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Form **990****Return of Organization Exempt From Income Tax**

OMB No 1545-0047

**2011****Open to Public Inspection**Department of the Treasury  
Internal Revenue Service

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

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

**A For the 2011 calendar year, or tax year beginning** 05/01, 2011, and ending 04/30, 2012

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization NATIONAL ROAD SAFETY FOUNDATION, INC.		<b>D</b> Employer identification number 13-6128274
	Doing Business As		<b>E</b> Telephone number (212) 837-4800
	Number and street (or P O box if mail is not delivered to street address) Room/suite 18 EAST 50TH STREET		
	City or town, state or country, and ZIP + 4 NEW YORK, NY 10022		<b>G</b> Gross receipts \$ 7,206,509.
	<b>F</b> Name and address of principal officer		
<b>I</b> Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no ) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'No,' attach a list (see instructions)	
<b>J</b> Website: ▶ N/A			
<b>K</b> Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation 1961	<b>M</b> State of legal domicile NY

**Part I Summary**

Activities & Governance	1 Briefly describe the organization's mission or most significant activities THE FOUNDATION IS DEDICATED TO REDUCING CRASHES, DEATH AND DISABILITY ON OUR NATION'S ROADS BY PROMOTING SAFE DRIVING HABITS. IT PRODUCES DOCUMENTARIES, EDUCATIONAL PROGRAMS AND PUBLIC SERVICE BROADCASTS.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3	Number of voting members of the governing body (Part VI, line 1a)	8.
	4	Number of independent voting members of the governing body (Part VI, line 1b)	2.
	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5.
	6	Total number of volunteers (estimate if necessary)	
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	0
7b	Net unrelated business taxable income from Form 990-T, line 34	0	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 651,498. Current Year 410,592.
	9	Program service revenue (Part VIII, line 2g)	0 0
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,105,711. 1,153,657.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0 0
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,757,209. 1,564,249.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	27,400. 20,350.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0 0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	177,974. 236,073.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0 0
	16b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 29,423.	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	412,836. 642,630.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	618,210. 899,053.
19	Revenue less expenses Subtract line 18 from line 12	1,138,999. 665,196.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 31,473,956. End of Year 31,695,000.
	21	Total liabilities (Part X, line 26)	45,863. 42,443.
	22	Net assets or fund balances Subtract line 21 from line 20	31,428,093. 31,652,557.

**Part II Signature Block**

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

<b>Sign Here</b>	Signature of officer	Date 3/13/13			
	JEROME H. KATZ Type or print name and title	TREASURER			
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date 3/11/13	Check <input type="checkbox"/> if self-employed	PTIN P00748248
	Firm's name ▶ BERDON LLP	Firm's EIN ▶ 13-0485070		Phone no 212-832-0400	
	Firm's address ▶ 360 MADISON AVE NEW YORK, NY 10017				
May the IRS discuss this return with the preparer shown above? (see instructions) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					

For Paperwork Reduction Act Notice, see the separate instructions

Form 990 (2011)

SCANNED MAR 27 2013

**Part III Statement of Program Service Accomplishments**Check if Schedule O contains a response to any question in this Part III ☐**1** Briefly describe the organization's mission

THE FOUNDATION IS DEDICATED TO REDUCING CRASHES, DEATH AND DISABILITY  
ON OUR NATION'S ROADS BY PROMOTING SAFE DRIVING HABITS. IT PRODUCES  
DOCUMENTARIES, EDUCATIONAL PROGRAMS AND PUBLIC SERVICE BROADCASTS.

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

If "Yes," describe these new services on Schedule O

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported**4a** (Code \_\_\_\_\_) (Expenses \$ 728,955. including grants of \$ 20,350 ) (Revenue \$ \_\_\_\_\_)

THE FOUNDATION PRODUCES DOCUMENTARIES, EDUCATIONAL PROGRAMS,  
PUBLIC SERVICE CAMPAIGNS FOR BROADCAST AND USE IN SAFETY,  
EDUCATIONAL AND DRIVER ENFORCEMENT PROGRAMS; AND DISTRIBUTES THEM  
FREE OF CHARGE.

**4b** (Code \_\_\_\_\_) (Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)**4c** (Code \_\_\_\_\_) (Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)**4d** Other program services (Describe in Schedule O )

(Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)

**4e** Total program service expenses ► 728,955.

**Part IV Checklist of Required Schedules**

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A . . . . .	1 X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . . .	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I . . . . .	3	X
4 <b>Section 501(c)(3) organizations.</b> 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 N/A	
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I . . . . .	6	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II . . . . .	7 X	
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III . . . . .	8	X
9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV . . . . .	9	X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V . . . . .	10	X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI . . . . .	11a X	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII . . . . .	11b	X
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII . . . . .	11c	X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX . . . . .	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X . . . . .	11e X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X . . . . .	11f	X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII . . . . .	12a X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional . . . . .	12b	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States? . . . . .	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV . . . . .	14b	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV . . . . .	15	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV . . . . .	16	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) . . . . .	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II . . . . .	18	X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III . . . . .	19	X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . .	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . . .	20b	

**Part IV Checklist of Required Schedules (continued)**

		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i>	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i>	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>		X
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25.</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25 a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i>		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I.</i>		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II.</i>		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i>		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>	X	
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i>		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1.</i>		X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		X
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI.</i>		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	X	

Form 990 (2011)

**Part V** Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response to any question in this Part V. ☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. . . . .	9	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. . . . .	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	1c	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. . . . .	2a	5
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . . . . . <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions). . . . .	2b	X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . . .	3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O. . . . .	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . .	4a	X
b	If "Yes," enter the name of the foreign country: <u>See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts</u> . . . . .	5a	X
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .	5b	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . . .	5c	
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? . . . . .	6a	X
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? . . . . .	6b	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .	7a	X
7	<b>Organizations that may receive deductible contributions under section 170(c).</b>	7b	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? . . . . .	7c	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .	7d	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .	7e	X
d	If "Yes," indicate the number of Forms 8282 filed during the year. . . . .	7f	X
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	7g	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .	7h	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . .	8	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . .	9a	
8	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . . . . .	9b	
9	<b>Sponsoring organizations maintaining donor advised funds.</b>	10a	
a	Did the organization make any taxable distributions under section 4966? . . . . .	10b	
b	Did the organization make a distribution to a donor, donor advisor, or related person? . . . . .	11a	
10	<b>Section 501(c)(7) organizations.</b> Enter	11b	
a	Initiation fees and capital contributions included on Part VIII, line 12. . . . .	12a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. . . . .	12b	
11	<b>Section 501(c)(12) organizations.</b> Enter	13a	
a	Gross income from members or shareholders. . . . .	13b	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them). . . . .	13c	
12a	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? . . . . .	14a	X
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. . . . .	14b	
13	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
a	Is the organization licensed to issue qualified health plans in more than one state? . . . . . <b>Note.</b> See the instructions for additional information the organization must report on Schedule O. . . . .		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans. . . . .		
c	Enter the amount of reserves on hand. . . . .		
14a	Did the organization receive any payments for indoor tanning services during the tax year? . . . . .		
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. . . . .		

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

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

**Section A. Governing Body and Management**

	Yes	No
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
<b>1b</b> Enter the number of voting members included in line 1a, above, who are independent.		
<b>2</b> 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?	X	
<b>3</b> 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?		X
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b> Did the organization have members or stockholders?		X
<b>7a</b> 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?		X
<b>7b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b> The governing body?	X	
<b>b</b> Each committee with authority to act on behalf of the governing body?	X	
<b>9</b> 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.		X

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

	Yes	No
<b>10a</b> Did the organization have local chapters, branches, or affiliates?		X
<b>b</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?		
<b>11a</b> Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
<b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b> Did the organization have a written conflict of interest policy? If "No," go to line 13.	X	
<b>b</b> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
<b>c</b> Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	X	
<b>13</b> Did the organization have a written whistleblower policy?	X	
<b>14</b> Did the organization have a written document retention and destruction policy?	X	
<b>15</b> 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?		
<b>a</b> The organization's CEO, Executive Director, or top management official	X	
<b>b</b> Other officers or key employees of the organization	X	
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
<b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
<b>b</b> If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

**Section 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) available for public inspection. Indicate how you made these available. Check all that apply.  
☐ Own website ☐ Another's website ☒ Upon request

**19** Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

**20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **JEROME H. KATZ 18 EAST 50TH STREET NEW YORK, NY 10022 212-837-4800**

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Check if Schedule O contains a response to any question in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) KIMBERLY MANOCHERIAN VICE PRESIDENT	5.00	X		X				0	0	0
(2) JOHN MANOCHERIAN PRESIDENT	5.00	X		X				0	0	0
(3) JEROME KATZ TREASURER	5.00	X		X				0	0	0
(4) CAROLINE M. MANOCHERIAN VICE PRESIDENT	5.00	X		X				0	0	0
(5) SCOTT SOLOMON SECRETARY	5.00	X		X				0	0	0
(6) BEHROOZ SHOKATI EXECUTIVE DIRECTOR	40.00	X						44,625.	0	0
(7) ANTHONY PORTERA INDEPENDENT TRUSTEE	5.00	X						0	0	0
(8) DAVID REICH INDEPENDENT TRUSTEE	5.00	X						0	0	0
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										





**Part VIII Statement of Revenue**

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	1a	Federated campaigns . . . . .	1a				
	b	Membership dues . . . . .	1b				
	c	Fundraising events . . . . .	1c				
	d	Related organizations . . . . .	1d				
	e	Government grants (contributions) . . . . .	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above . . . . .	1f	410,592.			
	g	Noncash contributions included in lines 1a-1f \$ . . . . .		240,000.			
	h	<b>Total.</b> Add lines 1a-1f . . . . .		410,592.			
<b>Program Service Revenue</b>				<b>Business Code</b>			
	2a						
	b						
	c						
	d						
	e						
	f	All other program service revenue . . . . .					
	g	<b>Total.</b> Add lines 2a-2f . . . . .		0			
<b>Other Revenue</b>	3	Investment income (including dividends, interest, and other similar amounts). . . . . ATTACHMENT 1 . . . . .		1,104,038			1,104,038
	4	Income from investment of tax-exempt bond proceeds . . . . .		0			
	5	Royalties . . . . .		0			
		(i) Real	(ii) Personal				
	6a	Gross rents . . . . .					
	b	Less rental expenses . . . . .					
	c	Rental income or (loss) . . . . .					
	d	Net rental income or (loss) . . . . .		0			
		(i) Securities	(ii) Other				
	7a	Gross amount from sales of assets other than inventory . . . . . 5,691,879.					
	b	Less cost or other basis and sales expenses . . . . . 5,642,260					
	c	Gain or (loss) . . . . . 49,619					
	d	Net gain or (loss) . . . . .		49,619			49,619
	8a	Gross income from fundraising events (not including \$ . . . . . of contributions reported on line 1c) See Part IV, line 18 . . . . . a					
	b	Less direct expenses . . . . . b					
	c	Net income or (loss) from fundraising events . . . . .		0			
	9a	Gross income from gaming activities See Part IV, line 19 . . . . . a					
	b	Less direct expenses . . . . . b					
	c	Net income or (loss) from gaming activities . . . . .		0			
	10a	Gross sales of inventory, less returns and allowances . . . . . a					
b	Less cost of goods sold . . . . . b						
c	Net income or (loss) from sales of inventory . . . . .		0				
<b>Miscellaneous Revenue</b>			<b>Business Code</b>				
11a							
b							
c							
d	All other revenue . . . . .						
e	<b>Total.</b> Add lines 11a-11d . . . . .		0				
12	<b>Total revenue.</b> See instructions . . . . .		1,564,249			1,153,657	

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.	9,850.	9,850.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22.	10,500.	10,500.		
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.	0			
4 Benefits paid to or for members.	0			
5 Compensation of current officers, directors, trustees, and key employees.	0			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0			
7 Other salaries and wages.	211,559.	182,136.		29,423.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	0			
9 Other employee benefits.	0			
10 Payroll taxes.	24,514.	24,514.		
11 Fees for services (non-employees):				
a Management.	0			
b Legal.	56,543.		56,543.	
c Accounting.	0			
d Lobbying.	0			
e Professional fundraising services. See Part IV, line 17.	0			
f Investment management fees.	0			
g Other.	0			
12 Advertising and promotion.	215,228.	215,228.		
13 Office expenses.	3,351.		3,351.	
14 Information technology.	0			
15 Royalties.	0			
16 Occupancy.	0			
17 Travel.	0			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.	0			
19 Conferences, conventions, and meetings.	0			
20 Interest.	0			
21 Payments to affiliates.	0			
22 Depreciation, depletion, and amortization.	0			
23 Insurance.	21,223.	21,223.		
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a POSTAGE AND MESSENGER	11,529.	11,529.		
b VIDEO & BOOK PRODUCTION	253,975.	253,975.		
c REAL ESTATE TAXES	35,377.		35,377.	
d MISCELLANEOUS	45,404.		45,404.	
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e.	899,053.	728,955.	140,675.	29,423.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).	0			

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
<b>Assets</b>	1 Cash - non-interest-bearing	546,814.	1	2,108,845.
	2 Savings and temporary cash investments	0	2	0
	3 Pledges and grants receivable, net	0	3	0
	4 Accounts receivable, net	0	4	0
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	0	5	0
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)	0	6	0
	7 Notes and loans receivable, net	0	7	0
	8 Inventories for sale or use	0	8	0
	9 Prepaid expenses and deferred charges	0	9	0
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 4,036,985.		
	b Less accumulated depreciation	10b 7,621.	10c	4,029,364.
	11 Investments - publicly traded securities	3,838,271.	11	25,189,122.
	12 Investments - other securities See Part IV, line 11	26,774,361.	12	0
	13 Investments - program-related See Part IV, line 11	0	13	0
	14 Intangible assets	0	14	0
	15 Other assets See Part IV, line 11	314,510.	15	367,669.
16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	31,473,956.	16	31,695,000.	
<b>Liabilities</b>	17 Accounts payable and accrued expenses	0	17	0
	18 Grants payable	0	18	0
	19 Deferred revenue	0	19	0
	20 Tax-exempt bond liabilities	0	20	0
	21 Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	45,863.	25	42,443.
	26 <b>Total liabilities.</b> Add lines 17 through 25	45,863.	26	42,443.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	27 Unrestricted net assets	31,428,093.	27	31,652,557.
	28 Temporarily restricted net assets	0	28	0
	29 Permanently restricted net assets	0	29	0
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	31,428,093.	33	31,652,557.
	34 <b>Total liabilities and net assets/fund balances.</b>	31,473,956.	34	31,695,000.

Form 990 (2011)

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response to any question in this Part XI ☒

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12) . . . . .	<b>1</b>	1,564,249.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25) . . . . .	<b>2</b>	899,053.
<b>3</b>	Revenue less expenses Subtract line 2 from line 1 . . . . .	<b>3</b>	665,196.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . . .	<b>4</b>	31,428,093.
<b>5</b>	Other changes in net assets or fund balances (explain in Schedule O) . . . . .	<b>5</b>	-440,732.
<b>6</b>	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) . . . . .	<b>6</b>	31,652,557.

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response to any question in this Part XII ☐

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

Form **990** (2011)

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

**Public Charity Status and Public Support**

OMB No 1545-0047

**2011**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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

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

Name of the organization

NATIONAL ROAD SAFETY FOUNDATION, INC.

Employer identification number

13-6128274

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

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

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state \_\_\_\_\_
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.
- a ☐ Type I      b ☐ Type II      c ☐ Type III - Functionally integrated      d ☐ Type III - Other
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? \_\_\_\_\_
- (ii) A family member of a person described in (i) above? \_\_\_\_\_
- (iii) A 35% controlled entity of a person described in (i) or (ii) above? \_\_\_\_\_

	Yes	No
11g(i)		X
11g(ii)		X
11g(iii)		X

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

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

Schedule A (Form 990 or 990-EZ) 2011

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**  
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") . . . . .	1,278,692.	2,901,840.	691,030.	651,498.	410,592.	5,933,652.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
<b>4</b> Total. Add lines 1 through 3. . . . .	1,278,692.	2,901,840.	691,030.	651,498.	410,592.	5,933,652.
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). . . . .						3,367,147.
<b>6</b> Public support. Subtract line 5 from line 4 . . . . .						2,566,505.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>7</b> Amounts from line 4 . . . . .	1,278,692.	2,901,840.	691,030.	651,498.	410,592.	5,933,652.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .	1,026,923.	978,591.	999,686.	1,041,713.	1,104,038.	5,150,951.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) . . . . .						
<b>11</b> Total support. Add lines 7 through 10 . . . . .						11,084,603.
<b>12</b> Gross receipts from related activities, etc. (see instructions) . . . . .					12	
<b>13</b> First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here . . . . .						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) . . . . .	<b>14</b>	23.15%
<b>15</b> Public support percentage from 2010 Schedule A, Part II, line 14 . . . . .	<b>15</b>	24.10%
<b>16a</b> 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>b</b> 33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>17a</b> 10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . .		<input checked="" type="checkbox"/>
<b>b</b> 10%-facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>18</b> Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . .		<input type="checkbox"/>

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support. (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

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

**Section D. Computation of Investment Income Percentage**

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

- 19a **33 1/3% support tests - 2011.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐
- b **33 1/3% support tests - 2010.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐
- 20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐



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

SUPPLEMENTAL INFORMATION TO PART II, LINE 17A:

NATIONAL ROAD SAFETY FOUNDATION PRINTED, PRODUCED, AND DISTRIBUTED BOOKS, VIDEOS AND PUBLIC SERVICE ANNOUNCEMENTS PROMOTING AUTOMOBILE SAFETY AND REDUCTION OF TRAFFIC DEATHS TO VARIOUS SCHOOL DISTRICT ORGANIZATIONS. AND IT MAINTAINS A CONTINUOUS AND BONA FIDE PROGRAM FOR SOLICITATION OF FUNDS FROM THE GENERAL PUBLIC, COMMUNITY, GOVERNMENTAL UNITS OR OTHER PUBLIC CHARITIES.

SCHEDULE C  
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

2011

Open to Public  
Inspection

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

▶ Complete if the organization is described below

▶ Attach to Form 990 or Form 990-EZ

▶ See separate instructions

Department of the Treasury  
Internal Revenue Service

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

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

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

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

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

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

Name of organization

Employer identification number

NATIONAL ROAD SAFETY FOUNDATION, INC.

13-6128274

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

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV

2 Political expenditures ▶ \$

3 Volunteer hours ▶

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

1 Enter the amount of any excise tax incurred by the organization under section 4955. ▶ \$

2 Enter the amount of any excise tax incurred by organization managers under section 4955. ▶ \$

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV

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

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. ▶ \$

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities. ▶ \$

3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b. ▶ \$

4 Did the filing organization file Form 1120-POL for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

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

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

Schedule C (Form 990 or 990-EZ) 2011

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

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
<b>1 a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying) . . . . .															
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . .															
<b>c</b> Total lobbying expenditures (add lines 1a and 1b) . . . . .															
<b>d</b> Other exempt purpose expenditures . . . . .		899,053.													
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) . . . . .		899,053.													
<b>f</b> Lobbying nontaxable amount Enter the amount from the following table in both columns		159,858.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f) . . . . .		39,965.													
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0- . . . . .		0	0												
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0- . . . . .		0	0												
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? . . . . .			<input type="checkbox"/> Yes <input type="checkbox"/> No												

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
<b>2 a</b> Lobbying nontaxable amount	105,756.	105,157.	117,732.	159,858.	488,503.
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					732,755.
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount	26,439.	26,289.	29,433.	39,965.	122,126.
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					183,189.
<b>f</b> Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2011

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

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

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

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

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

**Part IV** Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A, and Part II-B, line

1 Also, complete this part for any additional information

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**Part IV** Supplemental Information *(continued)*

SCHEDULE D  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2011

Open to Public  
Inspection

Name of the organization

NATIONAL ROAD SAFETY FOUNDATION, INC.

Employer identification number

13-6128274

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year . . . . .		
2 Aggregate contributions to (during year) . . . . .		
3 Aggregate grants from (during year) . . . . .		
4 Aggregate value at end of year . . . . .		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . .		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? . . . . .		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

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

<input type="checkbox"/> Preservation of land for public use (e g , recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input checked="" type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

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

	Held at the End of the Tax Year
a Total number of conservation easements . . . . .	2a 1.
b Total acreage restricted by conservation easements . . . . .	2b 43.00
c Number of conservation easements on a certified historic structure included in (a) . . . . .	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register . . . . .	2d

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

4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_ 1.

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

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

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

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

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

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.** Complete if the organization answered "Yes" to Form 990, Part IV, line 8

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

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

(i) Revenues included in Form 990, Part VIII, line 1 . . . . . ▶ \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X . . . . . ▶ \$ \_\_\_\_\_

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

a Revenues included in Form 990, Part VIII, line 1 . . . . . ▶ \$ \_\_\_\_\_

b Assets included in Form 990, Part X . . . . . ▶ \$ \_\_\_\_\_

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

Schedule D (Form 990) 2011

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

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

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

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

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

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

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

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

	Amount
1c	
1d	
1e	
1f	

c Beginning balance  
 d Additions during the year  
 e Distributions during the year  
 f Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

**Part V Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

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

a Board designated or quasi-endowment \_\_\_\_\_ %

b Permanent endowment \_\_\_\_\_ %

c Temporarily restricted endowment \_\_\_\_\_ %

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

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

4 Describe in Part XIV the intended uses of the organization's endowment funds

**Part VI Land, Buildings, and Equipment.** See Form 990, Part X, line 10

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		4,029,364		4,029,364
b Buildings				
c Leasehold improvements				
d Equipment		7,621	7,621	
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)).				4,029,364

Schedule D (Form 990) 2011

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

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

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

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

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

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

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ACCRUED EXPENSES & OTHER LIABILITIES	42,443.
(3) _____	
(4) _____	
(5) _____	
(6) _____	
(7) _____	
(8) _____	
(9) _____	
(10) _____	
(11) _____	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	42,443.

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



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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,564,249.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	899,053.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	665,196.
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10	665,196.

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1	Total revenue, gains, and other support per audited financial statements	1	1,123,517.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	-440,732.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	-440,732.
3	Subtract line 2e from line 1	3	1,564,249.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	1,564,249.

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

1	Total expenses and losses per audited financial statements	1	899,053.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	899,053.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	899,053.

**Part XIV Supplemental Information**

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

SEE PAGE 5

**Part XIV** Supplemental Information (continued)

## NOTE 1:

## SUPPLEMENTAL INFORMATION TO PART II LINE 9:

THE ORGANIZATION HAS APPROXIMATELY 68 ACRES OF UNDEVELOPED LAND, LOCATED IN JACKSONVILLE, FLORIDA. THE PROPERTY WAS APPRAISED AT THE DONATION DATE FOR \$1,850,000. IN ORDER FOR IT TO BE DESIGNED AS A QUALIFIED WETLANDS MITIGATION BANK, THE ORGANIZATION MADE LAND IMPROVEMENTS TO THE PROPERTY. 57 ACES OF THE PROPERTY QUALIFIED FOR MITIGATION BANKING. AS A QUALIFIED WETLANDS MITIGATION BANK, THE ORGANIZATION IS PERMITTED TO GRANT CONSERVATION EASEMENTS ON ITS PROPERTY. THE GRANTING OF THE CONSERVATION EASEMENTS BY THE FOUNDATION PROHIBITS THE FOUNDATION FROM DEVELOPING THE PROPERTY IN THE FUTURE AND, ACCORDINGLY, THE FOUNDATION REDUCES THE CARRYING VALUE OF THE LAND AND LAND IMPROVEMENT FOR THE PARCELS ENCUMBERED BY THE CONSERVATION EASEMENTS. THERE IS NO COST BASIS ALLOCATED TO THE 11 ACRES OF PROPERTY WHICH DOES NOT QUALIFY FOR LAND MITIGATION. THE FOUNDATION HAS THE RESPONSIBILITY TO MAINTAIN THE PROPERTY ENCUMBERED BY THE CONSERVATION EASEMENT IN PERPETUITY. FOR THE YEARS ENDED APRIL 30, 2012 AND APRIL 30, 2011, NO CONSERVATION EASEMENTS WERE GRANTED. AS OF APRIL 30, 2012, CONSERVATION EASEMENTS ON APPROXIMATELY 25 ACRES HAVE BEEN GRANTED. THE FOUNDATION INTENDS TO DONATE THE PROPERTY UPON THE GRANTING OF ALL THE CONSERVATION EASEMENTS.

## NOTE 2: SUPPLEMENTAL INFORMATION TO PART X:

THE FOUNDATION IS A NOT-FOR-PROFIT, PUBLIC CHARITABLE ORGANIZATION EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, AND IS CLASSIFIED AS A PUBLICLY SUPPORTED ORGANIZATION, WHICH

**Part XIV** Supplemental Information (continued)

ALLOWS FOR THE MAXIMUM CHARITABLE CONTRIBUTION DEDUCTION BY DONORS. AS A NOT-FOR-PROFIT CORPORATION, THE FOUNDATION IS ALSO EXEMPT FROM STATE AND LOCAL TAXES. THE FOUNDATION ANNUALLY REVIEWS ITS TAX POSITIONS AND HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS. THE FOUNDATION'S FEDERAL AND STATE INCOME TAX RETURNS AFTER 2008 REMAIN SUBJECT TO EXAMINATION BY THE RELEVANT TAXING AUTHORITIES.

SCHEDULE I  
(Form 990)

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

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

Department of the Treasury  
Internal Revenue Service

Name of the organization

NATIONAL ROAD SAFETY FOUNDATION, INC.

Employer identification number

13-6128274

OMB No 1545-0047

2011

Open to Public  
Inspection

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States ☒ Yes ☐ No

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000 ☒

Part II can be duplicated if additional space is needed

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								

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

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

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

Schedule I (Form 990) (2011)

**Part III** Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on 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
1 SCHOLARSHIPS	10.	10,500.			
2					
3					
4					
5					
6					
7					

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

PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS

REVIEWED BY VICE PRESIDENT

**SCHEDULE L**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Transactions With Interested Persons**

▶ **Complete if the organization answered**  
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,  
or Form 990-EZ, Part V, line 38a or 40b.  
▶ **Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.**

OMB No 1545-0047

**2011**

**Open To Public  
Inspection**

Name of the organization

NATIONAL ROAD SAFETY FOUNDATION, INC.

Employer identification number

13-6128274

**Part I Excess Benefit Transactions** (section 501(c)(3) and section 501(c)(4) organizations only)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

- 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 . . . . . ▶ \$ \_\_\_\_\_
- 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . ▶ \$ \_\_\_\_\_

**Part II Loans to and/or From Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
(1)										
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
Total . . . . . ▶ \$ _____										

**Part III Grants or Assistance Benefiting Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 27

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		

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

Schedule L (Form 990 or 990-EZ) 2011

**Part IV Business Transactions Involving Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) DAVID REICH	TRUSTEE	75,000	PROMOTION		X
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

**Part V Supplemental Information**

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

**SCHEDULE M  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Noncash Contributions**

► **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**  
► **Attach to Form 990.**

OMB No 1545-0047

**2011**

**Open To Public  
Inspection**

Name of the organization

NATIONAL ROAD SAFETY FOUNDATION, INC.

Employer identification number

13-6128274

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art . . . . .				
2 Art - Historical treasures . . . . .				
3 Art - Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .	X	1.	55,000.	SELLING PRICE
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 . . . . .	X	1.	185,000.	APPRAISAL
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ► ( ) . . . . .				
26 Other ► ( ) . . . . .				
27 Other ► ( ) . . . . .				
28 Other ► ( ) . . . . .				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . . **29** 1.

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



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

NOTE 1:

SUPPLEMENTAL INFORMATION TO PART I LINE 32B:

THE FOUNDATION RECEIVED A DONATION OF AN AUTOMOBILE, A 1963 ALFA ROMEO  
SPIDER, WITH A FAIR MARKET VALUE OF \$55,000, FROM A RELATED PARTY IN  
DECEMBER 2011. IN MARCH 2012, THE FOUNDATION SOLD THE AUTOMOBILE THROUGH  
RM AUCTIONS FOR \$55,000.

**SCHEDULE O**  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

OMB No 1545-0047

**2011**

**Open to Public  
Inspection**

Name of the organization

NATIONAL ROAD SAFETY FOUNDATION, INC.

Employer identification number

13-6128274

**FAMILY RELATIONSHIPS:**

**SUPPLEMENTAL INFORMATION TO PART VI LINE 2**

NAME OF OFFICER, DIRECTOR, ETC: CAROLINE M. MANOCHERIAN

RELATIONSHIP: SISTER

NAME OF OFFICER, DIRECTOR, ETC: JOHN F. MANOCHERIAN

RELATIONSHIP: BROTHER

NAME OF OFFICER, DIRECTOR, ETC: KIMBERLY D. MANOCHERIAN

RELATIONSHIP: SISTER

**CONFLICT OF INTEREST POLICY**

**PART VI SECTION B LINE 12C**

ANNUAL STATEMENTS ARE SENT TO EACH DIRECTOR AND MEMBER, WHICH MUST BE  
SIGNED BY EACH PERSON THAT AFFIRMS THAT SUCH PERSON HAS RECEIVED A COPY  
OF THE CONFLICTS OF INTEREST POLICY, HAS READ AND UNDERSTANDS THE POLICY,  
HAS AGREED TO COMPLY WITH THE POLICY AND UNDERSTANDS THE FOUNDATION IS A  
CHARITABLE ORGANIZATION AND IN ORDER TO MAINTAIN ITS FEDERAL TAX  
EXEMPTION IT MUST ENGAGE PRIMARILY IN ACTIVITIES WHICH ACCOMPLISH ITS  
TAX-EXEMPT PURPOSES. IN ADDITION, PERIODIC REVIEWS ARE CONDUCTED TO  
ACHIEVE THE ABOVE POLICY.

**AUDIT COMMITTEE**

**PART VI, LINE 11B**

THE AUDIT COMMITTEE REVIEWS THE 990 WITH THE FOUNDATION'S CPA, AND A COPY  
OF IT IS PROVIDED TO EACH TRUSTEE PRIOR TO FILING WITH THE APPROPRIATE

Name of the organization

NATIONAL ROAD SAFETY FOUNDATION, INC.

Employer identification number

13-6128274

GOVERNMENT AGENCIES.

## AVAILABILITY OF FINANCIAL STATEMENTS

PART VI, LINE 19

THE AUDITED FINANCIAL STATEMENTS AND FORM 990 ARE AVAILABLE AT THE  
NATIONAL ROAD SAFETY FOUNDATION'S BUSINESS OFFICE AND ARE AVAILABLE UPON  
WRITTEN REQUEST. GOVERNANCE DOCUMENTS ARE ALSO AVAILABLE AT THE BUSINESS  
OFFICE UPON WRITTEN REQUEST.

## UNREALIZED APPRECIATION ON MARKETABLE SECURITIES

PART XI, LINE 5

AMOUNT REPORTED ON LINE 5 REPRESENTS UNREALIZED  
APPRECIATION/(DEPRECIATION) ON MARKETABLE SECURITIES.

ATTACHMENT 1FORM 990, PART VIII - INVESTMENT INCOME

<u>DESCRIPTION</u>	(A) <u>TOTAL REVENUE</u>	(B) <u>RELATED OR EXEMPT REVENUE</u>	(C) <u>UNRELATED BUSINESS REV.</u>	(D) <u>EXCLUDED REVENUE</u>
INTEREST INCOME	880,544.			880,544.
DIVIDEND INCOME	223,494.			223,494.
TOTALS	<u>1,104,038.</u>			<u>1,104,038.</u>

ATTACHMENT 2

Name of the organization

NATIONAL ROAD SAFETY FOUNDATION, INC.

Employer identification number

13-6128274

ATTACHMENT 2 (CONT'D)

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

<u>DESCRIPTION</u>	<u>BEGINNING BOOK VALUE</u>	<u>ENDING BOOK VALUE</u>	<u>COST OR FMV</u>
SEE ATTACHED STATEMENT A	26,774,361.	25,189,122.	FMV
TOTALS	<u>26,774,361.</u>	<u>25,189,122.</u>	

**NATIONAL ROAD SAFETY FOUNDATION, INC.**

Year End: 04/30/2012

EIN: 13-6128274

	End of the Year	Beginning of the Year	End of the Year	Beginning of the Year
	Number of Shares	Number of Shares	Market Value	Market Value
<b>Corporate bonds</b>				
American Airlines Note, 10 5%, due 10/15/2012	300,000	300,000	315,000	321,750
American Express Note, 4 875%, due 7/15/2013	500,000	500,000	522,360	535,500
American Gen Fin Corp Note, 5 2%, due 12/15/2011	-	500,000	-	505,000
AstraZeneca PLC Note, 5 4%, due 6/1/2014	750,000	750,000	824,025	834,098
BellSouth Corp Note, 6 0%, due 10/15/2011	-	500,000	-	512,155
Berkshire Hathaway Inc Note, 4 75%, due 5/15/2012	370,000	370,000	370,537	385,980
Bristol-Myers Squibb Co Note, 5 25%, due 8/15/2013	750,000	750,000	795,893	822,600
Caterpillar Inc Note, 6 55%, due 5/11/2011	-	150,000	-	150,000
Coca-Cola Co Note, 5 35%, due 11/5/2017	230,000	230,000	276,702	263,580
Coca-Cola Co / The KO 1 5%, due 11/15/2015	500,000	-	510,795	-
Colgate-Palmolive Co Note, 5 98%, due 4/25/2012	-	825,000	-	868,890
Consolidated Edison Co NY Inc Note, 5 625%, due 7/1/2012	550,000	550,000	554,499	580,377
Consolidated Edison Co NY Inc Note, 4 875%, due 2/1/2013	125,000	125,000	129,028	132,618
Consolidated Edison Co NY Inc Note, 3 85%, due 6/15/2013	200,000	200,000	207,080	210,070
Ford Motor Credit Co Note, 7 25%, due 10/25/20 11	-	500,000	-	512,945
General Elec Cap Corp, 6 375%, due 11/15/2067	500,000	-	514,375	-
General Dynamics Corp Note, 5 25%, due 2/1/2014	295,000	295,000	319,293	327,002
GlaxoSmithKline Cap Inc Note, 4 375%, due 4/15/2014	1,294,000	1,294,000	1,389,158	1,405,095
Goldman Sachs Capital II, 5 793%, due 6/1/2043	500,000	-	343,750	-
Goldman Sachs Group Inc Note, 5 15%, due 1/15/2014	55,000	55,000	57,623	59,353
Hershey Co Note, 5 3%, due 9/1/2011	-	600,000	-	609,780
Hewlett Packard Note, 2 95%, due 8/15/2012	500,000	500,000	502,825	514,265
Household Finance Corp Note, 6 375%, due 11/27/2012	500,000	500,000	515,135	538,305
Int'l Business Machines Note, 4 75%, due 11/29/2012	300,000	300,000	308,046	318,759
Int'l Business Machines Note, 5 05%, due 10/22/2012	400,000	400,000	409,364	425,452
Int'l Business Machines Note, 5 70%, due 9/14/2017	100,000	100,000	120,473	115,181
International Lease Finance Corp Note, 5 875%, due 5/11/2013	500,000	500,000	511,250	516,250
JetBlue 04-1 G2 PT Trust, Floating rate note, due 3/15/2014	350,000	-	333,375	-
Johnson & Johnson Note, 5 15%, due 8/15/2012	264,000	264,000	267,744	279,375
Johnson & Johnson Note, 3 80%, due 5/15/2013	250,000	250,000	259,255	265,295
JPMorgan Chase & Co Note, 4 875%, due 3/15/2014	300,000	300,000	318,552	321,402
JPMorgan Chase & Co Note, 5 125%, due 9/15/2014	105,000	105,000	112,768	113,615
Microsoft Corp Note, 2 95%, due 6/01/2014	500,000	500,000	524,415	524,475
Morgan Stanley Note, 5%, due 2/11/2016	3,285,000	3,285,000	468,527	500,518
NStar Electric Co Note, 4 875%, due 4/15/2014	275,000	275,000	296,571	299,951
Pepsico Inc Note, 3 75%, due 3/01/2014	500,000	500,000	529,885	534,440
Pfizer Inc Note, 4 45%, due 3/15/2012	-	275,000	-	284,490
Pfizer Inc Note, 4 5%, due 2/15/2014	616,000	616,000	660,407	668,976
Pharmacia Corp Note, 6 5%, due 12/11/2018	500,000	500,000	636,925	586,495
Pitney Bowes Inc Note, 3 875%, due 6/15/2013	500,000	500,000	512,185	520,655
Procter & Gamble Co Note, 4 95%, due 8/15/2014	420,000	420,000	462,966	469,186
SBC Communications Inc Note, 5 875%, due 8/15/2012	-	1,250,000	-	1,331,088
Southern Cal Edison Note, 4 65%, due 4/1/2015	250,000	250,000	276,283	271,983
United Parcel Service, 3 875%, due 4/1/2014	750,000	750,000	796,425	809,295
Wachovia Capital Trust III, Var rate, due 3/31/2049	240,000	-	222,600	-
Wal-Mart Stores Inc Note, 4 55%, due 5/1/2013	351,000	351,000	365,377	376,862
Wal-Mart Stores Inc Note, 4 25%, due 4/15/2013	800,000	800,000	830,248	852,528
Walt Disney Note, 4 50%, due 12/15/2013	750,000	750,000	797,460	815,213
Wells Fargo & Co Note, 5 25%, due 10/23/2012	450,000	450,000	459,333	478,238
Wells Fargo & Co Note, 5 0%, due 11/15/2014	124,000	124,000	133,424	134,261
<b>Total corporate bonds</b>	<b>20,799,000</b>	<b>23,309,000</b>	<b>18,761,934</b>	<b>21,903,346</b>

**Mutual funds and other funds**

Fidelity Advisor Float Rate Hi Inc	-	19,368	-	191,547
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**NATIONAL ROAD SAFETY FOUNDATION, INC.**

Year End: 04/30/2012

EIN: 13-6128274

	End of the Year	Beginning of the Year	End of the Year	Beginning of the Year
	Number of Shares	Number of Shares	Market Value	Market Value
IPATH Dow Jones - UBS Commodity	1,960			104,096
iShares ETF, Floating Rate Note Fund	2,400	-	119,616	-
iShares Trust IBoxx High Yield Corp	2,190	2,110	199,728	195,914
iShares Iboxx Investop	4,220	870	491,546	96,109
iShares Barclays TIP	-	1,080	-	120,053
iShares Oil and Gas	180	180	11,617	13,457
iShares MSCI Pacific Ex Japan	990	660	43,659	33,370
JPMorgan Exch Traded NT Alerian MLP	2,600	2,600	104,026	101,920
JPMorgan Strategic Income	98,976	85,288	1,145,148	1,025,167
JPMorgan TR I Float Rate Inc 4 24%	25,076	-	246,995	-
PIMCO Foreign Bond	-	21,342	-	236,892
PIMCO Total Return Fund	96,199	92,252	1,079,350	1,017,535
PowerShares Fin Preferred	10,890	10,480	194,060	191,679
SPDR Gold Trust	300	400	48,564	60,948
SPDR KBW Bank	430	430	9,998	11,012
Materials Select Sector SPDR	300	300	11,001	12,261
Templeton Global Bond Fund Class A	30,063	27,925	393,829	392,899
Vanguard Short Term Bond Fund	-	1,180	-	95,320
Vanguard Fund MSCI Emerging Markets	-	490	-	24,794
Vanguard Div Appreciation	350	-	20,423	-
Vanguard Extended Market	1,000	330	58,830	20,021
Vanguard FTSE All-World	-	570	-	29,646
Vanguard Total Stock Market	900	420	64,620	29,694
Wisdomtree Emerging Markets Local Debt Fund	5,650	5,490	292,840	296,735
Wisdomtree Dreyfus Emerging Currency Fund	9,340	5,000	195,206	118,050
Wisdomtree Emerging Markets Equity Income Fund	390	-	22,113	-
Wisdomtree Trust Emerging Smallcap Div Fund	500	-	23,760	-
<b>Total mutual funds and other funds</b>	<b>294,903</b>	<b>278,765</b>	<b>4,776,927</b>	<b>4,419,119</b>
<b>Preferred stock</b>				
JPM Chase Capital XXVI Preferred Stock	4,000	4,000	104,080	106,320
JPM Chase Capital XXVIII Preferred Stock	13,200	13,200	341,088	345,576
JPM Chase & Co, 7 9% Preferred Stock, due 4/30/2049	1,100,000	-	1,205,093	-
<b>Total preferred stock</b>	<b>1,117,200</b>	<b>17,200</b>	<b>1,650,261</b>	<b>451,896</b>
<b>Total marketable securities</b>	<b>22,211,103</b>	<b>23,604,965</b>	<b>25,189,122</b>	<b>26,774,361</b>

**SCHEDULE D  
(Form 1041)**

Department of the Treasury  
Internal Revenue Service

# Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T. See the Instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

**2011**

Name of estate or trust

NATIONAL ROAD SAFETY FOUNDATION, INC.

Employer identification number

13-6128274

Note: Form 5227 filers need to complete *only* Parts I and II

**Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less**

(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo, day, yr)	(c) Date sold (mo, day, yr)	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) for the entire year Subtract (e) from (d)
<b>1a</b>					
<b>b</b> Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b					<b>1b</b> 7,482.
<b>2</b> Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824					<b>2</b>
<b>3</b> Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts					<b>3</b>
<b>4</b> Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2010 Capital Loss Carryover Worksheet					<b>4</b> ( )
<b>5</b> Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, column (3) on the back					<b>5</b> 7,482.

**Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year**

(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo, day, yr)	(c) Date sold (mo, day, yr)	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) for the entire year Subtract (e) from (d)
<b>6a</b> LONG-TERM CAPITAL GAIN DIVIDENDS			ATCH 1		5,507.
<b>b</b> Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b					<b>6b</b> 36,630.
<b>7</b> Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824					<b>7</b>
<b>8</b> Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts					<b>8</b>
<b>9</b> Capital gain distributions					<b>9</b>
<b>10</b> Gain from Form 4797, Part I					<b>10</b>
<b>11</b> Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2010 Capital Loss Carryover Worksheet					<b>11</b> ( )
<b>12</b> Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back					<b>12</b> 42,137.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041

Schedule D (Form 1041) 2011

**Part III Summary of Parts I and II****Caution:** Read the instructions before completing this part

	(1) Beneficiaries' (see instr)	(2) Estate's or trust's	(3) Total
<b>13</b> Net short-term gain or (loss) . . . . .	<b>13</b>		7,482.
<b>14</b> Net long-term gain or (loss):			
<b>a</b> Total for year . . . . .	<b>14a</b>		42,137.
<b>b</b> Unrecaptured section 1250 gain (see line 18 of the wrksht) . . . . .	<b>14b</b>		
<b>c</b> 28% rate gain . . . . .	<b>14c</b>		
<b>15</b> Total net gain or (loss). Combine lines 13 and 14a . . . . .	<b>15</b>		49,619.

**Note:** If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a). If lines 14a and 15, column (2), are net gains, go to Part V, and do not complete Part IV. If line 15, column (3), is a net loss, complete Part IV and the **Capital Loss Carryover Worksheet**, as necessary.

**Part IV Capital Loss Limitation**

<b>16</b> Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of	<b>16</b>	( )
<b>a</b> The loss on line 15, column (3) or		
<b>b</b> \$3,000 . . . . .		

**Note:** If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the **Capital Loss Carryover Worksheet** in the instructions to figure your capital loss carryover.

**Part V Tax Computation Using Maximum Capital Gains Rates**

**Form 1041 filers.** Complete this part only if both lines 14a and 15 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero.

**Caution:** Skip this part and complete the **Schedule D Tax Worksheet** in the instructions if

- Either line 14b, col (2) or line 14c, col (2) is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero

**Form 990-T trusts.** Complete this part only if both lines 14a and 15 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and complete the **Schedule D Tax Worksheet** in the instructions if either line 14b, col (2) or line 14c, col (2) is more than zero.

<b>17</b> Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34) . . . . .	<b>17</b>		
<b>18</b> Enter the smaller of line 14a or 15 in column (2) but not less than zero . . . . .	<b>18</b>		
<b>19</b> Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T) . . . . .	<b>19</b>		
<b>20</b> Add lines 18 and 19 . . . . .	<b>20</b>		
<b>21</b> If the estate or trust is filing Form 4952, enter the amount from line 4g, otherwise, enter -0- . . . . .	<b>21</b>		
<b>22</b> Subtract line 21 from line 20. If zero or less, enter -0- . . . . .	<b>22</b>		
<b>23</b> Subtract line 22 from line 17. If zero or less, enter -0- . . . . .	<b>23</b>		
<b>24</b> Enter the smaller of the amount on line 17 or \$2,300 . . . . .	<b>24</b>		
<b>25</b> Is the amount on line 23 equal to or more than the amount on line 24? <input type="checkbox"/> <b>Yes.</b> Skip lines 25 and 26, go to line 27 and check the "No" box <input type="checkbox"/> <b>No.</b> Enter the amount from line 23 . . . . .	<b>25</b>		
<b>26</b> Subtract line 25 from line 24 . . . . .	<b>26</b>		
<b>27</b> Are the amounts on lines 22 and 26 the same? <input type="checkbox"/> <b>Yes.</b> Skip lines 27 thru 30, go to line 31 <input type="checkbox"/> <b>No.</b> Enter the smaller of line 17 or line 22 . . . . .	<b>27</b>		
<b>28</b> Enter the amount from line 26 (If line 26 is blank, enter -0-) . . . . .	<b>28</b>		
<b>29</b> Subtract line 28 from line 27 . . . . .	<b>29</b>		
<b>30</b> Multiply line 29 by 15% ( 15 ) . . . . .		<b>30</b>	
<b>31</b> Figure the tax on the amount on line 23. Use the 2011 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041) . . . . .		<b>31</b>	
<b>32</b> Add lines 30 and 31 . . . . .		<b>32</b>	
<b>33</b> Figure the tax on the amount on line 17. Use the 2011 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041) . . . . .		<b>33</b>	
<b>34</b> Tax on all taxable income. Enter the smaller of line 32 or line 33 here and on Form 1041, Schedule G, line 1a (or Form 990-T, line 36) . . . . .		<b>34</b>	

Schedule D (Form 1041) 2011



Department of the Treasury  
Internal Revenue Service

▶ See instructions for Schedule D (Form 1041).

► Attach to Schedule D to list additional transactions for lines 1a and 6a.

2011

Name of estate or trust

Employer identification number

NATIONAL ROAD SAFETY FOUNDATION, INC.

13-6128274

## Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less

[illegible]

**1b Total.** Combine the amounts in column (f). Enter here and on Schedule D, line 1b . . . . . 7,482.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D-1 (Form 1041) 2011



Short-Term Capital Gains and Losses- Asset Held One Year or less

Name	Date Acquired	Date Sold	Quantity	Sales Price	Cost	Net Proceeds	Total Gain
<b>Total(Sales)</b>	-	-	-	-	<b>477,187 98</b>	<b>486,050 19</b>	<b>8,862 20</b>
<b>Fidelity Advisor Floating Rate Hi Inc I (FFRIX)</b>			<b>13,753 396</b>		<b>131,812 10</b>	<b>132,857 81</b>	<b>1,045 71</b>
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)	8/31/2010	8/5/2011	15 982	9 66	153 17	154 39	1 22
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)	9/2/2010	8/5/2011	3,136 131	9 66	30 056 58	30 295 03	238 45
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)	9/30/2010	8/5/2011	23 041	9 66	220 82	222 58	1 75
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)	10/29/2010	8/5/2011	23 714	9 66	227 27	229 08	1 80
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)	11/30/2010	8/5/2011	22 536	9 66	215 98	217 70	1 71
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)	12/31/2010	8/5/2011	67 361	9 66	645 59	650 71	5 12
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)	1/31/2011	8/5/2011	21 701	9 66	207 98	209 63	1 65
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)	2/28/2011	8/5/2011	17 197	9 66	164 82	166 12	1 31
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)	3/9/2011	8/5/2011	4,756 844	9 66	45,589 44	45,951 11	361 68
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)	3/30/2011	8/5/2011	5,471 608	9 66	52,439 71	52,855 73	416 02
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)	3/31/2011	8/5/2011	26 221	9 66	251 30	253 29	1 99
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)	4/29/2011	8/5/2011	40 056	9 66	383 90	386 94	3 05
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)	5/31/2011	8/5/2011	43 245	9 66	414 46	417 75	3 29
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)	6/30/2011	8/5/2011	42 879	9 66	410 95	414 21	3 26
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)	7/29/2011	8/5/2011	44 880	9 66	430 13	433 54	3 41
<b>Goldman Sachs Absolute Return Tracker I (GJRTX)</b>			<b>3,152 637</b>		<b>30,000 00</b>	<b>28,474 84</b>	<b>-1,525 16</b>
Goldman Sachs Absolute Return Tracker I (GJRTX)	5/10/2011	11/18/2011	3,152 637	9 04	30,000 00	28 474 84	-1 525 16

National Road Safety Foundation  
 EIN 13-6128274

Name	Date Acquired	Date Sold	Quantity	Sales Price	Cost	Net Proceeds	Total Gain
1Shares Barclays TIPS Bond (TIP)			280 000		30,128 55	30,916 84	788 29
1Shares Barclays TIPS Bond (TIP)	8/27/2010	6/3/2011	280 000	110 43	30 128 55	30,916 84	788 29
PIMCO Foreign Bond (Unhedged) D (PFBDX)			15,919 971		163,312 14	174,871 24	11,559 10
PIMCO Foreign Bond (Unhedged) D (PFBDX)	6/30/2010	6/21/2011	9 121	11 04	93 57	100 70	7 13
PIMCO Foreign Bond (Unhedged) D (PFBDX)	7/30/2010	6/21/2011	9 432	11 04	96 76	104 13	7 37
PIMCO Foreign Bond (Unhedged) D (PFBDX)	8/31/2010	6/21/2011	9 117	11 04	93 53	100 65	7 13
PIMCO Foreign Bond (Unhedged) D (PFBDX)	9/2/2010	6/21/2011	418 216	11 04	4 290 19	4,617 10	326 91
PIMCO Foreign Bond (Unhedged) D (PFBDX)	9/30/2010	6/21/2011	8 634	11 04	88 57	95 32	6 75
PIMCO Foreign Bond (Unhedged) D (PFBDX)	10/29/2010	6/21/2011	9 498	11 04	97 43	104 86	7 42
PIMCO Foreign Bond (Unhedged) D (PFBDX)	11/30/2010	6/21/2011	9 632	11 04	98 81	106 34	7 53
PIMCO Foreign Bond (Unhedged) D (PFBDX)	12/31/2010	6/21/2011	11 277	11 04	115 68	124 50	8 82
PIMCO Foreign Bond (Unhedged) D (PFBDX)	12/31/2010	6/21/2011	248 599	11 04	2,529 69	2,722 45	192 76
PIMCO Foreign Bond (Unhedged) D (PFBDX)	1/31/2011	6/21/2011	10 077	11 04	103 37	111 25	7 88
PIMCO Foreign Bond (Unhedged) D (PFBDX)	2/28/2011	6/21/2011	10 330	11 04	105 97	114 04	8 07
PIMCO Foreign Bond (Unhedged) D (PFBDX)	3/24/2011	6/21/2011	87 038	11 04	892 86	960 90	68 04
PIMCO Foreign Bond (Unhedged) D (PFBDX)	3/24/2011	6/23/2011	653 703	11 01	6,705 89	7,197 27	491 38
PIMCO Foreign Bond (Unhedged) D (PFBDX)	3/30/2011	6/23/2011	0 297	11 01	3 05	3 27	0 22
PIMCO Foreign Bond (Unhedged) D (PFBDX)	3/30/2011	6/29/2011	14,338 972	10 98	147,093 75	157 441 91	10 348 16
PIMCO Foreign Bond (Unhedged) D (PFBDX)	3/31/2011	6/29/2011	12 084	10 98	123 96	132 68	8 72
PIMCO Foreign Bond (Unhedged) D (PFBDX)	4/29/2011	6/29/2011	37 571	10 98	385 42	412 53	27 11

National Road Safety Foundation  
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Name	Date Acquired	Date Sold	Quantity	Sales Price	Cost	Net Proceeds	Total Gain
PIMCO Foreign Bond (Unhedged) D (PFBDX)	5/31/2011	6/29/2011	38 373	10 98	393 64	421 34	27 69
<b>PowerShares Financial Preferred (PGF)</b>			<b>900 000</b>		<b>15,635 50</b>	<b>15,348 72</b>	<b>-286 78</b>
PowerShares Financial Preferred (PGF)	12/16/2010	8/15/2011	900 000	17 06	15,635 50	15,348 72	-286 78
<b>Vanguard FTSE All-World ex-US ETF (VEU)</b>			<b>570 000</b>		<b>27,294 85</b>	<b>26,972 62</b>	<b>-322 23</b>
Vanguard FTSE All-World ex-US ETF (VEU)	12/31/2010	6/24/2011	570 000	47 34	27 294 85	26 972 62	-322 23
<b>Vanguard MSCI Emerging Markets ETF (VWO)</b>			<b>490 000</b>		<b>23,688 56</b>	<b>21,069 18</b>	<b>-2,619 38</b>
Vanguard MSCI Emerging Markets ETF (VWO)	12/31/2010	8/30/2011	240 000	43 02	11,554 87	10,319 60	1 235 27
Vanguard MSCI Emerging Markets ETF (VWO)	3/30/2011	8/30/2011	100 000	43 02	4,853 58	4,299 83	-553 75
Vanguard MSCI Emerging Markets ETF (VWO)	3/30/2011	8/30/2011	100 000	43 02	4,853 48	4 299 83	553 65
Vanguard MSCI Emerging Markets ETF (VWO)	3/30/2011	8/30/2011	50 000	43 02	2,426 63	2 149 92	-276 71
<b>Vanguard Short-Term Bond ETF (BSV)</b>			<b>650 000</b>		<b>52,208 68</b>	<b>52,677 40</b>	<b>468 72</b>
Vanguard Short-Term Bond ETF (BSV)	10/27/2010	6/29/2011	40 000	81 05	3,278 95	3,241 69	-37 26
Vanguard Short-Term Bond ETF (BSV)	3/29/2011	6/29/2011	610 000	81 05	48,929 73	49,435 71	505 98
<b>WisdomTree Emerging Mkts SmallCap Div (DGS)</b>			<b>60 000</b>		<b>3,107 60</b>	<b>2,861 54</b>	<b>-246 06</b>
WisdomTree Emerging Mkts SmallCap Div (DGS)	7/14/2011	3/22/2012	60 000	47 84	3,107 60	2,861 54	-246 06

Long-Term Capital Gains and Losses- Asset Held More Than One Year

Name	Date Acquired	Date Sold	Quantity	Sales Price	Cost	Net Proceeds	Total Gain
<b>Total(Sales)</b>	-	-	-	-	<b>517,663.27</b>	<b>536,924.80</b>	<b>19,261.53</b>
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)			5,745.355		55,063.29	55,500.13	436.84
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)	6/8/2009	8/5/2011	2,819.215	9.66	27,019.26	27,233.62	214.35
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)	6/30/2009	8/5/2011	4.669	9.66	44.75	45.10	0.35
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)	7/31/2009	8/5/2011	6.332	9.66	60.69	61.17	0.48
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)	8/6/2009	8/5/2011	2,706.079	9.66	25,934.97	26,140.72	205.75
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)	8/31/2009	8/5/2011	11.951	9.66	114.54	115.45	0.91
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)	9/30/2009	8/5/2011	12.790	9.66	122.58	123.55	0.97
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)	10/30/2009	8/5/2011	13.550	9.66	129.86	130.89	1.03
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)	11/30/2009	8/5/2011	13.339	9.66	127.84	128.85	1.01
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)	12/4/2009	8/5/2011	30.205	9.66	289.48	291.78	2.30
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)	12/31/2009	8/5/2011	28.855	9.66	276.55	278.74	2.19
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)	1/29/2010	8/5/2011	14.080	9.66	134.94	136.01	1.07
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)	2/26/2010	8/5/2011	12.387	9.66	118.72	119.66	0.94
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)	3/31/2010	8/5/2011	13.262	9.66	127.10	128.11	1.01

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Name	Date Acquired	Date Sold	Quantity	Sales Price	Cost	Net Proceeds	Total Gain
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)	4/30/2010	8/5/2011	13 134	9 66	125 88	126 87	1 00
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)	5/28/2010	8/5/2011	14 817	9 66	142 01	143 13	1 13
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)	6/30/2010	8/5/2011	14 950	9 66	143 28	144 42	1 14
Fidelity Advisor Floating Rate Hi Inc I (FFRIX)	7/30/2010	8/5/2011	15 740	9 66	150 85	152 05	1 20
<b>iPath DJ-UBS Commodity Index TR ETN (DJP)</b>			<b>1,960 000</b>		<b>84,150 32</b>	<b>80,814 94</b>	<b>-3,335 38</b>
iPath DJ-UBS Commodity Index TR ETN (DJP)	6/8/2009	4/17/2012	450 000	41 24	17 263 70	18,554 45	1,290 75
iPath DJ-UBS Commodity Index TR ETN (DJP)	6/8/2009	4/17/2012	200 000	41 24	7,672 75	8,246 42	573 67
iPath DJ-UBS Commodity Index TR ETN (DJP)	8/3/2009	4/17/2012	650 000	41 24	25,878 95	26,800 87	921 92
iPath DJ-UBS Commodity Index TR ETN (DJP)	3/9/2011	4/17/2012	660 000	41 24	33,334 92	27,213 19	-6,121 73
<b>iShares Barclays TIPS Bond (TIP)</b>			<b>800 000</b>		<b>82,293 31</b>	<b>88,333 84</b>	<b>6,040 53</b>
iShares Barclays TIPS Bond (TIP)	8/3/2009	6/3/2011	40 000	110 43	4 008 32	4,416 69	408 38
iShares Barclays TIPS Bond (TIP)	8/3/2009	6/3/2011	10 000	110 43	1,002 08	1,104 17	102 09
iShares Barclays TIPS Bond (TIP)	8/6/2009	6/3/2011	30 000	110 43	3 008 34	3,312 52	304 18
iShares Barclays TIPS Bond (TIP)	10/8/2009	6/3/2011	720 000	110 43	74,274 57	79,500 45	5,225 88
<b>iShares iBoxx \$ High Yield Corporate Bd (HYG)</b>			<b>150 000</b>		<b>12,579 31</b>	<b>12,944 11</b>	<b>364 80</b>
iShares iBoxx \$ High Yield Corporate Bd (HYG)	6/8/2009	8/16/2011	40 000	86 36	3,146 79	3,451 76	304 97
iShares iBoxx \$ High Yield Corporate Bd (HYG)	10/12/2009	8/16/2011	110 000	86 36	9 432 51	9,492 35	59 83
<b>PIMCO Foreign Bond (Unhedged) D (PFBDX)</b>			<b>5,460 029</b>		<b>56,010 72</b>	<b>60,278 72</b>	<b>4,268 00</b>
PIMCO Foreign Bond (Unhedged) D (PFBDX)	6/8/2009	6/21/2011	2,896 871	11 04	29,717 03	31,981 46	2,264 43

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Name	Date Acquired	Date Sold	Quantity	Sales Price	Cost	Net Proceeds	Total Gain
PIMCO Foreign Bond (Unhedged) D (PFBDX)	6/30/2009	6/21/2011	6 807	11 04	69 83	75 15	5 32
PIMCO Foreign Bond (Unhedged) D (PFBDX)	7/31/2009	6/21/2011	8 761	11 04	89 87	96 72	6 85
PIMCO Foreign Bond (Unhedged) D (PFBDX)	8/3/2009	6/21/2011	2,431 290	11 04	24,940 95	26 841 44	1,900 49
PIMCO Foreign Bond (Unhedged) D (PFBDX)	8/31/2009	6/21/2011	16 017	11 04	164 31	176 83	12 52
PIMCO Foreign Bond (Unhedged) D (PFBDX)	9/30/2009	6/21/2011	15 032	11 04	154 20	165 95	11 75
PIMCO Foreign Bond (Unhedged) D (PFBDX)	10/30/2009	6/21/2011	14 363	11 04	147 34	158 57	11 23
PIMCO Foreign Bond (Unhedged) D (PFBDX)	11/30/2009	6/21/2011	10 673	11 04	109 49	117 83	8 34
PIMCO Foreign Bond (Unhedged) D (PFBDX)	12/31/2009	6/21/2011	12 905	11 04	132 38	142 47	10 09
PIMCO Foreign Bond (Unhedged) D (PFBDX)	1/29/2010	6/21/2011	9 518	11 04	97 64	105 08	7 44
PIMCO Foreign Bond (Unhedged) D (PFBDX)	2/26/2010	6/21/2011	8 969	11 04	92 01	99 02	7 01
PIMCO Foreign Bond (Unhedged) D (PFBDX)	3/31/2010	6/21/2011	9 744	11 04	99 96	107 57	7 62
PIMCO Foreign Bond (Unhedged) D (PFBDX)	4/30/2010	6/21/2011	10 725	11 04	110 02	118 40	8 38
PIMCO Foreign Bond (Unhedged) D (PFBDX)	5/28/2010	6/21/2011	8 354	11 04	85 70	92 23	6 53
<b>PowerShares Financial Preferred (PGF)</b>			<b>240 000</b>		<b>4 169 47</b>	<b>4,303 77</b>	<b>134 30</b>
PowerShares Financial Preferred (PGF)	12/16/2010	3/27/2012	240 000	17 97	4,169 47	4,303 77	134 30
<b>SPDR Gold Shares (GLD)</b>			<b>100 000</b>		<b>9,313 31</b>	<b>18,050 89</b>	<b>8,737 58</b>
SPDR Gold Shares (GLD)	6/8/2009	8/23/2011	100 000	180 60	9,313 31	18,050 89	8,737 58
<b>Vanguard Extended Market Index ETF (VXF)</b>			<b>30 000</b>		<b>1,641 81</b>	<b>1,731 42</b>	<b>89 61</b>
Vanguard Extended Market Index ETF (VXF)	12/31/2010	4/20/2012	30 000	58 01	1,641 81	1,731 42	89 61



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Name	Date Acquired	Date Sold	Quantity	Sales Price	Cost	Net Proceeds	Total Gain
Vanguard Short-Term Bond ETF (BSV)			530 000		42,372 75	42,952 34	579 59
Vanguard Short-Term Bond ETF (BSV)	3/29/2010	6/29/2011	530 000	81 05	42,372 75	42 952 34	579 59
Vanguard Total Stock Market ETF (VTI)			290 000		18,850 38	20,543 04	1,692 66
Vanguard Total Stock Market ETF (VTI)	12/31/2010	4/20/2012	290 000	70 87	18,850 38	20,543 04	1,692 66
WisdomTree Dreyfus Emerging Currency (CEW)			1,660 000		37,119 35	34,776 05	-2,343 30
WisdomTree Dreyfus Emerging Currency (CEW)	3/16/2011	3/26/2012	1,660 000	20 96	37,119 35	34,776 05	-2,343 30
WisdomTree Emerging Markets Local Debt (ELD)			2,260 000		114,099 24	116,695 55	2,596 31
WisdomTree Emerging Markets Local Debt (ELD)	8/31/2010	3/26/2012	400 000	51 98	20,177 41	20 781 80	604 39
WisdomTree Emerging Markets Local Debt (ELD)	8/31/2010	4/25/2012	1,770 000	51 57	89,285 04	91 272 76	1,987 72
WisdomTree Emerging Markets Local Debt (ELD)	12/15/2010	4/25/2012	90 000	51 57	4,636 79	4 640 99	4 20

FEDERAL CAPITAL GAIN DIVIDENDS

ATTACHMENT 1

LONG-TERM CAPITAL GAIN DIVIDENDS

15% RATE CAPITAL GAIN DIVIDENDS

JPM MORGAN CAPITAL GAIN DISTRIBUTION  
CHARLES SCHWAB CAPITAL GAIN DISTRIBUTION

1,289.  
4,218.

TOTAL 15% RATE CAPITAL GAIN DIVIDENDS

5,507.

TOTAL LONG-TERM CAPITAL GAIN DIVIDENDS

5,507.



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

OMB No 1545-1709

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

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ **X**
- 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](http://www.irs.gov/efile) and click on *e-file for Charities & Nonprofits*.

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

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

Part I only ☐

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

<b>Type or print</b>  File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions	Employer identification number (EIN) or
	NATIONAL ROAD SAFETY FOUNDATION, INC.	<input checked="" type="checkbox"/> 13-6128274
	Number, street, and room or suite no. If a P.O. box, see instructions	Social security number (SSN)
	18 EAST 50TH STREET	<input type="checkbox"/>
	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
	NEW YORK, NY 10022	

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

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

- The books are in the care of ▶ JEROME H. KATZ

Telephone No ▶ 212 837-4800

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

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 12/15, 20 12, to file the exempt organization return for the organization named above. The extension is for the organization's return for
- ▶ ☐ calendar year 20 \_\_\_\_ or
- ▶ ☒ tax year beginning 05/01, 2011, and ending 04/30, 20 12

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

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

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

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

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

<b>Type or print</b>  <small>File by the due date for filing your return. See instructions</small>	Name of exempt organization or other filer. See instructions	Enter filer's identifying number, see instructions	
	NATIONAL ROAD SAFETY FOUNDATION, INC	<input checked="" type="checkbox"/> 13-6128274	Employer identification number (EIN) or
	Number, street, and room or suite no. If a P.O. box, see instructions	<input type="checkbox"/>	Social security number (SSN)
	18 EAST 50TH STREET		
	City, town, or post office, state, and ZIP code. For a foreign address, see instructions		
	NEW YORK, NY 10022		

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

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

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

- The books are in the care of JEROME H. KATZ  
Telephone No 212 837-4800 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
- 4 I request an additional 3-month extension of time until 03/15, 20 13
- 5 For calendar year , or other tax year beginning 05/01, 20 11, and ending 04/30, 20 12
- 6 If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return  
☐ Change in accounting period
- 7 State in detail why you need the extension DUE TO HURRICANE SANDY THE RETURN GOT EXTENDED TO 2/1/13 BUT ADDITIONAL TIME IS REQUIRED TO GATHER AND COMPILE INFORMATION. WE'RE ASKING FOR A SECOND EXTENSION UNTIL 3/15/13.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	8a \$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b \$
c <b>Balance Due.</b> 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 \$ <u>NONE</u>

**Signature and Verification must be completed for Part II only.**

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

Signature *[Signature]* Title FOR BERDON LLP Date 1/22/13  
CERTIFIED PUBLIC ACCOUNTANTS  
360 MACISON AVENUE  
NEW YORK, NY 10017  
ID #13-0485070

Form 8868 (Rev. 1-2012)