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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

OMB No 11545-0047

benefit trust or private foundation) Open to Public Inspection ▶ The organization may have to use a copy of this return to satisfy state reporting requirements

AF	or the	2011 calendar year, or tax year beginning MAY I, 2011 and endin	<u>g APR 30,</u>	, <u>2012</u>	
В	Check if pplicable	C Name of organization	D Employ	/er identifi	cation number
	Addres change	THE NATIONAL BOOK FOUNDATION INC.			
	Name change	Doing Business As		<u> 13-3</u>	347524
	Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room	/suite E Telepho	one numbe	r "
	Termin ated	90 BROAD STREET 604		212	685 0261
	Amend return	City or town, state or country, and ZIP + 4	G Gross rec	eipts \$	1,322,177.
	Application .	I NEW TORK, NI TOUGE	H(a) Is this	s a group re	
	pendin	F Name and address of principal officer HAROLD AUGENBRAUM	for af	filiates?	Yes X No
		SAME AS C ABOVE	H(b) Are al	l affiliates ind	cluded? Yes No
<u></u>	ax exe	mpt status X 501(c)(3) 501(c)() (insert no.) 4947(a)(1) or	527 If "No	," attach a	list (see instructions)
		e: ▶ WWW.NATIONALBOOK.ORG			n number 🕨
			Year of formation	<u> 1986 1</u>	M State of legal domicile NY
Pa		Summary			
ç	1 1	Briefly describe the organization's mission or most significant activities SEE SCH	EDULE O		· · ·
Governance	٠ ,	Check this have the properties discontinued its apprehiment or districtions	marathan-050/c	afoteon nt a	
Ver		Check this box If the organization discontinued its operations or disposed of) !	17
Ĝ	1	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b)	- North Control of the Control of th	$\frac{3}{60}$	17
త			AR 3 7 2013		7
Activities &	1	Total number of volunteers (estimate if necessary)	AR 3 7 2013	\(\oldsymbol{O} \) 6	30
÷	1	Total unrelated business revenue from Part VIII. column (C). line 12	·	-J & 73	0.
ĕ	1	Net unrelated business taxable income from Form 990-T, line 34	GDEN, UT	7b	0.
	<u> </u>	Not divolated business taxable meeting non-relative on the second	Prior Y		Current Year
41	8	Contributions and grants (Part VIII, line 1h)		3,155.	751,495.
nŭ	1	Program service revenue (Part VIII, line 2g)		5,536.	217,223.
Revenue	1	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		7,907.	67,827.
Œ	i	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		491.	2,811.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,312	2,089.	1,039,356.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		5,000.	89,500.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	582	2,082.	591,131.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Š	b ·	Total fundraising expenses (Part IX, column (D), line 25) 149,937.			
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	709	,462.	530,544.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		<u>7,544.</u>	1,211,175.
	19	Revenue less expenses Subtract line 18 from line 12 .	-55	5,455.	<u>-171,819.</u>
Net Assets or Fund Balances			Beginning of Cu		End of Year
sets	20	Total assets (Part X, line 16)		<u>2,637.</u>	2,206,368.
A As	21	Total liabilities (Part X, line 26)		3,556.	124,586.
		Net assets or fund balances Subtract line 21 from line 20	2,289	081.	2,081,782.
	art II	Signature Block			
		Ities of perjury, I declare that I have examined this return, including accompanying schedules and			iy knowledge and belief, it is
true	, correc	t, and complete-Beckration of prepare fother than officer) is based on all information of which pr			- 74.7
C:-	_	Signature of officer	Da	<u>3-/2-</u> ite	2013
Sig		HAROLD AUGENBRAUM, EXECUTIVE DIRECTOR			
Hei	e	Type or print name and title			
		Print/Type preparer's name Preparer's signature	Date	Check	PTIN
Pai	d .	MICHAEL WALLACE Michael Wallace	03/08/1	1 3 self-emotor	P00881958
	parer	Firm's name LUTZ AND CARR, CPAS LLP		m's EIN 🛌	13-1655065
	Only	Firm's address 300 EAST 42ND STREET		• • • • •	
	,	NEW YORK, NY 10017	Pr	ione no. 2	12-697-2299
Ma	v the IF	RS discuss this return with the preparer shown above? (see instructions)			X Yes No
	001 01-2			N	/ Form 990 (2011)
				, ,	

the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O. 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O. 4 Describe the organization's program service accomplishments for each of its three largest program services, as meas Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants others, the total expenses, and revenue, if any, for each program service reported 4a (Code) (Expenses \$ 928,826. including grants of \$ 89,500.) (Revenue \$ THE FOUNDATION'S PRIMARY FUNCTION IS THE PRESENTATION OF THE BOOK AWARDS, THE MOST PROMINENT LITERARY AWARDS IN AMERICA OF 2011, THE FOUNDATION EXPANDED THE AWARDS BY ANNOUNCING FINALISTS FOR THE FIRST TIME ON RADIO, IN CONJUNCTION WITH PUBLIC BROADCASTING, WITH WEBSTREAMING AROUND THE WORLD. THE PRESENTED THE MEDAL FOR DISTINGUISHED CONTRIBUTION TO AMER TO POET JOHN ASHBERY AND THE LITERARIAN AWARD FOR OUTSTAND	217,223. HE NATIONAL IN THE FALL THE AWARDS
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TO THE AMERICAN LITERARY COMMUNITY TO MITCHELL KAPLAN, FOU MIAMI BOOK FAIR. AS PART OF NATIONAL BOOK AWARDS WEEK IN N FOUNDATION PRESENTED SEVEN PROGRAMS, INCLUDING THE NATIONAL AWARDS, THE NATIONAL BOOK AWARDS AFTER-PARTY, THE MEDAL CE FINALISTS READING, THE TEEN PRESS CONFERENCE-WEBSTREAMED TO (Code) (Expenses \$ Including grants of \$) (Revenue \$	ICAN LETTERS ING SERVICE NDER OF THE EW YORK, THE L BOOK REMONY, THE O 30,000
4c (Code) (Expenses \$	
4d Other program services (Describe in Schedule O)	1
(Expenses \$ including grants of \$) (Revenue \$ 4e Total program service expenses ▶ 928,826.	<u> </u>
SEE SCHEDULE O FOR CONTINUATION(S)	Form 990 (2011)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A .	_1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4_		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete		_	
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
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	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	:		
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
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		_X_
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	Х	
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		_ <u>X</u> _
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	-	<u> X</u>
D	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			v
4-	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> X</u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			w
46	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15_		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	40		v
47	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		
10	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
20~	complete Schedule G, Part III	19		X_
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u>X</u>
D	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b Form	<u> </u> 	2011
		1-01111	J J J (2	2011)

Form 990 (2011)

Form 990 (2011) THE NATIONAL BOOK FOUNDATION INC.

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a Ent	er the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 63			
b Ent	er the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1	1	
c Did	the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
(ga	mbling) winnings to prize winners?	1c	X	
2a Ent	er the number of employees reported on Form W·3, Transmittal of Wage and Tax Statements,			
filed	d for the calendar year ending with or within the year covered by this return 2a 7			
b If at	t least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
No	te. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a Did	the organization have unrelated business gross income of \$1,000 or more during the year?	3a		<u> </u>
b f "\	Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a Ata	any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
fina	ancial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		<u>X</u>
b If "\	Yes," enter the name of the foreign country			
See	e instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts		i	
	is the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<u>X</u>
	Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	es the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			7.7
	contributions that were not tax deductible?	6a		X
	Yes," did the organization include with every solicitation an express statement that such contributions or gifts re not tax deductible?	er	-	
	ganizations that may receive deductible contributions under section 170(c).	6b		
	the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	_x	
	Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
	the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	ile Form 8282?	7c		Х
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		X
f Did	the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		_X_
g If th	ne organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	ne organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	onsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting		1	
	anization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
_	onsoring organizations maintaining donor advised funds.			
	the organization make any taxable distributions under section 4966?	9a		
	the organization make a distribution to a donor, donor advisor, or related person? ction 501(c)(7) organizations. Enter:	9b		
	eation fees and capital contributions included on Part VIII, line 12	i		
	pss receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	ction 501(c)(12) organizations. Enter.		Ì	
	oss income from members or shareholders		ļ	
b Gro	oss income from other sources (Do not net amounts due or paid to other sources against			
am	ounts due or received from them)			
12a Sed	ction 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If "	Yes," enter the amount of tax-exempt interest received or accrued during the year			
13 Sec	ction 501(c)(29) qualified nonprofit health insurance issuers.]	
a lst	he organization licensed to issue qualified health plans in more than one state?	13a		
	te. See the instructions for additional information the organization must report on Schedule O		Ì	
	ter the amount of reserves the organization is required to maintain by the states in which the			
	panization is licensed to issue qualified health plans			
	ter the amount of reserves on hand	 -		37
	I the organization receive any payments for indoor tanning services during the tax year? Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a		<u>X</u>
		14b		

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

	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion 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			ļ
	If there are material differences in voting rights among members of the governing body, or if the governing	İ		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.	<u> </u>		
b	Enter the number of voting members included in line 1a, above, who are independent 1b 17			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	<u></u>	Х
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			1
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	_8b_	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С				
	ın Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	_	X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a		X
b	, 1 - 3,	15b		X
40	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		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
<u></u>	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NY	-		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	ıvaılab	ıe	
	for public inspection. Indicate how you made these available. Check all that apply.			
40	X Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	i finar	icial	
	statements available to the public during the tax year.	_		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organizar	ion 🕨		
	HAROLD AUGENBRAUM - 212-685-0261			
13200	90 BROAD STREET, SUITE 604, NEW YORK, NY 10004			

01-23-12

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

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

- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title	(B) Average			((Pos	C) ition	1		(D) Reportable	(E) Reportable	(F) Estimated
	hours per	box	, unle	ss pe	rson	than is bot or/trus	h an	compensation	compensation	amount of
	week (describe hours for related organizations in Schedule O)	stee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) DAVID STEINBERGER								_	_	_
BOARD CHAIRMAN	1.00	X	ļ	X		_		0.	0.	<u> </u>
(2) MORGAN ENTREKIN									_	
BOARD VICE CHAIRMAN	1.00	X	-	X		<u> </u>	_	0.	0.	0.
(3) DEBORAH E. WILEY	1 00									•
BOARD TREASURER	1.00	X		X		 		0.	0.	0.
(4) CALVIN SIMS	1 00									•
BOARD MEMBER	1.00	X	-					0.	0.	0.
(5) CAROLYN K. REIDY	1									_
BOARD MEMBER	1.00	X						0.	0.	0.
(6) DAVID DRUMMOND	1 00						}			
BOARD MEMBER	1.00	X			ļ	ļ		0.	0.	0.
(7) ELPIDIO VILLARREAL	1 00							_		•
BOARD MEMBER	1.00	X	_					0.	0.	0.
(8) JAMIE CAREY	1 00							0		•
BOARD MEMBER	1.00	X	-		<u> </u>	├-		0.	0.	0.
(9) KENNETH L. WALLACH	1 00							_		•
BOARD MEMBER	1.00	<u>X</u>	\vdash			ļ		0.	0.	0.
(10) LES B. LEVI	1 00		}					•		•
BOARD MEMBER	1.00	X	<u> </u>	_		-	_	0.	0.	0.
(11) LYNN NESBIT	1 00	,,						0		•
BOARD MEMBER	1.00	X.				 		0.	0.	0.
(12) MARKUS DOHLE	1 00	3,5			}			0		0
BOARD MEMBER	1.00	X				-		0.	0.	0.
(13) PAUL LECLERC	1 00					ĺ		0	^	0
BOARD MEMBER	1.00	-			-			0.	0.	0.
(14) QUANG BAO	1.00	.						0.	0.	0
BOARD MEMBER	1.00	_	-			 -		<u> </u>		0.
(15) STEVEN LEVEEN BOARD MEMBER	1.00	x						0.	0.	0.
(16) SUSAN PETERSEN KENNEDY	1.00		_		 	<u> </u>		<u> </u>	•	
BOARD MEMBER	1.00	x						0.	0.	0.
(17) W. DRAKE MCFEELY	1.00		1			\vdash	 		0.	<u></u>
BOARD MEMBER	1.00	x						0.	0.	0.
132007 01-23-12						·		·		Form 990 (2011)

10100200 750420 122247524

Form 990 (2011)

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

Part VIII Statement of Revenue (D) Revenue excluded from (A) (B) (C) Total revenue Related or Unrelated exempt function business tax under sections 512, 513, or 514 revenue revenue Gifts, Grants ilar Amounts 1 a Federated campaigns 1a b Membership dues 1b 224,865. c Fundraising events 1<u>c</u> d Related organizations 1d 60,530. Contributions, and Other Sim e Government grants (contributions) 1e f All other contributions, gifts, grants, and 466,100. similar amounts not included above 48,028. g Noncash contributions included in lines 1a-1f \$_ 751,495 h Total. Add lines 1a-1f Business Code 149,750. 2 a ENTRY FEES 511120 149,750. Program Service Revenue 511120 50,973. 50,973 **b MEDALLION SALES** 16,500. c FINALIST FEES 511120 16,500. All other program service revenue 217,223. g Total. Add lines 2a-2f ▶ Investment income (including dividends, interest, and 50,716. 50,716. other similar amounts) Income from investment of tax-exempt bond proceeds 81. 81. Royalties (ı) Real (II) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other 89,842. assets other than inventory b Less cost or other basis 72,731 and sales expenses 17,111. c Gain or (loss) 17,111. 17,111. d Net gain or (loss) \triangleright 8 a Gross income from fundraising events (not Revenue including \$ 224,865. of contributions reported on line 1c) See a 210,090 Part IV, line 18 Other b|210,090.b Less direct expenses 0. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 2,730. 11 a MISCELLANEOUS INCOME 900099 2,730. d All other revenue 2,730. e Total. Add lines 11a-11d 217,223 039,356. 70,638. Total revenue. See instructions.

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Form 990 (2011)

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 respon-				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and	40.000	4.0.00		
	organizations in the United States. See Part IV, line 21	10,000.	10,000.		
2	Grants and other assistance to individuals in				
_	the United States See Part IV, line 22	79,500.	79,500.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the		Ì		
	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	005 050	00 055	00 505	
	trustees, and key employees	205,059.	92,277.	20,505.	92,277
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(8)	200 000	<u> </u>		
7	Other salaries and wages	309,992.	277,970.	25,870.	6,152
8	Pension plan accruals and contributions (include	6 770	4 0 - 4		
	section 401(k) and section 403(b) employer contributions)	6,770.	4,874. 24,994.	610.	1,286
9	Other employee benefits	33,895.	24,994.	3,030.	5,871
10	Payroll taxes	35,415.	25,499.	3,187.	6,729
11	Fees for services (non-employees)				
а	 		,		
b	-	40 000		4.5	
С		18,839.		18,839.	
d	· · · · · · · · · · · · · · · · · · ·				
е	• · · · · · · · · · · · · · · · · · · ·				
f	Investment management fees	19,746.	14,217.	1,777.	3,752
g		43,746.		43,746.	
12	Advertising and promotion	5,713.	987.	1,487.	3,239
13	Office expenses .	74,093.	64,577.	3,960.	5,556
14	Information technology	4,550.	4,550.		
15	Royalties				
16	Occupancy	85,925.	61,866.	7,733.	16,326
17	Travel	42,449.	42,449.		·
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings			···	
20	Interest			<u>-</u>	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,069.	1,490.	186.	393
23	Insurance .	16,464.	11,854.	1,482.	3,128
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	HONORARIA	145,504.	145,504.		
b		64,694.	64,694.		
С	INDIRECT AWARD DINNER E	5,228.			5,228
d	PHOTOGRAPHY	1,524.	1,524.		
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,211,175.	928,826.	132,412.	149,937
26	Joint costs. Complete this line only if the organization	T			
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.		Ì		
	Check here if following SOP 98-2 (ASC 958-720)				

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Pa	rt X	Balance Sheet				
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		221,066.	1_	130,208.
	2	Savings and temporary cash investments .		79,791.	2	79,891.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net .		30,490.	4	4,500.
	5	Receivables from current and former officers, du	ectors, trustees, key			
		employees, and highest compensated employee	es Complete Part II			
	1	of Schedule L			5	
	6	Receivables from other disqualified persons (as	defined under section			
		4958(f)(1)), persons described in section 4958(c)		1		
	}	employers and sponsoring organizations of sect	ion 501(c)(9) voluntary			
		employees' beneficiary organizations (see instru-	ctions)		6	
Assets	7	Notes and loans receivable, net	·		7	
Ass	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		9,696.	9	5,299.
	10a	Land, buildings, and equipment cost or other				
		basis Complete Part VI of Schedule D	10a 74,453.			}
	b	Less accumulated depreciation	10b 72,116.	4,406.	10c	2,337.
	11	Investments - publicly traded securities		2,030,199.	11	2,337. 1,957,144.
	12	Investments - other securities See Part IV, line 1	1		12	
	13	Investments - program-related See Part IV, line		13		
	14	Intangible assets		14		
	15	Other assets See Part IV, line 11		26,989.	15	26,989.
	16	Total assets. Add lines 1 through 15 (must equa	al line 34)	2,402,637.	16	2,206,368.
	17	Accounts payable and accrued expenses	65,655.	_17	55,755.	
İ	18	Grants payable		18	12,500.	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities	Į		20	
es	21	Escrow or custodial account liability Complete F	Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors	s, trustees, key employees,			_
iab		highest compensated employees, and disqualifie	ed persons. Complete Part II			
_		of Schedule L			22	
	23	Secured mortgages and notes payable to unrela	ted third parties		23	
	24	Unsecured notes and loans payable to unrelated	I third parties		24	
	25	Other liabilities (including federal income tax, pay	ables to related third			
		parties, and other liabilities not included on lines	17-24) Complete Part X of			
		Schedule D		47,901.	25	56,331.
	26	Total liabilities. Add lines 17 through 25		113,556.	26	124,586.
		Organizations that follow SFAS 117, check he	re 🕨 💹 and complete			
ses		lines 27 through 29, and lines 33 and 34.				
ano	27	Unrestricted net assets		1,894,081.	27	1,792,082.
Bal	28	Temporarily restricted net assets]	145,000.	28	39,700.
pu	29	Permanently restricted net assets	<u> </u>	250,000.	29	250,000.
.Fu		Organizations that do not follow SFAS 117, ch	eck here 🕨 📖 and			
S O		complete lines 30 through 34.			j	
set	30	Capital stock or trust principal, or current funds			30	<u> </u>
As	31	Paid-in or capital surplus, or land, building, or eq	F		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated inc	come, or other funds		32	
~	33	Total net assets or fund balances	-	2,289,081.	33	2,081,782.
	_34	Total liabilities and net assets/fund balances		2,402,637.	34	2,206,368. Form 990 (2011)

Form **990** (2011)

Form 990 (2011)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

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

Open to Public Inspection

Name of the organization

Employer identification number

			IONAL BOOK F						13	3-33 <u>47524</u>
Part I	Reason	for Public Char	ity Status (All organiz	zations mu	st comple	te this par	t) See ins	tructions		
The orga	inization is not a	a private foundation	because it is. (For lines	1 through	11, check	only one b	ox)			
1 🗔	A church, co.	nvention of churches	s, or association of chur	ches desc	nbed in se	ction 170	(b)(1)(A)(i)).		
2	A school des	cribed in section 17	0(b)(1)(A)(ii). (Attach Sc	hedule E)						
з 🗀	7		tal service organization			170(b)(1)	(A)(iii).			
4	ר י		operated in conjunction					(b)(1)(A)(i	ii). Enter th	ne hospital's name.
	city, and stat	-			•			(<i>N</i> - <i>N</i> - <i>N</i>	,	•
5	7		benefit of a college or u	niversity o	wned or or	perated by	a governi	mental un	ıt describe	d in
-		(b)(1)(A)(iv). (Comple	=				- g			-
6 [7		ent or governmental uni	t describer	d in sectio	n 170(h)/-	11/ / 1/1/1			
7 👿	7		eives a substantial part					or from the	annoral n	ublic described in
/ 125		(b)(1)(A)(vi). (Comple		or its supp	iort iioiii a	governme	intal unit C	7 110111 trae	general p	dolle described in
• [_		ection 170(b)(1)(A)(vi).	(Complete	Port II \					
ું ⊨	7						h			d
9			eives. (1) more than 33							-
		•	nctions - subject to certa	-	•	•				-
			axable income (less sect	uon 5 i i ta	ix) from bu	sinesses a	acquirea b	y the orga	inization a	πer June 30, 1975
40	7	509(a)(2). (Complete		- 			500/ W	4.		
10 -	7	-	perated exclusively to te	•	•			•		
11	-	-	perated exclusively for the							,
			ations described in section				c) See sec	ction 509(a)(3). Che	ck the box that
			organization and complete		•				٦, ٢	Time III. Other
- I	a ∐Type I		••		e III - Func	•	_			Type III - Other
e	•	•	it the organization is not		-	•	•			
			han one or more publicly		_				9(a)(1) 01 S	ection 509(a)(z)
f			ten determination from t	ine iko ina	atitisa iy	pe i, Type	ii, or Type	9 111		
_		rganization, check th					of the fell			لـــا
g	_		rganization accepted ar			•		•		[V N-
			irectly controls, either al	one or tog	ether with	persons c	iescribea	in (ii) and (iii) below,	Yes No
			upported organization?							11g(i)
			n described in (i) above?		-0					11g(ii)
_		•	person described in (i) o							11g(iii)
h	Provide the in	ollowing information	about the supported or	ganization	(S)					
(i) Nam	ne of supported	(ii) EIN	(iii) Type of		organization			(VI) İş	s the	(vii) Amount of
or	ganization		organization (described on lines 1-9		sted in your			organizáti (i) organiz	ed in the	support
			above or IRC section	governing	document?	(I) or your	support?	U.S	.7	
			(see instructions))	Yes	No	Yes	No	Yes	No	
									<u> </u>	
					İ					
	·	ļ			-			ļ	 -	
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				-	 				 	
		 						 	 	
<u> rotal</u>		L	L <u></u>	<u> </u>	L		<u>. </u>		<u> </u>	

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

Schedule A (Form 990 or 990-EZ) 2011

132021 01-24-12

Schedule A (Form 990 or 990-EZ) 2011 THE NATIONAL BOOK FOUNDATION INC. 13-3347524 Page 2

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

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

Sec	Section A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not			İ			
	ınclude any "unusual grants.")	848,546.	901,745.	917,090.	998,155.	751,495.	4417031.
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	848,546.	901,745.	917,090.	998,155.	751,495.	4417031.
5	The portion of total contributions					i	
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included			į		į	
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						1667862.
	Public support. Subtract line 5 from line 4				_,		<u>2749169.</u>
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🖊	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	848,546.	901,745.	917,090.	998,155.	751,495.	4417031.
8	Gross income from interest,						
	dividends, payments received on			İ			le .
	securities loans, rents, royalties						
	and income from similar sources	180,041.	71,032.	58,345.	58,909.	50,797.	419,124.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)	647.	1,916.	6,228.		2,730.	11,521.
11	Total support. Add lines 7 through 10						4847676.
	Gross receipts from related activities,	•	•				<u>,174,710.</u>
13	First five years. If the Form 990 is for	~	first, second, thir	d, fourth, or fifth ta	ix year as a section	n 501(c)(3)	. —
Sec	organization, check this box and store ction C. Computation of Publ		rcentage				<u> </u>
	Public support percentage for 2011 (column (fl)		14	56.71 %
	Public support percentage from 2010	, ,,	•	.0.0.0	-	15	56.48 %
	33 1/3% support test - 2011. If the o	•	•	n line 13, and line 1	ا 14 is 33 1/3% or m		
	stop here. The organization qualifies	=				, 0	▶ [X]
ь	33 1/3% support test - 2010. If the		=		line 15 is 33 1/3%	or more, check th	
	and stop here. The organization qual	-					▶ 🗀
17a	10% -facts-and-circumstances tes	• •	• •		e 13 16a or 16b a	and line 14 is 10%	or more
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"			=			▶ □
h	10% -facts-and-circumstances tes	_	•		-	7a. and line 15 is	10% or
~	more, and if the organization meets the	_					
	organization meets the "facts-and-circ						▶ □
18	Private foundation. If the organization		_	•		-	, [
		<u></u>				dule A (Form 990	
						, , , , , , , , , , , , , , , , , , , ,	-,

Schedule A (Form 990 or 990-EZ) 2011 Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to

Section A. Public Support	iow, piease com	piete Part II)				
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and	(a) 2007	(0) 2008	(6) 2009	(0) 2010	(e) 2011	(1) 10(a)
membership fees received (Do not						
include any "unusual grants ")						
, , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·	<u> </u>		ļ	 	
2 Gross receipts from admissions,		į				
merchandise sold or services per- formed, or facilities furnished in					1	
any activity that is related to the		ļ		1		
organization's tax-exempt purpose						
3 Gross receipts from activities that					1	
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities		 			 	
furnished by a governmental unit to						
the organization without charge		 		}	 	
6 Total. Add lines 1 through 5		<u> </u>		 		
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons		<u> </u>				
b Amounts included on lines 2 and 3 received			•			!
from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)] -	
Section B. Total Support	, , , , , , , , , , , , , , , , , , , ,					
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6				T		
10a Gross income from interest,						
dividends, payments received on						
securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income		 		 	 	
(less section 511 taxes) from businesses						
acquired after June 30, 1975		<u> </u>				
c Add lines 10a and 10b		<u> </u>			 	_
11 Net income from unrelated business				1		
activities not included in line 10b, whether or not the business is						
regularly carried on		<u> </u>				
12 Other income Do not include gain						
or loss from the sale of capital assets (Explain in Part IV)						
13 Total support (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for	the organization	's first, second, thir	d. fourth, or fifth ta	ax vear as a sectu	on 501(c)(3) organiz	ation.
check this box and stop here	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	o o., ooooo,	G , 10 G 1111, G1 111111	an year ac a cee.	01. 00 1(0)(0) 0. ga	.u, ▶□
Section C. Computation of Public	Support Pe	ercentage				
15 Public support percentage for 2011 (lir			column (fl)		15	9
16 Public support percentage from 2010			Joidinin (1))			
Section D. Computation of Inves					16	
			10 (5)		T ₂	
17 Investment income percentage for 201		•	ie is, column (t))		17	
18 Investment income percentage from 2					18	
19a 33 1/3% support tests - 2011. If the c						7 is not
more than 33 1/3%, check this box an	-		· · · · · · · · · · · · · · · · · · ·			▶└
b 33 1/3% support tests - 2010. If the o	organization did	not check a box on	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%,	and
line 18 is not more than 33 1/3%, chec	k this box and s	stop here. The orga	anızatıon qualifies	as a publicly sup	ported organization	▶
20 Private foundation. If the organization	did not check a	box on line 14, 19	<u>a, or 19b, check ti</u>	his box and see ir	structions	▶ ∟
122022 01-24-12				6.	hadula A (Earm 99	0 000 E3\ 00:

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047 Inspection

Name of the organization

Employer identification number

	THE NATIONAL BOOK	FOUNDATION INC.	13-3347524
Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (dunng year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	sed funds
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a		used only
	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?		Yes No
Par		ganization answered "Yes" to Form 990, P	Part IV, line 7
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply)	-
	Preservation of land for public use (e.g., recreation or		storically important land area
	Protection of natural habitat		ified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Yea
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic sti	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired		ure
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the	e organization during the tax
	year▶		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the pe		
	violations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting	, and enforcing conservation easements d	luring the year 🕨
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during	the year > \$
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the requirements of section 170)(h)(4)(B)(ı)
	and section 170(h)(4)(B)(ii)?		Yes L No
9	In Part XIV, describe how the organization reports conservation	tion easements in its revenue and expense	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	ation's financial statements that describes	the organization's accounting for
	conservation easements		
Pai	rt III Organizations Maintaining Collections o	of Art, Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (A	SC 958), not to report in its revenue stater	ment and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	hibition, education, or research in furthera	ance of public service, provide, in Part XIV
	the text of the footnote to its financial statements that described	ribes these items	
b	If the organization elected, as permitted under SFAS 116 (A	SC 958), to report in its revenue statement	t and balance sheet works of art, historica
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of pu	iblic service, provide the following amount
	relating to these items		
	(i) Revenues included in Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical tro	easures, or other similar assets for financia	al gain, provide
	the following amounts required to be reported under SFAS	116 (ASC 958) relating to these items	
а	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		> \$

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

Schedule D (Form 990) 2011

		IONAL BOOK	FOUNDATIO	N INC.		<u>13-33</u>	47524 Page 2
Par	t III Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, or Ot	her Simil	ar Asse	ts (continued)
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that are a	significant	use of its	collection items
	(check all that apply)						
а	Public exhibition	d	Loan or excl	hange programs			
b	Scholarly research	е	Other			. <u> </u>	
c	Preservation for future generations						
4	Provide a description of the organization's co	ollections and explair	n how they further th	ne organization's e	xempt purp	ose in Par	t XIV.
5	During the year, did the organization solicit o	r receive donations o	of art, historical trea	sures, or other sim	ılar assets		
	to be sold to raise funds rather than to be ma	aintained as part of t	he organization's co	ollection?			Yes No
Par	t IV Escrow and Custodial Arran	gements. Comple	ete if the organizatio	n answered "Yes"	to Form 990), Part IV, I	ine 9, or
	reported an amount on Form 990, Par	rt X, line 21					
1a	Is the organization an agent, trustee, custode	an or other intermed	liary for contribution	s or other assets n	ot included		
	on Form 990, Part X?						Yes No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing table:				
							Amount
С	Beginning balance				1c		
d	Additions during the year				1d		
е	Distributions during the year				1e		
f	Ending balance				1f		
2 a	Did the organization include an amount on Fe	orm 990, Part X, line	21?				Yes No
b	If "Yes," explain the arrangement in Part XIV					-	
Par	t V Endowment Funds. Complete r	f the organization an	swered "Yes" to For	rm 990, Part IV, line	e 10.		
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three	years back	(e) Four years back
1a	Beginning of year balance	2,030,199.	1,865,925.	1,619,431	. 2.	162,940.	
b	Contributions						
С	Net investment earnings, gains, and losses	12,601.	164,274.	246,494		334,891.	
d	Grants or scholarships						
е	Other expenditures for facilities						
	and programs	-85,656.				-8,618.	
f	Administrative expenses						
g	End of year balance	1,957,144.	2,030,199.	1,865,925	. 1.	519,431.	
2	Provide the estimated percentage of the curr	rent year end balanc	e (line 1g, column (a	ı)) held as·			
а	Board designated or quasi-endowment	87.23	_%				
b	Permanent endowment ► 12.77	%					
C	Temporarily restricted endowment ▶	.00%					
	The percentages in lines 2a, 2b, and 2c shou	ıld equal 100%					
За	Are there endowment funds not in the posse	ssion of the organiza	ation that are held a	nd administered fo	r the organi	zation	
	ph.						Yes No
	(i) unrelated organizations						3a(i) X
	(ii) related organizations		•				3a(ii) X
b	If "Yes" to 3a(II), are the related organizations	•				-	3b
4	Describe in Part XIV the intended uses of the						
Par	t VI Land, Buildings, and Equipm	nent. See Form 990), Part X, line 10.	· · · · · · · · · · · · · · · · · · ·			
	Description of property	(a) Cost or of basis (investing	1 ' '		Accumulat depreciation	1	(d) Book value
1a	Land						
b	Buildings						
c	Leasehold improvements						
d	Equipment		7	4,453.	72,1	16.	2,337.
<u>е</u>	Other .						
Total	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, column (B), line 1	0(c).)			2,337.

Schedule D (Form 990) 2011

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

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

(9) (10)(11)

	dule D (Form 990) 2011 THE NATIONAL BOOK FOUNDATION					<u> 13-3</u>	<u>3347524</u>	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to	Audi	ted Finan	cial S	tater	nent	s	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1			1,039	<u>,356.</u>
2	Total expenses (Form 990, Part IX, column (A), line 25)			2			1,211	,175.
3	Excess or (deficit) for the year Subtract line 2 from line 1			3			-171	,819.
4	Net unrealized gains (losses) on investments			4				,480.
5	Donated services and use of facilities			5				
6	Investment expenses			6				
7	Prior period adjustments		•	7				
8	Other (Describe in Part XIV)			8	-			
9	Total adjustments (net) Add lines 4 through 8			9			-35	,480.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and	d 9		10			-207	,299.
	t XII Reconciliation of Revenue per Audited Financial Stateme		/ith Rever	nue p	er Re	turn		<u> </u>
1	Total revenue, gains, and other support per audited financial statements					1	1,003	.876.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.			•	F			70,00
а	Net unrealized gains on investments	2a	-3	5,48	30.			
b	Donated services and use of facilities	2b		<u> </u>				
c	Recoveries of prior year grants	2c						
d	Other (Describe in Part XIV)	2d						
e	Add lines 2a through 2d					2e	-35	,480.
3	Subtract line 2e from line 1					3	1,039	356.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				-			, 3 3 0 •
· a	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	45				4c		0.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	•			F	5	1,039	
	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents \	With Expe	nses	per f			<u>, </u>
1	Total expenses and losses per audited financial statements					1	1,211	175.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.				-			, 2 , 3 .
_ а	Donated services and use of facilities	2a						
b	Prior year adjustments	2b						
c	Other losses	2c						
d	Other (Describe in Part XIV)	2d						
e	Add lines 2a through 2d		<u> </u>			2e		0.
3	Subtract line 2e from line 1				T	3	1,211	175.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1				T			, = , 5 •
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a						
	Other (Describe in Part XIV)	4b				1		
	Add lines 4a and 4b					4c		0.
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)				-	5	1,211	775.
	t XIV Supplemental Information							<u>, </u>
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III	linee	1a and 4 Do	rt IV be	10c 1h	and 0	h Part V line	1. Dart
	e 2; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also comp							4, Fait
	RT V, LINE 4: THE FOUNDATION'S ENDOWMENT CO							
	CI VI DIND 1. IND I CONDITION D DADONADAL CO	21101	DID OI	1110	<u>, </u>	<u> </u>		
DES	SIGNATED FUNDS ESTABLISHED FOR GENERAL SUPP	ο O D T	ר כדא בי	NE I	ONIC)₽~I	マエマ ・ アフェマ	רותיו
<u> </u>	JIONNIED I ONDO EDINDDIBNED I ON GENERAL DOIL	OICI	MID O	1410 1	20110	/11 1	CEDITCE.	עניו ו
माप	ND FOR THE FOUNDATION'S LITERARIAN AWARD.							
	10 TOR THE TOURSHITTOR & BITBURGH HWINDS							
							· · ·	
PAI	RT X, LINE 2: MANAGEMENT HAS EVALUATED ALL	TNC	OME TA	X PC	STT	יוסדיי	IS AND	
							15 1115	
COI	NCLUDED THAT NO DISCLOSURES RELATING TO UNC	CERT	AIN TA	х ро	osīn	יוסוי	IS WERE	
REC	QUIRED IN THE FINANCIAL STATEMENTS.							

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(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, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. ➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

OMB No 1545-0047

Name of the organization

Open To Public Inspection Employer identification number

THE NAT	IONAL BOOK FOUNDAT	ION	IN	C.	13-3347	524
Part I Fundraising Activities required to complete this par	Complete if the organization answert.	ered "\	res" to	Form 990, Part IV,	ine 17. Form 990-EZ	filers are not
a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, P b If "Yes," list the ten highest paid indicompensated at least \$5,000 by the	e Solicitat f Solicitat g Special or oral agreement with any individual eart VII) or entity in connection with p ividuals or entities (fundraisers) purs	tion of tion of fundra (inclui	non-grand governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governation governat	overnment grants nment grants events fficers, directors, trus fundraising services?	Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	have c	Did raiser ustody itrol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
		-				
					_	
						_
						:
•						
			<u></u>			
Total 3 List all states in which the organization or licensing	on is registered or licensed to solicit	contrib	outions	s or has been notified	d it is exempt from re	egistration
					·	
						
						· · ·
	· · · · · · · · · · · · · · · · · · ·			·		
					<u></u>	

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

Schedule G (Form 990 or 990-EZ) 2011

Sche Pa	rt I		ne organization answered	I "Yes" to Form 990, Part	IV, line 18, or reported	
		of fundraising event contributions and gr				pts greater than \$5,000
			(a) Event #1 BENEFIT EVENT	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through col. (c))
<u>a</u>			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts .	434,955.			434,955.
	2	Less: Chantable contributions	224,865.			224,865.
	3_	Gross income (line 1 minus line 2)	210,090.			210,090.
	4	Cash prizes				
ses	5	Noncash prizes	•			
Expen	6	Rent/facility costs				
Direct Expenses	7	Food and beverages	159,562.			159,562.
	8	Entertainment	820.			820.
	9	Other direct expenses	49,708.			49,708.
	10	Direct expense summary Add lines 4 throug	h 9 ın column (d)		>	(210,090)
_		Net income summary Combine line 3, colum	nn (d), and line 10	200 5 + 114 + 40		0.
Pa	irt		answered "Yes" to Form	1990, Part IV, line 19, or r	eported more than	
		\$15,000 on Form 990-EZ, line 6a		(b) Pull tabs/instant		(d) Total gaming (add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col (a) through col (c))
evei						
<u>ac</u>	1	Gross revenue				
Expenses	2	Cash prizes				
Expe	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes% No	Yes %	Yes %	
	7	Direct expense summary Add lines 2 throug	jh 5 in column (d)		>	()
	8	Net gaming income summary Combine line	1, column d, and line 7		>	
ā	ı İs	iter the state(s) in which the organization operathe organization licensed to operate gaming a "No," explain.	ctivities in each of these	states?	•	Yes No
		ere any of the organization's gaming licenses i				Yes No
	_					
	_					
1320	82 (01-23-12			Schedule G (Fo	orm 990 or 990-EZ) 2011

Sch	hedule G (Form 990 or 990-EZ) 2011 THE NATIONAL BOOK FOUNDATION INC. 13-3347524	Page 3
	Doe's the organization operate gaming activities with nonmembers?	No
	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed	
	to administer chantable gaming?	☐ No
13	Indicate the percentage of gaming activity operated in	
	a The organization's facility	%
	b An outside facility	%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records	
	Name ▶	
	Address ▶	
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes	☐ No
b	b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount	
	of gaming revenue retained by the third party > \$	
C	c If "Yes," enter name and address of the third party	
	Name ►	
	Address ▶	
16	Gaming manager information	
	Name ▶	
	Gaming manager compensation > \$	
	Description of services provided	

	Director/officer Employee Independent contractor	
	Director/officer Employee muependent contractor	
17	Mandatory distributions	
á	a is the organization required under state law to make charitable distributions from the gaming proceeds to	_
	retain the state gaming license?	∟ No
ı	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	
De	organization's own exempt activities during the tax year \$ art IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and I	Dort III
[F6	Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and I lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instruct	
	illies 9, 30, 100, 100, 100, 10, and 170, as applicable 7130 complete this part to provide any additional information (coo metable	10.10)
_		
_		
	2083 01-23-12 Schedule G (Form 990 or 990-	FZ) 2011
132	2083 01-23-12 - Schedule G (Form 990 or 990-	/ 2011

Schedule I (Form 990) (2011) **Employer identification number** ž 13-3347524 Open to Public Inspection (h) Purpose of grant or assistance X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States ▶ Attach to Form 990. (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table THE NATIONAL BOOK FOUNDATION INC. (c) IRC section if applicable LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table Part I General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization or government Name of the organization Department of the Treasury Internal Revenue Service SCHEDULEI (Form 990) Part II

THE NATIONAL BOOK FOUNDATION INC. Schedule I (Form 990) (2011)
Part III | Grants and Other

Page 2

13-3347524

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
NATIONAL BOOK AWARDS	22	57,000.	0	FMV	
LITERARIAN AND MEDAL FOR DISTINGUISHED CONTRIBUTION	2	20,000.	0	FMV	
INNOVATIONS IN READING	П	2,500,	0	FMV	
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	ide the informatio	n required in Part I, I	line 2, and any other	additional information	
SCHEDULE I, PART I, LINE 2: AWARD	AWARD WINNERS	FOR THE NA	THE NATIONAL BOOK AWARDS	K AWARDS ARE	
SELECTED BY FOUR PANELS OF FIVE JU	JUDGES EACH.	THE	JUDGES ARE SU	SUGGESTED BY	
AMERICAN WRITERS AND RECRUITED BY	THE	ONAL BOOK	NATIONAL BOOK FOUNDATION'S	S EXECUTIVE	
DIRECTOR. PANEL DELIBERATIONS ARE	THEN	EPENDENT O	INDEPENDENT OF THE FOUNDATION.	DATION. BOOKS	
ARE SUBMITTED BY PUBLISHERS ONLY.	PANELS S	SELECT FIVE	FINALISTS,	, FROM WHICH	
THEY CHOOSE ONE NATIONAL BOOK AWARD WINNER	RD WINNER				

THE MEDAL FOR DISTINGUISHED CONTRIBUTION TO AMERICAN LETTERS AND THE

LITERARIAN AWARD FOR OUTSTANDING SERVICE TO THE AMERICAN LITERARY COMMUNITY

132102 01-27-12

Schedule I (Form 990) 2011 THE NATIONAL BOOK FOUNDATION INC. Part IV Supplemental Information	13-334	17524 Page 2
ARE SELECTED BY THE FOUNDATION'S BOARD OF DIRECTORS FROM A	LIST OF	F NOMINEES
MADE BY AMERICAN WRITERS, PUBLISHERS, AND EDITORS.		
		
		<u> </u>
		·

Schedule I (Form 990) 2011

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

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

► Attach to Form 990. ► See separate instructions.

2011 2011

Open to Public

Employer identification number

Schedule J (Form 990) 2011

Name of the organization

Attach to Form 550. Foce separate metration

13-3347524 THE NATIONAL BOOK FOUNDATION INC. **Questions Regarding Compensation** Part I Yes No ta Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990. Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director Explain in Part III X Written employment contract Compensation committee Independent compensation consultant Compensation survey or study X Approval by the board or compensation committee X Form 990 of other organizations During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization a Receive a severance payment or change-of-control payment? b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of. a The organization? X 5a X b Any related organization? 5b 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 a The organization? 6a X b Any related organization? 6b 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 X Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III 8 X If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

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

Schedule J (Form 990) 2011

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

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

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

HAROLD AUGENBRAUM			(B) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	3C compensation	(0)	(a)	(E)	(F)
HAROLD AUGENBRAUM (0 207,873, 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.	(A) Name	- 1	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	Retirement and other deferred compensation	Nontaxable benefits	Total of columns (B)(i)-(D)	Compensation reported as deferred in prior Form 990
HAROLD AUGENBRAUM (II) (II) (II) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (III) (II		1	873		0	0	1,864.	209,737.	0
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Schedule J (Form 990) 2011.

SCHEDULE M (Form 990)

Noncash Contributions

➤ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

➤ Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

THE NATIONAL BOOK FOUNDATION INC.

Employer identification number 13-3347524

Par	rt I Types of Property	DOOR	TOUNDATIO	N IIVC.			<i>,</i> <u>, , , , , , , , , , , , , , , , , , </u>	<u> </u>	
		(a)	(b)	(c)		(d)			
		Check if	Number of	Noncash contr		Method of de			
		applicable	contributions or items contributed	amounts repor		noncash contrib	ution ai	mount	.s
1	Art - Works of art		Romo contributed	10/11/000,1 4/1 1/	M. IIIC 19				
2	Art - Historical treasures			 ·· ·		· · · · · · · · · · · · · · · · · · ·			
3	Art · Fractional interests		-						
4	Books and publications	X		48.	028.	FMV	_		
5	Clothing and household goods				0200	<u> </u>			-
6	Cars and other vehicles								
7	Boats and planes					····			
8	Intellectual property								
9	Securities - Publicly traded								
10	Securities - Closely held stock								-
11	Securities - Partnership, LLC, or								
•	trust interests								
12	Securities - Miscellaneous	·		· · · · · · · · · · · · · · · · · · ·					
13	Qualified conservation contribution -	···			-				
	Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential							_	
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy .								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other • ()								
26	Other • ()				-				
27	Other • ()					· · · · · · · · · · · · · · · · · · ·			
28	Other ()								
29	Number of Forms 8283 received by the organiz	zation during	g the tax year for c	ontributions					
	for which the organization completed Form 828	33, Part IV, I	Donee Acknowledg	jement	29				
								Yes	No
30a	During the year, did the organization receive by	y contribution	on any property rep	orted in Part I, line	es 1-28 tha	at it must hold for			
	at least three years from the date of the initial of	contribution	, and which is not i	equired to be use	d for exem	pt purposes for			
	the entire holding period?						30a		X
b	If "Yes," describe the arrangement in Part II								
31	Does the organization have a gift acceptance p	•	-	-		utions?	31		X
32a	Does the organization hire or use third parties of	or related or	ganizations to soli	cit, process, or sel	I noncash				
	contributions?						32a		X
b	If "Yes," describe in Part II								ĺ
33	If the organization did not report an amount in	column (c) f	or a type of proper	ty for which colun	nn (a) is ch	ecked,			
	describe in Part II						<u> </u>		

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

Schedule M (Form 990) (2011)

SCHEDULE-O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Name of the organization

THE NATIONAL BOOK FOUNDATION INC.

Employer identification number 13-3347524

THE NATIONAL BOOK FOUNDATION INC. 13 3347324
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THE MISSION OF THE NATIONAL BOOK FOUNDATION AND THE NATIONAL BOOK
AWARDS IS TO CELEBRATE THE BEST OF AMERICAN LITERATURE, TO EXPAND ITS
AUDIENCE, AND TO ENHANCE THE CULTURAL VALUE OF GOOD WRITING IN AMERICA.
THE FOUNDATION'S STRATEGIES INCLUDE RECOGNITION OF LITERARY EXCELLENCE
THROUGH THE NATIONAL BOOK AWARDS; EDUCATION THROUGH LITERARY PROGRAMS
FOR THE SCHOOL CHILDREN, COLLEGE STUDENTS, AND ADULTS; AND ADVOCACY
THROUGH THE DISSEMINATION OF INFORMATION ON BEST READING PRACTICES AND
LITERATURE.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THE MISSION OF THE NATIONAL BOOK FOUNDATION AND THE NATIONAL BOOK
AWARDS IS TO CELEBRATE THE BEST OF AMERICAN LITERATURE, TO EXPAND ITS
AUDIENCE, AND TO ENHANCE THE CULTURAL VALUE OF GOOD WRITING IN AMERICA.
THE FOUNDATION'S STRATEGIES INCLUDE RECOGNITION OF LITERARY EXCELLENCE
THROUGH THE NATIONAL BOOK AWARDS; EDUCATION THROUGH LITERARY PROGRAMS
FOR THE SCHOOL CHILDREN, COLLEGE STUDENTS, AND ADULTS; AND ADVOCACY
THROUGH THE DISSEMINATION OF INFORMATION ON BEST READING PRACTICES AND
LITERATURE.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
YOUNG ADULTS, THE INNOVATIONS IN READING CONFERENCE, AND 5 UNDER 35.
THROUGH BOOKUP, THE FOUNDATION SEEKS TO EXPAND THE AUDIENCE FOR READING
AND DOES SO THROUGH EDUCATIONAL PROGRAMS FOR UNDERSERVED PEOPLE IN
THEIR MIDDLE-SCHOOL YEARS. BOOKUP, LED BY PUBLISHED WRITERS, IS
PRESENTED IN FIVE LOCATIONS IN NEW YORK CITY AND EXPANDED TO TWO

132211 01-23-12

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

Schedule O (Form 990 or 990-EZ) (2011)

Employer identification number 13-3347524

LOCATIONS IN TEXAS IN FY 2012 AND SERVES ABOUT 200 UNDERSERVED

MIDDLE-SCHOOLERS A YEAR.

IN FY 2012, INNOVATIONS IN READING PRESENTED AWARDS TO FOUR SMALL

NONPROFITS ACROSS THE COUNTRY THAT USE INNOVATION MEANS TO EXPAND THE

AUDIENCE FOR READING IN THEIR LOCALITIES. THE PROGRAM THEN BRINGS THESE

ORGANIZATIONS TO NEW YORK FOR A LUNCHEON AND PRESENTATION WITH

COLLEAGUES AND FUNDERS AT THE FORD FOUNDATION.

THE NATIONAL BOOK FOUNDATION CONTINUED TO CREATE AN ONLINE ARCHIVE FOR

ITS PAST NATIONAL BOOK AWARD WINNERS AND FINALISTS. IN FY 2012, THE

FOUNDATION CREATED 375 NEW WEB PAGES FOR ITS AWARD FINALISTS IN FICTION

SINCE 1950 TO BE USED IN AN ONLINE EXHIBITION IN JUNE, 2012. THIS

BRINGS THE NUMBER OF INDIVIDUAL AUTHOR WEB PAGES TO OVER 500, WITH THE

GOAL OF CREATING OVER 2,100, ONE FOR EACH FINALIST OR WINNER IN THE

AWARDS' HISTORY.

FORM 990, PART VI, SECTION B, LINE 11: THE 990 IS REVIEWED BY THE BOARD

FINANCE COMMITTEE, WHICH INCLUDES THE TREASURER, THE INVESTMENT CHAIR, AND

THE CHAIRMAN OF THE BOARD.

FORM 990, PART VI, SECTION B, LINE 12C: EMPLOYEES ARE REQUIRED TO DIVULGE
ALL OUTSIDE EMPLOYMENT AND/OR VOLUNTEER WORK THAT MAY CONFLICT OR OVERLAP
WITH THE GOALS OF THE NATIONAL BOOK FOUNDATION. JUDGES ARE REQUIRED TO
DIVULGE ALL PERSONAL AND PROFESSIONAL RELATIONSHIPS THAT MAY CONFLICT OR
OVERLAP WITH THE GOALS OF THE NATIONAL BOOK FOUNDATION.

FORM 990, PART VI, SECTION B, LINE 15: THE FULL BOARD DISCUSSES THE

EXECUTIVE DIRECTOR'S COMPENSATION AS PART OF THE ANNUAL BUDGETARY PROCESS

AND AS PART OF THE OVERALL COMPENSATION FOR THE ORGANIZATION.

132212

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization THE NATIONAL BOOK FOUNDATION INC.	Employer identification number 13-3347524
FORM 990, PART VI, SECTION C, LINE 19: UPON REQUEST.	
FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:	
NET UNREALIZED LOSSES ON INVESTMENTS:	-35,480.

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Depreciation and Amortization (Including Information on Listed Property)

➤ See separate instructions. ► Attach to your tax return. OMB No 1545-0172

Attachment Sequence No 179

Business or activity to which this form relates

Identifying number

990

THE NATIONAL BOOK FOU				AGE 10		13-3347524
Part I Election To Expense Certain Prope	rty Under Section 1	79 Note: If you have any li	isted property, o	omplete Part V	before y	
1 Maximum amount (see instructions)					1	500,000.
2 Total cost of section 179 property place	ced in service (see	e instructions)			2	
3 Threshold cost of section 179 propert	y before reduction	ın lımıtatıon			3	2,000,000.
4 Reduction in limitation Subtract line 3	from line 2. If zero	o or less, enter -0-			4	
5 Dollar limitation for tax year Subtract line 4 from lin	e 1 If zero or less, enter	r -0- If married filing separately, se	ee instructions		5	
6 (a) Description of p	roperty	(b) Cost (bus	iness use only)	(c) Elected	cost	
				<u> </u>		
7 Listed property Enter the amount from	n line 29		7			
8 Total elected cost of section 179 prop	erty Add amounts	s in column (c), lines 6 and	d 7		8	
9 Tentative deduction Enter the smalle	-	• •			9	
10 Carryover of disallowed deduction from					10	***************************************
11 Business income limitation. Enter the	-		ero) or line 5		11	
12 Section 179 expense deduction Add		•	•		12	
13 Carryover of disallowed deduction to 2	•		▶ 13	-		
Note: Do not use Part II or Part III below for			- 10			
Part II Special Depreciation Allow		· · · · · · · · · · · · · · · · · · ·	ide listed prope	erty)		
14 Special depreciation allowance for qua						
, ,	aimed property (or	ner man ilsted property) p	DIACEG III SELVICE	during	44	
the tax year					14	
15 Property subject to section 168(f)(1) e	ection				15	2,069.
16 Other depreciation (including ACRS) Part III MACRS Depreciation (Do n	-4	roperty \ (Cap yestructions	- \		16	2,009.
Part III MACRS Depreciation (Do n	ot include listed p	Section A	5)			
18 If you are electing to group any assets placed in se Section B - Asset (a) Classification of property		c into one or more general asset acce During 2011 Tax Year (c) Basis for depreciation (business/investment use only - see instructions)			tion Syst	ern (g) Depreciation deduction
19a 3-year property				i l	(,,	(9)
19a 3-year property	1	1			()	(9, 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	_					(9,
b 5-year property	_					(3)
b 5-year property c 7-year property						(3)
b 5-year propertyc 7-year propertyd 10-year property						
 b 5-year property c 7-year property d 10-year property e 15-year property 						,
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Form	1 4562	(2011)	THE	NATIO	NAL E	OOK	FOUN	DATI	ON	INC.			13	-3347	524	Page 2
Pai	rt V	Listed Propert	y (Include au	utomobiles, d	certain oth	ner vehic	cles, cer	taın com	puters	s, and pro	perty us	sed for er	ntertain	ment, rec	reation,	or
		amusement) Note: For any v through (c) of S	rehicle for wi Section A, all	hich you are of Section E	using the B, and Sec	standare ction C if	d mileag fapplica	ie rate oi ble	r dedu	cting lease	e expen	se, comp	ete or	nly 24a, 2	4b, colur	nns (a)
			Depreciation						nstruc	tions for li	mits for	passeng	er auto	mobiles)		
24a	Do you	have evidence to s	upport the bu	siness/investr	nent use cl	aimed?	Y	es 🗀	No	24b If "Y	es," is t	he evide	nce wri	tten?] Yes [No
(list vehicles first) placed in investm			(c) Business investmei use percent	nt o	other basis		(e) Basis for depreciation (business/investment use only)		(f) Recovery period	(f) (g) Recovery Method/		(h) Depreciation deduction		(i) Elected section 179 cost		
25 5	Specia	depreciation allo	L	·			ın servic	ce during	the t	ax vear an	ıd.	T-	-			
	•	ore than 50% in			z proport	, p.acca			<i>y</i>	an your an		25				
		ty used more that			ness use:								L			
					%											
					%											
				<u> </u>	%								<u> </u>			
27 F	roper	ty used 50% or le	ess in a quali	fied busines	s use					r						
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			·		%						S/L -		<u> </u>			
			0-> >		<u>% </u>						S/L·		 			
		nounts in column		ū				, page 1				28	L			
<u> 29</u> /	Add an	nounts in column	(i), line 26 E	nter nere an	a on line Section			I I	-6 V-k					29		
If you	•	his section for ve ded vehicles to y les		,	prietor, p	artner, o	r other '	more th	an 5%	owner,"				ting this s	ection fo	or
30 1	30 Total business/investment miles driven during the				(a) Vehicle		(b) Vehicle V		(c) /ehicle V		(d) Vehicle		(e) ehicle	(f) Vehicle		
У	year (do not include commuting miles)															
31 Total commuting miles driven during the year			the year										1.1			
32 1	Fotal o	ther personal (no	ncommuting	ı) mıles									}			
c	driven						ļ		ļ							
		ules driven during	-													
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		e vehicle available	le for person	ial use	Yes	No	Yes	No	Yes	No No	Yes	No	Yes	No_	Yes	No
	_	off-duty hours? le vehicle used pi	rimarily by a	more			 		•	 -	-	 		 		
		% owner or relate		more												
		her vehicle availa	•	onal		 		1						 		
	use?	-						Į.					}			
			Section C	- Questions	for Emp	loyers V	Vho Pro	vide Vel	nicles	for Use b	y Their	Employe	es			
		ese questions to delated persons	determine if y	you meet an	exception	to com	pleting	Section	B for v	ehicles us	ed by e	mployee	s who a	are not m	ore than	5%
	Do you employ	maintain a writte	en policy stat	tement that p	prohibits a	all persor	nal use o	of vehicl	es, inc	luding cor	nmuting	g, by you	r		Yes	No
	-	maintain a writte rees? See the ins										your				
		treat all use of ve					•		•							
40 [Do you	provide more tha	an five vehic	les to your e	mployees	, obtain	ınformat	tion from	your	employees	s about					
t	the use	of the vehicles,	and retain th	ne informatio	n received	42									<u></u>	<u> </u>
41 [Do you	meet the require	ments conc	erning qualif	ed autom	obile de	monstra	ation use	? .							
		f your answer to	37, 38, 39, 4	0, or 41 is "Y	'es," do n	ot comp	lete Sec	tion B fo	r the c	covered ve	hicles	_			Ш	
Pa	rt VI	Amortization	-													
(a) Description of costs Date			(b) ite amortization begins						(f) Amortization for this year							
42 /	Amorti	zation of costs th	at begins du	ırıng your 20	11 tax ye	ar										
						ļ										
			-4.6.	, , , , , , , ,		<u> </u>										
		zation of costs th		-	-		o report						43			
44	rutali.	Add amounts in c	volumni (I) Se	ee use mondi	AUGUS IO	ANTIGLE	o report									

Form 4562 (2011)

116252 11-18-11

Form 88	368 (Rev. 1-2012)					ິ Page 2 ′						
	are filing for an Additional (Not Automatic) 3-Month Ex	tension,	complete only Part II and check the	s box								
	only complete Part II if you have already been granted an					. , .						
	are filing for an Automatic 3-Month Extension, comple											
Part				nal (no d	copies nee	eded).						
			Enter filer's	identifyi	ng number.	see instructions						
Type or Name of exempt organization or other filer, see instructions Employer identifications												
print												
File by the	THE NATIONAL BOOK FOUNDATION	[X]	X 13-3347524									
due date f				Social se	curity numb							
filing your return, See	loo prove ambana vo coa		·									
instruction												
_	NEW YORK, NY 10004	Ū				~						
Enter th	e Return code for the return that this application is for (file	e a separa	te application for each return)			0 1						
Applica	tion	Return	eturn Application									
ls For		Code	Is For			Code						
Form 99	90	01										
Form 99	00-BL	02	Form 1041-A			08						
Form 99	90-EZ	01	Form 4720			. 09						
Form 99	90-PF	04	Form 5227		10							
Form 99	00-T (sec 401(a) or 408(a) trust)	05	Form 6069	Form 6069								
Form 99	90-T (trust other than above)	06	Form 8870			12						
STOP! I	Do not complete Part II if you were not already granted	an autor	matic 3-month extension on a prev	iously file	ed Form 886	8						
	HAROLD AUGENBRA											
	books are in the care of 90 BROAD STREES	r, su		, NY	10004							
	phone No. ► <u>212-685-0261</u>		FAX No. ▶									
If the	organization does not have an office or place of business	s in the Ui	nited States, check this box			▶ 📙						
If this	s is for a Group Return, enter the organization's four digit											
box 🕨	If it is for part of the group, check this box ▶		ach a list with the names and EINs of	f all memb	ers the exter	nsion is for						
	request an additional 3-month extension of time until		H 15, 2013									
	or calendar year, or other tax year beginningI				<u>30, 2</u>	012						
6 If	the tax year entered in line 5 is for less than 12 months, c	heck reas	on: Initial return _	Final i	return~							
L	Change in accounting period											
	tate in detail why you need the extension											
	DDITIONAL TIME IS NEEDED TO	COMPI.	LE THE INFORMATION	NECE	SSARY	TO						
<u>C</u>	OMPLETE THE RETURN.											
			 									
	this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	inter the tentative tax, less any			^						
_	onrefundable credits. See instructions.			8a	\$	0.						
	this application is for Form 990-PF, 990-T, 4720, or 6069,											
	x payments made. include any prior year overpayment all	owed as a	a credit and any amount paid	<u> </u>		0.						
	previously with Form 8868 8b \$											
	Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using											
EFTPS (Electronic Federal Tax Payment System) See instructions. 8c \$ Signature and Verification must be completed for Part II only.												
Under pe It is true,	enalties of perjury, I deplare that I have examined this form, includ correct, and complete, and that I am authorized to prepare this fo	ing accomp irm.	panying schedules and statements, and to	o the best o	it my knowledo	ge and belief,						
Signatur	e ▶ / Y/ Title ▶ I	EXECU'	TIVE DIRECTOR	Date	<u> </u>							
					Form 0	969 (Pay 1 2012)						

123842 01-06-12 Form 8868 (Rev January 2012)

Application for Extension of Time To File an **Exempt Organization Return**

OMB No. 1545-1709

Department of the Treasury File a separate application for each return. Internal Revenue Service If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form. visit www.irs.gov/efile and click on e-file for Charities & Nonprofits Automatic 3-Month Extension of Time. Only submit original (no copies needed) A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Type or Name of exempt organization or other filer, see instructions Employer identification number (EIN) or print 13-3347524 THE NATIONAL BOOK FOUNDATION INC. File by the Number, street, and room or suite no. If a P O box, see instructions Social security number (SSN) due date for filing your 90 BROAD STREET, NO. 604 City, town or post office, state, and ZIP code. For a foreign address, see instructions instructions NEW YORK, NY 10004 01 Enter the Return code for the return that this application is for (file a separate application for each return) **Application** Return **Application** Return Code Is For Code ls For Form 990-T (corporation) Form 990 01 07 Form 990-BL 02 Form 1041-A Form 990-EZ 01 Form 4720 9 Form 990-PF 04 Form 5227 Form 990-T (sec 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) Form 8870 HAROLD AUGENBRAUM ullet The books are in the care of $ldsymbol{ riangle}$ 90 BROAD STREET, SUITE 604 - NEW YORK, NY 10004 Telephone No. ► 212-685-0261 FAX No > If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _. If this is for the whole group, check this box If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until DECEMBER 15, 2012 , to file the exempt organization return for the organization named above. The extension is for the organization's return for ► ___ calendar year 2011 ► X tax year beginning MAY 1, and ending APR 30, 2012 Initial return Final return If the tax year entered in line 1 is for less than 12 months, check reason Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 0. nonrefundable credits. See instructions. 3a If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit 3b Balance due. Subtract line 3b from line 3a Include your payment with this form, if required,

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

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

by using EFTPS (Electronic Federal Tax Payment System) See instructions

Form 8868 (Rev 1-2012)

2011 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 10

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(D) - Asset disposed

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