12 30 05	200DB	5.00	17	400.			400.	400.		0.
51	SOFTWARE	08 23 05	200DB	5.00	17	601.			601.	601.		0.
52	SOFTWARE	02 22 00	200DB	5.00	17	775.			775.	775.		0.
53	SOFTWARE	07 01 06	200DB	5.00	17	1,091.			1,091.	1,028.		63.
54	COMPUTER EQUIPMENT	07 01 06	200DB	5.00	17	3,495.			3,495.	3,294.		201.
55	COMPUTER HARDWARE	07 01 07	200DB	5.00	17	1,965.			1,965.	1,625.		226.
56	SOFTWARE	07 01 07	200DB	5.00	17	2,165.			2,165.	1,791.		249.
57	COMPUTER EQUIPMENT	07 01 08	200DB	5.00	17	1,892.		946.	946.	657.		116.
58	COMPUTER EQUIPMENT SERVICE UPGRADE	10 17 08	200DB	5.00	17	3,487.		1,744.	1,743.	1,146.		238.
59	COMPUTER	04 27 09	200DB	5.00	17	1,695.			1,695.	932.		305.
60	COMPUTER	10 11 11	200DB	5.00	19B	1,064.			1,064.			53.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2011 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - THE GLAUCOMA FOUNDATION, INC.

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	* TOTAL 990 PAGE 10 DEPR					73,052.		2,690.	70,362.	66,671.	0.	1,451.

128102
05-01-11

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

THE GLAUCOMA FOUNDATION, INC.

FINANCIAL STATEMENTS

DECEMBER 31, 2011 AND 2010

ROSENBERG ZACH & COMPANY LLP
CERTIFIED PUBLIC ACCOUNTANTS

THE GLAUCOMA FOUNDATION, INC.
DECEMBER 31, 2011 AND 2010

CONTENTS

ROSENBERG ZACH & COMPANY LLP
Certified Public Accountants

INDEPENDENT AUDITORS' REPORT

To the Board of Directors
The Glaucoma Foundation, Inc.
New York, New York 10038

We have audited the accompanying statements of financial position of The Glaucoma Foundation, Inc. (a non-profit organization) as of December 31, 2011 and 2010 and the related statements of activities and cash flows for the years then ended, and statement of functional expenses for the year ended December 31, 2011 with comparative totals for the year ended December 31, 2010. These financial statements are the responsibility of the Foundation's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of The Glaucoma Foundation, Inc. as of December 31, 2011 and 2010 and changes in net assets and cash flows for the years then ended and functional expenses for the year ended December 31, 2011 in conformity with accounting principles generally accepted in the United States of America.

ROSENBERG ZACH & COMPANY LLP
Rosenberg Zach & Company LLP

Clifton, New Jersey
March 9, 2012

881 Allwood Road, Suite 202, Clifton, New Jersey 07012
Telephone: 973-773-1129 • Fax: 973-773-1139

THE GLAUCOMA FOUNDATION, INC.
STATEMENTS OF FINANCIAL POSITION
DECEMBER 31, 2011 AND 2010

	2011	2010
ASSETS		
CURRENT ASSETS		
Cash and cash equivalents	$ 575,326	$ 542,514
Accounts receivable	82,863	82,780
Prepaid expense	14,793	19,857
Total current assets	672,982	645,151
EQUIPMENT, NET	2,240	2,627
OTHER ASSETS		
Assets restricted for permanent endowments		
Cash	20,550	33,746
Investments - equity securities	2,857,597	2,650,409
Investments - money market	133,995	85,212
	3,012,142	2,769,367
Security deposit	27,796	27,796
Total other assets	3,039,938	2,797,163
TOTAL ASSETS	$3,715,160	$3,444,941
LIABILITIES AND NET ASSETS		
CURRENT LIABILITIES		
Accounts payable and accrued expenses	$ 149,227	$ 225,471
Grants payable	62,667	64,994
Charitable gift annuity-current portion	840	840
Total current liabilities	212,734	291,305
LONG-TERM LIABILITIES		
Charitable gift annuity-long term portion	1,285	2,125
TOTAL LIABILITIES	214,019	293,430
NET ASSETS		
Unrestricted	488,999	382,144
Permanently restricted	3,012,142	2,769,367
Total net assets	3,501,141	3,151,511
TOTAL LIABILITIES AND NET ASSETS	$3,715,160	$3,444,941

The accompanying notes are an integral part of the financial statements.
See Auditors' Report.

THE GLAUCOMA FOUNDATION, INC.
STATEMENTS OF ACTIVITIES
FOR THE YEARS ENDED DECEMBER 31, 2011 AND 2010

	2011				2010			
	Unrestricted	Temporarily Restricted	Permanently Restricted	2011 Totals	Unrestricted	Temporarily Restricted	Permanently Restricted	2010 Totals
Revenue								
Support, contributions, and other revenue								
Individual and corporate donations	$1,291,906	$ —	$ 240	**$1,292,146**	$1,550,534	$ —	$ 39,914	**$1,590,448**
Fundraising benefit	383,611	—	—	**383,611**	444,740	—	—	**444,740**
Board designated restrictions	(242,535)	—	242,535	—	(480,213)	—	480,213	—
Net assets released from restrictions	—	—	—	—	—	—	—	—
Total support, contributions, and other revenue	1,432,982	—	242,775	**1,675,757**	1,515,061	—	520,127	**2,035,188**
Investment income								
Interest and dividend income	47,892	—	—	**47,892**	41,811	—	—	**41,811**
Investment management fees	(49,090)	—	—	**(49,090)**	(39,543)	—	—	**(39,543)**
Net unrealized and realized gains (losses) on investments	161,304	—	—	**161,304**	378,799	—	—	**378,799**
Total investment income	160,106	—	—	**160,106**	381,067	—	—	**381,067**
Total revenue	1,593,088	—	242,775	**1,835,863**	1,896,128	—	520,127	**2,416,255**
Expenses								
Operating expenses								
Program services	1,107,317	—	—	**1,107,317**	1,381,769	—	—	**1,381,769**
Management and general	53,225	—	—	**53,225**	53,535	—	—	**53,535**
Fundraising	142,873	—	—	**142,873**	201,023	—	—	**201,023**
Total operating expenses	1,303,415	—	—	**1,303,415**	1,636,327	—	—	**1,636,327**
Fundraising benefit expenses	182,818	—	—	**182,818**	223,250	—	—	**223,250**
Total expenses	1,486,233	—	—	**1,486,233**	1,859,577	—	—	**1,859,577**
Change in net assets	106,855	—	242,775	**349,630**	36,551	—	520,127	**556,678**
Net assets, beginning of year	382,144	—	2,769,367	**3,151,511**	345,593	—	2,249,240	**2,594,833**
Net assets, end of year	$ 488,999	$ —	$3,012,142	**$3,501,141**	$ 382,144	—	$2,769,367	**$3,151,511**

The accompanying notes are an integral part of the financial statements.
See Auditors' Report.

THE GLAUCOMA FOUNDATION, INC.
SUPPLEMENTARY INFORMATION
STATEMENT OF FUNCTIONAL EXPENSES
FOR THE YEAR ENDED DECEMBER 31, 2011 (WITH SUMMARIZED INFORMATION IN TOTAL FOR 2010)

	Education Program	Medical Research Program	Total Program Services	Management and General	Fundraising	2011 Total Expenses	2010 Total Expenses
Salaries, payroll taxes and employee benefits	$ 295,342	$ 156,647	$ 451,989	$ 41,095	$ 20,599	$ 513,683	$ 518,571
Research grants	—	190,712	190,712	—	—	190,712	366,295
Publications	53,681	—	53,681	—	—	53,681	79,630
Optic Nerve Think Tank	—	104,780	104,780	—	—	104,780	117,475
Community outreach	26,774	6,694	33,468	—	—	33,468	30,618
Direct mail	72,150	—	72,150	—	72,150	144,300	254,120
Fundraising consultants	40,186	—	40,186	—	40,186	80,372	86,500
Conventions and travel	8,196	8,196	16,392	—	—	16,392	22,021
Personnel recruiting and advertising	5,722	—	5,722	—	—	5,722	4,838
Occupancy	45,009	26,187	71,196	6,547	4,091	81,834	78,646
Computer and internet expense	2,664	1,550	4,214	387	242	4,843	4,904
Professional fees	12,105	7,043	19,148	1,761	1,100	22,009	20,797
Office, insurance, telephone, equipment rental, messengers, and miscellaneous expenses	23,510	12,582	36,092	3,319	2,074	41,485	43,991
State filing fees	2,358	—	2,358	—	2,358	4,716	4,459
Depreciation expense	798	464	1,262	116	73	1,451	2,263
Chapter expenses	3,967	—	3,967	—	—	3,967	1,199
Total expenses other than personnel expenses	297,120	358,208	655,328	12,130	122,274	789,732	1,117,756
Total expenses FYE 12/31/11	**$592,462**	**$514,855**	**$1,107,317**	**$53,225**	**$142,873**	**$ 1,303,415**	**$ —**
Total expenses FYE 12/31/10	**$675,358**	**$706,411**	**$1,381,769**	**$53,535**	**$201,023**	**$ —**	**$ 1,636,327**

The accompanying notes are an integral part of the financial statements.
See Auditors' Report.

THE GLAUCOMA FOUNDATION, INC.
STATEMENTS OF CASH FLOWS
YEARS ENDED DECEMBER 31, 2011 AND 2010

	2011	2010
CASH FLOWS FROM OPERATING ACTIVITIES		
Change in net assets	$ 349,630	$ 556,678
Adjustments to reconcile change in net assets to net cash provided (used) by operating activities:		
Depreciation	1,451	2,263
Net unrealized and realized (gains) losses on investments	(161,304)	(378,799)
Changes in assets and liabilities which provided (used) cash:		
Accounts receivable	(83)	21,977
Prepaid expense	5,064	3,476
Accounts payable and accrued expenses	(76,244)	22,108
Grants payable	(2,327)	(22,506)
Net cash provided by operating activities	116,187	205,197
CASH FLOWS FROM INVESTING ACTIVITIES		
Acquisition of equipment and computer software	(1,064)	—
Assets restricted for permanent endowment	(35,587)	(68,346)
Purchases of investments and reinvested dividends	(399,126)	(710,028)
Sales proceeds of investments	353,242	637,046
Net cash (used) by investing activities	(82,535)	(141,328)
CASH FLOWS FROM FINANCING ACTIVITIES		
Payments of charitable gift annuity	(840)	(840)
Net cash (used) by financing activities	(840)	(840)
Net increase in cash	32,812	63,029
Cash and cash equivalents, beginning of year	542,514	479,485
Cash and cash equivalents, end of year	$ 575,326	$ 542,514
Supplemental disclosure of cash flow information:		
Cash paid for interest	$ —	$ —
Cash paid for income taxes	$ —	$ —
Non-cash investing activities:		
Donated securities	$ 73,948	$ 58,105

The accompanying notes are an integral part of the financial statements
See Auditors' Report

NOTE 1. NATURE OF OPERATIONS

The Glaucoma Foundation, Inc. ('Foundation') is a not-for-profit organization, incorporated in New York State in 1984 and founded to stimulate and support basic and applied research in glaucoma, to gain and disseminate new information about the biological causes and treatment of glaucoma, and to identify and develop novel approaches to preserve visual function and reversal of blindness caused by glaucoma.

The major programs are described as follows:

Public education

To encourage routine eye examinations for everyone and in order to halt potential blindness from glaucoma, the Foundation provides free literature, a toll-free hotline and an internet website which includes an interactive e-mail based support group and public service announcements. In 2006, the foundation initiated chapters in various parts of the United States to disseminate educational material and promote the programs of the foundation.

Medical Research Program

The Foundation raises funds for research into the causes of glaucoma, improvement of existing methods of treatment, and development of cures. Currently, the research priorities are: optic nerve regeneration and molecular genetics. The Foundation hosts the Annual Scientific Think Tank on Optic Nerve Rescue and Restoration which brings together experts from around the world working in related - but different - disciplines, in order to provide creative insights into the mysteries of glaucoma.

NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

A summary of the significant accounting policies consistently applied in the preparation of the accompanying financial statements follows:

a. Financial Statement Presentation

The Foundation's financial statements are prepared in accordance with the provisions of FASB, "Financial Statements of Not-for-Profit Organizations" which establishes standards for general purpose, external financial statements of financial position, activities, cash flows, and functional expenses. It also requires that an organization's net assets and its revenues, expenses, gains and losses be classified based on the existence or absence of donor imposed restrictions.

The financial statements include certain prior-year summarized comparative information in total but not by net asset class. Such information does not include sufficient detail to constitute a presentation in conformity with generally accepted accounting principles. Accordingly, such information should be read in conjunction with the Foundation's financial statements for the year ended December 31, 2010.

b. Net Assets

All financial transactions have been recorded as either unrestricted, temporarily restricted or permanently restricted net assets:

- Unrestricted net assets consist of investments and otherwise unrestricted amounts that are available for use in carrying out the mission of the Foundation and include those expendable resources which have been designated for special use by the Board.

- Temporarily restricted net assets represent those amounts which are donor restricted for specific purposes. When a donor restriction expires, that is, when a stipulated time restriction ends or a purpose restriction is accomplished, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions.

- Permanently restricted net assets result from contributions from donors who place restrictions on the use of the funds which mandate that the original principal be invested in perpetuity. This original principal is reported as a permanently restricted net asset, the income from which may be either temporarily restricted or unrestricted, depending on the donor's specifications.

NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

c. Depreciation

Equipment is recorded at cost. Depreciation is calculated using the declining balance method based on the estimated useful lives of the respective assets. Additions are capitalized; routine expenditures for maintenance and repairs are expensed as incurred.

d. Contributions

The Foundation follows FASB "Accounting for Contributions Received and Contributions Made." In accordance with this standard, contributions received are recorded as unrestricted, temporarily restricted, or permanently restricted support depending on the existence and nature of any donor stipulations. Unconditional pledges receivable that are to be received in the future are time restricted and increase temporarily restricted net assets. When a donor stipulation expires or its purpose is accomplished, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions. Donor restricted contributions whose restrictions are met in the same reporting period are reported as unrestricted support.

e. Revenue

All gains and losses arising from the sale, collection or other disposition of investments are accounted for as unrestricted net assets. Interest and dividend income from investments are accounted for as unrestricted net assets.

f. Income Taxes

The Foundation is classified for tax purposes as a public charity organization under Section 501(c)(3) of the Internal Revenue Code. Accordingly, income taxes have not been provided for in the accompanying financial statements. In addition, the Foundation has been determined by the Internal Revenue Service not to be a private foundation within the meaning of section 509(a)(1) of the Code.

NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

In June 2006, the Financial Accounting Standards Board issued the interpretation, *Accounting for Uncertainty in Income Taxes*, which prescribed a comprehensive model for how an organization should measure, recognize, present, and disclose in its financial statements uncertain tax positions that the organization has taken or expects to take on a tax return. The Glaucoma Foundation, Inc. adopted this interpretation as of January 1, 2009 and, thereafter, recognized the tax benefits from uncertain tax positions only if it is more likely than not that the tax position will be sustained on examination by taxing authorities, based on the technical merits of the position. Using that guidance, as of December 31, 2011 and 2010, the organization has no uncertain tax positions that qualify for either recognition or disclosure in the financial statements.

g. Cash Equivalents

The Foundation considers certificates of deposits with a maturity of less than one year as cash equivalents.

h. Investments

The Foundation adopted FASB "Accounting for Certain Investments Held by Not - For - Profit Organizations." In accordance with this standard, all investments in equity securities with readily determinable fair values and investments in debt securities are recorded at fair value in the statement of financial position.

i. Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period. Actual results could differ from those estimates.

j. Subsequent Events

The organization has evaluated all subsequent events through March 9, 2012, the date the financial statements were available to be issued.

NOTE 3. EQUIPMENT

Equipment is stated at cost and consists of the following:

	2011	2010
Software	$ 36,579	$ 36,579
Equipment	36,473	35,409
Total	73,052	71,988
Less accumulated depreciation	70,812	69,361
	$ 2,240	$ 2,627

Depreciation expense for the years ended December 31, 2011 and 2010 amounted to $1,451 and $2,263, respectively.

NOTE 4. INVESTMENTS

Investments consist of the following:

	2011	2010
Marketable securities:		
Cost	$2,043,112	$ 1,962,011
Market	$2,857,597	$ 2,650,409

The following schedule summarizes unrealized and realized gains and losses on investments and classification in the statement of activities for the years ended December 31, 2011 and 2010:

	2011	2010
Interest and dividend income	$ 47,892	$ 41,811
Unrealized gains	157,496	405,267
Realized gains (losses)	3,808	(26,468)
Investment management fees	(49,090)	(39,543)
	$160,106	$381,067

NOTE 5. ENDOWMENT FUNDS

The Foundation's endowment consists of 3 donor-restricted funds, all three are established for use of the Foundation with restriction. As required by GAAP, net assets associated with endowment funds are classified and reported based on the existence or absence of donor-imposed restrictions, considering the laws of the state for endowment management. In New York, those laws are found in the New York Prudent Management of Institutional Funds Act (NYPMIFA) as enacted on September 17, 2010. NYPMIFA provides uniform and fundamental rules for the prudent investment of funds held by charitable institutions and the expenditure of funds donated as endowments. NYPMIFA requires that the donor intent be respected when the organization makes decisions with respect to either investing or spending from its endowment funds.

Interpretation of Relevant Law

The Board of Trustees of the Foundation has interpreted the law as requiring the preservation of the fair value of corpus of a donor-restricted endowment fund absent explicit donor stipulations to the contrary. As a result of this interpretation, the Foundation classifies as permanently restricted net assets (a) the original value of gifts donated to the permanent endowment, (b) the original value of any subsequent gifts to the permanent endowment, and (c) accumulations to the permanent endowment made in accordance with the direction of the applicable donor gift instrument at the time the accumulation is added to the fund. The Board of Trustees of the Foundation annually shall allocate unrestricted funds that approximate the endowment earnings for spending consistent with donor stipulations. The Board of Trustees has an investment policy that is consistent with the long-term preservation of the real value of the assets of the endowment.

NOTE 5. ENDOWMENT FUNDS (continued)

Changes in Endowment Net Assets for the Years Ended December 31,

	2011	2010
Endowment net assets, Beginning of Year	$2,769,367	$2,249,240
Contributions	240	39,914
Investment return:		
Investment income	47,799	41,811
Management advisory fees	(49,090)	(39,543)
Net appreciation (realized and unrealized)	161,304	378,799
Total investment return	160,013	381,067
Appropriation of assets for expenditure:		
Research grants	(160,013)	(366,295)
Net assets released from restriction per donor stipulation	-	(14,772)
	-	-
Board designated restrictions	242,535	480,213
Endowment net assets, End of Year	$3,012,142	$2,769,367

NOTE 6. FUND RAISING BENEFITS

The Foundation hosted fund raising benefits during the years ended December 31, 2011 and 2010. The revenue and expenses from the benefits were as follows:

2011	Revenue	Expenses	Net Revenue
Black & White Ball	$ 383,611	$ 182,818	$ 200,793

2010	Revenue	Expenses	Net Revenue
Black & White Ball	$ 444,740	$ 223,250	$ 221,490

In-kind contributions were donated for the above fund raising events and valued at their market price on date of donation. In-kind contributions received for the years ended December 31, 2011 and 2010 were recorded at $41,175 and $49,646, respectively.

NOTE 7. FUNCTIONAL ALLOCATION OF EXPENSES

The costs of providing the various programs and other activities have been summarized on a functional basis in the statement of activities. Accordingly, certain costs have been allocated among the programs and supporting services benefited. The statement of functional expenses is presented only for the year ended December 31, 2011, with comparative totals for the year ended December 31, 2010.

NOTE 8. NET ASSETS

a. Temporarily restricted

Temporarily restricted net assets at December 31, 2011 and 2010 are available for the following purposes:

2011	2010
$ —	$ —

b. Permanently restricted

Permanently restricted net assets as of December 31, 2011 and 2010 are restricted to investment in perpetuity, the income from which is available to ensure the long-term continuation of cutting-edge research programs and to guarantee the permanent financial health of The Glaucoma Foundation. The board of directors designated $242,535 of unrestricted net assets to become permanently restricted net assets in 2011. The Board of Directors designated $480,213 of unrestricted net assets to become permanently restricted net assets in 2010.

	2011	2010
Endowments	$3,012,142	$2,769,367

NOTE 9. PROMISES TO GIVE

Included in Accounts Receivable are the following unconditional promises to give:

	2011	2010
Unrestricted	$82,863	$82,780

NOTE 10. GRANTS PAYABLE

During 2011 and 2010, the Glaucoma Foundation, Inc. recorded grants payable for the medical research program. The grants are payable currently. At December 31, 2011 and 2010, grants payable amounted to $62,667 and $64,994 respectively.

NOTE 11. GIFT ANNUITY PAYABLE

On August 15, 2002, the Foundation received $10,000 to support the fight against glaucoma and was recognized as a charitable gift annuity payable. The Foundation is obligated to pay the donor for the donor's life, an annual annuity of $840 in quarterly payments of $210 that commenced October 1, 2002. The amount was computed using actuarial tables.

The required future annuity payments are as follows:

2012	$ 840
2013	840
2014	445
	$2,125

During 2011 and 2010, the Foundation made annual annuity payments of $840, respectively.

NOTE 12. FAIR VALUE MEASUREMENTS

The Foundation's financial instruments consist primarily of cash and cash equivalents, investments, accounts receivable, accounts payable and accrued expenses, grants payable, and charitable gift annuity.

The carrying value of cash and cash equivalents, accounts receivable, accounts payable, accrued expenses, and grants payable approximate their fair value due to the short-term nature of such instruments. The charitable gift annuity approximates its fair value due to its de minimus value.

NOTE 12. FAIR VALUE MEASUREMENTS (continued)

The Foundation's investments are reported at fair value in the accompanying statement of activities and changes in net assets.

	December 31, 2011 Equity Securities	December 31, 2010 Equity Securities
Fair Value	$2,857,597	$2,650,409
(Level 1) Quoted Prices in Active Markets for Identical Assets	$2,857,597	$2,650,409

FASB "*Fair Value Measurements*," establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices inactive markets for identical assets and have the highest priority, Level 2 inputs consist of observable inputs other than quoted prices for identical assets, and Level 3 inputs have the lowest priority. The Foundation uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments.

When available, the Foundation measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. No Level 2 or 3 inputs were used for the organization's investments.

Level 1 Fair Value Measurements
The fair value of equity securities is based on quoted net asset value of the shares held by the organization at year-end.

Gains and losses (realized and unrealized) included in changes in net assets for the years ended December 31, 2011 and 2010 are reported in the net appreciation or depreciation in fair value of the investments.

NOTE 13. CONCENTRATION OF CREDIT RISK

Financial instruments which potentially subject the Foundation to significant concentrations of credit risk consist principally of cash, revenue and pledges receivable.

The Foundation maintains its cash at one financial institution. Accounts at the institution are insured by the Federal Deposit Insurance Corporation up to $100,000. Effective October 2008 through December 30, 2010, accounts are insured up to $250,000. From December 31, 2010 through December 31, 2012, all noninterest bearing transaction accounts are fully insured, regardless of the account balance and ownership capacity of the funds. There were no uninsured amounts at December 31, 2011 and 2010 respectively. Cash, cash equivalents, and investments held in brokerage accounts are covered by the Securities Investor Protection Corporation (SIPC) in case a brokerage firm fails and assets are missing from customers' accounts.

Approximately 23% of the gross revenues for the year ended December 31, 2011 and approximately 22% of the gross revenues for the year ended December 31, 2010 was earned from one special event.

At December 31, 2011, over 12% of accounts receivable was due from one individual. At December 31, 2010, over 12% of accounts receivable was due from one individual.

For the year ended December 31, 2011, approximately, 58% of donations (including donations from fundraising event) were from twenty-four individuals and entities. For the year ended December 31, 2010, approximately 60% of donations (including donations from fundraising event) were from twenty-six individuals and entities.

NOTE 14. RETIREMENT PLAN

The Foundation participates in a retirement plan which is a Simple Savings Incentive Match Plan for the benefit of all eligible professional and support staff employees who qualify under applicable participation requirements. Fixed dollar contributions are remitted monthly to a trustee. Upon retirement, the vested benefit (full immediate vesting) will be distributed to each participant. Contributions made by the Foundation to the Plan amounted to $11,375 in 2011 and $12,685 in 2010.

NOTE 15. COMMITMENTS

a. Property lease

On August 5, 2004 the foundation entered into a lease agreement for office space effective November 1, 2004 for five years and 3 months (63 months) expiring in 2010.

On November 14, 2007, the Foundation entered into an agreement to amend the lease dated August 5, 2004. The Foundation agreed to vacate their office space and move within the same building to new office space. The landlord agreed to pay all moving costs of the Foundation and renovation costs of the new office space. In addition, the lease was extended for seven years from the date of occupancy of the new premises. The Foundation has the option to renew the lease for an additional five years after the expiration date in 2014.

Future minimum lease commitments under this operating lease are presented below:

2012	$ 78,907
2013	81,274
2014	83,713
	$243,894

Rent expense amounted to $78,485 and $75,636 for 2011 and 2010, respectively.

b. Equipment leases

The Foundation has entered into operating lease agreements to lease a copying machine and a postage machine. Effective August, 2008, the Foundation entered into a lease agreement for a copying machine which expired in November, 2011. On June 30, 2011, The Foundation entered into a copying machine lease agreement which expires in December 2014. On October 27, 2004 the postage machine lease was renewed for a period of five years expiring October 26, 2009. Since 2009, the postage machine is rented on a month-to-month basis.

Future minimum lease commitments under these operating leases are presented below:

2012	$ 5,028
2013	5,028
2014	5,028
	$ 15,084

Equipment lease expense for the years ended December 31, 2011 and 2010 amounted to $5,550 and $5,724, respectively.

The Glaucoma Foundation

Statement of Purpose/Mission Statement

The Glaucoma Foundation is an international not-for-profit organization dedicated to eradicating glaucoma, the leading cause of preventable blindness. The strategy to achieve this goal is two-fold: raise public awareness concerning the necessity of routine e ye exams, and fund critical research to find cures for glaucoma.

Program Activities

Medical Research: The Glaucoma Foundation awards grants-in-aid for glaucoma research in the following disciplines:

1. Optic Nerve Rescue and Restorations
   - Neuroprotectants and their role in glaucoma
   - Reversal of dysfunction of damaged retinal ganglion cells
   - Retinal ganglion cell axonal regeneration
   - Optic nerve transplantation
2. Molecular Genetics
   - Research into the genetic causes of the various forms of glaucoma, particularly the identification of the responsible genes, with the long-term goal of finding ways to reverse these genetic defects.
3. Nanotechnology
   - Research into the use of nanotechnology for monitoring IOP, diagnosing and monitoring damage to the optic nerve and delivering drugs and other therapies.

Grants are awarded for a one-year period and are renewable. The maximum amount of funds awarded for a one-year period is $40,000 per grantee. Researchers may also apply for a one-time expanded grant renewal up to $50,000 for a second year. Funds are not to be used for salaries, personnel support, overhead or other indirect costs. All requests for grants must be made in writing on The Foundation's application form and supporting documentation must include a description of the objectives, background, methodology, significance, any preliminary results, and budget for the project.

The Foundation also sponsors the annual Scientific Think Tank on Optic Nerve Rescue and Restoration, a worldwide collaboration of leading scientists and researchers pooling their efforts to seek a way to reverse optic nerve damage.

Public Education: The Glaucoma Foundation distributes the following publication on request to the general public at no charge:

- a 20-page color brochure, *Doctor, I Have a Question*, a guide for patients and their families
- a quarterly newsletter, *Eye to Eye*
- a leaflet, *Glaucoma: The leading cause of preventable blindness*, a brief guide describing glaucoma and treatment for glaucoma.

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www.glaucomafoundation org

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As of December 2011

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Chairman of the Boardl
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The Glaucoma Foundation Board of Directors
As of December 2011

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The Glaucoma Foundation Board of Directors
As of December 2011

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Chair, Medical Advisory Board
Robert R. Young Professor and Chairman
Yale School of Medicine
Dept. of Ophthalmology & visual Science
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Mary Jane Voelker
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Julian Gangolli
Corporate Vice President and President
North American Pharmaceuticals
2525 Dupont Drive
Irvine, California 92612

Alcon Laboratories, Inc.
Gary Menichini
Vice president & General manager
U.S. Pharmaceuticals
6201 South Freeway
Fort Worth, Texas 76134-7131

Officers of the Corporation

Chairman	Gregory K. Harmon, M.D. Director, Glaucoma Service New York Presbyterian Hospital 520 East 70th Street, Suite 823 New York, NY 10021
President and Chief Executive Officer	Mr. Scott R. Christensen 8 Inness Place Manhasset, NY 11030
Assistant Treasurer	Ms. Nilda L. Richards 34 Cornell Avenue Staten Island, NY 10310
Vice President and Secretary	Robert Ritch, M.D New York Eye & Ear Infirmary 310 East 14th Street New York,NY 10003
Assistant Secretary	Helen Murphy 160 E.117th 2A New York, NY 10035

Individuals Responsible for Custody and Distribution of Funds

Chairman
Gregory K. Harmon, M.D.
Director, Glaucoma Service
New York Presbyterian Hospital
520 East 70th Street, Suite 823
New York, NY 10021
(212) 746-2475

President and Chief Executive Officer
Mr. Scott R. Christensen
8 Inness Place
Manhasset, NY 11030

Vice President and Secretary
Robert Ritch, M.D.
Professor and Chief, Glaucoma Service
New York Eye & Ear Infirmary
310 East 14th Street
New York, NY 10003
(212) 477-7540

Individual Responsible for Custody of Records

Nilda Richards, Assistant Treasurer

Individuals Authorized to Sign Checks

Gregory K. Harmon, M.D., Chairman;
Scott R. Christensen, President and Chief Executive Officer
Joseph M. La Motta, Chairman Emeritus
Robert Ritch, M.D., Vice President & Secretary

All checks of $2,500 or more require 2 signatures or
the personal approval of the Chairman.

Key Staff List
As of December 2011

Dr. Gregory K. Harmon, Chairman
(unpaid volunteer)

Scott R. Christensen, President and Chief Executive Officer

Nilda Richards, Controller and Assistant Treasurer

Helen M. Murphy, Director of Research and Events

Angela Cooley, Director of Fundraising

The Glaucoma Foundation

Solicitation Plan for Fundraising

The Glaucoma Foundation solicits funds or plans to solicit funds from individuals, corporations and foundations through a variety of methods including:

1. At the quarterly meeting on August 13, 1997, the Board of Directors of The Glaucoma Foundation, Inc., approved a proposal to begin an endowment campaign for glaucoma research with a goal of $5 million. Solicitations for this campaign will include personal solicitation of individuals, corporations, and foundations by members of the Board of Directors and Foundation staff.

2. Direct mail to readers of The Foundation's free quarterly newsletter, *Eye to Eye*, and to individuals on lists to be purchased or rented by The Foundation.

3. Corporations will be solicited through a variety of methods to meet the requirements of each corporation. These include the submission of completely developed proposals for specific project support, solicitation letters for general operating support, and in-person solicitation by members of The Foundation's Board of Directors and staff for project support and/or operating support.

4. Foundations that provide funding in the areas of health and human services will receive solicitations proposals for specific project support and/or general operating support based on the requirements and limitation of each foundation.

5. Special event: The annual Black and White Ball in early winter in a black tie dinner/dance held at one of New York City's landmark locations. The event is attended by approximately 350 guests from the financial community and medical profession. Other facets of this event include the publication of an advertising journal, a silent auction of donated prizes and a raffle of donated prizes.

Banking and Other Financial Institutions

Brokerage Account
Treasury Partners
Div. of High Tower Sec.
505-5th Ave. 14th Fl.
New York, NY 10017
(917)286-2770
Account Number: 395-11339 263

Brokerage Account-Endow.
Treasury Partners
Div. of High Tower Sec.
505-5th Ave. 14th Fl.
(917) 286-2770
A/C #: 395-31798 263 -Luntz
A/C #: 395-04565 263 -Mendelsohn

Business Checking
J.P.Morgan Chase Bank
255 First Avenue
New York, NY 10003
(212) 935-9935
Account Number: 079-3602483

Neuberger Berman
605 Third Ave.
New York, NY 10158-3698
(212) 476-5911
Account Number: 550-00071 002

Sanky

December 15, 2011

The Glaucoma Foundation
80 Maiden Lane, Suite 700
New York, NY 10038

Sanky Communications, Inc.
589 Eighth Avenue, 10th Floor
New York, NY 10018

The following is an agreement between Sanky Communications, Inc., (SCI) Professional Fundraising Counsel, and The Glaucoma Foundation (TGF), a 501-C-3 not-for-profit organization dedicated to the eradication of glaucoma.

SCI will design and supervise the direct mail program for fundraising and program support for TGF. All contributions from the direct mail program will be used for the work of The Glaucoma Foundation. TGF raises funds for research into the causes of glaucoma, improvement of existing methods of treatment, and development of cures.

This contract covers the period from January 18, 2011 through December 31, 2012. SCI services will commence on January 18, 2012. The contract can be canceled by either party with sixty days written notice. If canceled, TGF would be responsible for all invoices for materials, design and production and counsel ordered before the cancellation date, for any mailing in the agreed upon mail plan.

The direct mail schedule of appeals will be developed jointly by TGF and SCI, and can be revised as needed throughout this time period. TGF has approval over the mail plan.

SCI's responsibilities will include the following:

- Creation of all materials for the acquisition program, seven to eight donor mailings pending 2010 results (this includes one year-end reminder mailing). TGF will provide the background materials and SCI will write the copy, work with the artists and supervise the printing process. All materials will be submitted to TGF for any revisions and approval at copy, design, mechanical and blueprint stages.

  SCI will work with TGF staff to develop themes and concepts for the acquisition and renewal packages, craft calls for action, and work to accomplish both the fundraising and educational/public awareness goals of the organization. This is also to confirm that TGF program personnel will be involved in the development of each activity.

- Selection of all acquisition lists. The acquisition mailing quantity recommended for this contract period is a quantity of approximately 500,000-750,000 pending 2011 results. TGF has final authority over the acquisition quantity. SCI will arrange for

merge purges, negotiate for list exchanges and schedule and request exchange paybacks from The Glaucoma Foundation list. List selections will be sent to TGF in advance for approval. TGF has approval over all exchanges of the donor list.

- Working with TGF and Foundation Computer Services (FCS) to ensure accurate donor inputting and reporting. SCI will use the statistical reports from TGF and FCS to provide additional analysis on a regular basis. SCI will work with TGF staff on any necessary revisions of the mailing plan.

- Supervision of all lettershop activities, including preparation of mailing schedules, checking in of lists and monitoring of mailing times.

- Providing periodic reports and analysis on the results of the direct mail campaign and recommendations for the program.

The following procedures will apply:

COPY, DESIGN AND LIST APPROVALS

Any copy written or materials designed by SCI will be based on information supplied by TGF and in regular consultation with TGF. TGF exercises control and approval over the content and volume of all mailings, but TGF understands that timely approvals will be critical for the maintenance of the mailing schedule. By sending written approvals of blueprints to SCI, TGF accepts responsibility for the mailing package.

The donor list remains the exclusive property of TGF. SCI will have no independent access to or use of TGF's donor names.

VENDORS

Suppliers will be selected on a competitive bid basis in order to obtain the best prices and delivery dates possible. TGF can elect to have SCI handle the bidding and ordering, or TGF may choose suppliers for any or all mailings.

All vendor invoices (for printing, lettershop, computer, lists, artists, postage, typesetting, etc.) will be sent to SCI for approval and then forwarded to TGF for direct payment to the vendor, with no agency markup. TGF will be responsible for paying all vendor invoices within the specified period.

FEE

SCI's fee for the above services will be $90,000. This will be billed in 12 monthly installments at $7,500 per month. Any special projects that SCI might be asked to take on during this period, may occasion an additional fee (please refer to the appendix), which would be jointly agreed upon in advance.

Overnight delivery or messenger charges, or typesetting work, will be billed separately. In addition, TGF will be billed for any mechanical layouts and/or revisions produced by our staff. Your approval will be secured in advance for any of these charges which might exceed $300.

CONTRIBUTIONS

All contributions will be received by TGF or its bank. At no time will SCI have control over, custody of, or access to any of the contributions.

STATE AND LOCAL REGULATIONS

This contract is written in accordance with provisions established by the Association of Direct Response Fundraising Counsel's code of ethics and with various state and local regulations. TGF agrees to register in jurisdictions where it is required, and understands that SCI also registers as fundraising counsel, sending copies of client contracts as required.

According to New York State Law, you may cancel this contract without cost penalty or liability for the first fifteen days that the contract is on file with the Office of the Attorney General. In such a case, send a written notice of cancellation to SCI, and a duplicate copy to: Office of the Attorney General, Charities Bureau, The Capitol, Albany, NY 12224.

For purposes of the Commonwealth of Pennsylvania the following shall apply: Services under the terms of the Agreement with respect to solicitation of contributions in the Commonwealth will commence on the Effective Date or ten (10) working days after the Agreement is received by the Department of State, Bureau of Charitable Organizations and/or is approved by the Department of State, Bureau of Charitable Solicitations. Services and the Agreement will terminate on the Expiration Date within the Commonwealth of Pennsylvania.

TGF agrees to return a signed copy of the contract to SCI, and to supply financial and/or organizational information necessary for SCI to satisfy governmental regulations.

We are looking forward to another rewarding year!

Sincerely,

Harry Lynch
CEO

AGREED AND ACCEPTED:

FOR The Glaucoma Foundation	PRESIDENT TITLE	12/19/11 DATE
X FOR The Glaucoma Foundation (board member)	CHAIRMAN TITLE	12/20/11 DATE

Appendix to Contract

ADDITIONAL SERVICES

The following additional services and products, beyond the scope of this contract, are offered by Sanky Communications, Inc. to The Glaucoma Foundation. Each service or product must be mutually agreed upon in advance by both SCI and TGF.

Service or Product	Minimum Fee
Acknowledgment Letter	$500.00
Short Inserts (planned giving or matching gift)	$500.00
Additional Renewal	$4,000.00
Additional Acquisition Mailing	$5,000.00
Welcome Package	$2,500.00
Planned Giving Marketing Package	$4,000.00
Major Donor Package	$6,000.00
Gift Club Development	$10,000.00
Pledge Program Development	$6,000.00

Sanky*Net*: SCI's online division, Sanky*Net*, offers our clients a range of Internet-related services including web design; consulting to make web sites more dynamic and increase traffic; and multifaceted campaigns designed to help NPOs use the internet proactively to both raise funds and further their missions.

Related Consulting: Ongoing consulting is also available to our clients in other areas of fundraising and marketing, including major donor cultivation programs.

Printing Production: SCI is available, upon request, to handle printing production of non-direct-mail materials for a fee equivalent to 10% of the gross price charged by the selected printer (minimum charge for this service will be $25).

NOTICE

There is an appendix with your contract renewal that asks you to specify which states are to be included in your mailing program for the contract year.

It has become necessary for us to pay much closer attention to state selects because we find that many jurisdictions are becoming stricter about the registration status of both charitable organizations and the consultants who advise them. Several states have resorted to imposing fines or other penalties on mailers who have failed to register.

Thank you.

TGF CONTRACT APPENDIX -- STATE SELECTS

Sanky Communications, Inc. is authorized by you to order names from the states checked below for inclusion in your acquisition and renewal mailings during the FY12 contract year (1/18/11-12/31/12). By signing below, you affirm that your organization is duly registered in each of these states where registration is required by law, and that you are committed to informing SCI before any mailing date if there is any change in your regulatory status in the jurisdictions checked.

Alabama ✓	Montana —
Alaska ✓	Nebraska —
Arizona ✓	Nevada —
Arkansas ✓	New Hampshire ✓
California ✓	New Jersey ✓
Colorado —	New Mexico ✓
Connecticut ✓	New York ✓
Delaware ✓	North Carolina ✓
District of Columbia ✓	North Dakota ✓
Florida ✓	Ohio ✓
Georgia ✓	Oklahoma ✓
Hawaii ✓	Oregon ✓
Idaho ✓	Pennsylvania ✓
Illinois ✓	Rhode Island ✓
Indiana ✓	South Carolina —
Iowa —	South Dakota —
Kansas ✓	Tennessee ✓
Kentucky ✓	Texas —
Louisiana ✓	Utah BLOCKED
Maine ✓	Vermont ✓
Maryland ✓	Virginia ✓
Massachusetts ✓	Washington ✓
Michigan ✓	West Virginia ✓
Minnesota ✓	Wisconsin ✓
Mississippi ✓	Wyoming ✓
Missouri —	

✓ = REGISTERED
— = NO REGS REQ.
UTAH: BLOCKED

Signed _____ Date 12/19/11

Title PRESIDENT

TGF CONTRACT APPENDIX -- STATE SELECTS

Sanky Communications, Inc. is authorized by you to order names from the states checked below for inclusion in your acquisition and renewal mailings during the FY12 contract year (1/18/11-12/31/12). By signing below, you affirm that your organization is duly registered in each of these states where registration is required by law, and that you are committed to informing SCI before any mailing date if there is any change in your regulatory status in the jurisdictions checked.

Alabama ✓	Montana —
Alaska ✓	Nebraska —
Arizona ✓	Nevada —
Arkansas ✓	New Hampshire ✓
California ✓	New Jersey ✓
Colorado —	New Mexico ✓
Connecticut ✓	New York ✓
Delaware ✓	North Carolina ✓
District of Columbia ✓	North Dakota ✓
Florida ✓	Ohio ✓
Georgia ✓	Oklahoma ✓
Hawaii ✓	Oregon ✓
Idaho ✓	Pennsylvania ✓
Illinois ✓	Rhode Island ✓
Indiana ✓	South Carolina —
Iowa —	South Dakota —
Kansas ✓	Tennessee ✓
Kentucky ✓	Texas —
Louisiana ✓	Utah BLOCKED
Maine ✓	Vermont ✓
Maryland ✓	Virginia ✓
Massachusetts ✓	Washington ✓
Michigan ✓	West Virginia ✓
Minnesota ✓	Wisconsin ✓
Mississippi ✓	Wyoming ✓
Missouri —	

✓ = REGISTERED
— = NO REGS REQ.
UTAH: BLOCKED

Signed _____ Date 12/19/11

Title PRESIDENT

Banking and Other Financial Institutions

Brokerage Account
Treasury Partners
Div. of High Tower Sec.
505-5th Ave. 14th Fl.
New York, NY 10017
(917)286-2770
Account Number: 395-11339 263

Brokerage Account-Endow.
Treasury Partners
Div. of High Tower Sec.
505-5th Ave. 14th Fl.
(917) 286-2770
A/C #: 395-31798 263 -Luntz
A/C #: 395-04565 263 -Mendelsohn

Business Checking
J.P.Morgan Chase Bank
255 First Avenue
New York, NY 10003
(212) 935-9935
Account Number: 079-3602483

Neuberger Berman
605 Third Ave.
New York, NY 10158-3698
(212) 476-5911
Account Number: 550-00071 002

The Glaucoma Foundation Staff list 2011

Staff List

Scott Christensen
President & Chief Executive Officer

Angela Cooley
Director of Fundraising

Kira Zmuda
Director of Research & Events

Helen Murphy
Director of Research & Events

Marianne Howard
Director of Research & Events

Nilda Richards
Controller & Assistant Treasurer

Capital Gains

THE GLAUCOMA FOUNDATION (LAMOTTA ENDOWMENT)
80 MAIDEN LANE - STE 700
NEW YORK NY 10038-4965

Capital Gains Summary From 01/01/2011 To 12/31/2011

Description	Totals
Short Term Gain/Loss	3,421.50
Long Term Gain/Loss	31,795.40
Total Short Sale Gain/Loss	0.00
Discount Income	0.00
Total Capital Gains/Losses	35,216.90
Adjusted Basis	318,024 14
Proceeds	353,241.04
Total Curr Gain/Loss	0 00

EQUITIES - NONCOVERED

Purchase Date	Close Date	No. of Shares	Orig Face	Symbol	Description	Unit Cost	Sale Price	Total Cost	Net Amount	Ind	ST Gain/Loss	LT Gain/Loss	Book Cost	Disc Inc	Curr Gain/Loss
07/28/2010	05/24/2011	200 00	0 00	COP	CONOCOPHILL IPS	54 952	72.061	10,990.32	14,411.82	ST	3,421 50	0 00	10,990 32	0 00	0 00
ST - TERM TOTAL		200.00						10,990.32	14,411 82	ST	3,421.50	0 00	10,990 32	0 00	0.00
09/11/2009	01/14/2011	200 00	0 00	PXD	PIONEER NATURAL RESOURCES CO	33.460	93 096	6,692.08	18,618 88	LT	0 00	11,926 80	6,692 08	0 00	0 00
02/06/2009	05/24/2011	1,500 00	0 00	KR	KROGER CO	22 527	24 510	33,789 99	36,764 74	LT	0 00	2,974.75	33,789 99	0 00	0 00
08/20/2009	05/24/2011	200 00	0 00	KR	KROGER CO	20 947	24 510	4,189.30	4,901 96	LT	0 00	712 66	4,189 30	0.00	0.00
02/19/2010	05/24/2011	500 00	0 00	TMK	TORCHMARK CORP	46 591	65.600	23,295 70	32,799 42	LT	0 00	9,503.72	23,295 70	0 00	0.00
03/14/2006	06/17/2011	1,000 00	0 00	ORCL	ORACLE CORP	12 920	31 299	12,919 80	31,298 49	LT	0 00	18,378 69	12,919 80	0 00	0 00
04/30/2010	06/28/2011	200 00	0 00	ACN	***ACCENTURE PLC IRELAND SHS CL A	43 940	60 028	8,787 93	12,005 38	LT	0 00	3,217 45	8,787 93	0.00	0 00

04/30/2010	07/12/2011	300 00	0 00	ACN	***ACCENTURE PLC IRELAND SHS CL A	43.940	61 233	13,181 90	18,369 39	LT	0 00	5,187 49	13,181 90	0 00	0 00
12/09/2003	07/26/2011	200 00	0 00	COG	CABOT OIL & GAS CORP	9.646	73 721	1,939 17	14,743.87	LT	0.00	12,804 70	1,939 17	0 00	0 00
09/27/2007	08/05/2011	500 00	0 00	XRX	XEROX CORP	17 351	8.330	8,675 50	4,164.85	LT	0 00	-4,510 65	8,675 50	0 00	0.00
03/19/2007	08/05/2011	3,000 00	0.00	XRX	XEROX CORP	16 856	8 330	50,568.00	24,989.07	LT	0.00	-25,578 93	50,568 00	0 00	0 00
02/25/2008	08/08/2011	2,000 00	0.00	XRX	XEROX CORP	14 882	8 006	29,764 28	16,011 09	LT	0 00	-13,753 19	29,764.28	0.00	0 00
06/08/2006	08/12/2011	900 00	0 00	XRX	XEROX CORP	13.617	8 036	12,255 57	7,231.95	LT	0 00	-5,023 62	12,255.57	0 00	0 00
06/08/2006	08/12/2011	2,100.00	0 00	XRX	XEROX CORP	13 617	8 036	28,596 33	16,874 54	LT	0 00	-11,721.79	28,596 33	0 00	0 00
03/14/2006	08/17/2011	500 00	0.00	ORCL	ORACLE CORP	12.920	27.188	6,459 90	13,593 90	LT	0 00	7,134 00	6,459 90	0 00	0 00
12/09/2003	10/27/2011	300 00	0 00	COG	CABOT OIL & GAS CORP	9 646	77.260	2,908 75	23,177 56	LT	0 00	20,268 81	2,908 75	0 00	0 00
12/09/2003	11/10/2011	200 00	0.00	COG	CABOT OIL & GAS CORP	9.646	83.448	1,939.17	16,689 27	LT	0 00	14,750 10	1,939 17	0 00	0.00
12/24/2007	11/16/2011	400 00	0 00	DVN	DEVON ENERGY CORPORATIO N NEW	91.878	66.565	36,751.28	26,625 63	LT	0 00	-10,125 65	36,751 28	0 00	0.00
11/28/2007	11/16/2011	300.00	0 00	DVN	DEVON ENERGY CORPORATIO N NEW	81 064	66 565	24,319 17	19,969 23	LT	0.00	-4,349 94	24,319 17	0 00	0 00
LT - TERM TOTAL		14,300.00						307,033.82	338,829.22	LT	0.00	31,795.40	307,033.82	0.00	0 00
SECTION TOTAL		14,500 00						318,024.14	353,241.04		3,421.50	31,795 40	318,024 14	0 00	0.00

Indicators

ST - Short Term
LT - Long Term
WO - Written Option
SS - Short Sale
P - Purchase includes option premium
S - Sale includes option premium
B - Purchase & sale include option premium

PLEASE CONSULT YOUR TAX ADVISOR REGARDING THE USE OF THIS REPORT.

This supplemental report is provided for informational purposes only, please refer to your account statements or other information provided by your custodian for the official records of your account(s) This is not a substitute Form 1099 and you should not provide this report to the Internal Revenue Service. This report is not an official tax record for your account