

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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 Fo	r the 2	2011 ca	ılendar year, or tax year beginnin	g 01-01-2011 and ending 12-3	31-2011				
		pplicable	C Name of organization				D Employ	er id	dentification number
	dress ch		NATIONAL RESTAURANT ASSOCIATION	V			36-15	254	80
— _{Na}	me chai	nae	Doing Business As				E Telepho	ne r	number
_	tıal retui	-					(202)	331	-5900
_	rminateo		Number and street (or P O box if ma 2055 L Street NW	ııl ıs not delivered to street address) R	.oom/suite		G Gross re	ceipt	s \$ 111,219,690
_									
_	nended i		City or town, state or country, and ZI Washington, DC 200364957	P + 4					
Ap	plication	n pending							
			F Name and address of princ	cipal officer		H(a) Is this		retu	
			Dawn M Sweeney 2055 L Street NW			affiliate	es?		⊤Yes ▼ No
			Washington, DC 200364957	•		H(b) Are all a	affiliates i	nclu	ded?
						If"No,	' attach	a lıs	t (see instructions)
I Ta	ıx-exem	npt status	「 501(c)(3)	nsert no) 4947(a)(1) or 527	7	H(c) Group	exemptı	on n	umber ►
J W	ebsite	e: 🕨 ww	w restaurant org						
K For	m of ord	ganization	Corporation Trust Association	Other ►		L Year of form	ation 193	39	M State of legal domicile IL
	rt I		mary	,					
			escribe the organization's mission	or most significant activities					
	7	The Nati	ional Restaurant Association crea	ites value for the industry and n					
w			on We conduct research on behalf nt industry We provide education				/ initiativ	es t	that affect the
ġ Ę	<u> </u>	restaura	nt maustry we provide education	ar and networking opportunities	o for the h	luustiy			
Ē	-								
Governance	-								
			nis box 🛏 if the organization dis			nore than 25	% of its	net	assets
ió ió			of voting members of the governing				L	3	95
¥			of independent voting members o				L	4	95
Activities &			mber of individuals employed in c		2a) .		L	5	226
đ.	1		mber of volunteers (estimate if ne	, ,			F	6	0
	1		related business revenue from Pa		•		F	7a	1,240,952
	Ь	Net unre	lated business taxable income fro	om Form 990-T, line 34				7b	238,474
	_				-	Prior			Current Year
<u>o</u>	8		butions and grants (Part VIII, lin				5,231,1	\rightarrow	1,430,376
Revenue	9	_	am service revenue (Part VIII, lin		- F		18,133,941 820,333		23,275,946
ž. H	10		tment income (Part VIII, column		- F	-		-	27,576,510
	11 12		revenue (Part VIII, column (A), l revenue—add lines 8 through 11 (·		2,342,7	29	39,117,492
	12		· · · · · · · · · · · · · · · · · · ·			5	6,528,1	11	91,400,324
	13		s and sımılar amounts paıd (Part I				126,0	00	370,055
	14	Benefi	ts paid to or for members (Part IX	(, column (A), line 4)				0	0
ø	15		es, other compensation, employee	e benefits (Part IX, column (A),	lines	,	4 400 7	ا ، ح	27 120 072
Expenses		5-10)		salaman (A.) lana didia)	ŀ		4,480,7	70	27,120,972
<u>ā</u>	16a		ssional fundraising fees (Part IX, c		•				
五	b		indraising expenses (Part IX, column (D),	· 					
	17		expenses (Part IX, column (A), li		The state of the s		1,220,0	-	37,643,226
	18 19		expenses Add lines 13–17 (mus		· · · · · · · · · · · · · · · · · · ·	5	5,826,7		65,134,253
<i>, 0</i> 7	19	Reven	ue less expenses Subtract line 1	8 from line 12	•	Dominuina d	701,3	\rightarrow	26,266,071
හල. කුළ						Beginning (Ye		•	End of Year
Net Assets or Fund Balances	20	Total	assets (Part X, line 16)		.	4	0,137,4	56	64,492,494
4 P	21		liabilities (Part X, line 26)			2	2,150,3	72	20,696,814
žĪ	22	Netas	ssets or fund balances Subtract li	ine 21 from line 20	[1	7,987,0	84	43,795,680
Pa	rt II	Sign	ature Block						
			erjury, I declare that I have examine						
	ledge a ledge.	and belie	f, it is true, correct, and complete. [vectaration of preparer (other than	n oπicer) i	s dased on all	ıntormat	lion	or which preparer has any
					_				
		I					2-11-14		
Sigr		Signa	ature of officer			Date	!		
Her	е		aela Skalniak Vice President, Finance						
		Type	or print name and title	T					
		Preparer		Date	Che self-				payer identification number
Paid		signatur	e y	(see instructions)					
•	arer's		ame (or yours	<u> </u>			EIN 🕨		
Use	Only		mployed), , and ZIP + 4			—— ļ	LIN F		
		1					Phone no	b.	

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

┌ Yes ┌ No

Part	1111	Statement of Program S Check if Schedule O contains a				
1	Briefly	y describe the organization's mis	sion			
	ision is serve	s to lead America's restaurant ir	dustry into a new era of p	rosperity, promine	ence, and participation, enh	ancing the quality of life for
2		e organization undertake any sig ior Form 990 or 990-EZ?	nıfıcant program servıces	during the year v	which were not listed on	┌ Yes ┌ No
	If "Yes	s," describe these new services	on Schedule O			
3		e organization cease conducting	, or make significant char	iges in how it cond	ducts, any program	┌ Yes ┌ No
	If "Yes	s," describe these changes on So	chedule O			
4	expens	ube the organization's program s ses Section 501(c)(3) and 501 and allocations to others, the to	(c)(4) organizations and s	ection 4947(a)(1) trusts are required to repo	
4a	(Code	e) (Expenses \$	ıncludı	ng grants of \$) (Revenue \$)
		safety training and other educational pro 516,019 foodservice managers in Serv				food handling During 2011, NRA
4b	(Code	e) (Expenses \$	ıncludı	ng grants of \$) (Revenue \$)
	restau specifi	nment Relations and Communications trant industry Depending on the specific ic issue and works with government ago ations on various matters that affect the	: issue, the NRA, along with the encies/organizations to achieve	State Restaurant Ass	ociations, develops an appropriate	e position and response to the
4c	(Code	e) (Expenses \$	ıncludı	ng grants of \$) (Revenue \$	
π.	` Annua	Il Trade Show The 2011 NRA Show attı than 515,000-square-feet, showcased t	acted nearly 63,000 registrants	from all over the Uni	ted States and 112 countries Mor	e than 1,900 exhibitors, covering
4d	Othe	r program services (Describe ir	Schedule O)			
		enses \$ 0	including grants of \$		0)(Revenue\$	0)
<u>4e</u>	Total	I program service expenses -\$	0			

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		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? $^{f 2}$	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		
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	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI , XII , and $XIII$	12a		No
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	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV.	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II $\textcircled{\textbf{5}}$	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
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		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		Νo
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
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		Νo
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	Yes	
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	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a	Yes	
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	Yes	
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		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	20	Yes	

Part V	Statements Regarding Other IRS Filings and Tax Compliance	

	Check in Schedule O contains a response to any question in this Part V	•	•1	
_			Yes	No
La	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	1a 151			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this			
b	return	26	V	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
la	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)?	4a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N o
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
5a	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	Yes	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes	
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
_	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		
5	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		
•	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
а	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			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the	12a		
D	year 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
C	Enter the aggregate amount of reserves on hand 13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
Ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

175 W Jackson Blvd

Chicago, IL 60604 (312)715-6765

Suite 1500

Part VI

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

Se	ction 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			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
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	Yes	
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	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal			
Re	venue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
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		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			_
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶IL			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
19	Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of			
20	interest policy, and financial statements available to the public. See Additional Data Table.	a oran	nization	, b -
20	State the name, physical address, and telephone number of the person who possesses the books and records of th Caelie Skalniak	ie orga	ııı∠atlor	

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

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

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

(a) Name and Title A verage hours par week (describe hours for related organizations in Schedule O) See Additional Data Table (b) Position (do not check more than one box, unless person is both an officer and a director/trustee) (c) Position (do not check more than one box, unless person is both an officer and a director/trustee) (describe hours for related organizations is not should be a director/trustee) (describe hours for related organizations is not should be a director/trustee) (describe hours for related organizations is not should be a director/trustee) (describe hours for related organizations) (describe hours for related organizations) (describe hours for the director/trustee) (describe hours for related organizations) (describe hours for the director/trustee) (describe hours for related organizations) (describe hours for the director/trustee) (de	Check this box if neither the organiz	•	lated o	rganı	ızatı	ons	compe	ensat	ed any current or fo	ormer officer, direct	tor, or trustee
for related organizations in Schedule Officer Schedule O) organizations	(A)	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a				(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the		
See Additional Data Table		for related organizations in Schedule	Individual trustee or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former		MISC)	I
	See Additional Data Table										

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

	(A) Name and Title	(B) A verage hours per week (describe hours	unles an	on (d e tha	n on son er a	e bo ıs b nd a	x, oth)	T	Rep comp fro organiz	(D) (E) Reportable Reportable compensatio from related organizations (W- 2/1099- MISC) (W- 2/1099- MISC)			(F) Estimated amount of other compensation from the organization and related		
		for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			,		organiza	ations	
See A	ddıtıonal Data Table			<u> </u>			+ -					+			
												+			
												+			
				<u> </u>								+			
								-				+			
								\vdash				+			
												+			
							-	_				+			
												4			
												_			
1b					•	•		•							
<u>c</u>	Total from continuation sheets				•	•		P		6,896,469		0		2 020 522	
	Total (add lines 1b and 1c). Total number of individuals (incl) who	receive		ın	<u> </u>	•	2,020,533	
_	\$100,000 of reportable compen						45010	,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.a more ene					
													Yes	No	
3	Did the organization list any for on line 1a? <i>If</i> "Yes," complete Sci								r highes	t compens	ated employee	3		No	
4	For any individual listed on line organization and related organiz														
_	individual			•	•	•		•				4	Yes		
5	Did any person listed on line 1a services rendered to the organiz										or individual for	5		No	
Se	ection B. Independent Con	tractors													
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax y	n the organizatio													
	-	(A) me and business ad-	dress							Descr	(B)		(C Comper		
	exposition Services Inc	The aria business au	u1C33									1			
Las Ve	Lindell Avenue egas, NV 89118									Exposition S	ervices		1	,126,115	
1048 Cape	fficient Inc Dolphin Drive Coral, FL 33904									IT Integratio	n Consultants		1,013,997		
33 We 17th I										IT Services			901,129		
Manıf 600 V	go, IL 60603 est Solutions LLC V Chicago Ave									IT Consulting]		559,700		
	go, IL 60654													•	
	ssional Examination Service h Street Station									Exam Consu	ltants			535,761	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►51

	Page 9 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				
nts nts	1a	Federated cam	. •									
gra	b	Ÿ	es 1b	0								
ts, an	C .		ents 1c	359,653								
<u> </u>	d	Government grants	eations 1d	0								
Sign Sign	e	_	ons, gifts, grants, and 1f	1,070,723		·						
ž ja	f	sımılar amounts no	ot included above									
1 1 1 1 1 1 1 1 1 1	g	Noncash contri lines 1a-1f \$ _	butions included in									
Contributions, gifts, grants and other similar amounts	h		s 1a-1f	▶	1,430,376							
				Business Code								
nue.	2a	Annual Trade Show	<i>I</i>	541900	17,753,175	17,753,175	0	0				
Program Service Revenue	b	Conferences & Sen	nınars	813910	735,715	735,715	0	0				
9.C.A	C	Member Programs	Partner products	813910	1,240,952	0	1,240,952	0				
Seri	d	SRA License Rever	nue	813910	155,000	0	0	155,000				
E G	e	Membership Dues		813910	3,391,104	3,391,104	0	0				
į.	f	All other progra	am service revenue		0	0	0	0				
	g		s 2a – 2f		23,275,946							
	3		ome (including dividen ar amounts)	_	514,598	0	0	514,598				
	4		transfer in the street of tax-exempt bond		0	0	0	0				
	5			· · · · · · · · · · · · · · · · · · ·	2,128,599	0	0	2,128,599				
			(ı) Real	(11) Personal								
	6a	Gross rents	1,194,283									
	Ь	Less rental expenses	559,999									
	C	Rental income or (loss)	634,284	0								
	d	Net rental inco	me or (loss)		634,284	0	0	634,284				
	7a	Gross amount	(ı) Securities 3,207,384	(II) O ther 39,650,000								
)	from sales of assets other than inventory Less cost or	2,814,731	12,980,741								
	c	other basis and sales expenses Gain or (loss)	392,653	26,669,259								
	d	Net gain or (los			27,061,912	o	0	27,061,912				
Other Revenue	8a	Gross income f events (not inc \$359 of contributions	rom fundraising luding ,653 s reported on line 1c)									
ъ Б		See Part IV, lin	e 18 a	10.7.7.7								
je.	Ь	Less direct ex	penses b	136,800 77,011								
ᅙ	c		· (loss) from fundraising		59,789		0	59,789				
	9a	Gross income f See Part IV, lin	rom gaming activities le 19 a									
	ь	Less direct ex	penses b									
	C		loss) from gamıng actı) '	vities								
	10a	Gross sales of returns and allo		39,681,704								
	b c	Net income or (oods sold b (loss) from sales of inv	3,386,884 entory ►	36,294,820	36,294,820	0	0				
	-	Miscellaneous	s Revenue	Business Code								
	11a											
	b c											
	d	All other reven	ue		0	0	0	0				
	e	Total. Add lines	Į.			Ĭ	<u> </u>					
				▶	0							
	12	Total revenue.	See Instructions .	· · •	91,400,324	58,174,814	1,240,952	30,554,182 Form 990 (2011)				

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 no	ot include amounts reported on lines 6b, p, 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	370,055	СХРСПЭСЭ	general expenses	скрепосо
2	Grants and other assistance to individuals in the United States See Part IV, line 22	370,033			
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	5,950,993			
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	12,779,084			_
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,836,789			
9	Other employee benefits	3,891,321			
10	Payroll taxes	1,662,785			
11	Fees for services (non-employees)				_
a	Management				
b	Legal	615,644			_
c	Accounting	76,397			
d	Lobbying	1,184,114			
e	Professional fundraising See Part IV, line 17	, ,			_
f	Investment management fees	92,356			
g	Other	5,332,132			_
12	Advertising and promotion	858,879			_
13	Office expenses	1,349,200			
14	Information technology	1,199,781			
15	Royalties	3,800,000			
16	Occupancy	2,463,064			_
17	Travel	1,800,410			_
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	5,163,742			
20	Interest	56,120			
21	Payments to affiliates	531,019			_
22	Depreciation, depletion, and amortization	1,605,450			
23	Insurance	218,101			_
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	SRA payments	8,069,540			
b	Printing	1,047,034			
c	bank & credit card fees, taxes	2,085,941			
d	Bad debt and swap	94,302			
e					
f	All other expenses	0			
25	Total functional expenses. Add lines 1 through 24f	65,134,253	0	0	0
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				orm 990 (2011)

Part X **Balance Sheet** (A) (B) Beginning of year End of year 36,012,236 4,019,953 Cash—non-interest-bearing 1 1 2 0 2 0 0 0 3 3 3.514.604 4 4.107.367 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 0 0 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of ol 0 6 340,183 0 7 751.043 585.405 847.572 9 9 1.563.464 Prepaid expenses and deferred charges 10a 12,592,951 Land, buildings, and equipment cost or other basis *Complete* Part VI of Schedule D 10a 10b 5,684,860 b Less accumulated depreciation 16,780,596 10c 6,908,091 13,273,973 13,598,771 11 11 0 12 12 Investments—other securities See Part IV, line 11 13 0 13 0 Investments—program-related See Part IV, line 11 . . ol 0 14 Intangible assets 14 609,532 1,717,160 15 15 40,137,456 64,492,494 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 10,853,721 11,593,407 17 17 Accounts payable and accrued expenses . 18 18 19 6,638,851 19 6,762,862 20 ol 20 Ω 21 Escrow or custodial account liability Complete Part IV of Schedule D . . ol 21 0 Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified ol 0 22 23 Secured mortgages and notes payable to unrelated third parties . . . 425.126 23 305.101 24 Unsecured notes and loans payable to unrelated third parties ol 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 4,232,674 25 2,035,444 D 26 22,150,372 26 20,696,814 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 15,455,859 Unrestricted net assets 41,172,465 2,531,225 28 2,623,215 28 Temporarily restricted net assets Fund 29 ol 29 0 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ž 33 17.987.084 33 43.795.680 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 40.137.456 64,492,494

	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		91,4	100,324
2	Total expenses (must equal Part IX, column (A), line 25)	2			
3	Revenue less expenses Subtract line 2 from line 1	3		26,2	266,07
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		17,9	987,084
5	Other changes in net assets or fund balances (explain in Schedule O)	5		- 4	157,475
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		43,7	795,680
Pai	TEXII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? \cdot .		2a		Νo
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of 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 its Schedule O		2 c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were on a separate basis, consolidated basis, or both	ıssued			
	Separate basis Consolidated basis Both consolidated and separated basis				
За	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?	ne	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b		

DLN: 93493319045572

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

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

- 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, line 35c (Proxy Tax), then

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

Name of	the	organız	ation
NATIONAL	RES	TAURANT	ASSOCIATION

Employer identification number

36-1525480

- Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV
- Political expenditures
- 3 Volunteer hours

art I-B	Complete	if the org	<u>anization is</u>	exempt unde	r section 501	L(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955
- 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?
- Was a correction made?
- If "Yes," describe in Part IV

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

- Enter the amount directly expended by the filing organization for section 527 exempt function activities
- Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b
- Did the filing organization file Form 1120-POL for this year?

☐ Yes

┌ Yes

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

(e) A mount of political (a) Name (b) Address (c) EIN (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none. enter -0-

f Grassroots lobbying expenditures

(The term "expenditures" means amounts paid or incurred.) Lia 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 If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not 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 \$1,000,000 but not over \$1,000,000 \$1,000,000 g Grassroots nontaxable amount (enter 25% of line 1f) 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? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)	ווטפ	edule C (F	01111 9 9 0 01 9 9 0 - EZ) 2 0 1 1					Page ∠
A Check If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member expenses, and share of excess lobbying expenditures) 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.) Organization Total Incurred (The term "expenditures" means amounts paid or incurred.) Organization Total Incurred (The term "expenditures to influence a legislative body (direct lobbying)	Pa	rt II-A		n is exempt under	section 501(c)(3) and fi	iled Form 5768	(election
expenses, and share of excess lobbying expenditures) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures to influence public opinion (grass roots lobbying) Lobbying expenditures to influence a legislative body (direct lobbying) Total lobbying expenditures (add lines 1a and 1b) Other exempt purpose expenditures Total obtaining purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: Not over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000 but not over \$1,500,	١	Check		an affiliated group (and	lıst ın Part IV ea	ch affiliated gr	oup member's nam	e, address, EIN,
Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Total lobbying expenditures to influence public opinion (grass roots lobbying) Total lobbying expenditures (add lines 1 aand 1b) Other exempt purpose expenditures (add lines 1 aand 1b) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line Le, column (a) or (b) is: If the amount on line Le, column (a) or (b) is: If the amount on line Le, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 If the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 If the excess over \$1,000,000 If the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 If the excess over \$1,000,000 If the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 If the excess over \$1			expenses, and share of excess lob	bying expenditures)		_	•	
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 If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Diver \$500,000 Diver \$500,000 Diver \$500,000 but not over \$1,000,000 Diver \$1,000,000 but not over \$1,000,0	3	Check	ıf the filing organization checked bo	ox A and "limited contro	ol" provisions app	ly	1	1
(The term "expenditures" means amounts paid or incurred.) Ital Total lobbying expenditures to influence public opinion (grass roots lobbying) b 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 If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1225,000 plus 10% of the excess over \$1,000,000 Over \$17,000,000 Over \$17,000,000 S11,000,000 F11,000,000			Limits on Lobbying	Expenditures			(a) Filing	(b) Affiliated
Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S175,000 plus 15% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S100,000 plus 15% of the excess over \$1,000,000 Over \$1,000,000 Over \$1,000,000 Over \$1,000,000 The lobbying nontaxable amount is: Not over \$500,000 Over \$1,000,000 Over \$1,000,00					l.)		Organization's Totals	Group Totals
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 If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,7000,000 Over \$1,000,000 but not over \$1,7000,000 S225,000 plus 15% of the excess over \$1,000,000 Over \$1,7000,000 Over \$1,7000,000 F17,000,000 S225,000 plus 5% of the excess over \$1,500,000 Over \$1,7000,000 F17,000,000 S1,000,000 F17,000,000 F17,000,		-			1 \		100013	1 ocars
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 If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 In the excess over \$1,000,000 F1,000,000 F1,000,0				· -				
d O ther exempt purpose expenditures Total exempt purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000					ying)			
Total exempt purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is:			,	b)				
f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$17,000,000 but not over \$1,7000,000 Over \$17,000,000 but not over \$17,000,000 S225,000 plus 10% of the excess over \$1,000,000 Over \$17,000,000 Over \$17,000,000 Over \$17,000,000 S225,000 plus 5% of the excess over \$1,000,000 Over \$17,000,000 Over \$17,000,000 S1,000,000 S1,000,0	d	Otherexe	empt purpose expenditures					
Columns If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$500,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,7000,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,000,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 Over \$1,500,000 S1,000,000	e	Total exe	mpt purpose expenditures (add lines 1	.c and 1d)				
Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,7000,000 Over \$1,500,000 but not over \$1,7000,000 Over \$1,500,000 but not over \$1,000,000 Over \$1,500,000 but not over \$1,000,000 S225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 S1,000,000 Grassroots nontaxable amount (enter 25% of line 1f) Subtract line 1g from line 1a If zero or less, enter -0- Subtract line 1f from line 1c If zero or less, enter -0- 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? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all 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) 20 Lobbying celling amount	f		nontaxable amount Enter the amount	from the following table	in both			
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 \$1,000,000 \$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 \$1,000,00		If the an	ount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Section \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 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 1ffrom 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? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all 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) 20 2a Lobbying ceiling amount		Not over \$5	500,000	20% of the amount on lii	ne 1e			
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 \$1,00		Over \$500,	000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	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? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all 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) 20 Lobbying celling amount		Over \$1,00	0,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$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 1ffrom 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? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all 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) 20 Lobbying non-taxable amount		Over \$1,50	0,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,	000		
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? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all 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) 20 2a Lobbying ceiling amount		Over \$17,0	00,000	\$1,000,000				
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? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all 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) 20 2a Lobbying ceiling amount								
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? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all 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) 20 Lobbying non-taxable amount		Grassroo	ts nontaxable amount (enter 25% of li	ne 1f)				
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? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all 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) 20 Lobbying non-taxable amount	h	Subtract	line 1a from line 1a If zero or less. en	ter -0 -				
Jection 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all 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) 20 Lobbying ceiling amount								
4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete al 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) 20 Lobbying non-taxable amount					organization file	Form 4720 re	portina	
(Some organizations that made a section 501(h) election do not have to complete al 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) 20 Lobbying non-taxable amount							F - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	┌ Yes ┌ No
Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2009 Lobbying non-taxable amount		(Sor	ne organizations that made a	section 501(h) el	ection do not	have to co		ne five
beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying non-taxable amount b Lobbying ceiling amount			Lobbying Exp	enditures During	4-Year Avera	ging Period	d	
b Lobbying ceiling amount				(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
	2a	Lobbyin	g non-taxable amount					
	b							
c Total lobbying expenditures	c	Total loi	obying expenditures					
d Grassroots non-taxable amount	d	Grassro	ots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))	e							

che	edule C (Form 990 or 990-EZ) 2011				Pa	age 3
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has f (election under section 501(h)).	NOT f	iled F	orm	5768	3
		(a)			(b)	
		Yes	No	1	Amoun	it
L	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?			4		
Ь	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			4		
C	Media advertisements?		<u> </u>	╀		
d	Mailings to members, legislators, or the public?			ــــــ		
e	Publications, or published or broadcast statements?			ـــــــ		
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	O ther activities? If "Yes," describe in Part IV					
j	Total lines 1c through 1:					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
ar	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)(5),	or s	ectio	n
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		L	1	Yes	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		L	2		Νo
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		Νo
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".				ectio	n
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year	2a	<u> </u>			
b	Carryover from last year	2b				
С	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
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?	4				

Part IV Supplemental Information

5 Taxable amount of lobbying and political expenditures (see instructions)

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 11 Also, complete this part for any additional information

Identifier | Return Reference | Explanation

5

DLN: 93493319045572

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

Open to Public Inspection

Internal Revenue Service

Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions.

	me of the organization IONAL RESTAURANT ASSOCIATION		Emp	loyer identificat	ion numbe	er
IVA	IONAL RESTAURANT ASSOCIATION		36-:	1525480		
Pa	organizations Maintaining Donor A organization answered "Yes" to Form 99	90, Part IV, line 6.			•	
		(a) Donor advised funds	((b) Funds and ot	her accou	nts
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 adv funds are the organization's property, subject to the		ıor advı	sed	┌ Yes	┌ No
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ber conferring impermissible private benefit	nefit of the donor or donor advisor, or for a	ny othe	r purpose	┌ Yes	┌ No
Pa	rt III Conservation Easements. Complete	ıf the organization answered "Yes" t	o Forn	n 990, Part IV,	line 7.	
1 2	Purpose(s) of conservation easements held by the o Preservation of land for public use (e g , recreat Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qual easement on the last day of the tax year	rion or pleasure) Preservation of an Preservation of a G	certifie	d historic struct	-	a
	easement on the last day of the tax year			Held at the I	nd of the	Year
а	Total number of conservation easements		2a	ricia at the	ind of the	1001
ь	Total acreage restricted by conservation easements	5	2b			
c	Number of conservation easements on a certified his		2c			
d	Number of conservation easements included in (c) a	icquired after 8/17/06	2d			
3	Number of conservation easements modified, transfe	erred, released, extinguished, or terminate	ed by th	ie organization d	urıng	
	the taxable year ▶					
4	Number of states where property subject to conserv	ation easement is located ►				
5	Does the organization have a written policy regardin enforcement of the conservation easements it holds		dling of	violations, and	┌ Yes	┌ No
6	Staff and volunteer hours devoted to monitoring, ins	pecting and enforcing conservation easem	nents d	uring the year 🛌		
7	A mount of expenses incurred in monitoring, inspecti	ing, and enforcing conservation easement:	s durin	g the year		
В	Does each conservation easement reported on line 2 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	2(d) above satisfy the requirements of sec	tion		┌ Yes	┌ No
9	In Part XIV, describe how the organization reports c balance sheet, and include, if applicable, the text of the organization's accounting for conservation eases	the footnote to the organization's financial				
Par	Organizations Maintaining Collection Complete if the organization answered	ons of Art, Historical Treasures,	or Otl	her Similar A	ssets.	
1a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fire	5 116, not to report in its revenue stateme I for public exhibition, education or researd	ch ın fu			 e,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research i				
	(i) Revenues included in Form 990, Part VIII, line 1	L		► \$		

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

following amounts required to be reported under SFAS 116 relating to these items

(ii) Assets included in Form 990, Part X

Assets included in Form 990, Part X

Revenues included in Form 990, Part VIII, line 1

Part	Organizations Maintaining Co	llections of Art	<u>, His</u>	<u>toric</u>	<u>cal Tre</u>	easu	ires, or Ot	<u>the</u>	<u>r Similar A</u>	sse	ts (co	ntınued)
3	Using the organization's accession and other items (check all that apply)	r records, check an	y of th	ne foll	owing th	nat ar	e a significa	nt u	se of its colle	ction	ı	
а	Public exhibition		d	Γ	Loan o	rexc	hange progra	ams				
b	Scholarly research		e	Γ	Other							
c	Preservation for future generations											
4	Provide a description of the organization's c Part XIV	ollections and expla	ın hov	v they	further	the c	organization'	's ex	empt purpos	e ın		
5	During the year, did the organization solicit assets to be sold to raise funds rather than								ılar	Γ.	Yes	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an ar						n answered	'Y'	es" to Form	990	,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	lian or other interme	ediary	forco	ntrıbut	ions	or other ass	ets r	not	Γ.	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	/ and complete the	follow	ng ta	ble		Г		-	\ mou	nt	
c	Beginning balance							1c				
d	Additions during the year						<u> </u>	1d				
e	Distributions during the year						-	1e				
f	Ending balance						<u> </u>	1f				
2a	Did the organization include an amount on F	orm 990 Part V line	a 212				_	<u> </u>			Yes	
	-	•	E 21'							'	165	1 140
	If "Yes," explain the arrangement in Part XIV Endowment Funds. Complete		2 200	o.ro	d "Voc	" to	Form 000	Dar	+ TV line 10	`		
Ра	Endowment Funds. Complete	(a)Current Year		Prior Y			o Years Back		Three Years Bad)Four Y	ears Back
1a	Beginning of year balance	7,866,196	<u> </u>		727,821	(-)	7,669,821	+	7,551,8	-	,	
ь	Contributions	129,500			138,375		58,000		118,0	00		
С	Investment earnings or losses	0			0		C			0		
d	Grants or scholarships	0			0		C			0		
e	Other expenditures for facilities and programs	0			0		C			0		
f	Administrative expenses	0			0		C			0		
g	End of year balance	7,995,696		7,8	366,196		7,727,821		7,669,8	21		
2	Provide the estimated percentage of the year	r end balance held a	as		<u> </u>							
а	Board designated or quasi-endowment	0 %										
b	Permanent endowment ► 100 %											
c	Term endowment ► 0 %											
За	Are there endowment funds not in the posse	ssion of the organiz	ation	that a	re held	and a	dministered	for	the			
	organization by										Yes	No
	(i) unrelated organizations			•				•		a(i)		No
	(ii) related organizations								-	a(ii)	Yes	
	If "Yes" to 3a(II), are the related organization	•						•	· · · L	3b	Yes	
4	Describe in Part XIV the intended uses of the											
Par	t VI Land, Buildings, and Equipme	ent. See Form 99	0, Pa									
	Description of property				Cost or o		(b) Cost or ot basis (othe		(c) Accumulat depreciatior		(d) Bo	ok value
1a	Land		•			0		0				0
b I	Buildings					0		0		0		0
c I	Leasehold improvements					0	1,674,	945	764,	,354		910,591
d I	Equipment					0	3,071,	105	2,295,	,512		775,593
_e (Other	<u></u> .				0	7,846,	901	2,624,	,994	į	5,221,907
Tota	I. Add lines 1a-1e <i>(Column (d) should equal F</i>	orm 990, Part X, colur	nn (B)	, line	10(c).)				🕨		(5,908,091
									Schedule	D (F	orm 9	90) 2011

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		od of valuation f-year market value
(1)Financial derivatives			,
(2)Closely-held equity interests			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See	Form 990, Part X, line	13.	
(a) Description of investment type	(b) Book value		od of valuation
		Cost or end-o	f-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		(h) Rook value
	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Im (a) Descrip	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Im (a) Description (b) Should equal Form 990, Part X, col.(B) line 1	ne 15. Stion		(b) Book value
Part IX Other Assets. See Form 990, Part X, Im (a) Descrip	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)	, , , , , ,	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)	, , , , , ,	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes SWAP Agreement	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes SWAP Agreement	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes SWAP Agreement	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes SWAP Agreement	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes SWAP Agreement	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes SWAP Agreement	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes SWAP Agreement	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes SWAP Agreement	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes SWAP Agreement	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes SWAP Agreement	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes SWAP Agreement	5.)		(b) Book value

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
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 - 8	9	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue	per Re	turn
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants]	
d	Other (Describe in Part XIV) 2d]	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a]	
b	Other (Describe in Part XIV) 4b	1	
C	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	s per F	leturn
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	-	
– a	Donated services and use of facilities		
b	Prior year adjustments	7	
c	Other losses	7	
d	Other (Describe in Part XIV) 2d	7	
e	Add lines 2a through 2d		
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b	7	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	
Pai	rt XIV Supplemental Information		
Con	nplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, P	art IV , li	nes 1b and 2b,

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

Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any

Identifier	Return Reference	Explanation
SchD_P05_S00_L04	Schedule D, Part V, Line 4	The National Restaurant Association's related entity, the National Restaurant Association Educational Foundation exists to enhance the restaurant industry's service to the public through education, community engagement and promotion of career opportunities. The funds are used to provide scholarships to students studying in the foodservice industry.
SchD_P10_S00_L02	Schedule D, Part X, Line 2	The Organization is subject to income tax on any unrelated business income, net of related expenses. The accounting standard on Accounting for Uncertainty in Income Taxes addresses the determination of whether tax benefits claimed or expected to be claimed on a tax return should be recorded in the financial statements. Under this guidance, the Organization may recognize the tax benefit from an uncertain tax position 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. Examples of tax positions include the tax-exempt status of the Organization and various positions related to the potential sources of unrelated business taxable income (UBIT). For the reporting periods presented in these financial statements, there were no unrecognized tax benefits identified or recorded as liabilities. Liabilities for unrelated business income taxes were \$102,718 and \$72,207 at December 31, 2011 and 2010, respectively.

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493319045572

OMB No 1545-0047

2011

Open to Public Inspection

SCHEDULE G (Form 990 or 990-EZ) Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19,
Department of the Treasury

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.

Name of the organization
NATIONAL RESTAURANT ASSOCIATION

Employer identification number	
26 1525490	

Pa	rt I Fundraising Ac	tivities. Complete	e if the c	organiza	tion a	inswered "Yes"	to Form 990, Part IV	, line 17.
1 b c d	Indicate whether the organ Mail solicitations Internet and e-mail so Phone solicitations In-person solicitations Did the organization have or key employees listed in If "Yes," list the ten highes to be compensated at leas	ilicitations s a written or oral agre Form 990, Part VII st paid individuals or	ement wit or entity entities (e f g th any ind in conne (fundraise	Ividua ction	Solicitation of noi Solicitation of gov Special fundraisin al (including office with professional irsuant to agreem	n-government grants vernment grants ng events rs, directors, trustees fundraising services? ents under which the fur	
	(i) Name and address of Individual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or rol of utions? No		Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
Γota 3	List all states in which the licensing	organization is regis	tered or l	.► icensed t	o soli	cit funds or has be	een notified it is exempt	from registration or

			(a) Event #1 Richard E Marriott	(b) Event #2	(c) Other Events	(d) Total Events (Add col (a) through col (c))
			Golf Invitational (event type)	(event type)	(total number)	Cor (C)
₽	1	Gross receipts	496,453			496,453
Kevelkue	2	Less Charitable contributions	359,653			359,65
_	3	Gross income (line 1 minus line 2)	136,800			136,800
	4	Cash prizes	0			(
.	5	Non-cash prizes	0			(
) 12 13	6	Rent/facility costs	33,940			33,940
	7	Food and beverages	25,571		0	25,571
3	8	Entertainment	0		0	C
ة	9	Other direct expenses .	17,500			17,500
	10	Direct expense summary Add lir	nes 4 through 9 in column	(d)	🛌	(77,011
	11	Net income summary Combine I	ines 3 and 10 in column (d)		59,789
	: 1111	Gaming. Complete if the o \$15,000 on Form 990-EZ, li		(b) Pull tabs/Instant	(c) Other gaming	(d) Total gaming
- 1					(a) a that gaining	(w) rotar garring
NOVOIR				bingo/progressive bingo		(Add col (a) through col (c))
REVEIR	1	Gross revenue		bingo/progressive bingo		
		Gross revenue		bingo/progressive bingo		
	2			bingo/progressive bingo		
0001000	2	Cash prizes		bingo/progressive bingo		
Died Expelises Reveiled	2 3 4	Cash prizes		bingo/progressive bingo		(Add col (a) through col (c))
2001004	2 3 4 5	Cash prizes Non-cash prizes Rent/facility costs		F Yes	Г Yes	
0001000	2 3 4 5	Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Volunteer labor	Г Yes Г No	Г Yes	□ No	
0001000	2 3 4 5 6	Cash prizes	☐ Yes	Г Yes Г No		col (c))
0001000	2 3 4 5 6	Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Volunteer labor	☐ Yes No	Г Yes Г No		col (c))
0.001.004	2 3 4 5 6 7 8 Ente	Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Add line Net gaming income summary Comer the state(s) in which the organiz	Yes No s 2 through 5 in column (hbine lines 1 and 7 in column ation operates gaming action		Г No	col (c))
	2 3 4 5 6 7 8 Enter Is the	Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Add line Net gaming income summary Com	Yes	<pre></pre>	□ No ▶	col (c)) (Yes □ No

Sche	dule G (Form 990 or 990-EZ) 20	11			Page 3					
11	Does the organization operate ga	aming activities with nonmembers? .		Г _{Yes} Г	- No					
12	Is the organization a grantor, be	neficiary or trustee of a trust or a mem	per of a partnership or other entity							
	formed to administer charitable gaming? $\dots \dots \dots \dots \dots \dots \dots $ Yes $ extstyle ex$									
13	Indicate the percentage of gamii	ag activity operated in		1 1						
a				13a						
b										
14		f the person who prepares the organiza		<u> </u>						
	Name ►									
	Address ►									
	revenue?	ntract with a third party from whom the			_ No					
	amount of gaming revenue retained by the third party 🟲 \$									
С	C If "Yes," enter name and address									
	Name 🟲									
	Address ►									
16	Gaming manager information									
	Name 🟲									
	Gaming manager compensation I	\$ \$								
	Description of services provided	>								
17 a		Employee er state law to make charitable distribu		· · ·	- No					
b	Enter the amount of distributions	required under state law distributed to	o other exempt organizations or sp		-					
_		activities during the tax year > \$		hadala C /						
Par	t IV Complete this part to proceed instructions.)	provide additional information for	responses to quuestion on Sc	nedule G (see						
	Identifier	ReturnReference	Explana	tion						
		•	•							

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Schedule I (Form 990)

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

DLN: 93493319045572

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization
NATIONAL RESTAURANT ASSOCIATION

Employer identification number

36-1525480

Part I General Inform	nation on Grants	and Assistance					
 Does the organization ma the selection criteria used Describe in Part IV the or 	d to award the grants o	rassistance?			ity for the grants or ass	istance, and	▽ Yes
Form 990, Part I	V, line 21 for any re	Governments and ecipient that received if additional space	l more than \$5,000.	Check this box if n	o one recipient rece	ived more than \$5,0	000. Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) National Restaurant Association Educational Foundation175 W Jackson Suite 1500 Chicago,IL 60604	36-6103388	501(c)(3)	30,000	0	FM∨		Scholarships
(2) American Legislative Exchange Council 1101 Vermont Avenue NW Washington, DC 20005	52-0140979	501(c)(3)	7,000	0	FMV		Private Sector Support
(3) Ovarian Cancer National Alliance901 E Street NW Suite 405 Washington, DC 20004	31-1581756	501(c)(3)	9,100	0	FMV		Cancer Awareness
(4) Mount Vernon Ladies Association1250 Eye Street NW Suite 400 Washington, DC 20005	54-0564701	501(c)(3)	9,250	0	FM∨		Heritage Celebration
(5) Mırıam's Kıtchen2401 Vırgınıa Avenue NW Washıngton, DC 20037	52-1584936	501(c)(3)	11,500	0	FMV		100 Bowls of Compassion
(6) Campaign to End Obesity 805 15th Street NW Suite 650 Washington, DC 20005	26-0389759	501(c)(3)	15,000	0	FMV		Sponsor breakfast
(7) Anti-Defamation League 605 Third Avenue Suite 10-DR New York, NY 10158	13-1818723	501(c)(3)	8,000	0	FMV		Tribute
(8) Common Threads500 N Dearborn Street Chicago,IL 60654	20-0106847	501(c)(3)	8,750	0	FMV		Sponsorship of Common Threads World Festival
(9) Culinary Institute of America at Greystone2555 Main Street St Helena, CA 94574	06-0653264		25,000	0	FMV		Alliance support
(10) International Women's Forum Inc2120 L Street NW Washington, DC 20037	84-0919612	501(c)(6)	10,000	0	FMV		Alliance Support
		1			I		Ī

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

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

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

Partery Suppleme	Supplemental Information. Complete this part to provide the information required in Part 1, line 2, and any other additional information.								
Identifier	Return Reference	Explanation							
SchI_P01_S00_L02		For restricted grants, the NRA requires grantees to submit detailed project status reports, as specified in each grant agreement							

Schedule I (Form 990) 2011

Software ID: 11000129

Software Version: v1.00

EIN: 36-1525480

Name: NATIONAL RESTAURANT ASSOCIATION

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
National Restaurant Association Educational Foundation175 W Jackson Suite 1500 Chicago, IL 60604	36- 6103388	501(c)(3)	30,000	0	FMV		Scholarships
American Legislative Exchange Council 1101 Vermont Avenue NW Washington, DC 20005	52- 0140979	501(c)(3)	7,000	0	FM∨		Private Sector Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section If applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
O varian Cancer National Alliance 901 E Street NW Suite 405 Washington, DC 20004	31- 1581756	501(c)(3)	9,100	0	FMV		Cancer A wareness
Mount Vernon Ladies Association 1250 Eye Street NW Suite 400 Washington, DC 20005	54- 0564701	501(c)(3)	9,250	0	FMV		Heritage Celebration

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Miriam's Kitchen 2401 Virginia Avenue NW Washington, DC 20037	52- 1584936	501(c)(3)	11,500	0	FMV		100 Bowls of Compassion
Campaign to End Obesity805 15th Street NW Suite 650 Washington, DC 20005	26- 0389759	501(c)(3)	15,000	0	FMV		Sponsor breakfast

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Anti-Defamation League605 Third Avenue Suite 10-DR New York, NY 10158	13- 1818723	501(c)(3)	8,000	0	FMV		Tribute
Common Threads 500 N Dearborn Street Chicago,IL 60654	20- 0106847	501(c)(3)	8,750	0	FMV		Sponsorship of Common Threads World Festival

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Culinary Institute of America at Greystone2555 Main Street St Helena, CA 94574	06- 0653264		25,000	0	FMV		Alliance support
International Women's Forum Inc 2120 L Street NW Washington, DC 20037	84- 0919612	I 501(c)(6)	10,000	0	FMV		Alliance Support

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

DLN: 93493319045572

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

NATIONAL RESTAURANT ASSOCIATION 36-1525480 **Questions Regarding Compensation** Yes Νo 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 idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e g, maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No." complete Part III to explain Yes 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? Yes Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee 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 Receive a severance payment or change-of-control payment? 4a Nο 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Νo Participate in, or receive payment from, an equity-based compensation arrangement? **4**c Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9. 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 The organization? **5**a 5b Any related organization? If "Yes," to line 5a or 5b, describe in Part III 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 The organization? 6b Any related organization? If "Yes," to line 6a or 6b, describe in Part III 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 Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

section 53 4958-6(c)?

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

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

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

(1)	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable	other deferred	benefits	(B)(ı)-(D)	reported in prior	
(I) (II)	890,000		compensation	compensation			reported in prior Form 990 or Form 990-EZ	
	0	564,894 0	64,458 0	573,780 0	109,070 0	2,202,202	662,790 0	
(1)	500,000	414,225	1,242	253,221	17,081	1,185,769	269,363	
(11)	0	0	0	0	0	0	0	
(I)	302,500	94,947	1,195	95,633	13,708	507,983	69,020	
(II)	0	0	0	0	0	0	0	
(I)	406,736	44,057	6,858	43,848	14,804	516,303	45,957	
(II)	0	0	0	0	0	0	0	
(I)	339,545	42,166	1,242	56,427	13,348	452,728	42,610	
(II)	0	0	0	0	0	0		
(I)	279,000	64,828	841	101,489	17,504	463,662	70,023	
(II)	0	0	0	0	0	0		
(I)	250,000	27,773	3,564	64,167	16,504	362,008	31,373	
(II)	0	0	0	0	0	0	0	
(I)	265,000	29,814	540	41,263	15,804	352,421	32,174	
(II)	0	0	0	0	0	0	0	
(I) (II)	255,000 0	68,604 0	561 0	126,489 0	13,204	463,858 0	64,000	
(I)	248,558	17,038	748	45,385	12,413	324,142	23,077	
(II)	0	0	0	0	0	0		
(I) (II)	235,000	28,277 0	486 0	45,693 0	27,904 0	337,360 0	18,800	
(I)	238,154	25,015	2,412	43,861	14,081	323,523	25,423	
(II)	0	0	0	0	0	0	0	
(I)	202,433	10,836	1,290	35,867	14,081	264,507	0	
(II)	0	0	0	0	0	0		
(ı) (ıı)	201,297 0	6,507 0	561 0	28,642 0	12,904	249,911 0	0	
(I)	182,960	6,650	732	30,391	12,970	233,703	0	
(II)	0	0	0	0	0	0		
		(i) 302,500 (ii) 406,736 (ii) 339,545 (ii) 279,000 (ii) 250,000 (ii) 265,000 (ii) 248,558 (ii) 0 (ii) 235,000 (ii) 235,000 (ii) 0 (ii) 235,000 (ii) 0 (ii) 235,000 (ii) 0 (iii) 0 (iiii) 0 (iiii) 0 (iiii) 0 (iiiiiii) 0 (iiiiiiiiii	(I) 302,500 94,947 (II) 406,736 44,057 (II) 339,545 42,166 (II) 279,000 64,828 (II) 250,000 27,773 (II) 265,000 29,814 (II) 255,000 68,604 (II) 248,558 17,038 (II) 235,000 28,277 (II) 235,000 28,277 (II) 238,154 25,015 (II) 202,433 10,836 (II) 201,297 6,507 (II) 201,297 6,507 (II) 182,960 6,650	(i) 302,500 94,947 1,195 (ii) 406,736 44,057 6,858 (iii) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	(i) 302,500	(i) 302,500	(i) 302,500	

Schedule J (Form 990) 2011 Page **3**

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
		The CEO is authorized to maintain two memberships in private clubs in Washington and New York for her duties for the Association. The Executive VP of Policy and Governmental Affairs also maintains a membership for business purposes.

Schedule J (Form 990) 2011

OMB No 1545-0047

2044

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

Name of the organization
National RESTAURANT ASSOCIATION

Employer identification number

36-1525480

ldentifier	Return Reference	Explanation
F990_P06_S0A_L06	Form 990, Part VI, Section A, Line 6	The NRA is organized as an association with members who have the right to participate in the organization's governance
F990_P06_S0A_L07a	Form 990, Part VI, Section A, Line 7a	The Board elects the officers of the governing body of the NRA who are nominated by the Board Governance Committee
F990_P06_S0A_L07b	Form 990, Part VI, Section A, Line 7b	Members have the right to approve decisions of the governing body's election of directors and officers
F990_P06_S0B_L11b	Form 990, Part VI, Section B, Line 11b	The Association's governing body consists of 95 individual members. The Form 990 is reviewed by the governing body's leadership which includes the following positions. Officers of the Association including the Chairman, Vice Chairman and the Treasurer/Chairman of the Finance Committee, and the Chairman of the Audit Comittee of the Board. The 2011 Form 990 was distributed to and reviewed by this leadership group by teleconference prior to filing.
F990_P06_S0B_L12c	Form 990, Part VI, Section B, Line 12c	Officers and Directors are required to disclose conflicts of interests annually to the Chair of the Board of Directors. For each interest disclosed to the Chair, the Chair will determine whether to (a) take no action, (b) assure full disclosure to the Board of Directors and other individuals covered by this policy, (c) ask the person to recuse from participation in related Association discussions or decisions, or (d) ask the person to resign from the Association position, or, if the person refuses to resign, become subject to possible removal in accordance with removal procedures in the Association Bylaws. The President and CEO and chief staff finance executive will monitor proposed or ongoing transactions for conflicts of interest and disclose them to the Chair in order to deal with potential or actual conflicts, whether discovered before or after the transaction has occurred
F990_P06_S0B_L15	Form 990, Part VI, Section B, Line 15	The NRA Compensation Committee meets three times a year to review compensation. The Committee reviews and approves the compensation of the Chief Executive Officer, and reviews the compensation of her direct reports. An outside consultant is engaged to review compensation data with comparable organizations. This process was undertaken in 2011 for these officers.
F990_P06_S0C_L19	Form 990, Part VI, Section C, Line 19	The NRA makes all of its documents available for public disclosure upon written request at their office in Chicago. The financial statements are also available for public inspection upon written request.
F990_P07_S0A_L01a	Form 990, Part VII, Section A, Line 1a	The following board members of the National Restaurant Association also serve on the NRA Educational Foundation (related entity) board Officers of either board are also indicated Carlton Curtis is Chair of the NRAEF Board Denise Fugo is Treasurer of the NRAEF Board Phil Hickey, Treasurer, is a member of the NRAEF Board Rosalyn Mallet, Vice Chair, is a member of the NRAEF Board Sally Smith, Chair, is a member of the NRAEF Board Xavier Teixido is Vice Chair of the NRAEF Board Jeff Davis, Lorna Donatone, Sam Facchini, Ted Fowler, Phil Friedman, Michael Gibbons, Bob McAdam, Frank Puleo, Craig Reed, and Billy Sewell are all members of the NRAEF board
F990_P11_S00_L05	Form 990, Part XI, Line 5	Unrealized investment loss -457,475

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493319045572

SCHEDULE R (Form 990)

Department of the Treasury

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

2011

OMB No 1545-0047

Open to Public Inspection

nternal Revenue Service							Цns	spectio	1
Name of the organization NATIONAL RESTAURANT ASSOCIATION					Employe	r iden	tification number		
					36-152	5480			
Part									
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	Legal domicile (state	(d) Total income				Direct controlling		
175 W Jackson Blvd Chicago, IL 60604		IL.	60,999,346		17,934,635	Nation	al Restaurant Association		
Part II Identification of Related Tax-Exempt Orga or more related tax-exempt organizations during	nizations (Complete g the tax year.)	ıf the organizatio	n answered "Y	es" on I	Form 990,	, Part	: IV, line 34 becaus	e it had	one
(a) Name, address, and EIN of related organization		Legal domicile (state	(d) Exempt Code sed		Public charity stat		Direct controlling	Section 5 cont	12(b)(13 rolled
175 W Jackson Blvd Chicago, IL 60604	service to public education, community, promotion of	IL	501(c)(3)			11a			No

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990,	Part IV,	line 34
	because it had one or more related organizations treated as a partnership during the tax year.)		

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total Income	(g) Share of end-of- year assets	(h) Disprop allocati	rtionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) Gener mana partr	ral or iging	(k) Percentage ownership
							Yes	No		Yes	No	
												i
	·											

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) NRA Political Action Committee 2055 L Street NW Washington, DC 20036 52-1220888	Lobbying for the NRA	IL	N/A	С			0 %
(2) National Restaurant Association Services Inc 175 W Jackson Blvd Suite 1500 Chicago, IL 60604 36-1525480	Marketing services	IL	National Restaurant Association	С	-645	740,667	1 00 %
						Schodulo P (I	orm 990) 2011

Part V	Transactions With Related Organizations (Complete if the organization answered	"Yes" on Form 990, Pa	rt IV, line 34, 35, 3	35A, or 36.)			
Note	Complete line 1 if any entity is listed in Parts II, III or IV					Yes	No
1 During t	the tax year, did the orgranization engage in any of the following transactions with one or more related	organizations listed in Par	ts II-IV?				
a Rece	eipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity				1a		No
b Gıft,	grant, or capital contribution to related organization(s)				1b		No
c Gıft,	grant, or capital contribution from related organization(s)				1 c		No
d Loan	s or loan guarantees to or for related organization(s)				1d		No
e Loan	s or loan guarantees by related organization(s)				1e		No
f Sale	of assets to related organization(s)				1f		No
g Purc	hase of assets from related organization(s)				1 g		No
h Exch	nange of assets with related organization(s)				1h		No
i Lease	e of facilities, equipment, or other assets to related organization(s)				1 i		No
j Leas	e of facilities, equipment, or other assets from related organization(s)				1j		No
k Perfo	ormance of services or membership or fundraising solicitations for related organization(s)				1k	Yes	
I Perfo	rmance of services or membership or fundraising solicitations by related organization(s)				11		No
m Shari	ing of facilities, equipment, mailing lists, or other assets with related organization(s)				1m	Yes	
n Shar	ing of paid employees with related organization(s)				1n		No
o Reim	bursement paid to related organization(s) for expenses				10		No
p Reim	bursement paid by related organization(s) for expenses				1 p	Yes	
q Othe	er transfer of cash or property to related organization(s)				1 q	Yes	
r Othe	r transfer of cash or property from related organization(s)				1r		No
2 If the	e answer to any of the above is "Yes," see the instructions for information on who must complete this li	ne, including covered relat	tionships and transact	ion thresholds			
	(a)	(b)	(c)			ına əm	ount
	<u>-</u>	type(a-r)	Amount involved				
(1) National I	Restaurant Association Educational Foundation	m	186,050	FMV			
(2) National I	Restaurant Association Educational Foundation	k	721,950	FMV			
(3) National I	Restaurant Association Educational Foundation	q	3,800,000	FMV			
(4) National I	Restaurant Association Educational Foundation	р	1,901,335	FMV			
(5)							
(6)	ther transfer of cash or property to related organization(s) the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds (a) Name of other organization (a) Name of other organization (b) Transaction type(a-1) Amount involved Method of determining and involved involved onal Restaurant Association Educational Foundation (b) Transaction type(a-1) Amount involved (c) Amount involved (d) Method of determining and involved (n) Method of						

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	org	(e) Are all partners section 501(c)(3) janizations?	(f) Share of total income	(g) Share of end-of-year assets	end-of-year assets assets amount in bc 20 of Schedule (Form 1065		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	j) eral or aging ener?	(k) Percentage ownership
			,	Yes	No			Yes	No		Yes	No	

Schedule R (Form 990) 2011

Part VII Supplemental Information

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

Identifier Return Reference Explanation

Schedule R (Form 990) 2011

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

(A) Name and Title	(B) Average hours		(ition that			ıll		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
MICHAEL MCCALLUM CHIEF STRATEGY OFFICER	40				х			382,953	0	69,775
MARY PAT HEFTMAN EVP, CONVENTION	40				х			344,669	0	114,993
DAVID MATTHEWS SVP AND CIO	40				х			281,337	0	77,671
JAMES BALDA SVP, MEMBERSHIP	40				х			294,814	0	55,067
PAUL HINEMAN EVP, PRODUCTS & SVC	40				х			324,165	0	139,693
ROBERT GIFFORD EVP, POLITICAL ADVOCACY	40				х			266,344	0	57,798
SUSAN HENSLEY ROBUSTO SVP, PUBLIC AFFAIRS COMMUNICATIONS	40					х		263,763	0	67,597
HUDSON RIEHLE SVP, RESEARCH	40					х		265,581	0	57,942
JOAN MCGLOCKTON VP, INDUSTRY AFFAIRS	40					Х		214,559	0	49,948
ANGELO AMADOR VP, LABOR & WORKFORCE POLICY	40					Х		208,365	0	41,546
DAWN CACCIOTTI SVP, HUMAN RESOURCES	40					х		190,341	0	43,361

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

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) Average hours		tion (that a	che		II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other		
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations		
Edward Tinsley Director	2	Х						0	0	0		
Alfred L Thimm Jr Director	2	Х						0	0	0		
Clarice Turner Director	2	Х						0	0	0		
Joan Wagner Director	2	Х						0	0	0		
Roy Steven Watson Director	2	Х						0	0	0		
Robert Wong Director	2	Х						0	0	0		
Rıchard Zdyb Dırector	2	Х						0	0	0		
Fritzi Woods Director	2	Х						0	0	0		
Joseph K Fassler Director	2	Х						0	0	0		
Theodore M Fowler Jr Director	2	Х						0	0	0		
Richard Marriott Director	2	Х						0	0	0		
Xavier Teixido Director	2	Х						0	0	0		
Burton Sack Past Chair	2	Х						0	0	0		
Mıchael S Kaufman Past Chairman	2	Х						0	0	0		
Theodore J Balestrerı Past Chaır	2	Х						0	0	0		
Ralph O Brennan Past Chair	2	х						0	0	0		
Denise Marie Fugo Director	2	х						0	0	0		
Richard Rivera Past Chair	2	Х						0	0	0		
Harrıs Rusıtzky Past Chaır	2	Х						0	0	0		
Michael Gibbons Director	2	Х						0	0	0		
DAWN M SWEENEY CEO	40			Х				1,519,352	0	682,850		
DAVID GILBERT COO	40			Х				915,467	0	267,302		
MARVIN FIRBY CFO and CAO	40			Х				398,642	0	109,341		
PETER G KILGORE GENERAL COUNSEL CORPORATE SECRETARY	40			x				457,651	0	57,652		
JOHN SCOTT DEFIFE EVP POLICY & GOVT AFFAIRS	40				Х			568,466	0	127,997		

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

(A) Name and Title	(B) Average hours		(ition i that a					(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
John Metz Jr Director	2	×						0	0	0
Brian P Moore Director	2	Х						0	0	0
Raphael Oliver Director	2	Х						0	0	0
Mıchael Osborn Dırector	2	Х						0	0	0
Christopher Pappas Director	2	Х						0	0	0
Justin Persons Director	2	Х						0	0	0
Edward Pfannmuller Director	2	Х						0	0	0
Margo Provost Director	2	Х						0	0	0
Frank Puleo Director	2	Х						0	0	0
Mike Rastrelli Director	2	Х						0	0	0
Craig Reed Director	2	Х						0	0	0
Richard J Roman Director	2	Х						0	0	0
Thomas Russo Director	2	Х						0	0	0
Casey Ryan Director	2	Х						0	0	0
John Scharnweber Director	2	Х						0	0	0
Kevin Settles Director	2	Х						0	0	0
Billy Sewell Director	2	Х						0	0	0
Forrest Shoaf Director	2	Х						0	0	0
Richard T Snead Director	2	Х						0	0	0
Carl Sobocinski Director	2	Х						0	0	0
David E Stockman Director	2	Х						0	0	0
Wes Stouder Director	2	Х						0	0	0
Gene Suellentrop Director	2	Х						0	0	0
Joe Taylor	2	Х						0	0	0
Director Richard Clinton Taylor Director	2	Х						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

(A) Name and Title	(B)		((C)				(D)	(E)	(F) Estimated
ivame and little	A verage hours		ition i that a			111		Reportable compensation	Reportable compensation	amount of other
	per week	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
Philip Friedman Director	2	Х						0	0	0
Jaime Gonzalez Director	2	Х						0	0	0
David Goronkin Director	2	х						0	0	0
Frank A Grisanti Director	2	Х						0	0	C
Dewey Guida Director	2	Х						0	0	0
Desmond Hague Director	2	Х						0	0	0
Daniel Halpern Director	2	Х						0	0	0
Craig A Heath Director	2	Х						0	0	C
Geoff Hetrick Director	2	Х						0	0	0
Geoff Hill Director	2	Х						0	0	0
Steve Hilton Director	2	Х						0	0	0
Jım Hopper Dırector	2	Х						0	0	0
Tom Hutchinson Director	2	Х						0	0	C
Richie Jackson Director	2	х						0	0	C
Kenneth James Director	2	Х						0	0	C
Joseph J Kadow Director	2	Х						0	0	C
John P Kavanaugh Director	2	х						0	0	C
William Kohl Director	2	Х						0	0	0
Victor Lim Director	2	х						0	0	0
Ivan Matsunaga Director	2	Х						0	0	0
Robert McAdam Director	2	Х						0	0	0
Steve McCoid Director	2	Х						0	0	0
Matthew McMahon Director	2	Х						0	0	C
Peter Meersman Director	2	Х						0	0	C
Jeffery Messinger Director	2	Х						0	0	C

Software ID: 11000129 **Software Version:** v1.00

EIN: 36-1525480

Name: NATIONAL RESTAURANT ASSOCIATION

Form 990, Special Condition Description:

Special Condition Description

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

Compensated Employees, and (A)	(B)	ient C		c)	.ors	•		(D)	(E)	(F)
Name and Title	A verage hours per		tion that a	(che	/)			Reportable compensation from the	Reportable compensation from related	Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
Sally Smith Chairman	5	Х		х				0	0	0
Rosalyn Mallet Vice Chair	5	х		х				0	0	0
Philip J Hickey Jr Treasurer	5	Х		х				0	0	0
Mıchael Gıbbons Past Chaırman	2	Х						0	0	0
Maribeth Bisienere Director	2	Х						0	0	0
Mary Blankenbaker Dırector	2	Х						0	0	0
Thomas C Boucher Director	2	Х						0	0	0
Rıchard Brennan Jr Dırector	2	Х						0	0	0
John Campbell Director	2	Х						0	0	0
Michael M Carney Director	2	х						0	0	0
Brian E Casey Director	2	Х						0	0	0
Steve Chucri Director	2	Х						0	0	0
Ira R Cohn Director	2	Х						0	0	0
Jot Condie Director	2	Х						0	0	0
Ken Conrad Dırector	2	Х						0	0	0
Patrick Conway Director	2	Х						0	0	0
J Karl Crase Director	2	Х						0	0	0
John G Crawford Dırector	2	Х						0	0	0
Carlton Curtis Director	2	Х						0	0	0
Kevin Davies Director	2	х						0	0	0
Tommy Cvitanovich Director	2	Х						0	0	0
Jeffrey W Davis Director	2	Х						0	0	0
Lorna C Donatone Director	2	Х						0	0	0
Joseph Essa Director	2	Х						0	0	0
Sam J Facchini Director	2	х						0	0	0