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Return of Organization Exempt From Income Tax

2011

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2011 calendar year, or tax year beginning, 2011, and ending, 20

Form 990 header section containing organization name (INTERACTIVE ADVERTISING BUREAU, INC.), EIN (13-3900517), address (116 EAST 27TH STREET, 7TH FLOOR, NEW YORK, NY 10016), and principal officer (RANDALL ROTHENBERG).

Part I Summary

Summary table with columns for Revenue, Expenses, and Net Assets or Fund Balances. Rows include mission statement, revenue breakdown, fundraising expenses, and total assets/liabilities.

Part II Signature Block

Signature block containing officer signature (Mark Gold), preparer signature (John D. Daum), and firm information (CONDON O'MEARA MCGINTY & DONNELLY L).

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

For Paperwork Reduction Act Notice, see the separate instructions.

ENVELOPE POSTMARK DATE NOV 06 2012

SCANNED DEC 05 2012

RECEIVED NOV 13 2012

Handwritten signature/initials

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III Yes No

1 Briefly describe the organization's mission
SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
If "Yes," describe these changes on Schedule O

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

4a (Code _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)
SEE SCHEDULE O

4b (Code _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

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 ►

Part IV Checklist of Required Schedules

Table with 3 columns: Question, Yes, No. Rows 1-20b detailing various organizational requirements and their fulfillment status.

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? <i>If "Yes," complete Schedule I, Parts I and II.</i>		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? <i>If "Yes," complete Schedule I, Parts I and III.</i>		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? <i>If "Yes," complete Schedule J.</i>	X	
24 a 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25.</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25 a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i>		
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I.</i>		
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II.</i>		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? <i>If "Yes," complete Schedule L, Part III.</i>		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? <i>If "Yes," complete Schedule L, Part IV.</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		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? <i>If "Yes," complete Schedule L, Part IV.</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i>		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? <i>If "Yes," complete Schedule R, Part I.</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1.</i>		X
35 a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		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)? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		
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? <i>If "Yes," complete Schedule R, Part VI.</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Form with questions 1a through 14b and Yes/No columns. Includes input fields for numbers and checkboxes.

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

Table with 3 columns: Question, Yes, No. Rows include 1a (43), 1b (42), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

Table with 3 columns: Question, Yes, No. Rows include 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed
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
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

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 X

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) RANDALL ROTHENBERG PRESIDENT/CEO	40.00	X		X			724,670.	0	29,403.	
(2) PETER NAYLOR CHAIRMAN	1.00	X		X			0	0	0	
(3) RANDY KILGORE VICE CHAIRMAN	1.00	X		X			0	0	0	
(4) RICH LEFURGY FOUNDING CHAIRMAN	1.00	X		X			0	0	0	
(5) BRUCE GORDON TREASURER	1.00	X		X			0	0	0	
(6) JOSEPH ROSENBAUM SECRETARY	1.00	X		X			0	0	0	
(7) BOB CARRIGAN EXECUTIVE COMMITTEE	1.00	X		X			0	0	0	
(8) LEON LEVITT EXECUTIVE COMMITTEE	1.00	X		X			0	0	0	
(9) DAVID MOORE EXECUTIVE COMMITTEE	1.00	X		X			0	0	0	
(10) TINA SHARKEY EXECUTIVE COMMITTEE	1.00	X		X			0	0	0	
(11) BILL TODD EXECUTIVE COMMITTEE	1.00	X		X			0	0	0	
(12) RIK VAN DER KOOI EXECUTIVE COMMITTEE	1.00	X		X			0	0	0	
(13) LAUREN WIENER EXECUTIVE COMMITTEE	1.00	X		X			0	0	0	
(14) JOHN ALDERMAN DIRECTOR	1.00	X					0	0	0	

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			
15) JOE APPRENDI DIRECTOR	1.00	X					0	0	0	
16) TOM ARRIX DIRECTOR	1.00	X					0	0	0	
17) JOHN BATTELLE DIRECTOR	1.00	X					0	0	0	
18) ALISA BOWEN DIRECTOR	1.00	X					0	0	0	
19) NED BRODY DIRECTOR	1.00	X					0	0	0	
20) PAUL CAINE DIRECTOR	1.00	X					0	0	0	
21) JORY DES JARDINS DIRECTOR	1.00	X					0	0	0	
22) DAVE DICKMAN DIRECTOR	1.00	X					0	0	0	
23) JOAN GILLMAN DIRECTOR	1.00	X					0	0	0	
24) MARK HOWARD DIRECTOR	1.00	X					0	0	0	
25) WALKER JACOBS DIRECTOR	1.00	X					0	0	0	
1b Sub-total							724,670.	0	29,403.	
c Total from continuation sheets to Part VII, Section A							2,995,364.	0	219,665.	
d Total (add lines 1b and 1c)							3,720,034.	0	249,068.	

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 **15**

	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		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	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		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
ATTACHMENT 1		

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

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				
	1b	Membership dues	1b				
	1c	Fundraising events	1c				
	1d	Related organizations	1d				
	1e	Government grants (contributions)	1e				
	1f	All other contributions, gifts, grants, and similar amounts not included above	1f				
	g	Noncash contributions included in lines 1a-1f \$					
	h	Total. Add lines 1a-1f		0			
Program Service Revenue	2a	MEMBERSHIP DUES	Business Code	900099	7,803,941.	7,803,941.	
	b	MEETINGS & EVENTS	Business Code	900099	7,752,062.	7,752,062.	
	c	FUNDED RESEARCH PROGRAM	Business Code	900099	191,875.	191,875.	
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		15,747,878.			
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		22,316.		22,316.
4		Income from investment of tax-exempt bond proceeds		0			
5		Royalties		0			
6a		Gross rents	(i) Real				
			(ii) Personal				
b		Less rental expenses					
c		Rental income or (loss)					
d		Net rental income or (loss)		0			
7a		Gross amount from sales of assets other than inventory	(i) Securities				
			(ii) Other				
b		Less cost or other basis and sales expenses					
c		Gain or (loss)					
d		Net gain or (loss)		0			
8a		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a				
	b						
	c			0			
9a	Gross income from gaming activities See Part IV, line 19	a					
		b					
		c		0			
10a	Gross sales of inventory, less returns and allowances	a					
		b					
		c		0			
Miscellaneous Revenue		Business Code					
11a	ADVERTISING REVENUE	541800	41,306.		41,306.		
b	INDUSTRY PRODUCTS REVENUE	900099	457,078.	457,078.			
c							
d	All other revenue						
e	Total. Add lines 11a-11d		498,384.				
12	Total revenue. See instructions		16,268,578.	16,204,956.	41,306.	22,316.	

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	0			
2 Grants and other assistance to individuals in the United States See Part IV, line 22	0			
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	2,499,082.			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	3,561,921.			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	111,118.			
9 Other employee benefits	378,215.			
10 Payroll taxes	310,660.			
11 Fees for services (non-employees)				
a Management	0			
b Legal	316,748.			
c Accounting	18,700.			
d Lobbying	143,895.			
e Professional fundraising services See Part IV, line 17	0			
f Investment management fees	0			
g Other	1,279,244.			
12 Advertising and promotion	0			
13 Office expenses	585,582.			
14 Information technology	76,162.			
15 Royalties	0			
16 Occupancy	432,355.			
17 Travel	495,461.			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	3,883,911.			
20 Interest	0			
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	86,501.			
23 Insurance	22,913.			
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 IAB RES & IND. INITIATIVE	898,304.			
b MARKETING & PUBLIC RELATIONS	784,620.			
c INFRASTRUCTURE	251,813.			
d SELF-REGULATING CONTRIBUTION	23,354.			
e All other expenses	105,934.			
25 Total functional expenses. Add lines 1 through 24e	16,266,493.			
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)	0			

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	4,223,126.	1	993,835.
	2 Savings and temporary cash investments	500,000.	2	3,792,764.
	3 Pledges and grants receivable, net	0	3	0
	4 Accounts receivable, net	7,400,217.	4	7,424,612.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	0
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), 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)	0	6	0
	7 Notes and loans receivable, net	0	7	0
	8 Inventories for sale or use	0	8	0
	9 Prepaid expenses and deferred charges	158,304.	9	294,862.
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 1,075,359.		
	b Less accumulated depreciation	10b 65,999.	55,835.	10c 1,009,360.
	11 Investments - publicly traded securities	0	11	0
	12 Investments - other securities See Part IV, line 11	0	12	0
	13 Investments - program-related See Part IV, line 11	0	13	0
	14 Intangible assets	0	14	0
	15 Other assets See Part IV, line 11	50,950.	15	50,950.
16 Total assets. Add lines 1 through 15 (must equal line 34)	12,388,432.	16	13,566,383.	
Liabilities	17 Accounts payable and accrued expenses	1,217,475.	17	1,419,197.
	18 Grants payable	0	18	0
	19 Deferred revenue	10,060,574.	19	11,034,718.
	20 Tax-exempt bond liabilities	0	20	0
	21 Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	0	25	0
	26 Total liabilities. Add lines 17 through 25	11,278,049.	26	12,453,915.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	1,009,532.	27	1,009,117.
	28 Temporarily restricted net assets	100,851.	28	103,351.
	29 Permanently restricted net assets	0	29	0
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> 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	1,110,383.	33	1,112,468.	
34 Total liabilities and net assets/fund balances	12,388,432.	34	13,566,383.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	16,268,578.
2	Total expenses (must equal Part IX, column (A), line 25)	2	16,266,493.
3	Revenue less expenses Subtract line 2 from line 1	3	2,085.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,110,383.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	0
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	1,112,468.

Part XII Financial Statements and Reporting

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

- 1 Accounting method used to prepare the Form 990 Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
- b Were the organization's financial statements audited by an independent accountant?
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O
- d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both.
 Separate basis Consolidated basis Both consolidated and separate basis
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

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

Political Campaign and Lobbying Activities

2011

Open to Public Inspection

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

▶ See separate instructions.

Department of the Treasury
Internal Revenue Service

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

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

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

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

If the organization answered "Yes" to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of organization INTERACTIVE ADVERTISING BUREAU, INC.	Employer identification number 13-3900517
--	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV
- 2 Political expenditures ▶ \$ 143,895.
- 3 Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955. ▶ \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 . . ▶ \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ \$
- 4 Did the filing organization file Form 1120-POL for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1 a	Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount Enter the amount from the following table in both columns														
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a If zero or less, enter -0-														
i	Subtract line 1f from line 1c If zero or less, enter -0-														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2 a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

Table with columns (a) Yes/No and (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation...; 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?; 2b If "Yes," enter the amount of any tax incurred under section 4912; 2c If "Yes," enter the amount of any tax incurred by organization managers under section 4912; 2d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

Table with columns Yes/No. Rows include: 1 Were substantially all (90% or more) dues received nondeductible by members?; 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?; 3 Did the organization agree to carry over lobbying and political expenditures from the prior year?

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

Table with columns 1-5 and Amount. Rows include: 1 Dues, assessments and similar amounts from members; 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid); 2a Current year; 2b Carryover from last year; 2c Total; 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues; 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?; 5 Taxable amount of lobbying and political expenditures (see instructions).

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A, and Part II-B, line 1. Also, complete this part for any additional information.

SEE PAGE 4

Part IV Supplemental Information (continued)

LOBBYING ACTIVITY - PAC

PART I- A

THE IAB'S PUBLIC POLICY OFFICE, LOCATED IN WASHINGTON, DC, ADVOCATES IAB'S MEMBERS AND PROMOTES THE VALUE OF THE INTERACTIVE ADVERTISING INDUSTRY TO LEGISLATORS AND POLICYMAKERS. TO DO THIS, IAB ADDRESS LEGISLATIVE AND REGULATORY ISSUES THAT AFFECT ALL PLATFORMS AND PRACTICES WITHIN THE INDUSTRY. THEY ALSO STRIVE TO KEEP THEIR MEMBERS INFORMED ABOUT IMPORTANT POLICY-RELATED EVENTS THROUGH PARTICIPATION IN THE PUBLIC POLICY COUNCIL AND BY DEVELOPING TIMELY ISSUE BRIEFS AND LEGAL ANALYSIS OF KEY PROPOSALS. THE VICE PRESIDENT OF PUBLIC POLICY AND DIRECTOR OF PUBLIC POLICY, ALONG WITH IAB'S OUTSIDE COUNCIL, VENABLE LLP, COMPRISE THE PUBLIC POLICY OFFICE. THE OFFICE SPENDS A SIGNIFICANT PORTION OF ITS TIME ON REGULATORY, EDUCATIONAL, AND INDUSTRY OPERATIONS EFFORTS, BUT ALSO LOBBIES CONGRESS REGULARLY. SUCH LOBBYING ACTIVITIES INCLUDE:

1. PROACTIVELY ENGAGE WITH MEMBER OF CONGRESS AND THEIR STAFF ON ISSUES AFFECTING THE INTERACTIVE ADVERTISING INDUSTRY, WITH A FOCUS ON SUPPORTING PRO-INDUSTRY LEGISLATION WHILE RAISING CONCERNS REGARDING OVERLY BURDENSOME LEGISLATIVE PROPOSALS
2. CRAFT MEANINGFUL LEGISLATION THAT PROTECTS CONSUMERS' PRIVACY INTEREST WITHOUT UNDULY BURDENING LEGITIMATE INTERACTIVE ADVERTISING PRACTICES. INCLUDING DRAFTING LEGISLATIVE LANGUAGE AND AMENDMENTS AS THEY PROGRESS THROUGH THE LEGISLATIVE PROCESS.
3. LEAD THE ADVOCACY EFFORTS OF THE IAB'S MEMBER COMPANIES AND PARTNER TRADE ASSOCIATIONS AS THEY ENGAGE CONGRESS AND STATE LEGISLATURES ON KEY POLICY ISSUES IN ORDER TO ENSURE CONTINUED GROWTH OF THE INDUSTRY.

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. See separate instructions.

Name of the organization

INTERACTIVE ADVERTISING BUREAU, INC.

Employer identification number

13-3900517

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.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include Total number at end of year, Aggregate contributions, Aggregate grants, Aggregate value, and questions about donor advisement.

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

Table with 2 columns: Held at the End of the Tax Year. Rows include Purpose(s) of conservation easements, Total number of conservation easements, Total acreage, and various questions about monitoring and expenses.

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.

Table with 2 columns: Amounts. Rows include questions about reporting works of art, historical treasures, and similar assets, and reporting revenues and assets.

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

Schedule D (Form 990) 2011

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?

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?

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

Table with 2 columns: Description, Amount. Rows: 1c Beginning balance, 1d Additions during the year, 1e Distributions during the year, 1f Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21?

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

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows: 1a-1g

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, 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

- (i) unrelated organizations, (ii) related organizations

Table with 2 columns: Yes, No. Rows: 3a(i), 3a(ii), 3b

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

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

Table with 5 columns: (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows: 1a Land, b Buildings, c Leasehold improvements, d Equipment, e Other, Total

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

Table with 3 columns: (a) Description of security or category, (b) Book value, (c) Method of valuation. Rows include (1) Financial derivatives, (2) Closely-held equity interests, (3) Other, and sub-rows (A) through (I). Total row at the bottom.

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

Table with 3 columns: (a) Description of investment type, (b) Book value, (c) Method of valuation. Rows numbered (1) through (10). Total row at the bottom.

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

Table with 2 columns: (a) Description, (b) Book value. Rows numbered (1) through (10). Total row at the bottom.

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

Table with 2 columns: (a) Description of liability, (b) Book value. Row 1 includes (1) Federal income taxes and rows (2) through (11). Total row at the bottom.

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	16,268,578.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	16,266,493.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	2,085.
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net). Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10	2,085.

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	15,108,633.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	15,108,633.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	1,159,945.
c	Add lines 4a and 4b	4c	1,159,945.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	16,268,578.

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

1	Total expenses and losses per audited financial statements	1	15,106,548.
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	
3	Subtract line 2e from line 1	3	15,106,548.
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	1,159,945.
c	Add lines 4a and 4b	4c	1,159,945.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	16,266,493.

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

SEE PAGE 5

Part XIV Supplemental Information (continued)

ENDOWMENT FUNDS

PART V - LINE 4

THE BUREAU RECORDS CONTRIBUTIONS AS UNRESTRICTED REVENUE UNLESS THE DONOR STIPULATES A TIME OR LIMITS THE USE OF THE DONATED ASSETS. THE BUREAU'S POLICY IS TO RECORD CONTRIBUTIONS WITH DONOR IMPOSED RESTRICTIONS THAT ARE MET IN THE SAME YEAR THE CONTRIBUTIONS ARE RECEIVED AS UNRESTRICTED REVENUE. CONTRIBUTIONS WITH DONOR STIPULATIONS ARE REPORTED AS TEMPORARILY RESTRICTED SUPPORT. WHEN A DESIGNATED RESTRICTION EXPIRES, THAT IS, WHEN A STIPULATED TIME RESTRICTION ENDS OR 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.

OTHER LIABILITIES

PART X - LINE 2

AS OF DECEMBER 31, 2011, NO AMOUNTS HAVE BEEN RECOGNIZED FOR ANY UNCERTAIN INCOME TAX POSITIONS. THE BUREAU'S TAX RETURNS FOR THE YEAR 2008 AND FORWARD ARE SUBJECT TO THE USUAL REVIEW BY THE APPROPRIATE TAXING AUTHORITIES.

Part XIV Supplemental Information (continued)

RECONCILIATION OF REVENUE

PART XII - LINE 4B

4B. GROSS UP FROM SPONSORSHIP REVENUE: 849,000.

4B. GROSS UP FROM DELEGATE REVENUE: 310,945.

RECONCILIATION OF EXPENSES

PART XIII - LINE 4B

4B. GROSS UP OF CONFERENCES, CONVENTIONS & MEETINGS: 1,159,945

**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

INTERACTIVE ADVERTISING BUREAU, INC.

Employer identification number

13-3900517

Part I Questions Regarding Compensation

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

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

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the 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.

- | | |
|--|---|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> 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**
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? **4b**
- c** Participate in, or receive payment from, an equity-based compensation arrangement? **4c**

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**
- b** Any related organization? **5b**
- 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**
- b** Any related organization? **6b**
- If "Yes" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1a		
1b		
2		
3		
4a		X
4b		X
4c		X
5a		
5b		
6a		
6b		
7		
8		
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 RANDALL ROTHENBERG	(i)	574,670.	150,000.	0	12,250.	754,073.	0
	(ii)	0	0	0	0	0	0
2 DAVID DOTTY	(i)	404,610.	145,545.	0	12,250.	570,900.	0
	(ii)	0	0	0	0	0	0
3 PATRICK DOLAN	(i)	367,819.	101,676.	0	12,250.	498,715.	0
	(ii)	0	0	0	0	0	0
4 MICHAEL ZANEIS	(i)	300,273.	75,000.	0	0	392,758.	0
	(ii)	0	0	0	0	0	0
5 SHERRILL MANE	(i)	279,246.	63,648.	0	12,250.	369,475.	0
	(ii)	0	0	0	0	0	0
6 MICHAEL THEODORE	(i)	223,573.	52,490.	0	11,813.	305,919.	0
	(ii)	0	0	0	0	0	0
7 PHILIP ARDIZZONE	(i)	189,559.	76,374.	0	10,806.	295,268.	0
	(ii)	0	0	0	0	0	0
8 LISA MILGRAN	(i)	192,723.	64,775.	0	10,239.	275,347.	0
	(ii)	0	0	0	0	0	0
9 STEVE SULLIVAN	(i)	199,386.	37,530.	0	5,140.	258,930.	0
	(ii)	0	0	0	0	0	0
10 VIRGINIA ROLLET MOORE	(i)	165,824.	55,313.	0	9,266.	247,717.	0
	(ii)	0	0	0	0	0	0
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.

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2011

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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.

Name of the organization

INTERACTIVE ADVERTISING BUREAU, INC.

Employer identification number

13-3900517

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

PART III - LINE 1

THE INTERACTIVE ADVERTISING BUREAU (IAB) IS COMPRISED OF MORE THAN 500 LEADING MEDIA AND TECHNOLOGY COMPANIES WHO ARE RESPONSIBLE FOR SELLING 86% OF ONLINE ADVERTISING IN THE UNITED STATES. ON BEHALF OF ITS MEMBERS, THE IAB IS DEDICATED TO THE GROWTH OF THE INTERACTIVE ADVERTISING MARKETPLACE, OF IAB'S SHARE OF TOTAL MARKETING SPEND, AND OF ITS MEMBERS' SHARE OF TOTAL MARKETING SPEND. THE IAB EDUCATES MARKETERS, AGENCIES, MEDIA COMPANIES AND THE WIDER BUSINESS COMMUNITY ABOUT THE VALUE OF INTERACTIVE ADVERTISING. WORKING WITH ITS MEMBER COMPANIES, THE IAB EVALUATES AND RECOMMENDS STANDARDS AND PRACTICES AND FIELDS CRITICAL RESEARCH ON INTERACTIVE ADVERTISING. FOUNDED IN 1996, THE IAB IS HEADQUARTERED IN NEW YORK CITY WITH A PUBLIC POLICY OFFICE IN WASHINGTON, D.C. FOR MORE INFORMATION, PLEASE VISIT WWW.IAB.NET.

THE IAB HAS SIX CORE OBJECTIVES:

- FEND OFF ADVERSE LEGISLATION AND REGULATION
- COALESCE AROUND MARKET-MAKING MEASUREMENT GUIDELINES AND CREATIVE STANDARDS
- CREATE COMMON GROUND WITH CUSTOMERS TO REDUCE COSTLY FRICTION IN THE SUPPLY CHAIN
- SHARE BEST PRACTICES THAT FOSTER INDUSTRY-WIDE GROWTH
- GENERAL INDUSTRY-WIDE RESEARCH AND THOUGHT LEADERSHIP THAT SOLIDIFIES INTERACTIVE AS A MAINSTREAM MEDIUM
- CREATE COUNTERVAILING FORCE TO BALANCE POWER OF OTHER MEDIA, MARKETING,

Name of the organization INTERACTIVE ADVERTISING BUREAU, INC.	Employer identification number 13-3900517
--	--

AND AGENCY TRADE GROUPS.

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

PART III - LINE 2

IN 2011, IAB UNVEILED THE IAB AD LAB, A MULTIPURPOSE MEETING AND EVENTS CENTER FOR CASE STUDY PRESENTATIONS, NETWORKING RECEPTIONS, RESEARCH RELEASES, ROUNDTABLE DISCUSSIONS, PRODUCT DEMONSTRATIONS, PROFESSIONAL DEVELOPMENT CLASSES, TECH MEETUPS AND WEBINARS. THROUGH THE AD LAB, NEW TECHNOLOGIES AND IDEAS ARE REVEALED, COMMON INTERESTS ARE ADVANCED AND INNOVATION, COLLABORATION, AND EDUCATION ARE ENCOURAGED.

GOVERNANCE, MANAGEMENT, AND DISCLOSURE

PART VI, SECTION A. - QUESTION 6

THE INTERACTIVE ADVERTISING BUREAU, INC. WAS INCORPORATED AS A MEMBERSHIP ORGANIZATION.

GOVERNANCE, MANAGEMENT, AND DISCLOSURE

PART VI, SECTION A. - QUESTION 7A

THE MEMBERSHIP ELECTS THE BOARD OF DIRECTORS UPON EXPIRATION OF THE DIRECTORS TERMS.

GOVERNANCE, MANAGEMENT, AND DISCLOSURE

PART VI, SECTION A. - QUESTION 7B

THE BOARD OF DIRECTORS MAY, IN ITS DISCRETION, CREATE A MEMBERSHIP COMMITTEE AND DELEGATE TO SUCH COMMITTEE THE POWER TO MAKE RULES GOVERNING APPLICATIONS AND REQUIREMENTS FOR MEMBERSHIP AND TO DETERMINE

Name of the organization

INTERACTIVE ADVERTISING BUREAU, INC.

Employer identification number

13-3900517

WHETHER MEMBERS MEET THE MEMBERSHIP QUALIFICATIONS ESTABLISHED IN THESE
BY-LAWS.

GOVERNANCE, MANAGEMENT, AND DISCLOSURE

PART VI, SECTION B. - QUESTION 11B

THE FORM 990 IS REVIEWED BY THE TREASURER PRIOR TO FILING.

GOVERNANCE, MANAGEMENT, AND DISCLOSURE

PART VI, SECTION B. - QUESTION 12C

ALL BOARD MEMBERS ARE REQUIRED TO SIGN THE CONFLICT OF INTEREST POLICY
FORM, TO BE SUBMITTED ANNUALLY.

GOVERNANCE, MANAGEMENT, AND DISCLOSURE

PART VI, SECTION B. - QUESTION 15A

THE PROCESS OF DETERMINING COMPENSATION BY THE ORGANIZATION IS DONE BY A
REVIEW BY THE BOARD VS. INDIVIDUAL OBJECTIVES.

GOVERNANCE, MANAGEMENT, AND DISCLOSURE

PART VI, SECTION C. - QUESTION 19

THE IAB DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST
POLICY, OR FINANCIAL STATEMENTS AVAILABLE TO THE GENERAL PUBLIC.

ATTACHMENT 1

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
REED SMITH P.O. BOX 10096 UNIONDALE, NY 11565	LEGAL	341,923.

Name of the organization INTERACTIVE ADVERTISING BUREAU, INC.	Employer identification number 13-3900517
<u>ATTACHMENT 1 (CONT'D)</u>	

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
116 ASSOCIATES LLC 116 EAST 27TH STREET NEW YORK, NY 10016	RENT	335,480.
BLINKHORN 23 GRANT AVENUE OLD GREENWICH, CT 06870	EXECUTIVE RECRUITING	204,132.
JULIE THOMPSON, INC. 123 WAVERLY PLACE NEW YORK, NY 10011	CONSULTANT/MARKETING	180,213.
VENABLE LLP P.O. BOX 62727 BALTIMORE, MD 21264	LEGAL	172,160.
TOTAL COMPENSATION		<u>1,233,908.</u>

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			
26) MIKE KERIAKOS DIRECTOR	1.00	X					0	0	0	
27) MICHAEL PERLIS DIRECTOR	1.00	X					0	0	0	
28) WAYNE POWERS DIRECTOR	1.00	X					0	0	0	
29) JEFF PULLEN DIRECTOR	1.00	X					0	0	0	
30) SCOTT SCHILLER DIRECTOR	1.00	X					0	0	0	
31) DREW SCHUTTE DIRECTOR	1.00	X					0	0	0	
32) VIVEK SHAH DIRECTOR	1.00	X					0	0	0	
33) EVAN STERNSCHEIN DIRECTOR	1.00	X					0	0	0	
34) JEAN PAUL COLACO DIRECTOR	1.00	X					0	0	0	
35) KEVIN CONROY DIRECTOR	1.00	X					0	0	0	
36) HENRIQUE DE CASTRO DIRECTOR	1.00	X					0	0	0	
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **15**

	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		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	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		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

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

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			
37) DAVE MADDEN DIRECTOR	1.00	X						0	0	
38) GREG MCCASTLE DIRECTOR	1.00	X						0	0	
39) DAVID MORRIS DIRECTOR	1.00	X						0	0	
40) PAUL PALMIERI DIRECTOR	1.00	X						0	0	
41) LISA UTZSCHNEIDER DIRECTOR	1.00	X						0	0	
42) DENISE WARREN DIRECTOR	1.00	X						0	0	
43) GRANT WHITMORE DIRECTOR	1.00	X						0	0	
44) DAVID DOTTY SENIOR VICE PRESIDENT/CMO	40.00				X			550,155.	20,745.	
45) PATRICK DOLAN EXECUTIVE VICE PRESIDENT/COO	40.00				X			469,495.	29,220.	
46) SHERRILL MANE SENIOR VICE PRESIDENT	40.00				X			342,894.	26,581.	
47) MICHAEL THEODORE VICE PRESIDENT - MEMBER SVCS.	40.00				X			276,063.	29,856.	
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **15**

	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		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	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		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

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

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
 - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)
- Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868

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

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

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

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

Type or print <small>File by the due date for filing your return. See instructions.</small>	Name of exempt organization or other filer, see instructions	<small>Enter filer's identifying number, see instructions</small>	
	INTERACTIVE ADVERTISING BUREAU, INC.	<input checked="" type="checkbox"/>	Employer identification number (EIN) or
	Number, street, and room or suite no. If a P O box, see instructions	<input type="checkbox"/>	13-3900517
	116 EAST 27TH STREET, 7TH FLOOR	<input type="checkbox"/>	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions		
	NEW YORK, NY 10016		

Enter the Return code for the return that this application is for (file a separate application for each return) 0 1

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

• The books are in the care of ▶ MARK GOLDMAN/THE BUREAU,
Telephone No ▶ 212 380-4701 FAX No ▶ 212 820-9757

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

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 08/15, 20 12, to file the exempt organization return for the organization named above. The extension is for the organization's return for
▶ calendar year 20 11 or
▶ tax year beginning _____, 20 _____, and ending _____, 20 _____

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

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

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

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box. **Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1)

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

Type or print <small>File by the due date for filing your return. See instructions</small>	Name of exempt organization or other filer, see instructions INTERACTIVE ADVERTISING BUREAU, INC.	<small>Enter filer's identifying number, see instructions</small> Employer identification number (EIN) or	
	Number, street, and room or suite no. If a P O box, see instructions 116 EAST 27TH STREET, 7TH FLOOR	<input checked="" type="checkbox"/>	13-3900517
	City, town or post office, state, and ZIP code. For a foreign address, see instructions NEW YORK, NY 10016	<input type="checkbox"/>	Social security number (SSN)

Enter the Return code for the return that this application is for (file a separate application for each return) 0 1

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

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

- The books are in the care of **MARK GOLDMAN/THE BUREAU,**
Telephone No **212 380-4701** FAX No **212 820-9757**
 - If the organization does not have an office or place of business in the United States, check this box
 - If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for
- 4 I request an additional 3-month extension of time until 11/15, 2012
- 5 For calendar year 2011, or other tax year beginning _____, 20____, and ending _____, 20____
- 6 If the tax year entered in line 5 is for less than 12 months, check reason Initial return Final return
 Change in accounting period
- 7 State in detail why you need the extension **ALL THE INFORMATION NECESSARY TO COMPLETE THE RETURN IS NOT AND WILL NOT BE AVAILABLE BY THE DUE DATE. THEREFORE WE RESPECTFULLY REQUEST ADDITIONAL TIME IN ORDER TO COMPLETE THE RETURN.**

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

Signature and Verification must be completed for Part II only.

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

ACCOUNTANTS AUTHORIZED TO SIGN RETURNS
AUG 11 2012

Signature Title Date